SixTen and Associates
Mandate Reimbursement Services

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RECEIVED
SEP 04 2012
COMMISSION ON STATE MANDATES

August 29, 2012

Heather Halsey, Executive Director
Commission on State Mandates
U.S. Bank Plaza Building
980 Ninth Street, Suite 300
Sacramento, California 95814

RE: 08-PGA-02 (99-TC-13 and 00-TC-15)
Enrollment Fee Collection and Waivers
Request to Amend the Parameters and Guidelines
to Adopt a Reasonable Reimbursement Methodology.
Los Rios Community College District, et al.

Dear Ms. Halsey:

On May 21, 2009, I submitted on behalf of 16 community college districts a Request to Amend the Parameters and Guidelines to Adopt a Reasonable Reimbursement Methodology for the above referenced mandate.

The unit cost rate proposed for the RRM is based on the filed annual claims for FY 2004-05, FY 2005-06, and FY 2006-07, for 24 college districts. This letter transmits printed copies of the annual claims and supporting documentation for the 24 districts. This information has also been scanned onto the enclosed data stick.

By my signature below, I hereby declare, under penalty of perjury under the laws of the State of California, that the information in this submission is true and complete to the best of my own knowledge or information or belief, and that the attached documents are true and correct copies of documents received from the claimants by SixTen and Associates and used for the preparation of the referenced annual reimbursement claims.

Keith B. Petersen

From: Kbpsixten@aol.com [mailto:Kbpsixten@aol.com]
Sent: Tuesday, September 04, 2012 11:06 AM
To: Camille Shelton
Cc: Heidi Palchik; Djbsixten@aol.com
Subject: EFCW RRM

Camille

There should be delivered to you today by FedEx ground from me 3 document boxes that contain hardcopy of the annual claims used to establish the unit cost rate for the Enrollment Fee Collection and Wavier RRM.

The first box contains the transmittal letter and a data stik that has all of the hard copy scanned. Files are too large to email using the Commission drop box procedure.

Keith B. Petersen, President
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SixTen and Associates
Mandate Reimbursement Services

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June 26, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8536

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Allan Hancock Joint Community College District CC 42005

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Allan Hancock Joint Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen
President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

BE HERE

(01) Claimant Identification Number: CC42005

(02) Claimant Name: Allan Hancock Joint Community College District

County of Location: Santa Barbara

Street Address or P.O. Box: 800 S College Drive

City: Santa Maria | State: CA | Zip Code: 93454-6399

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 70,690
Less: 10% Late Penalty		(14) $ 7,069
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 63,621
Due from State	(08)	(17) $ 63,621
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	82,409
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	859
(28) EFCW-1, (04)(B)(2)(b)(f)	16,843
(29) EFCW-1, (04)(B)(2)(c)(f)	330
(30) EFCW-1, (06)	32
(31) EFCW-1, (07)	30,272
(32) EFCW-1, (09)	41,991
(33) EFCW-1, (10)	18,031
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 5/10/07

Elizabeth Miller, Ed. D.
Type or Print Name

Vice-President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Allan Hancock Joint Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 77,991.42	$ 1,876.00	$ -	$ 2,542.00	$ -	$ 82,409.42
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ 858.59	$ -	$ -	$ 858.59
b. Waiving student fees	$ 16,842.80	$ -	$ -	$ -	$ -	$ 16,842.80
c. Reporting BOG fee waiver data to CCC	$ 330.06	$ -	$ -	$ -	$ -	$ 330.06
(05) Total Direct Costs	$ 95,164.28	$ 1,876.00	$ 858.59	$ 2,542.00	$ -	$ 100,440.87
Indirect Costs						
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]					31.81%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]					$ 30,271.76
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]					$ 130,712.63
Cost Reduction						
(09) Less: Enrollment Fee Revenue offset						$ 41,991.00
(10) Less: Enrollment Fee Waiver offsets						$ 18,031.31
(11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]					$ 70,690.32

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Allan Hancock Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
A & R Cashiers	Various	$18.09	1,645.0	$ 29,758.05				
Calculating total enrollment fee to be collected								
A & R Cashiers	Various	$18.09	1,645.0	$ 29,758.05				
Cashiering Expenses 1	Operational Supplies	$1.00	1,876.0		$ 1,876.00			
Cashiering Expenses 2	Equipment	$1.00	2,542.0				$ 2,542.00	
Answering student's questions regarding enrollment fee collection								
A & R Cashiers	Various	$18.09	940.0	$ 17,004.60				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
A & R Cashiers	Various	$18.09	81.3	$ 1,470.72				
Total ☒ Subtotal ☐			Page 1 of 1	$ 77,991.42	$ 1,876.00	$ -	$ 2,542.00	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Allan Hancock Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
EPOS Corporation Software - prorated 6.5% cost for EFCW	$1.00	858.6			$ 858.59		
Total ☒ Subtotal ☐		Page 1 of 1	$ -	$ -	$ 858.59	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Allan Hancock Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
FA Cashiers	Various	$28.88	333.3	$ 9,625.70				
Receiving waiver applications								
FA Cashiers	Various	$28.88	83.3	$ 2,405.70				
Evaluating waiver applications and verifying application documents								
FA Cashiers	Various	$28.88	83.3	$ 2,405.70				
Entering approved application information into district records; providing student award letter								
FA Cashiers	Various	$28.88	83.3	$ 2,405.70				
Total ☒ Subtotal ☐			Page 1 of 1	$ 16,842.80	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
Allan Hancock Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: *Check only* **one** *box per form to identify the activity being claimed.*

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Allen, Shelly Budget Analyst	$55.01	6.0	$ 330.06				
Total ☒ Subtotal ☐		Page 1 of 1	$ 330.06	$ -	$ -	$ -	$ -

New 04/06

Allan Hancock Joint Community College District
308/95 ENROLLME[illegible]E COLLECTIONS/WAIVERS
[illegible]4-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-5	1,645.00	A & R Cashiers	Various	$18.09	$29,758.05	Referencing student accounts and records	Calculating and collecting enrollment fees
04-5	940.00	A & R Cashiers	Various	$18.09	$17,004.60	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-5	81.30	A & R Cashiers	Various	$18.09	$1,470.72	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
04-5	1,645.00	A & R Cashiers	Various	$18.09	$29,758.05	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
	4,311.30	**A & R Cashiers Total**			$77,991.42		
04-5	6.00	Allen, Shelly	Budget Analyst	$55.01	$330.06	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	6.00	**Allen, Shelly Total**			$330.06		
04-5	1,876.00	Cashiering Expenses 1	Operational Supplies	$1.00	$1,876.00	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
	1,876.00	**Cashiering Expenses 1 Total**			$1,876.00		
04-5	2,542.00	Cashiering Expenses 2	Equipment	$1.00	$2,542.00	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
	2,542.00	**Cashiering Expenses 2 Total**			$2,542.00		
04-5	858.59	EPOS Corporation	Software - prorated 6.5% cost for EFCW	$1.00	$858.59	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	858.59	**EPOS Corporation Total**			$858.59		
04-5	333.30	FA Cashiers	Various	$28.88	$9,625.70	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-5	83.30	FA Cashiers	Various	$28.88	$2,405.70	Receiving waiver applications	Waiving student fees
04-5	83.30	FA Cashiers	Various	$28.88	$2,405.70	Evaluating waiver applications and verifying application documents	Waiving student fees
04-5	83.30	FA Cashiers	Various	$28.88	$2,405.70	Entering approved application information into district records; providing student award letter	Waiving student fees
	583.20	**FA Cashiers Total**			$16,842.80		
	10,177.09	**Grand Total**			$100,440.87		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Allan Hancock CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$21,538,543		$21,538,543	$536,733	$21,001,810
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,556,076		2,556,076	278,870	2,277,206
Course and Curriculum Development	6020	585,049		585,049	2,989	582,060
Academic/Faculty Senate	6030	25,614		25,614		25,614
Other Instructional Administration & Instructional Governance	6090	31,128		31,128		31,128
Instructional Support Services	6100					
Learning Center	6110	534,190		534,190	5,977	528,213
Library	6120	502,205		502,205	73,375	428,830
Media	6130	367,286		367,286		367,286
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	511,928		511,928	1,443	510,485
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	861,715		861,715	848	860,867
Matriculation and Student Assessment	6320	524,220		524,220		524,220
Transfer Programs	6330	151,588		151,588		151,588
Career Guidance	6340	32,658		32,658		32,658
Other Student Counseling and Guidance	6390	79,958		79,958		79,958
Other Student Services	6400					
Disabled Students Programs & Services	6420	867,422		867,422		867,422
Subtotal		$29,169,580	$0	$29,169,580	$900,235	$28,269,345

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Allan Hancock CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,017,721	$508,483	$509,238	$31,580	$477,658
Health Services	6440	222,364		222,364	3,816	218,548
Student Personnel Admin.	6450	137,696		137,696	1,027	136,669
Financial Aid Administration	6460	626,166		626,166	24,632	601,534
Job Placement Services	6470	374,080		374,080		374,080
Veterans Services	6480	40,560		40,560		40,560
Miscellaneous Student Services	6490	525,489		525,489	2,535	522,954
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	689,635		689,635	689,635	0
Custodial Services	6530	973,125		973,125	973,125	0
Grounds Maintenance and Repairs	6550	403,662		403,662	403,662	0
Utilities	6570	1,073,242		1,073,242	1,073,242	0
Other	6590					
Planning, Policy Making, and Coordination	6600	834,837		834,837	834,837	0
General Inst. Support Services	6700					
Community Relations	6710	539,178		539,178	539,178	0
Fiscal Operations	6720	1,361,354		1,361,354	1,361,354	0
Human Resources Management	6730	540,791		540,791	540,791	0
Noninstructional Staff Benefits & Incentives	6740	96,721		96,721	96,721	0
Staff Development	6750	8,872		8,872	8,872	0
Staff Diversity	6760	8,680		8,680	8,680	0
Logistical Services	6770	1,890,669		1,890,669	1,890,669	0
Management Information Systems	6780	898,100		898,100	898,100	0
Subtotal		$41,432,522	$508,483	$40,924,039	$10,282,691	$30,641,348

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Allan Hancock CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	32,685		32,685	32,685	0
Community Services and Economic Development	6800					
Community Recreation	6810	683,578		683,578	364	683,214
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	19,000		19,000		19,000
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	248,560		248,560	111,509	137,051
Student and Co-curricular Activities	6960	965,515		965,515	1,265	964,250
Student Housing	6970					
Other	6990	414,161		414,161		414,161
Auxiliary Operations	7000					
Contract Education	7010	5,130		5,130		5,130
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	25,870		25,870	25,870	0
(05) Total		$43,827,021	$508,483	$43,318,538	$10,454,384	$32,864,154
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				31.81%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	135,915	10,070	41,138	39,927		227,050
Architecture and Environmental Design	0200	83,488		1,107			84,595
Biological Sciences	0400	463,427	27,195	25,478	753		516,853
Business and Management	0500	940,273	112,790	3,667	44,025		1,100,755
Communications	0600	192,928	152	4,199	1,347		198,626
Computer and Information Science	0700	269,904	34,530	2,011			306,445
Education	0800	970,000	131,457	19,688	1,786		1,122,931
Engineering and Related Industrial Tech.	0900	813,587	220,418	150,568	161,417		1,345,990
Fine and Applied Arts	1000	1,969,786	280,843	137,861	16,102		2,404,592
Foreign Language	1100	528,408	44,554	933			573,895
Health	1200	856,450	352,856	33,194	23,898		1,266,398
Consumer Education and Home Economics	1300	594,974	198,335	47,069	10,854		851,232
Law	1400						
Humanities (Letters)	1500	1,845,110	166,932	3,310	8,613		2,023,965
Library Science	1600						
Mathematics	1700	1,308,299	116,514	5,011	2,942		1,432,766
Military Studies	1800						
Physical Sciences	1900	781,237	25,718	20,029			826,984
Psychology	2000	283,441		242			283,683
Public Affairs and Services	2100	909,359	597,826	834,633	222,668		2,564,486
Social Sciences	2200	853,334	108,807	4,749	1,755		968,645
Commercial Services	3000	9,388	14,605	575,877			599,870
Interdisciplinary Studies	4900	1,959,807	430,139	216,281	646		2,606,873
Instruct. Staff-Retir's Bnfts & Retire. Incents.	5900	231,909					231,909
Subtotal - Instructional Activities	**599**	16,001,024	2,873,741	2,127,045	536,733		21,538,543

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,919,605	357,601	278,870		2,556,076
Course and Curriculum Development	6020		363,878	218,182	2,989		585,049
Academic/Faculty Senate	6030		23,835	1,779			25,614
Other Instruct. Admin. & Instruct. Governance	6090		13,011	18,117			31,128
Subtotal - Instructional Administration	**6000**		2,320,329	595,679	281,859		3,197,867
Instructional Support Services (6100)							
Learning Center	6110	171,313	336,126	20,774	5,977		534,190
Library	6120		424,735	4,095	73,375		502,205
Media	6130		323,420	43,866			367,286
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	171,313	1,084,281	68,735	79,352		1,403,681
Admissions and Records	**6200**		470,314	40,171	1,443		511,928
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		846,731	14,136	848		861,715
Matriculation and Student Assessment	6320		510,727	13,493			524,220
Transfer Programs	6330		149,299	2,289			151,588
Career Guidance	6340		32,205	453			32,658
Other Student Counseling and Guidance	6390		79,069	889			79,958
Subtotal - Student Counseling and Guidance	**6300**		1,618,031	31,260	848		1,650,139

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000 (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		856,652	10,770			867,42
Extended Opportunity Prgms. & Services (EOPS)	6430		414,622	63,036	31,580	508,483	1,017,72
Health Services	6440		167,002	51,546	3,816		222,36
Student Personnel Administration	6450		132,208	4,461	1,027		137,69
Financial Aid Administration	6460		489,510	112,024	24,632		626,16
Job Placement Services	6470		333,612	40,468			374,08
Veterans Services	6480		40,560				40,56
Miscellaneous Student Services	6490		387,466	135,488	2,535		525,48
Subtotal - Other Student Services	**6400**		2,821,632	417,793	63,590	508,483	3,811,49
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		547,739	135,679	6,217		689,63
Custodial Services	6530		893,224	75,279	4,622		973,12
Grounds Maintenance and Repairs	6550		388,562	15,100			403,66
Utilities	6570			1,073,242			1,073,24
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		1,829,525	1,299,300	10,839		3,139,66
Planning, Policymaking, and Coordination	**6600**		745,397	85,464	3,976		834,83

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		236,673	302,505			539,178
Fiscal Operations	6720		1,241,796	118,359	1,199		1,361,354
Human Resources Management	6730		488,284	52,507			540,791
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		96,721				96,721
Staff Development	6750		5,075	3,797			8,872
Staff Diversity	6760			8,680			8,680
Logistical Services	6770		717,437	1,085,152	88,080		1,890,669
Management Information Systems	6780		775,953	29,354	92,793		898,100
Other General Institutional Support Services	6790		32,685				32,685
Subtotal - General Institutional Support Services	**6700**		3,594,624	1,600,354	182,072		5,377,050
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		454,962	228,252	364		683,578
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		18,114	886			19,000
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		473,076	229,138	364		702,578

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		107,568	29,483	111,509		248,56
Student and Co-curricular Activities	6960		769,007	195,243	1,265		965,51
Student Housing	6970						
Other Ancillary Services	6990		403,325	10,836			414,16
Subtotal - Ancillary Services	**6900**		1,279,900	235,562	112,774		1,628,23
Auxiliary Operations (7000)							
Contract Education	7010		5,130				5,13
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**		5,130				5,13
Physical Property and Related Acquisitions (7100)	**7100**			16,608	9,262		25,87
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			50,844			50,84
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			50,844			50,84
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					2,055,501	2,055,50
Student Aid	7320					216,457	216,45
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,271,958	2,271,95
TOTAL EXPENDITURES and OTHER OUTGO	**391**	16,172,337	19,115,980	6,797,953	1,283,112	2,780,441	46,149,82

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 2**	28200
Avg. time p/account	3.5
Total Time (in minutes)	98700
Per Hour	60
Hours Worked (** **11**)	**1645.0**
***EFC 2**	28200
Avg. time p/student	3.5
Total Time (in minutes)	98700
Per Hour	60
Hours Worked (** **12**)	**1645.0**
***EFC 2**	28200
Avg. time p/question	2
Total Time (in minutes)	56400
Per Hour	60
Hours Worked (** **13**)	**940.0**
***EFC 2**	28200
Avg. time p/file	0.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **14**)	**0.0**
***EFC 4**	
Avg. time p/account	6
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **15**)	**0.0**
***EFC 5**	488
Avg. time p/student	10
Total Time (in minutes)	4880
Per Hour	60
Hours Worked (** **16**)	**81.3**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 7**	4999
Avg. time p/question	4
Total Time (in minutes)	19996
Per Hour	60
Hours Worked **(** 21)**	**333.3**
***EFW 7**	4999
Avg. time p/application	1
Total Time (in minutes)	4999
Per Hour	60
Hours Worked **(** 22)**	**83.3**
***EFW 7**	4999
Avg. time p/evaluation	1
Total Time (in minutes)	4999
Per Hour	60
Hours Worked **(** 23)**	**83.3**
***EFW 8**	
Avg. time p/application	1.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	4999
Avg. time p/application	1.0
Total Time (in minutes)	4999
Per Hour	60
Hours Worked **(** 25)**	**83.3**
***EFW 8**	
Avg. time p/application	1.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

***EFW Workload Multiplier (Client Provided, except code 24 and 26 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2, documentation is only in 04-05 workpapers.
Findings:

		Multiplier					
		2	2	2		4	5
		*Activity Codes					
Staff	Title	11	12	13	14	15	16
Solano, Candy	Accounting Services Tech. II						15
Various	Registration Cashiers	3.5	3.5	2		6	5
Average		**3.5**	**3.5**	**2.0**		**6.0**	**10.0**

***EFC Workload Multiplier (Client Provided, except code 15 used default multiplier 4)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print ou receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff doing the collection fee functions.
Source: PHR lists provided by client by fiscal year -- documentation in only in 04-05 workpapers.
Findings:

		PHR'S						
Staff	**Title**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**
Solano, Candy	Accounting Serv. Tech. II	20.35	20.92	21.98	23.45	23.45	26.14	28.19
Various	Registration Cashiers	7.46	7.46	7.46	7.98	7.98	7.98	7.98
Average		**13.91**	**14.19**	**14.72**	**15.72**	**15.72**	**17.06**	**18.09**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3, documentation is only in 04-05 workpapers.
Findings:

		*Multiplier					
		7	7	7	8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Valenzuela, Espie	Financial Aid Assistant	4	1	1	1.5	1	1.5
		4.0	1.0	1.0	1.5	1.0	1.5

***EFW Workload Multiplier (Client Provided, except code 24 and 26 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff doing the enrollment fee waiver functions.
Source: PHR lists provided by client by fiscal year -- documentation in only in 04-05 workpapers.
Findings:

		PHR'S							
Staff	**Title**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
Jody Kuhbender	Financial Aid Assistant	22.87	25.03						
Valenzuela, Espie	Financial Aid Assistant			21.90	23.22	24.97	27.91	28.88	
Average		**22.87**	**25.03**	**21.90**	**23.22**	**24.97**	**27.91**	**28.88**	**#DIV/0!**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.8-1, "# of EF Refunds" schedule from client, and Chancellor's Website Headcount -- documentation is only in 04-05 workpapers.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	33,311	35,691	37,061	37,935	40,923	41,868	38,220
EFC 2	1.8-1 2.	Paid Enrollment fees	24,378	27,048	28,652	28,607	32,778	32,528	28,200
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X	8,643	8,409	9,328	8,045	9,340	10,020
EFC 4	1.8-2 1.	Delinquencies collections							
EFC 5	1.8-2 2.	Refunds	260	275	288	388	342	419	488
EFW 6	1.8-3 1.	Waivers Requested	X						
EFW 7	1.8-3 2. Not used -- Used Chancellor's Website Headcount	Waivers Approved	X	4,763	4,702	4,840	4,908	4,625	4,999
EFW 8	1.8-3 1-2	Waivers Denied	X						

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2004 Summer Term

Data Current As Of April 30, 2012 02:28:29

Total Headcount	7,603

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2004 Fall Term

Data Current As Of April 30, 2012 02:28:37

Total Headcount	14,707

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2005 Spring Semester

Data Current As Of April 30, 2012 02:28:49

Total Headcount	15,910

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Allan Hancock College

Shelly Allan — Employee Name

Budget Analyst — Exact Position Title

Administrative Svcs — College/Department/Location

805 922-6966 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Circle Yrs

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

Enrollment Fee Report - Estimate January + April:	6	6	6	6	6	6	6	6	& 11/27/07
Final - Sept TOTALS:	6	6	6	6	6	6	6	6	& 11/27/07

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shelly Allan — Date 6/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Shelly Allan 11/27/07

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Allan Hancock College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	6,202	6,263	7,148	7,302	7,767	9,854	7,603	6700
Fall	12,995	14,099	14,275	14,477	14,884	15,846	14,707	14319
Winter/ Intersession	X	X	X	X	X	X	X	X
Spring	14,114	15,529	15,638	16,161	18,282	16,168	15,910	16,432
Total	33,311	35,691	37,001	37,935	40,923	41,868	38,220	37,451
2. Number of students who paid enrollment fees:								
Summer	Not available	4,733	5,651	Not available	Not available	8,175	5747	4,643
Fall		10,552	10,883			12,041	10,706	9,943
Winter/ Intersession	Not available	X	X	Not available	Not available	X	X	X
Spring		11,763	12,118			12,812	11,087	12,001
Total	24,378	27,048	28,652	28,607	32,778	32,852	28,200	26,587
3. Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	Not available	1,530	1,497	Not available	Not available	1,679	1,856	2057
Fall		3,547	3,392			3,805	3,941	4,376
Winter/ Intersession	Not available	X	X	Not available	Not available	X	X	X
Spring		3,566	3,520			3,850	4,223	4,431
Total	8,933	8,643	8,409	9,528	8,045	9,340	10,020	10,864

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Shelly Allen 11/28/07 05706

Employee Signature: Shelly Allen Date 5/19/06

Shelly Allen Budget Analyst

Employee Name: (print) Position or Title

If you have any questions, please contact 805 922-6906, at x3226

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

Allan Hancock College
Enrollment Fee Collections and Waiver Mandate
Workload Multiplier for 1.7.2 Code 16 (Refunds)

Fiscal Year	# of EF Refunds
1998/99	260
1999/00	275
2000/01	288
2001/02	388
2002/03	342
2003/04	419
2004/05	488
2005/06	407

Shelly Allen
11/27/07
05/06

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Allan Hancock College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	1,015,136	1,112,923	1,083,347	1,164,159	1,343,993	2,487,080	2,819,320	2,475,185
2. Enrollment Fees Refunded	26,623	31,857	25,218	36,000	34,476	58,356	155,027	126,165
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	988,511	1,081,066	1,058,129	1,128,159	1,309,517	2,428,724	2,664,293	2,349,020
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 429,115	$ 856,735	$ 819,399	$ 848,856	$ 944,778	$ 1,282,914	$ 2,033,350	$ 2,180,203
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 18,582	$ 16,134	$ 16,388	$ 16,977	$ 18,895	$ 25,658	$ 40,667	$ 43,604
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$ 65,038	$ 56,571						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
~~Spring~~ Total			74,441	77,1105	76797	85527	85872	83,854
TOTAL x $0.91 per credit			67,786	70,223	69885	77,830	78,142	76307

Shelly Allen 11/27/07 05/06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Shelly Allen Date 5/19/06

Shelly Allen (Employee Name) (print) Budget Analyst (Position or Title)

If you have any questions, please contact 805 922-6966, at X3226

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Allan Hancock College
Web-Reg Software Expenses for EFCW claim

Vendor: EPOS Corporation
Rational: Software purchased for Web-reg included a credit card component for collecting enrolment fees
Prorated to be 6.5% of total expenses

Year	Total Expense	EFCW Claimable 6.50%
98/99	0	0
99/00	0	0
00/01	0	0
01/02	40,581.25	2,637.78
02/03	5,000.00	325.00
03/04	14,130.00	918.45
04/05	13,209.00	858.59

Shelly Allen
12/23/04

T ORDER: Program within Object

ECT Program Code: 62110000 ; PE ID's: V16069

Program - Object	Primary Ref	Transaction Description	SS	Ref Date	Job No	Debit	Credit	NET
62110000-4514	IV111774	EPOS CORPPORATI Technology/Sof	OH	04/13/05	01126514	4,800.00	0.00	4,800.00
62110000-4514	IV111844	EPOS CORPPORATI Technology/Sof	OH	06/01/05	01143021	3,879.00	0.00	8,679.00
Total 62110000		By Program Code		(2)	DR-CR	8,679.00	0.00	8,679.00
Total 4514		By Object Code		(1)	DR-CR	8,679.00	0.00	8,679.00
62110000-5640	IV111278	EPOS CORPPORATI Maintenance Ag	OH	01/19/05	01097898	4,530.00	0.00	4,530.00
Total 62110000		By Program Code		(2)	DR-CR	4,530.00	0.00	4,530.00
Total 5640		By Object Code		(1)	DR-CR	4,530.00	0.00	4,530.00
		** G R A N D T O T A L **			DR-CR	13,209.00	0.00	13,209.00

0. C

4,800.00 +
3,879.00 +
4,530.00 +
13,209.00 *

13,209.00 x
6.5 %
858.59 *

C Internet Reg.

AGREEMENT

This Agreement is made and entered into this **18th day of May, 2001**, by and between **Allan Hancock College ("District")** and **EPOS ("Contractor")**, with its principal place of business located at: **177 Technology Parkway, Auburn, AL 36831-3140.**

In consideration of the mutual covenants set forth herein, Contractor and District agree as follows:

ARTICLE 1. THE PROJECT.

Contractor agrees, for the Contract Price and within the Contract Time, to perform and provide all necessary work, labor, materials, equipment transportation and services, including without limitation, all necessary permits, fees, approvals and/or licenses required by law (collectively "the Work") to complete the Project described below in strict conformity with the Contract Documents and in a good and workmanlike manner, free from any and all claims of mechanics, Material Suppliers, Subcontractors or laborers providing or performing any portion of the Work. The Work of the Project is generally described as: **INTERNET BASED INFORMATION SYSTEM, BID #01-12.**

ARTICLE 2. THE CONTRACT DOCUMENTS.

The Contract Documents consist of the following, all of which are component parts of the Contract Documents and which are collectively referred to herein as the "Contract Documents."

Request for Proposals
Instructions for Bidders
Proposal General Conditions
Cost Summary Proposal
Bid Bond
Non-Collusion Affidavit
Agreement
Certificate of Worker's Compensation Insurance

The Contract Documents shall include amendments or modifications issued after the date of this Agreement.

ARTICLE 3. CONTRACT TIME.

3.1 CONTRACT TIME. The Contractor shall commence the Work on the date set forth in the District's Notice to Proceed (NTP) issued to the Contractor. The Contractor shall achieve Substantial Completion of the Work within the Contract Time which is **(to be determined)** consecutive days after the date for commencement of the Work as set forth in the NTP. Adjustment of the Contract Time, if any, shall be made only in strict conformity with the applicable provisions of the Contract Documents.

3.2 LIQUIDATED DAMAGES. Time is of the essence in the Contractor's performance and completion of the Work and all other obligations to be performed by the Contractor under the Contract Documents. The Contractor acknowledges and agrees that if Substantial Completion of the Work is not achieved within the Contract Time for each Site within the Contract Time, the District will sustain losses, damages and other costs which are difficult to ascertain. If Substantial Completion of the Work is not achieved within the Contract Time for any Site, the Contractor shall be liable for Liquidated Damages to the District at the rate of Five Hundred Dollars ($200.00) for each calendar day beyond the Contract Time at each Site until Substantial Completion of the Work for each Site is achieved. The Contractor acknowledges and agrees that the foregoing per diem rate of Liquidated Damages for delayed Substantial Completion at each Site is reasonable under the circumstances existing at the time of the execution of this Agreement. If Substantial Completion of the Work is not achieved on or prior to the Contract Time for each Site, the District may thereafter assess and withhold Liquidated Damages from any portion of the Contract Price then or thereafter due the Contractor. The Contractor and the Performance Bond Surety shall be jointly and severally liable and responsible to the District for payment of any assessment of Liquidated Damages which exceeds the remaining undisbursed Contract Price.

ARTICLE 4. Contract Price.

4.1 Contract Price. The Contract Price payable by District to Contractor for the Contractor's full, complete and timely performance of the Work under the Contract Documents is **FIFTY SEVEN THOUSAND TWO HUNDRED FORTY THREE 75/100 Dollars ($57,243.75)**. The Contract Price shall be subject to adjustment only in strict conformity with the applicable terms of the Contract Documents.

Base Software		$34,250
Modules:		
	Student	$10,500
	Financial Aid	included in above
	Financial	included in above
Credit Card Payment Module		$3,500
Installation, Acceptance Testing, Cutover		$3,500
Training		$1,500
	Total	$53,250.00
	Tax	3,993.75
	Total Cost	**$57,243.75**

4.2 DISBURSEMENT OF PAYMENTS. The District's payment of the Contract Price shall be in a series of Progress Payments based upon the Cost Breakdown prepared pursuant to the General Conditions and Contractor's Applications for Progress Payment on forms approved by the District and submitted monthly by the Contractor to the District. In accordance with the General Conditions, the District will review Applications for Progress Payment to determine if they are proper and will verify that the amount requested by any such Application for Progress Payment is actually due and payable to the Contractor based upon the Work actually completed, installed and in place as of the date of the Application for Progress

Payment and the value of such Work as determined by the Schedule of Values. The District will make payment to the Contractor on each proper Application for Progress Payment an amount equal to Ninety Percent (90%) of the value of the Work actually completed, installed and in lace as verified by the District, less the aggregate amount of previous Progress Payments.

4.3 DISBURSEMENT OF FINAL PAYMENT. Final Payment, consisting of Retention previously deducted and withheld from Progress Payments and the remaining balance, if any of the Contract Price, shall be disbursed by the District to the Contractor upon completion of all of the Work and the District's acceptance of the same in accordance with the Contract Documents.

ARTICLE 5. MISCELLANEOUS.

5.1. ENTIRE AGREEMENT. This Contract Documents constitute the entire agreement and understanding between the District and Contractor regarding the subject matter hereof. There are no understandings, agreements, representations or warranties, express or implied, of the District to the Contractor regarding the subject matter hereof, except as expressly set forth in the Contract Documents. Contractor, by the execution of this Agreement, acknowledges that Contractor has read this Agreement and all Contract Documents, understands all terms, conditions and obligations therein, and agrees to be bound by the terms and conditions of the Contract Documents.

5.2. EXECUTION OF OTHER DOCUMENTS. The District and Contractor shall cooperate fully in the execution of any and all other documents and in the completion of any additional actions that may be necessary or appropriate to give full force and effect to the terms and intent of the Contract Documents.

5.3. COUNTERPARTS. This Agreement may be executed in counterparts, each of which shall be deemed an original and all executed counterpart copies hereof shall be deemed the same instrument.

5.4. BINDING EFFECT. This Agreement and all portions of the Contract Documents shall inure to the benefit of and shall be binding upon the Contractor and District and their respective successors and assigns.

5.5. SEVERABILITY. If any provision of this Agreement or any other portion of the Contract Documents shall be held invalid or unenforceable by a court of competent jurisdiction, such provision or potion of the Contract Documents shall be deemed severed herefrom but all other provisions and portions of the Agreement and Contract Documents shall remain in full force and effect.

5.6. AMENDMENTS. No term, condition or other provision of the Contract Documents shall be waived, altered, modified supplemented or amended in any manner whatsoever except by written instrument executed by authorized representatives of the District and the Contractor.

5.7. NO ASSIGNMENT. The Contractor shall not assign or transfer or pursuant to assign or transfer any of its rights or obligations under the Contract Documents without prior written consent of the District, which consent may be granted, withheld or limited in the sole and exclusive discretion of the District.

5.8. WRITTEN NOTICE. Written notice shall be deemed to have been duly served if delivered by personal service requiring a signature acknowledging receipt or if delivered certified or registered United States Mail, postage fully pre-paid. Notices hereunder to the District or the Contractor shall be addressed as follows:

If to District:
Allan Hancock College
800 South College Drive
Santa Maria, California 93454
Attention: Craig Wilde, Director, Business Services

If to Contractor:
EPOS Corporation
177 Technology Parkway
Auburn, AL 36830
Attn: Ed Graf, Contracts Administrator

CONTRACTORS ARE REQUIRED BY LAW TO BE LICENSED AND REGULATED BY THE CONTRACTORS' STATE LICENSE BOARD. ANY QUESTIONS CONCERNING A CONTRACTOR MAY BE REFERRED TO THE REGISTRAR, CONTRACTORS' STATE LICENSE BOARD, P.O. BOX 26000, SACRAMENTO, CALIFORNIA 95826

IN WITNESS WHEREOF the parties have executed this Agreement on the date first hereinabove written.

"CONTRACTOR"

By: _____
Signature

Michael A. Lawler
Typed or Printed Name

President
Title

"DISTRICT"
ALLAN HANCOCK COLLEGE

_____
Dr. Elizabeth A. Miller
Vice President, Administrative Services

Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 -- documentation is only in 04-05 workpapers.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 1,084,994	$ 1,058,199	$ 1,125,159	$ 1,348,957	$ 2,428,050	$ 2,666,224
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 21,700	$ 21,164	$ 22,503	$ 26,979	$ 48,561	$ 53,324
1.8-4 line 4A	Enrollment Fees Waived	$ 836,735	$ 819,399	$ 848,856	$ 844,770	$ 1,282,914	$ 2,003,350
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,735	$ 16,388	$ 16,977	$ 16,895	$ 25,658	$ 40,067
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,571	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		74,490	77,168	76,797	81,870	85,833
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 67,786	$ 70,223	$ 69,885	$ 74,502	$ 78,108
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 16,735	$ 16,388	$ 16,977	$ 16,895	$ 25,658	$ 40,067
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,571					
1.8-4 5.	Credit Units Waived		$ 67,786	$ 70,223	$ 69,885	$ 74,502	$ 78,108
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,306**	**$ 84,174**	**$ 87,200**	**$ 86,780**	**$ 100,160**	**$ 118,175**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Allan Hancock
COUNTY: Santa Barbara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$23,090,134	$19,410,258	$1,189,631	$20,599,889
ENROLL FEE ADMIN (2%)	41,991	36,112	5,879	41,991
APPRENTICE ALLOWANCE	52,780	45,503	7,277	52,780
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,605,376	1,380,624	224,752	1,605,376
S.F.A.A.	287,055	305,777	-18,722	287,055
E.O.P.S.	603,711	517,813	85,898	603,711
C.A.R.E.	241,653	206,006	35,647	241,653
D.S.P.S.	757,330	648,120	109,210	757,330
STATE HOSPITALS	0	0	0	0
CALWORKS	392,912	256,741	136,171	392,912
MATRICULATION (CREDIT)	390,043	327,521	62,522	390,043
MATRIC. (NONCREDIT)	257,600	221,536	36,064	257,600
FAC. & STAFF DIVERSITY	13,919	9,894	4,025	13,919
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	9,334	0	9,334	9,334
PART-TIME FACULTY ALLOC	418,022	359,499	58,523	418,022
BLOCK GRANT (ONE-TIME)	200,912	172,784	28,128	200,912
ECON. DEVELOPMENT	178,875	153,833	-3,578	150,255
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	68,238	58,685	9,553	68,238
VTEA LEADERSHIP	100,000	78,000	6,000	84,000
VTEA TECH. PREP.	34,400	40,248	-11,352	28,896
VTEA TITLE I C	628,560	163,426	364,564	527,990
PLANT & INSTRUCTIONAL	225,355	193,805	31,550	225,355
PRIOR YEAR CORRECTION	294,481	283,224	11,257	294,481
TOTAL	$29,945,784	$24,900,969	$2,403,876	$27,304,845

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)						
2	Staff Training	(04)(B)(1)(b)						
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)			$ 2,637.78	$ 325.00	$ 918.45	$ 858.45
4	Waiving student fees	(04)(B)(2)(b)	$ 13,909.17	$ 12,016.53	$ 13,114.64	$ 14,297.83	$ 15,060.23	$ 16,842.80
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 174.06	$ 221.70	$ 238.32	$ 276.12	$ 305.04	$ 330.06
6	EFCW - Fee Waiver Costs	Total	$ 14,083.23	$ 12,238.23	$ 15,990.74	$ 14,898.95	$ 16,283.72	$ 18,031.31
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 75,306.00	$ 84,174.00	$ 87,200.00	$ 86,780.00	$ 100,160.00	$ 118,175.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (61,222.77)	$ (71,935.77)	$ (71,209.26)	$ (71,881.05)	$ (83,876.28)	$ (100,143.69)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 14,083.23**	**$ 12,238.23**	**$ 15,990.74**	**$ 14,898.95**	**$ 16,283.72**	**$ 18,031.31**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Monday, April 30, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Allan Hancock College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of April 30, 2012 02:29:15

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	501	191,626
BOGW - Part B based on income standards	2,048	686,768
BOGW - Part C based on financial need	2,478	1,124,956

Total Amount = $ 2,003,350

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 21, 2008

CERTIFIED MAIL # 7006 3450 0000 3941 8666

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Allan Hancock Joint Community College District CC 42005

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Allan Hancock Joint Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number:	CC42005
(02) Claimant Name	Allan Hancock Joint Community College District
County of Location	Santa Barbara
Street Address or P.O. Box	800 South College Drive
City / State / Zip Code	Santa Maria / CA / 93454-6399

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 63,450
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 6,345
Less : Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 57,105
Due from State	(08)	(17) $ 57,105
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	73,369
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	977
(28) EFCW-1, (04)(B)(2)(b)(f)	17,986
(29) EFCW-1, (04)(B)(2)(c)(f)	346
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	29,996
(32) EFCW-1, (09)	39,915
(33) EFCW-1, (10)	19,309
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 12/14/07

Elizabeth Miller, Ed. D. — Vice President, Administrative Services

Type or Print Name — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 2C7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
llan Hancock Joint Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 73,369.42	$ -	$ -	$ -	$ -	$ 73,369.42
1. rollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ 976.95	$ -	$ -	$ -	$ 976.95
b. Waiving student fees	$ 17,986.46	$ -	$ -	$ -	$ -	$ 17,986.46
c. Reporting BOG fee waiver data to CCC	$ 346.02	$ -	$ -	$ -	$ -	$ 346.02
5) Total Direct Costs	$ 91,701.90	$ 976.95	$ -	$ -	$ -	$ 92,678.85

direct Costs		
6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.71%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 29,995.69
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 122,674.54
st Reduction		
9) Less: Enrollment Fee Revenue offset		$ 39,915.00
0) Le rollment Fee Waiver offsets		$ 19,309.43
) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 63,450.11

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Hancock Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records A&R Cashiers Various	$18.09	1,550.9	$ 28,055.78				
Calculating total enrollment fee to be collected A&R Cashiers Various	$18.09	1,550.9	$ 28,055.78				
Answering student's questions regarding enrollment fee collection A&R Cashiers Various	$18.09	886.2	$ 16,031.36				
...iding refund of enrollment fees paid to students establishing fee waiver after enrollment A&R Cashiers Various	$18.09	67.8	$ 1,226.50				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 73,369.42	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Hancock Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
EPOS Software prorated 6.5% EFCW	$100.00	9.8		$ 976.95			
(05) Total ☒ Subtotal ☐ Page 1 of 1			$ -	$ 976.95	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Hancock Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
FA Cashiers Various	$28.88	355.8	$ 10,275.50				
Receiving waiver applications							
FA Cashiers Various	$28.88	89.0	$ 2,570.32				
Evaluating waiver applications and verifying application documents							
FA Cashiers Various	$28.88	89.0	$ 2,570.32				
...ering approved application information into district records; providing student award letter							
FA Cashiers Various	$28.88	89.0	$ 2,570.32				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 17,986.46	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Hancock Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Allen, Shelly Budget Analyst	$57.67	6.0	$ 346.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 346.02	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

05-2006

by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	886.20	A&R Cashiers	Various	$18.09	$16,031.36	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	1,550.90	A&R Cashiers	Various	$18.09	$28,055.78	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	67.80	A&R Cashiers	Various	$18.09	$1,226.50	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
05-06	1,550.90	A&R Cashiers	Various	$18.09	$28,055.78	Referencing student accounts and records	Calculating and collecting enrollment fees
	4,055.80	**A&R Cashiers Total**			$73,369.42		
05-06	6.00	Allen, Shelly	Budget Analyst	$57.67	$346.02	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	6.00	**Allen, Shelly Total**			$346.02		
05-06	9.77	EPOS	Software prorated 6.5% EFCW	$100.00	$976.95	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	9.77	**EPOS Total**			$976.95		
05-06	89.00	FA Cashiers	Various	$28.88	$2,570.32	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	355.80	FA Cashiers	Various	$28.88	$10,275.50	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	89.00	FA Cashiers	Various	$28.88	$2,570.32	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	89.00	FA Cashiers	Various	$28.88	$2,570.32	Receiving waiver applications	Waiving student fees
	622.80	**FA Cashiers Total**			$17,986.46		
	4,694.37	**Grand Total**			$92,678.85		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Allan Hancock Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$22,516,484		$22,516,484	$701,879	$21,814,605
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,456,175		2,456,175	71,450	2,384,725
Course and Curriculum Development	6020	585,283		585,283	8,583	576,700
Academic/Faculty Senate	6030	41,379		41,379	1,212	40,167
Other Instructional Administration & Instructional Governance	6090	20,179		20,179		20,179
Instructional Support Services	6100					
Learning Center	6110	519,106		519,106		519,106
Library	6120	512,964		512,964	72,385	440,579
Media	6130	375,322		375,322	2,387	372,935
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	533,775		533,775	3,689	530,086
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	788,530		788,530	9,099	779,431
Matriculation and Student Assessment	6320	706,863		706,863	16,281	690,582
Transfer Programs	6330	194,142		194,142	4,736	189,406
Career Guidance	6340	95,949		95,949	974	94,975
Other Student Counseling and Guidance	6390	89,492		89,492		89,492
Other Student Services	6400					
Disabled Students Programs & Services	6420	891,675		891,675	4,094	887,581
Subtotal		$30,327,318	$0	$30,327,318	$896,769	$29,430,549

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Allan Hancock Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$983,993	$461,241	$522,752	$7,315	$515,437
Health Services	6440	248,664		248,664	2,761	245,903
Student Personnel Admin.	6450	146,671		146,671	592	146,079
Financial Aid Administration	6460	691,393		691,393	11,780	679,613
Job Placement Services	6470	298,210		298,210	2,069	296,141
Veterans Services	6480	38,425		38,425		38,425
Miscellaneous Student Services	6490	450,237		450,237	15,815	434,422
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	741,831		741,831	741,831	0
Custodial Services	6530	1,065,961		1,065,961	1,065,961	0
Grounds Maintenance and Repairs	6550	460,726		460,726	460,726	0
Utilities	6570	992,858		992,858	992,858	0
Other	6590					
Planning, Policy Making, and Coordination	6600	1,058,792		1,058,792	1,058,792	0
General Inst. Support Services	6700					
Community Relations	6710	409,410		409,410	409,410	0
Fiscal Operations	6720	1,405,270		1,405,270	1,405,270	0
Human Resources Management	6730	655,320		655,320	655,320	0
Noninstructional Staff Benefits & Incentives	6740	115,728		115,728	115,728	0
Staff Development	6750	7,192		7,192	7,192	0
Staff Diversity	6760	26,326		26,326	26,326	0
Logistical Services	6770	2,115,590		2,115,590	2,115,590	0
Management Information Systems	6780	967,634		967,634	967,634	0
Subtotal		$43,207,549	$461,241	$42,746,308	$10,959,739	$31,786,569

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Allan Hancock Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	20,250		20,250	20,250	0
Community Services and Economic Development	6800					
Community Recreation	6810	705,090		705,090	158	704,932
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	8,161		8,161		8,161
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	22,237		22,237		22,237
Farm Operations	6930					
Food Services	6940	81,618		81,618		81,618
Parking	6950	299,719		299,719	119,118	180,601
Student and Co-curricular Activities	6960	1,133,320		1,133,320	16,949	1,116,371
Student Housing	6970					
Other	6990	176,870		176,870		176,870
Auxiliary Operations	7000					
Contract Education	7010	3,421		3,421		3,421
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	30,009		30,009	30,009	0
(05) Total		$45,688,244	$461,241	$45,227,003	$11,146,223	$34,080,780
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.71%		
(07) Notes						

CALIFO[illegible]IA COMMUNITY COLLEGES
Annual F[illegible]nancial and Budget Report

Exp[illegible]ditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	146,107	17,744	53,623	18,892		236,366
Architecture and Environmental Design	0200	31,472		809			32,281
Biological Sciences	0400	549,313	41,574	33,374	15,494		639,755
Business and Management	0500	759,007	66,780	4,531	51,670		881,988
Communications	0600	186,260	1,994	5,963	20,391		214,608
Computer and Information Science	0700	336,369	43,844	1,652			381,865
Education	0800	949,948	127,999	21,096	14,282		1,113,325
Engineering and Related Industrial Tech.	0900	816,716	262,115	178,233	201,284		1,458,348
Fine and Applied Arts	1000	2,042,108	300,853	150,987	103,564		2,597,512
Foreign Language	1100	592,761	8,208				600,969
Health	1200	884,561	333,662	47,163	54,010		1,319,396
Consumer Education and Home Economics	1300	712,923	241,427	46,511	16,982		1,017,843
Law	1400						
Humanities (Letters)	1500	1,802,896	110,904	5,631	18,149		1,937,580
Library Science	1600						
Mathematics	1700	1,454,444	131,228	5,857	9,820		1,601,349
Military Studies	1800						
Physical Sciences	1900	815,573	68,902	29,414	21,475		935,364
Psychology	2000	289,252		635			289,887
Public Affairs and Services	2100	911,251	578,539	592,449	132,826		2,215,065
Social Sciences	2200	1,002,467	90,126	8,886	21,764		1,123,243
Commercial Services	3000	7,895	79,219	655,449			742,563
Interdisciplinary Studies	4900	2,093,507	417,051	224,073	1,276		2,735,907
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	441,270					441,270
Subtotal - Instructional Activities	**599**	16,826,100	2,922,169	2,066,336	701,879		22,516,484

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORN COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,785,061	599,664	71,450		2,456,175
Course and Curriculum Development	6020		371,249	205,451	8,583		585,283
Academic/Faculty Senate	6030		37,145	3,022	1,212		41,379
Other Instruct. Admin. & Instruct. Governance	6090		12,229	7,950			20,179
Subtotal - Instructional Administration	**6000**		2,205,684	816,087	81,245		3,103,016
Instructional Support Services (6100)							
Learning Center	6110	182,292	317,672	19,142			519,106
Library	6120		420,672	19,907	72,385		512,964
Media	6130		330,687	42,248	2,387		375,322
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	182,292	1,069,031	81,297	74,772		1,407,392
Admissions and Records	**6200**		501,041	29,045	3,689		533,775
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		766,616	12,815	9,099		788,530
Matriculation and Student Assessment	6320		649,365	41,217	16,281		706,863
Transfer Programs	6330		183,208	6,198	4,736		194,142
Career Guidance	6340		94,576	399	974		95,949
Other Student Counseling and Guidance	6390		87,226	2,266			89,492
Subtotal - Student Counseling and Guidance	**6300**		1,780,991	62,895	31,090		1,874,976

* Salaries and Benefits of Instructors and Instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR''A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		838,879	48,702	4,094		891,675
Extended Opportunity Prgms. & Services (EOPS)	6430		457,169	58,268	7,315	461,241	983,993
Health Services	6440		189,068	56,835	2,761		248,6
Student Personnel Administration	6450		141,800	4,279	592		146,671
Financial Aid Administration	6460		547,615	131,998	11,780		691,393
Job Placement Services	6470		259,039	37,102	2,069		298,210
Veterans Services	6480		38,425				38,425
Miscellaneous Student Services	6490		314,516	119,906	15,815		450,237
Subtotal - Other Student Services	**6400**		2,786,511	457,090	44,426	461,241	3,749,268
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		568,147	165,462	8,222		741,831
Custodial Services	6530		985,882	73,317	6,762		1,065,961
Grounds Maintenance and Repairs	6550		436,625	22,877	1,224		460,726
Utilities	6570			992,858			992,858
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		1,990,654	1,254,514	16,208		3,261,3
Planning, Policymaking, and Coordination	**6600**		877,250	177,759	3,783		1,058,792

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		221,829	183,453	4,128		409,410
Fiscal Operations	6720		1,230,691	170,253	4,326		1,405,270
Human Resources Management	6730		588,296	65,840	1,184		655,320
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		115,728				115,728
Staff Development	6750		3,673	3,519			7,192
Staff Diversity	6760			26,326			26,326
Logistical Services	6770		783,326	1,195,668	136,596		2,115,590
Management Information Systems	6780		888,674	47,057	31,903		967,634
Other General Institutional Support Services	6790		20,250				20,250
Subtotal - General Institutional Support Services	**6700**		3,852,467	1,692,116	178,137		5,722,720
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		486,618	218,314	158		705,090
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		4,144	4,017			8,161
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		490,762	222,331	158		713,251

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR''A COMMUNITY COLLEGES
Annual F...ancial and Budget Report

Expe litures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		22,237				22,237
Farm Operations	6930						
Food Services	6940		79,260	2,358			81,618
Parking	6950		152,443	28,158	119,118		299,719
Student and Co-curricular Activities	6960		879,806	236,565	16,949		1,133,320
Student Housing	6970						
Other Ancillary Services	6990		175,956	914			176,870
Subtotal - Ancillary Services	**6900**		1,309,702	267,995	136,067		1,713,764
Auxiliary Operations (7000)							
Contract Education	7010		3,421				3,421
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**		3,421				3,421
Physical Property and Related Acquisitions (7100)	**7100**			12,047	17,962		30,009
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			69,003			69,(
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			69,003			69,003
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,644,685	1,644,685
Student Aid	7320					219,515	219,515
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,864,200	1,864,200
TOTAL EXPENDITURES and OTHER OUTGO	**391**	17,008,392	19,789,683	7,208,515	1,289,416	2,325,441	47,621,447

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 2**	26587
Avg. time p/account	3.5
Total Time (in minutes)	93055
Per Hour	60
Hours Worked **(** 11)**	**1550.9**
***EFC 2**	26587
Avg. time p/student	3.5
Total Time (in minutes)	93055
Per Hour	60
Hours Worked **(** 12)**	**1550.9**
***EFC 2**	26587
Avg. time p/question	2
Total Time (in minutes)	53174
Per Hour	60
Hours Worked **(** 13)**	**886.2**
***EFC 2**	26587
Avg. time p/file	0.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 14)**	**0.0**
***EFC 4**	
Avg. time p/account	6
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 15)**	**0.0**
***EFC 5**	407
Avg. time p/student	10
Total Time (in minutes)	4070
Per Hour	60
Hours Worked **(** 16)**	**67.8**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 7**	5337
Avg. time p/question	4
Total Time (in minutes)	21348
Per Hour	60
Hours Worked **(** 21)**	**355.8**
***EFW 7**	5337
Avg. time p/application	1
Total Time (in minutes)	5337
Per Hour	60
Hours Worked **(** 22)**	**89.0**
***EFW 7**	5337
Avg. time p/evaluation	1
Total Time (in minutes)	5337
Per Hour	60
Hours Worked **(** 23)**	**89.0**
***EFW 8**	
Avg. time p/application	1.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	5337
Avg. time p/application	1.0
Total Time (in minutes)	5337
Per Hour	60
Hours Worked **(** 25)**	**89.0**
***EFW 8**	
Avg. time p/application	1.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

***EFW Workload Multiplier (Client Provided, except code 24 and 26 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - *Total number of enrollment fee waivers denied*

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2, documentation is only in 04-05 workpapers.
Findings:

		Multiplier					
		2	2	2		4	5
		*Activity Codes					
Staff	Title	11	12	13	14	15	16
Solano, Candy	Accounting Services Tech. II						15
Various	Registration Cashiers	3.5	3.5	2		6	5
Average		**3.5**	**3.5**	**2.0**		**6.0**	**10.0**

***EFC Workload Multiplier (Client Provided, except code 15 used default multiplier 4)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print ou receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff doing the collection fee functions.
Source: PHR lists provided by client by fiscal year -- documentation in only in 04-05 workpapers.
Findings:

		PHR'S							
Staff	**Title**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
*Solano, Candy	Accounting Serv. Tech. II	20.35	20.92	21.98	23.45	23.45	26.14	28.19	28.19
*Various	Registration Cashiers	7.46	7.46	7.46	7.98	7.98	7.98	7.98	7.98
Average		**13.91**	**14.19**	**14.72**	**15.72**	**15.72**	**17.06**	**18.09**	**18.09**

*** Used 2004-05 PHR's because 2005-06 PHR's not available.**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3, documentation is only in 04-05 workpapers.
Findings:

Staff	Title	*Multiplier					
		7	7	7	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Valenzuela, Espie	Financial Aid Assistant	4	1	1	1.5	1	1.5
		4.0	1.0	1.0	1.5	1.0	1.5

***EFW Workload Multiplier (Client Provided, except code 24 and 26 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff doing the enrollment fee waiver functions.
Source: PHR lists provided by client by fiscal year -- documentation in only in 04-05 workpapers.
Findings:

Staff	Title	PHR'S							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
*Jody Kuhbender	Financial Aid Assistant	22.87	25.03						
*Valenzuela, Espie	Financial Aid Assistant			21.90	23.22	24.97	27.91	28.88	28.88
Average		**22.87**	**25.03**	**21.90**	**23.22**	**24.97**	**27.91**	**28.88**	**28.88**

*** Used 2004-05 PHR's because 2005-06 PHR's not available.**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Allan Hancock Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.8-1, "# of EF Refunds" schedule from client, and Chancellor's Website Headcount -- documentation is only in 04-05 workpapers.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	33,311	35,691	37,061	37,935	40,923	41,868	38,220	37,451
EFC 2	1.8-1 2.	Paid Enrollment fees	24,378	27,048	28,652	28,607	32,778	32,528	28,200	26,587
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X	8,643	8,409	9,328	8,045	9,340	10,020	10,864
EFC 4	1.8-2 1.	Delinquencies collections								
EFC 5	1.8-2 2.	Refunds	260	275	288	388	342	419	488	407
EFW 6	1.8-3 1.	Waivers Requested	X							
EFW 7	1.8-3 2. Not used -- Used Chancellor's Website Headcount	Waivers Approved	X	4,763	4,702	4,840	4,908	4,625	4,999	5,337
EFW 8	1.8-3 1-2	Waivers Denied	X							

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - *Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load*
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2005 Summer Term

Data Current As Of May 01, 2012 10:51:11

Total Headcount	6,700

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California Home Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2005 Fall Term

Data Current As Of May 01, 2012 10:52:16

Total Headcount	14,319

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock
For 2006 Spring Semester

Data Current As Of May 01, 2012 10:52:28

Total Headcount	16,432

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Allan Hancock College

Shelly Allan — Employee Name

Budget Analyst — Exact Position Title

Administrative Svcs — College/Department/Location

805 922-6906 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Circle years

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

Enrollment Revenue Report - Estimate January + April: 6 6 6 6 6 6 6 6 & 11/27/07

Final - Sept TOTALS: 6 6 6 6 6 6 6 6 & 11/27/07

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shelly Allan — Date 6/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Shelly Allan 11/27/07

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January 2006

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Allan Hancock College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	6,202	6,263	7,148	7,302	7,767	9,854	7,603	6700
Fall	12,995	14,099	14,275	14,472	14,824	15,846	14,707	14319
Winter/ Intersession	X	X	X	X	X	X	X	X
Spring	14,114	15,329	15,638	16,161	18,282	16,168	15,940	16,432
Total	33,511	35,691	37,001	37,935	40,923	41,868	38,220	37,451
2. Number of students who paid enrollment fees:								
Summer	Not available	4,733	5,651	Not available	Not available	8,175	5947	4,643
Fall		10,552	10,883			12,641	10,760	9,943
Winter/ Intersession	Not available	X	X	Not available	Not available	X	X	X
Spring		11,763	12,118			12,312	11,087	12,001
Total	24,378	27,048	28,652	28,607	32,778	32,852	28,200	26,587
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	Not available	1,530	1,497	Not available	Not available	1,679	1,856	2057
Fall		3,547	3,392			3,805	3,941	4,376
Winter/ Intersession	Not available	X	X	Not available	Not available	X	X	X
Spring		3,566	3,520			3,856	4,223	4,431
Total	8,933	8,643	8,409	9,528	8,045	9,340	10,020	10,864

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Shelly Alle 11/20/07 05706

Employee Signature: Shelly Alle Date 5/19/06

Shelly Allen Budget Analyst

Employee Name: (print) Position or Title

If you have any questions, please contact 805 922-6946, at x3226

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

California Home

Tuesday, November 27, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock CCD
For 2005 Summer Quarter

Data Current As Of November 27, 2007 11:46:36

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	6,700

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock CCD
For 2005 Fall Term

Data Current As Of November 27, 2007 11:48:10

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	14,319

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California Home

Tuesday, November 27, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Allan Hancock CCD
For 2006 Spring Semester

Data Current As Of November 27, 2007 11:53:26

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	16,432

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	BOGG-A	BOGG-B	BOGG-C		
Summer '2005					
AWARD TOTALS	$17,701.00	$99,326.00	$144,502.00	$261,529.00	
TOTAL STUDENTS	146	804	1,107		2057
Fall '2005					
AWARD TOTALS	$67,472.00	$431,066.00	$573,245.00	$1,071,783.00	
TOTAL STUDENTS	280	1,913	2,183		4376
Spring '2006					
AWARD TOTALS	$69,802.00	$457,708.00	$554,786.00	$1,082,296.00	
TOTAL STUDENTS	298	2,053	2,080		4431
REPORT TOTAL				$2,415,608.00	
TOTAL STUDENTS				6,108	

10,8

1.8-2 #12

Allan Hancock College
Enrollment Fee Collections and Waiver Mandate
Workload Multiplier for 1.7.2 Code 16 (Refunds)

Fiscal Year	# of EF Refunds
1998/99	260
1999/00	275
2000/01	288
2001/02	388
2002/03	342
2003/04	419
2004/05	488
2005/06	407

Shelly Ale
11/27/07
05106

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Allan Hancock College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	1,015,134	1,112,831	1,083,347	1,166,159	1,363,983	2,857,486	2,819,320	2,475,185
2. Enrollment Fees Refunded	26,623	27,837	25,218	36,000	34,776	59,356	55,097	126,165
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	988,511	1,084,994	1,058,129	1,130,159	1,329,207	2,798,130	2,764,223	2,349,020
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 929,115	$ 856,735	$ 819,399	$ 848,856	$ 844,770	$ 1,282,914	$ 1,283,353	$ 1,180,203
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 18,582	$ 16,734	$ 16,388	$ 16,977	$ 16,895	$ 25,658	$ 40,067	$ 43,604
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$ 65,038	$ 58,571						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
~~Spring~~ Total			74,441	77,1168	76797	85527	85,572	83,854
TOTAL x $0.91 per credit			67,786	70,223	69,885	77,830	78,142	76,307

Shelly Allen 11/27/07 05/06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Shelly Allen Date 5/19/06

Shelly Allen Budget Analyst

Employee Name (print) Position or Title

If you have any questions, please contact 805 922-6966, at X3226

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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TUE NOV 27, 2007, 12:16 PM --req: SHELLY----leg: GL GP--loc: ONSITE----job: 1397025 #J773---prog: GL440 <1.54>--report id: GLFLTR04

SORT ORDER: OTYP

SELECT Fund Code: 01 ; Object Code: 8876 ; Subsystem ID's: OH

Sort Value	Sort Level Description	Sort Level	Type	Debit	Credit	Net
** Total 4	By OBJECT TYPE	(1)	DR-CR	128,165.00	0.00	128,165.00
	** G R A N D T O T A L **		DR-CR	128,165.00	0.00	128,165.00

1.8.4.2

05/06 Enrollment Fee Refunds

ORNIA COMMUNITY COLLEGES
nual Financial and Budget Report

Detail of General Fund Revenues

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Description	State Use Only (EDP)	Fund S11 Unrestricted Actual (1)	Fund S12 Restricted Actual (1)	Fund S10 Total General Fund Actual (1)
Local Revenues (CA 8800):				
Property Taxes (CA8810):				
Tax Allocation, Secured Roll	8811	9,133,992		9,133,992
Tax Allocation, Supplemental Roll	8812	686,538		686,538
Tax Allocation, Unsecured Roll	8813	466,506		466,506
Prior Years Taxes	8816	23,579		23,579
Education Revenue Augmentation Fund (ERAF)	8817	881,455		881,455
Contributions, Gifts, Grants, and Endowments	8820	270,000	21,697	291,697
Contract Services (CA 8830):				
Contract Instructional Services	140	30,240	38,670	68,910
Other Contract Services	141	7,628	240	7,868
Sales and Commissions	8840	34,952		34,952
Rentals and Leases	8850	26,587	249	26,836
Interest and Investment Income	8860	253,059		253,059
Student Fees and Charges				
Community Services Classes	8872	102,216		102,216
Dormitory	8873			
Enrollment 1.8.4.3	8874	2,347,018		2,347,018
Field Trips and use of Nondistrict Facilities	8875	7,489		7,489
Health Services	8876			
Instructional Materials Fees and Sales of Materials	8877	70,016		70,016
Insurance	8878			
Student Records	8879			
Nonresident Tuition	8880	263,561		263,561
Parking Services and Public Transportation	8881		280,949	280,949
Other Student Fees and Charges	8885	132,766	237,021	369,787
Other Local Revenues	8890	49,249	13,358	62,607
TOTAL LOCAL REVENUES	**8800**	14,786,851	592,184	15,379,035
TOTAL REVENUES (8100 + 8600 + 8800)	**801**	43,480,947	7,920,394	51,401,341
Other Financing Sources (CA 8900):				
Proceeds of General Fixed Assets	8910			
Proceeds of General Long-Term Debt	8940			
Incoming Transfer	8980	99,869	19,990	119,859
TOTAL OTHER FINANCING SOURCES	**8900**	99,869	19,990	119,859
TOTAL REVENUES AND OTHER FINANCING SOURCES	**899**	43,580,816	7,940,384	51,521,200

Original mailed 9/11/06

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

ACTUAL ENROLLMENT FEE REVENUE

District: ALLAN HANCOCK

9/15/2006 Report - Recalculation			
	Fees Paid	**Receivables**	**Total Fees**
Enrollment Fee Revenue 1 (ECS 76300)	2,157,342	189,676	2,347,018
ECS 76140(k) Enrollment Fee Revenue 2 (Students from bordering states)	0	0	0
Total	2,157,342	189,676	2,347,018

Certification

I the **District Chief Business Officer,** hereby certify that, to the best of my knowledge and belief, the data on this form are true and correct.

Chief Business Officer
Signature:
Typed Name: E. Miller, Assc Supt/Vice Pres, Adm Svcs
Certify Date: 09/07/2006 02:39:13
District: ALLAN HANCOCK

For Supplemental Information, Contact
Name: Shelly Allen
Title: Budget Analyst
Phone: (805) 922-6966 x 3226
Email: sallen@hancockcollege.edu

SEND SIGNED CERTIFICATION PAGE TO:

California Community Colleges
Fiscal Services Unit
1102 Q Street
Sacramento, CA 95814
Fax: (916) 323-3057

Print Report Back

California Home

Tuesday, November 27, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Allan Hancock College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 27, 2007 11:54:30

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	381	140,245
BOGW - Part B based on income standards	2,401	857,655
BOGW - Part C based on financial need	2,555	1,182,303

Total Amount = $ 2,180,203

1.8.4 4.1

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Internet Reg.

AGREEMENT

This Agreement is made and entered into this **18th day of May, 2001**, by and between **Allan Hancock College ("District")** and **EPOS ("Contractor")**, with its principal place of business located at: **177 Technology Parkway, Auburn, AL 36831-3140.**

In consideration of the mutual covenants set forth herein, Contractor and District agree as follows:

ARTICLE 1. THE PROJECT.

Contractor agrees, for the Contract Price and within the Contract Time, to perform and provide all necessary work, labor, materials, equipment transportation and services, including without limitation, all necessary permits, fees, approvals and/or licenses required by law (collectively "the Work") to complete the Project described below in strict conformity with the Contract Documents and in a good and workmanlike manner, free from any and all claims of mechanics, Material Suppliers, Subcontractors or laborers providing or performing any portion of the Work. The Work of the Project is generally described as: **INTERNET BASED INFORMATION SYSTEM, BID #01-12.**

ARTICLE 2. THE CONTRACT DOCUMENTS.

The Contract Documents consist of the following, all of which are component parts of the Contract Documents and which are collectively referred to herein as the "Contract Documents."

Request for Proposals
Instructions for Bidders
Proposal General Conditions
Cost Summary Proposal
Bid Bond
Non-Collusion Affidavit
Agreement
Certificate of Worker's Compensation Insurance

The Contract Documents shall include amendments or modifications issued after the date of this Agreement.

ARTICLE 3. CONTRACT TIME.

3.1 CONTRACT TIME. The Contractor shall commence the Work on the date set forth in the District's Notice to Proceed (NTP) issued to the Contractor. The Contractor shall achieve Substantial Completion of the Work within the Contract Time which is (to be determined) consecutive days after the date for commencement of the Work as set forth in the NTP. Adjustment of the Contract Time, if any, shall be made only in strict conformity with the applicable provisions of the Contract Documents.

3.2 LIQUIDATED DAMAGES. Time is of the essence in the Contractor's performance and completion of the Work and all other obligations to be performed by the Contractor under the Contract Documents. The Contractor acknowledges and agrees that if Substantial Completion of the Work is not achieved within the Contract Time for each Site within the Contract Time, the District will sustain losses, damages and other costs which are difficult to ascertain. If Substantial Completion of the Work is not achieved within the Contract Time for any Site, the Contractor shall be liable for Liquidated Damages to the District at the rate of Five Hundred Dollars ($200.00) for each calendar day beyond the Contract Time at each Site until Substantial Completion of the Work for each Site is achieved. The Contractor acknowledges and agrees that the foregoing per diem rate of Liquidated Damages for delayed Substantial Completion at each Site is reasonable under the circumstances existing at the time of the execution of this Agreement. If Substantial Completion of the Work is not achieved on or prior to the Contract Time for each Site, the District may thereafter assess and withhold Liquidated Damages from any portion of the Contract Price then or thereafter due the Contractor. The Contractor and the Performance Bond Surety shall be jointly and severally liable and responsible to the District for payment of any assessment of Liquidated Damages which exceeds the remaining undisbursed Contract Price.

ARTICLE 4. Contract Price.

4.1 Contract Price. The Contract Price payable by District to Contractor for the Contractor's full, complete and timely performance of the Work under the Contract Documents is **FIFTY SEVEN THOUSAND TWO HUNDRED FORTY THREE 75/100 Dollars ($57,243.75)**. The Contract Price shall be subject to adjustment only in strict conformity with applicable terms of the Contract Documents.

Base Software		$34,250
Modules:		
Student		$10,500
Financial Aid		included in above
Financial		included in above
Credit Card Payment Module		$3,500
Installation, Acceptance Testing, Cutover		$3,500
Training		$1,500
	Total	$53,250.00
	Tax	3,993.75
	Total Cost	**$57,243.75**

4.2 DISBURSEMENT OF PAYMENTS. The District's payment of the Contract Price shall be in a series of Progress Payments based upon the Cost Breakdown prepared pursuant to the General Conditions and Contractor's Applications for Progress Payment on forms approved by the District and submitted monthly by the Contractor to the District. In accordance with the General Conditions, the District will review Applications for Progress Payment to determine if they are proper and will verify that the amount requested by any such Application for Progress Payment is actually due and payable to the Contractor based upon the Work actually completed, installed and in place as of the date of the Application for Progress

Payment and the value of such Work as determined by the Schedule of Values. The District will make payment to the Contractor on each proper Application for Progress Payment an amount equal to Ninety Percent (90%) of the value of the Work actually completed, installed and in place as verified by the District, less the aggregate amount of previous Progress Payments.

4.3 DISBURSEMENT OF FINAL PAYMENT. Final Payment, consisting of Retention previously deducted and withheld from Progress Payments and the remaining balance, if any of the Contract Price, shall be disbursed by the District to the Contractor upon completion of all of the Work and the District's acceptance of the same in accordance with the Contract Documents.

ARTICLE 5. MISCELLANEOUS.

5.1. ENTIRE AGREEMENT. This Contract Documents constitute the entire agreement and understanding between the District and Contractor regarding the subject matter hereof. There are no understandings, agreements, representations or warranties, express or implied, of the District to the Contractor regarding the subject matter hereof, except as expressly set forth in the Contract Documents. Contractor, by the execution of this Agreement, acknowledges that Contractor has read this Agreement and all Contract Documents, understands all terms, conditions and obligations therein, and agrees to be bound by the terms and conditions of the Contract Documents.

5.2. EXECUTION OF OTHER DOCUMENTS. The District and Contractor shall cooperate fully in the execution of any and all other documents and in the completion of any additional actions that may be necessary or appropriate to give full force and effect to the terms and intent of the Contract Documents.

5.3. COUNTERPARTS. This Agreement may be executed in counterparts, each of which shall be deemed an original and all executed counterpart copies hereof shall be deemed the same instrument.

5.4. BINDING EFFECT. This Agreement and all portions of the Contract Documents shall inure to the benefit of and shall be binding upon the Contractor and District and their respective successors and assigns.

5.5. SEVERABILITY. If any provision of this Agreement or any other portion of the Contract Documents shall be held invalid or unenforceable by a court of competent jurisdiction, such provision or potion of the Contract Documents shall be deemed severed herefrom but all other provisions and portions of the Agreement and Contract Documents shall remain in full force and effect.

5.6. AMENDMENTS. No term, condition or other provision of the Contract Documents shall be waived, altered, modified supplemented or amended in any manner whatsoever except by written instrument executed by authorized representatives of the District and the Contractor.

5.7. NO ASSIGNMENT. The Contractor shall not assign or transfer or pursuant to assign or transfer any of its rights or obligations under the Contract Documents without prior written consent of the District, which consent may be granted, withheld or limited in the sole and exclusive discretion of the District.

5.8. WRITTEN NOTICE. Written notice shall be deemed to have been duly served if delivered by personal service requiring a signature acknowledging receipt or if delivered certified or registered United States Mail, postage fully pre-paid. Notices hereunder to the District or the Contractor shall be addressed as follows:

If to District:
Allan Hancock College
800 South College Drive
Santa Maria, California 93454
Attention: Craig Wilde, Director, Business Services

If to Contractor:
EPOS Corporation
177 Technology Parkway
Auburn, AL 36830
Attn: Ed Graf, Contracts Administrator

CONTRACTORS ARE REQUIRED BY LAW TO BE LICENSED AND REGULATED BY THE CONTRACTORS' STATE LICENSE BOARD. ANY QUESTIONS CONCERNING A CONTRACTOR MAY BE REFERRED TO THE REGISTRAR, CONTRACTORS' STATE LICENSE BOARD, P.O. BOX 26000, SACRAMENTO, CALIFORNIA 95826

IN WITNESS WHEREOF the parties have executed this Agreement on the date first hereinabove written.

"CONTRACTOR"

By: _____
Signature

Michael A. Lawler
Typed or Printed Name

President
Title

"DISTRICT"
ALLAN HANCOCK COLLEGE

_____
Dr. Elizabeth A. Miller
Vice President, Administrative Services

Allan Hancock College
Web-Reg Software Expenses for EFCW claim

Vendor: EPOS Corporation
Rational: Software purchased for Web-reg included a credit card component for collecting enrolment fees
Prorated to be 6.5% of total expenses

Year	Total Expense	EFCW Claimable 6.50%
98/99	0	0
99/00	0	0
00/01	0	0
01/02	40,581.25	2,637.78
02/03	5,000.00	325.00
03/04	14,130.00	918.45
04/05	13,209.00	858.59
05/06	15,030.00	976.95

Shelly Allen
11/27/07
05/06

SORT ORDER: Program within Object

SELECT Program Code: 62110000 ; PE ID's: V16069

Lg	Program - Object	Primary Ref	Transaction Description	SS	Ref Date	Job No	Debit	Credit	NET
GL	62110000-4514	IV110487	EPOS CORPPORATI Technology/Sof	OH	11/18/05	01195690	10,500.00	0.00	10,500.00
**	Total 62110000		By Program Code		(2)	DR-CR	10,500.00	0.00	10,500.00
**	Total 4514		By Object Code		(1)	DR-CR	10,500.00	0.00	10,500.00
GL	62110000-5640	112074	EPOS CORPPORATI Maintenance Ag	OH	07/27/05	01159218	4,530.00	0.00	4,530.00
**	Total 62110000		By Program Code		(2)	DR-CR	4,530.00	0.00	4,530.00
**	Total 5640		By Object Code		(1)	DR-CR	4,530.00	0.00	4,530.00
			** G R A N D T O T A L **			DR-CR	15,030.00	0.00	15,030.00

EPOS

177 Technol...
Auburn, AL 3...
Tel: 334-3...
Fax: 334-321...
www.epos...

INVOICE

Invoice: IV110487 Revision: 0
Invoice Date: 04/29/05 Page: 1
Due Date: 05/29/05

Bill To: ALLEN

ALLAN HANCOCK COLLEGE
800 SOUTH COLLEGE DRIVE
SANTA MARIA, CA 93454-6399

Sold To: ALLEN

ALLAN HANCOCK COLLEGE
800 SOUTH COLLEGE DRIVE
SANTA MARIA, CA 93454-6399

P.O. ~~014715~~ 060637
V 110069

Sales Order: SO103533
Order Date: 05/29/01
Salesperson(s): PAD

Credit Terms: 30
Net 30 days
Resale:
Remarks: INVOICE IN DUPLICATE - JAY NORBY

Ship Date: 04/27/05
Ship-to: ALLEN-1
Ship Via:
BOL:
FOB Point:

DEC 13 2005

Item Number	UM	Shipped	Backorder	Tax	Price	Net Price
310000	DY	1.0	0.0	no	10,500.00	10,500.00
CUSTOM SCRIPTING						

STUDENT, FINANCIAL AID, FINANCIAL MODULES

OK to pay per Richard Darmody SCOHC 97-682829

Non-Taxable: 10,500.00
Taxable: 0.00
Tax Date: 04/27/05

Currency: USD
0.00%

Line Total: 10,500.00
Discount: 0.00
Service 10 : 0.00
Freight 20 : 0.00
Special 30 : 0.00
Total Tax: 0.00
Total: 10,500.00

1	2	3
7.750%	0.000%	0.000%
0.00	0.00	0.00
0.00	0.00	0.00

621100000-4514 F

WARRANT # 0187355
DATE PAID 11/22/05

EPOS

www.epos.com

Inv
Invoice Da
Due Date:

Bill To: ALLEN

ALLAN HANCOCK COLLEGE
800 SOUTH COLLEGE DRIVE
CRAIG WILDE
SANTA MARIA, CA 93454-6399

Sold To: ALLEN

ALLAN HANCOCK COLLEGE
1300 SOUTH COLLEGE DRIVE
NORMA RAZO
SANTA MARIA, CA 93454

P.O. PO 060047

Sales Order: SV504857
Order Date: 05/17/05
Salesperson(s):

Credit Terms: 30
Net 30 days
Resale:
Remarks:

Ship Date: 05/17/05

Ship-To: ALLEN-1
Ship Via:
BOL:
FOB Point:

For Period: 07/01/05 To: 06/30/06
Service Contract: 10005135
ANNUAL WEB MAINTENANCE BILLING
A COPY OF THIS INVOICE WAS SENT TO NORMA RAZO

Item Number	UM	Shipped	Backorder	Tax	Price	Net Price
Depot Depot	EA	12.0	0.0	no	377.50	4,530.00

SKB

*** CONTINUED ***

6211-5640F
V16069

WARRANT # 187172
DATE PAID AUG 01 2005

BOARD APPROVED ON
AUG 16 2005

Please Remit To:
EPOS Corporation
P.O. 3140 • Auburn, AL 36831-3140
Tel: (334) 321-EPOS(3767) • Fax: (334) 321-7285
www.epos.com

Allan Hancock Joint Community College District
308/95 Enrollment Fe[illegible]llection and Waivers
Fiscal Years: 1999[illegible] through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 -- documentation is only in 04-05 workpapers.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 1,084,994	$ 1,058,199	$ 1,125,159	$ 1,348,957	$ 2,428,050	$ 2,666,224	$ 2,347,018
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 21,700	$ 21,164	$ 22,503	$ 26,979	$ 48,561	$ 53,324	$ 46,940
1.8-4 line 4A	Enrollment Fees Waived	$ 836,735	$ 819,399	$ 848,856	$ 844,770	$ 1,282,914	$ 2,003,350	2,180,203
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,735	$ 16,388	$ 16,977	$ 16,895	$ 25,658	$ 40,067	$ 43,604
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,571	For 00-01 through 04-05 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34
Total # of credits	Line 4A divided by unit fee		74,490	77,168	76,797	81,870	85,833	93,410
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 67,786	$ 70,223	$ 69,885	$ 74,502	$ 78,108	$ 85,003
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 16,735	$ 16,388	$ 16,977	$ 16,895	$ 25,658	$ 40,067	$ 43,604
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,571						
1.8-4 5.	Credit Units Waived		$ 67,786	$ 70,223	$ 69,885	$ 74,502	$ 78,108	$ 85,003
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,306**	**$ 84,174**	**$ 87,200**	**$ 86,780**	**$ 100,160**	**$ 118,175**	**$ 128,607**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Allan Hancock
COUNTY: Santa Barbara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$25,822,260	$22,741,779	$1,019,777	$23,761,556
EQUALIZATION	128,121	117,872	10,249	128,121
ENROLL FEE ADMIN (2%)	39,915	36,721	3,194	39,915
APPRENTICE ALLOWANCE	57,839	55,742	2,097	57,839
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	269,388	247,837	21,551	269,388
S.F.A.A.	338,058	309,938	28,120	338,058
E.O.P.S.	655,735	599,021	56,714	655,735
C.A.R.E.	286,893	262,070	24,823	286,893
D.S.P.S.	843,926	776,412	67,514	843,926
STATE HOSPITALS	0	0	0	0
CALWORKS	343,613	274,653	68,960	343,613
MATRICULATION (CREDIT)	413,553	376,328	37,225	413,553
MATRIC. (NONCREDIT)	321,422	295,709	25,713	321,422
FAC.& STAFF DIVERSITY	15,278	12,917	2,361	15,278
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	10,445	0	10,445	10,445
PART-TIME FAC. ALLO.	418,022	384,581	33,441	418,022
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	232,304	213,719	18,585	232,304
ECON. DEVELOPMENT	178,875	150,255	0	150,255
TANF	68,238	62,779	5,459	68,238
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	37,625	15,802	15,803	31,605
VTEA TITLE I C	583,188	156,732	333,146	489,878
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	863,430	864,037	-607	863,430
TOTAL	$31,980,460	$27,988,666	$1,803,140	$29,791,806

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schr 5A
Allan Hancock Joint C. .unity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)							
2	Staff Training	(04)(B)(1)(b)							
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)			$ 2,637.78	$ 325.00	$ 918.45	$ 858.45	$ 976.95
4	Waiving student fees	(04)(B)(2)(b)	$ 13,909.17	$ 12,016.53	$ 13,114.64	$ 14,297.83	$ 15,060.23	$ 16,842.80	$ 17,986.46
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 174.06	$ 221.70	$ 238.32	$ 276.12	$ 305.04	$ 330.06	$ 346.02
6	EFCW - Fee Waiver Costs	Total	$ 14,083.23	$ 12,238.23	$ 15,990.74	$ 14,898.95	$ 16,283.72	$ 18,031.31	$ 19,309.43
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 75,306.00	$ 84,174.00	$ 87,200.00	$ 86,780.00	$ 100,160.00	$ 118,175.00	$ 128,607.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (61,222.77)	$ (71,935.77)	$ (71,209.26)	$ (71,881.05)	$ (83,876.28)	$ (100,143.69)	$ (109,297.57)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 14,083.23**	**$ 12,238.23**	**$ 15,990.74**	**$ 14,898.95**	**$ 16,283.72**	**$ 18,031.31**	**$ 19,309.43**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Allan Hancock College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 01, 2012 10:53:00

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	381	140,245
BOGW - Part B based on income standards	2,401	857,655
BOGW - Part C based on financial need	2,555	1,182,303

Total Amount = $ 2,180,203

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Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Cerritos Community College District CC19080

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Cerritos Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

Claimant Identification Number: CC 19080

(02) Claimant Name: Cerritos Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 11110 Alondra Blvd.

City: Norwalk | State: CA | Zip Code: 90650

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐

Fiscal Year of cost	(06)	(12) 2004-2005	(30) EFCW-1, (06)	34
Total Claimed Amount	(07)	(13) $ 497,436	(31) EFCW-1, (07)	199,545
Less: 10% Late Penalty		(14) $ 49,744	(32) EFCW-1, (09)	109,137
Less: Prior Claim Payment Received		(15) $ -	(33) EFCW-1, (10)	177,977
Net Claimed Amount		(16) $ 447,692	(34)	
Due from State	(08)	(17) $ 447,692	(35)	
Due to State		(18)	(36)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	407,028
(25) EFCW-1, (04)(B)(1)(a)(f)	390
(26) EFCW-1, (04)(B)(1)(b)(f)	988
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	176,512
(29) EFCW-1, (04)(B)(2)(c)(f)	88

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**

Berlanti Rizkallah — 6/28/07

Berlanti "Lola" Rizkallah
Type or Print Name

Director of Fiscal Services
Title

(38) Name of Contact Person for Claim

Sixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 207	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Cerritos Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 407,027.77	$ -	$ -	$ -	$ -	$ 407,027.77
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 389.93	$ -	$ -	$ -	$ -	$ 389.93
b. Staff training (One time per employee)	$ 987.86	$ -	$ -	$ -	$ -	$ 987.86
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 176,511.51	$ -	$ -	$ -	$ -	$ 176,511.51
c. Reporting BOG fee waiver data to CCC	$ 87.56	$ -	$ -	$ -	$ -	$ 87.56
(05) Total Direct Costs	$ 585,004.63	$ -	$ -	$ -	$ -	$ 585,004.63

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.11%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 199,545.08
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 784,549.71
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 109,137.00
(10) Enrollment Fee Waiver offsets		$ 177,976.89
(11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 497,435.82

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$18.49	9,506.8	$ 175,780.73				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$18.49	1,028.9	$ 19,024.36				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$18.49	7,716.5	$ 142,678.09				
...lating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$18.49	2,001.4	$ 37,005.89				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$18.49	1,759.8	$ 32,538.70				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 407,027.77	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Cerritos Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Quiroz, Jamie — Financial Aid Specialist	$39.69	1.0	$ 39.69				
Westby, Kimberly — Student Affairs Specialist	$43.78	8.0	$ 350.24				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 389.93	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Cerritos Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Quiroz, Jamie	Financial Aid Specialist	$39.69	10.0	$ 396.90				
Tafoya, Yvette	Financial Aid Specialist	$30.09	8.0	$ 240.72				
Westby, Kimberly	Student Affairs Specialist	$43.78	8.0	$ 350.24				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 987.86	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff — Waving Enrollment Fees	$35.70	1,425.4	$ 50,886.78				
Receiving waiver applications Financial Aid Office Staff — Waving Enrollment Fees	$35.70	1,247.2	$ 44,525.04				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff — Waving Enrollment Fees	$35.70	890.9	$ 31,805.13				
Ente[illegible]proved application information into district records; providing student award letter Financial Aid Office Staff — Waving Enrollment Fees	$35.70	1,380.8	$ 49,294.56				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 176,511.51	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Westby, Kimberly Student Affairs Specialist	$43.78	2.0	$ 87.56				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 87.56	$ -	$ -	$ -	$ -

New 04/06

Cerritos Community College District
308/95 ENROLLMENT FEE LECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	9,506.80	Enrollment Office Staff	Collecting Fees	$18.49	$175,780.73	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	1,028.90	Enrollment Office Staff	Collecting Fees	$18.49	$19,024.36	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	7,716.50	Enrollment Office Staff	Collecting Fees	$18.49	$142,678.09	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	2,001.40	Enrollment Office Staff	Collecting Fees	$18.49	$37,005.89	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	1,759.80	Enrollment Office Staff	Collecting Fees	$18.49	$32,538.70	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	22,013.40	**Enrollment Office Staff Total**			$407,027.77		
04-05	1,425.40	Financial Aid Office Staff	Waving Enrollment Fees	$35.70	$50,886.78	Answering student's questions regarding enrollment fee waivers/referring to appropriate perso	Waiving student fees
04-05	1,247.20	Financial Aid Office Staff	Waving Enrollment Fees	$35.70	$44,525.04	Receiving waiver applications	Waiving student fees
04-05	890.90	Financial Aid Office Staff	Waving Enrollment Fees	$35.70	$31,805.13	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,380.80	Financial Aid Office Staff	Waving Enrollment Fees	$35.70	$49,294.56	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,944.30	**Financial Aid Office Staff Total**			$176,511.51		
3/11/2005	5.00	Quiroz, Jamie	Financial Aid Specialist	$39.69	$198.45	Train district staff or attend training to implement procedures for waiver eligibility determinatio	Staff training - enrollment fee waiver
3/14/2005	5.00	Quiroz, Jamie	Financial Aid Specialist	$39.69	$198.45	Train district staff or attend training to implement procedures for waiver eligibility determinatio	Staff training - enrollment fee waiver
4/1/2005	1.00	Quiroz, Jamie	Financial Aid Specialist	$39.69	$39.69	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B
	11.00	**Quiroz, Jamie Total**			$436.59		
3/23/2005	8.00	Tafoya, Yvette	Financial Aid Specialist	$30.09	$240.72	Train district staff or attend training to implement procedures for waiver eligibility determinatio	Staff training - enrollment fee waiver
	8.00	**Tafoya, Yvette Total**			$240.72		
4/22/2005	8.00	Westby, Kimberly	Student Affairs Specialis	$43.78	$350.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B
4/27/2005	8.00	Westby, Kimberly	Student Affairs Specialis	$43.78	$350.24	Train district staff or attend training to implement procedures for waiver eligibility determinatio	Staff training - enrollment fee waiver
4/27/2005	2.00	Westby, Kimberly	Student Affairs Specialis	$43.78	$87.56	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	18.00	**Westby, Kimberly Total**			$788.04		
	26,994.70	**Grand Total**			$585,004.63		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$44,358,408		$44,358,408	$1,309,275	$43,049,133
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	1,922,032		1,922,032	82,351	1,839,681
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	67,709		67,709		67,709
Other Instructional Administration & Instructional Governance	6090	22,608		22,608		22,608
Instructional Support Services	6100					
Learning Center	6110	149,999		149,999	149,999	0
Library	6120	1,221,909		1,221,909	69,338	1,152,571
Media	6130	292,915		292,915	15,135	277,780
Museums and Galleries	6140	19,827		19,827		19,827
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	2,063,146		2,063,146	111,516	1,951,630
Admissions and Records	6200	1,172,249		1,172,249	69,302	1,102,947
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,664,602		2,664,602		2,664,602
Matriculation and Student Assessment	6320	1,265,407		1,265,407	20,117	1,245,290
Transfer Programs	6330	127,336		127,336		127,336
Career Guidance	6340					
Other Student Counseling and Guidance	6390	1,930		1,930		1,930
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,765,731		1,765,731	105,983	1,659,748
Subtotal		$57,115,808	$0	$57,115,808	$1,933,016	$55,182,792

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$386,392		$386,392	$14,909	$371,483
Health Services	6440					
Student Personnel Admin.	6450	969,788		969,788	27,829	941,959
Financial Aid Administration	6460	789,601		789,601	5,927	783,674
Job Placement Services	6470					
Veterans Services	6480	55,856		55,856	14,154	41,702
Miscellaneous Student Services	6490	236,405		236,405	5,029	231,376
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,719,151		1,719,151	1,719,151	0
Custodial Services	6530	1,871,660		1,871,660	1,871,660	0
Grounds Maintenance and Repairs	6550	620,610		620,610	620,610	0
Utilities	6570	1,897,292		1,897,292	1,897,292	0
Other	6590	85,148		85,148	85,148	0
Planning, Policy Making, and Coordination	6600					
General Inst. Support Services	6700					
Community Relations	6710	876,737		876,737	876,737	0
Fiscal Operations	6720	3,113,744		3,113,744	3,113,744	0
Human Resources Management	6730	890,674		890,674	890,674	0
Noninstructional Staff Benefits & Incentives	6740	1,021,657		1,021,657	1,021,657	0
Staff Development	6750	215,634		215,634	215,634	0
Staff Diversity	6760	21,657		21,657	21,657	0
Logistical Services	6770	1,373,922		1,373,922	1,373,922	0
Management Information Systems	6780	3,891,862		3,891,862	3,891,862	0
Subtotal		$77,153,598	$0	$77,153,598	$19,600,612	$57,552,986

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	656,991		656,991	656,991	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830	113,809		113,809		113,809
Economic Development	6840					
Other Community Services & Economic Development	6890	246,418		246,418	799	245,619
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	383,396		383,396	1,804	381,592
Farm Operations	6930					
Food Services	6940	143,836		143,836		143,836
Parking	6950	11,022		11,022		11,022
Student and Co-curricular Activities	6960	5,777		5,777		5,777
Student Housing	6970					
Other	6990	247,083		247,083		247,083
Auxiliary Operations	7000					
Contract Education	7010	710,158		710,158		710,158
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	3,250		3,250	3,250	0
(05) Total		$79,675,338	$0	$79,675,338	$20,263,456	$59,411,882
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.11%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	882					882
Biological Sciences	0400	910,834					910,834
Business and Management	0500	2,603,453	240,964	41,452	96,351		2,982,220
Communications	0600	101,541					101,541
Computer and Information Science	0700	1,232,320		4,282	124,628		1,361,230
Education	0800	3,098,662	727,382	190,344	63,605		4,079,993
Engineering and Related Industrial Tech.	0900	4,775,972	1,179,873	464,203	237,430		6,657,478
Fine and Applied Arts	1000	3,130,617	620,906	117,946	36,496		3,905,965
Foreign Language	1100	778,081					778,081
Health	1200	2,710,687	165,865	122,108	136,424		3,135,084
Consumer Education and Home Economics	1300	735,057	4,884	4,277			744,218
Law	1400	329,059	8,221	4,469			341,749
Humanities (Letters)	1500	5,916,537	587,532	39,041	36,723		6,579,833
Library Science	1600						
Mathematics	1700	2,992,761		3,220			2,995,981
Military Studies	1800						
Physical Sciences	1900	1,777,486	502,031	83,934	42,758		2,406,209
Psychology	2000	1,001,793					1,001,793
Public Affairs and Services	2100	423,263	122,102	21,657	3,064		570,086
Social Sciences	2200	1,679,967	138,569	29,987	10,557		1,859,080
Commercial Services	3000	356,177					356,177
Interdisciplinary Studies	4900	1,297,601	119,698	2,797	521,239		1,941,335
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,648,639					1,648,639
Subtotal - Instructional Activities	**599**	37,501,389	4,418,027	1,129,717	1,309,275		44,358,408

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,319,698	519,983	82,351		1,922,032
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		60,343	7,366			67,709
Other Instruct. Admin. & Instruct. Governance	6090			22,608			22,608
Subtotal - Instructional Administration	**6000**		1,380,041	549,957	82,351		2,012,349
Instructional Support Services (6100)							
Learning Center	6110				149,999		149,999
Library	6120		1,113,091	39,480	69,338		1,221,909
Media	6130		263,347	14,433	15,135		292,915
Museums and Galleries	6140		18,923	904			19,827
Academic Information Systems and Tech	6150						
Other Instructional Support Services	6190		1,414,377	537,253	111,516		2,063,146
Subtotal - Instructional Support Services	**6100**		2,809,738	592,070	345,988		3,747,796
Admissions and Records	**6200**		1,052,044	50,903	69,302		1,172,249
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,609,271	55,331			2,664,602
Matriculation and Student Assessment	6320		1,204,588	40,702	20,117		1,265,407
Transfer Programs	6330		127,336				127,336
Career Guidance	6340						
Other Student Counseling and Guidance	6390			1,930			1,930
Subtotal - Student Counseling and Guidance	**6300**		3,941,195	97,963	20,117		4,059,275

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,578,972	80,776	105,983		1,765,731
Extended Opportunity Prgms. & Services (EOPS)	6430		334,410	37,073	14,909		386,392
Health Services	6440						
Student Personnel Administration	6450		868,231	73,728	27,829		969,788
Financial Aid Administration	6460		743,478	40,196	5,927		789,601
Job Placement Services	6470						
Veterans Services	6480		41,702		14,154		55,856
Miscellaneous Student Services	6490		213,797	17,579	5,029		236,405
Subtotal - Other Student Services	**6400**		3,780,590	249,352	173,831		4,203,773
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,150,851	520,081	48,219		1,719,151
Custodial Services	6530		1,686,176	179,868	5,616		1,871,660
Grounds Maintenance and Repairs	6550		532,353	84,168	4,089		620,610
Utilities	6570			1,897,292			1,897,292
Other Operation and Maintenance of Plant	6590		37,545	15,391	32,212		85,148
Subtotal - Operation and Maintenance of Plant	**6500**		3,406,925	2,696,800	90,136		6,193,861
Planning, Policymaking, and Coordination	**6600**						

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		686,519	176,013	14,205		876,737
Fiscal Operations	6720		1,535,820	1,558,233	19,691		3,113,744
Human Resources Management	6730		790,909	91,591	8,174		890,674
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,021,657				1,021,657
Staff Development	6750		208,986	4,654	1,994		215,634
Staff Diversity	6760			12,414	9,243		21,657
Logistical Services	6770		822,757	479,737	71,428		1,373,922
Management Information Systems	6780		2,657,996	291,845	942,021		3,891,862
Other General Institutional Support Services	6790		696,243	(39,252)			656,991
Subtotal - General Institutional Support Services	**6700**		8,420,887	2,575,235	1,066,756		12,062,878
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830		110,927	2,882			113,809
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		117,794	127,825	799		246,418
Subtotal - Community Services	**6800**		228,721	130,707	799		360,227

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		375,663	5,929	1,804		383,396
Farm Operations	6930						
Food Services	6940		143,836				143,836
Parking	6950		11,022				11,022
Student and Co-curricular Activities	6960		5,777				5,777
Student Housing	6970						
Other Ancillary Services	6990		228,902	18,181			247,083
Subtotal - Ancillary Services	**6900**		765,200	24,110	1,804		791,114
Auxiliary Operations (7000)							
Contract Education	7010		676,412	33,746			710,158
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**		676,412	33,746			710,158
Physical Property and Related Acquisitions (7100)	**7100**				3,250		3,250
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					2,128,940	2,128,940
Student Aid	7320					461,190	461,190
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,590,130	2,590,130
TOTAL EXPENDITURES and OTHER OUTGO	**391**	37,501,389	30,879,780	8,130,560	3,163,609	2,590,130	82,265,468

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report
SUPPLEMENTAL DATA

Receipt and Expenditures of Lottery Proceed

L11 GENERAL FUND

For Actual Year: **2003-04** Budget Year: **2004-05**

Description	State Use Only (EDP)	Instructional Activities (0100 - 5900) (1)	Instructional & Institutional Support Activities (6000 - 6700) (2)	Others (3)	Total (Col. 1 thru 3) (4)
1. 06/30/03 Reported Ending Balance	902				
2. Adjustments	903				21,074
3. Adjusted Beginning Balance (lines 1 + 2)	**904**				21,074
Part I. Actual Fiscal Year Data					
4. State Lottery Proceeds:					
a) Cash Received	869A				1,256,844
b) Accrued	860A				820,742
Expenditures:					
5. Salaries and Benefits (Objects 1000 - 3000)	100A				
6. Supplies and Materials (Object 4000)					
(a) Software	210A				
(b) Books, Magazines, & Periodicals	220A				
(c) Instructional Supplies & Materials	230A				
(e) Noninstructional Supplies & Materials	240A				
7. Other. Oper. Exp. & Services (5000)	400A		2,098,660		2,098,660
8. Capital Outlay:					
a) Library Books (Object 6300)	630A				
b) Equipment (Object 6400)	640A				
9. Other	650A				
10. Total Expenditures (add lines 5 thru 9)	**501A**		2,098,660		2,098,660
11. 06/30/04 Balance (lines 3 + 4 - 10)	**905A**				
Part II. Budget Fiscal Year Data					
12. State Lottery Proceeds (estimated)	869B				2,000,000
Expenditures:					
13. Salaries and Benefits (Objects 1000 - 3000)	100B				
14. Supplies & Materials (Object 4000)					
(a) Software	210B				
(b) Books, Magazines, & Periodicals	220B				
(c) Instructional Supplies & Materials	230B				
(e) Noninstructional Supplies & Materials	240B				
15. Other Oper. Exp. & Services (Object 5000)	400B		2,000,000		2,000,000
16. Capital Outlay:					
a) Library Books (Object 6300)	630B				
b) Equipment (Object 6400)	640B				
17. Other	650B				
18. Total Expenditures (add lines 13 thru 17)	**501B**		2,000,000		2,000,000
19. 06/30/05 Projected Balance (add lines 11 + 12 - 18)	**905B**				

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report
SUPPLEMENTAL DATA
For Actual Year: 2003-04

Analysis of Interfund Transfers

Fund #	In/Out	Fund Title	Amount Transferred In	Amount Transferred Out
41	IN	Capital Outlay Projects Fund	1,769,689	
42	OUT	Revenue Bond Construction Fund		1,769,689
41	IN	Capital Outlay Projects Fund	2,128,940	
11	OUT	Unrestricted Subfund		1,508,940
12	OUT	Restricted Subfund		620,000

Analysis of Interfund Transfers

Fund #	In/Out	Fund Title	Amount Transferred In	Amount Transferred Out
Summary Totals				
Totals			3,898,629	3,898,629
41		Capital Outlay Projects Fund	3,898,629	
42		Revenue Bond Construction Fund		1,769,689
11		Unrestricted Subfund		1,508,940
12		Restricted Subfund		620,000

Schedule 1A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	60,043
Avg. time p/account	9.5
Total Time (in minutes)	570409
Per Hour	60
Hours Worked (****Activity 11**)	**9506.8**
***EFC 2**	30,866
Avg. time p/student	2
Total Time (in minutes)	61732
Per Hour	60
Hours Worked (****Activity 12**)	**1028.9**
***EFC 2**	30,866
Avg. time p/question	15
Total Time (in minutes)	462990
Per Hour	60
Hours Worked (****Activity 13**)	**7716.5**
***EFC 1**	60,043
Avg. time p/file	2
Total Time (in minutes)	120086
Per Hour	60
Hours Worked (****Activity 14**)	**2001.4**
***EFC 4**	21,118
Avg. time p/account	5
Total Time (in minutes)	105590
Per Hour	60
Hours Worked (****Activity 15**)	**1759.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)

Schedule 1B
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	26,726
Avg. time p/question	3.2
Total Time (in minutes)	85523
Per Hour	60
Hours Worked (****Activity 21**)	**1425.4**
***EFW 7**	26,726
Avg. time p/application	2.8
Total Time (in minutes)	74833
Per Hour	60
Hours Worked (****Activity 22**)	**1247.2**
***EFW 7**	26,726
Avg. time p/evaluation	2.0
Total Time (in minutes)	53452
Per Hour	60
Hours Worked (****Activity 23**)	**890.9**
***EFW 8**	
Avg. time p/application	4.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
***EFW 7**	26,726
Avg. time p/application	3.1
Total Time (in minutes)	82851
Per Hour	60
Hours Worked (****Activity 25**)	**1380.8**
***EFW 8**	
Avg. time p/application	2.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2		1	4	5
		**Activity Codes					
		11	12	13	14	15	16
Agustin, Huimaro	Admissions Clerk	9.5	2	15	2	5	0
Alegre, Rose	Division Secretary Clerk	9.5	2	15	2	5	0
Arreola, Rafael	Admissions Clerk	9.5	2	15	2	5	0
Ascensio, Wendy	Admissions Clerk	9.5	2	15	2	5	0
Ayala, Anthony	Admissions Clerk	9.5	2	15	2	5	0
Badzey, Paul	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bays, Joyce	Admissions Clerk	9.5	2	15	2	5	0
Bello, Francesca	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bernabe, Delfina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bland, Trenain	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Boss, Brian	Admissions Clerk	9.5	2	15	2	5	0
Boss, Sue	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Campbell, Christina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Cary, Joan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Castillo, Raquel	Admissions Clerk	9.5	2	15	2	5	0
Castro, Nancy	Admissions Clerk	9.5	2	15	2	5	0
Clegg, Matthew	Admissions Clerk	9.5	2	15	2	5	0
Connelly, Frances	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
David, Mila	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Del Real, Juan David	Admissions Clerk	9.5	2	15	2	5	0
Deutschman, Susan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Duenas, Corrine	Admissions Clerk	9.5	2	15	2	5	0
Ear, Joey	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Eckheart, Brian	Admissions Clerk	9.5	2	15	2	5	0
Estrella, Hugo	Admissions Clerk	9.5	2	15	2	5	0
Fehn, Letty	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Gaia, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Gardner, Marisa	Admissions Clerk	9.5	2	15	2	5	0
Guevara, Heidy	Admissions Clerk	9.5	2	15	2	5	0
Hawkins, Niki	Admissions Clerk	9.5	2	15	2	5	0
Hernandez, Peter	Admissions Clerk	9.5	2	15	2	5	0
Kanamaki, Brandon	Admissions Clerk	9.5	2	15	2	5	0
Kapao, Jill	Admissions Clerk	9.5	2	15	2	5	0
Kline, Gayle	Admissions and Records Clerk	9.5	2	15	2	5	0
Krause, Amy	Admissions Clerk	9.5	2	15	2	5	0
Ladmirault, Barbara	Admissions and Records Clerk	9.5	2	15	2	5	0
Leyh, Josephine	Admissions Clerk	9.5	2	15	2	5	0
Leyva, Sylvia	Admissions and Records Clerk	9.5	2	15	2	5	0
Littrell, Christinia	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Sharon	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Shawna	Admissions Clerk	9.5	2	15	2	5	0
Long, Robert	Admissions Clerk	9.5	2	15	2	5	0
Luico, Dolores	Admissions Clerk	9.5	2	15	2	5	0

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

'urpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
'indings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	4	5	
		**Activity Codes					
		11	12	13	14	15	16
Madan, Juan	Admissions Clerk	9.5	2	15	2	5	0
Matsumoto, David	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Joshua	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Natasha	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Mejias, Tristan	Admissions Clerk	9.5	2	15	2	5	0
Miramontes, Marianne	Admissions Clerk	9.5	2	15	2	5	0
Montes, Edgar	Admissions Clerk	9.5	2	15	2	5	0
Morry, Ellie	Admissions Clerk	9.5	2	15	2	5	0
Nosal, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Otero, Jessica	Admissions Clerk	9.5	2	15	2	5	0
Otero, Kathleen	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Pagano, Doreen	Admissions and Records Clerk	9.5	2	15	2	5	0
Pendleton, Ben	Sr. Admissions and Records Clerk	9.5	2	15	2	5	0
Pimentel, Margaret	Admissions Clerk	9.5	2	15	2	5	0
Quiroz, Alejandro	Admissions Clerk	9.5	2	15	2	5	0
Ramirez, Liz	Admissions Clerk	9.5	2	15	2	5	0
Reichert, Andrea	Admissions Clerk	9.5	2	15	2	5	0
Roberson, Kevin	Admissions Clerk	9.5	2	15	2	5	0
Rodarte, George	Admissions Clerk	9.5	2	15	2	5	0
Rodriguez, Reyes	Admissions Clerk	9.5	2	15	2	5	0
Roldan, Yolanda	Admissions Clerk	9.5	2	15	2	5	0
Rosales, Veronica	Admissions Clerk	9.5	2	15	2	5	0
Ruiz, Sandra	Admissions Clerk	9.5	2	15	2	5	0
Ryan, Pat	Admissions Clerk	9.5	2	15	2	5	0
Santillan, Suzie	Admissions Clerk	9.5	2	15	2	5	0
Simentel, Yvette	Admissions Clerk	9.5	2	15	2	5	0
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Torres, Patricia	Admissions Clerk	9.5	2	15	2	5	0
Torres, Theresa	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Ulloa, Dominick	Admissions Clerk	9.5	2	15	2	5	0
Valencia, Erica Ceja	Admissions Clerk	9.5	2	15	2	5	0
Valles, Katie	Admissions Clerk	9.5	2	15	2	5	0
Valles, Lisha	Program Facilitator	9.5	2	15	2	5	0
Woszack, Betty	Admissions Clerk	9.5	2	15	2	5	0
Average		**9.5**	**2.0**	**15.0**	**2.0**	**5.0**	**0.0**

Conclusion: Findings go forward to Schedule 1A.

EFC Workload Multiplier (Client Provided)
FC 1 - Total number of students who enroll in the college
FC 2 - Total number of students who paid enrollment fees
FC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
FC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in

Activity Codes
1 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
2 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
3 - Answer Questions and/or referring student to the appropriate person for an answer.
4 - Updating Student File for the enrollment fee information, and providing a copy to the student.
5 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
6 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from District.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Agustin, Hulmaro	Admissions Clerk					15.31	15.31	13.79	13.79
Alegre, Rose	Division Secretary Clerk	19.93	22.28	23.65	27.76	29.14	30.02	30.77	31.85
Arreola, Rafael	Admissions Clerk								
Ascensio, Wendy	Admissions Clerk	7.74	8.55	9.11	10.62				
Ayala, Anthony	Admissions Clerk				10.84	10.84	10.84	9.76	9.76
Badzey, Paul	Inter. Admin. and Records Clerk	17.45	18.24	19.42	24.75	25.90	26.68	27.35	28.31
Bays, Joyce	Admissions Clerk	9.65			10.84				
Bello, Francesca	Inter. Admin. and Records Clerk			10.84	21.61	22.59	24.33	27.33	28.45
Bernabe, Delfina	Inter. Admin. and Records Clerk	11.48	12.14	18.88	22.59	25.49	27.35	27.35	28.31
Bland, Trenain	Inter. Admin. and Records Clerk	17.80	18.13	25.37	26.52	27.76	28.59	28.59	
Boss, Brian	Admissions Clerk						9.59	10.77	10.77
Boss, Sue	Inter. Admin. and Records Clerk	11.48	16.21	22.05	23.05	24.14	26.03	26.68	27.62
Campbell, Christina	Inter. Admin. and Records Clerk	21.35	20.76	24.18	26.54	27.33	28.02	28.02	29.00
Cary, Joan	Senior Admissions and Records	22.42	24.59	29.29	30.60	30.60	31.52	32.52	35.11
Castillo, Raquel	Admissions Clerk						8.27	9.76	9.76
Castro, Nancy	Admissions Clerk					15.31	15.31	13.79	13.79
Clegg, Matthew	Admissions Clerk				10.84	11.38	11.96		
Connelly, Frances	Inter. Admin. and Records Clerk								
David, Mila	Inter. Admin. and Records Clerk	21.89	21.89	26.61	27.81	27.81			
Del Real, Juan David	Admissions Clerk								
Deutschman, Susan	Inter. Admin. and Records Clerk	20.37	20.76	25.39	25.39				
Duenas, Corrine	Admissions Clerk								
Ear, Joey	Inter. Admin. and Records Clerk	17.80	18.95	21.06	25.27	25.27	26.03	26.68	27.62
Eckheart, Brian	Admissions Clerk	11.48	12.14	12.88					
Estrella, Hugo	Admissions Clerk	16.30	19.52	17.35					
Fehn, Letty	Inter. Admin. and Records Clerk			21.09	23.05	23.05	24.87		
Gaia, Barbara	Admissions Clerk	20.93	21.33	12.88	12.88	12.88			
Gardner, Marisa	Admissions Clerk							10.25	10.25
Guevara, Heidy	Admissions Clerk								
Hawkins, Niki	Admissions Clerk					10.84	11.38	10.77	10.77
Hernandez, Peter	Admissions Clerk							9.76	9.76
Kanamaki, Brandon	Admissions Clerk								
Kapao, Jill	Admissions Clerk								
Kline, Gayle	Admissions and Records Clerk	22.13	24.03	27.89	30.60	30.60	31.52	32.31	33.44
Krause, Amy	Admissions Clerk		10.21	11.38					
Ladmirault, Barbara	Admissions and Records Clerk	20.03	20.41	24.30	25.39	26.66	27.46	28.15	29.14
Leyh, Josephine	Admissions Clerk								
Leyva, Sylvia	Admissions and Records Clerk	17.02	18.13	18.95				26.18	
Littrell, Christinia	Admissions Clerk							10.77	10.77
Littrell, Sharon	Admissions Clerk	10.14	11.26	12.28	12.88	13.54	13.54	12.19	12.19
Littrell, Shawna	Admissions Clerk							8.64	8.64
Long, Robert	Admissions Clerk	10.21	10.21	10.72					
Luico, Dolores	Admissions Clerk								

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Madan, Juan	Admissions Clerk								
Matsumoto, David	Admissions Clerk			10.84					
Mejia, Joshua	Admissions Clerk				10.84	11.38	11.96		
Mejia, Natasha	Inter. Admin. and Records Clerk		10.21	21.09	23.05	23.05	26.03	26.68	28.56
Mejias, Tristan	Admissions Clerk	7.74	9.99	10.62	10.62	10.62	10.62	9.56	9.56
Miramontes, Marianne	Admissions Clerk	11.48	11.92					9.56	9.56
Montes, Edgar	Admissions Clerk					14.23	10.84	9.76	
Morry, Ellie	Admissions Clerk								
Nosal, Barbara	Admissions Clerk	18.17	18.51						
Otero, Jessica	Admissions Clerk					9.59	10.84	10.25	
Otero, Kathleen	Inter. Admin. and Records Clerk			21.09	21.82	24.14	24.87	26.68	27.62
Pagano, Doreen	Admissions and Records Clerk	22.29	22.85	22.64	23.66	24.84	25.59	26.23	27.14
Pendleton, Ben	Sr. Admissions and Records Clerk	18.23	19.86	25.37	27.76	27.76	28.59	30.41	31.85
Pimentel, Margaret	Admissions Clerk						9.59	8.64	8.64
Quiroz, Alejandro	Admissions Clerk						10.84	9.76	
Ramirez, Liz	Admissions Clerk								
Reichert, Andrea	Admissions Clerk								
Roberson, Kevin	Admissions Clerk	11.48	11.48						
Rodarte, George	Admissions Clerk								
Rodriguez, Reyes	Admissions Clerk	10.14	11.05						
Roldan, Yolanda	Admissions Clerk	12.67	10.62	10.84	15.31	11.38	10.62		
Rosales, Veronica	Admissions Clerk		10.02						
Ruiz, Sandra	Admissions Clerk								
Ryan, Pat	Admissions Clerk	10.14	11.26	11.96	11.96	9.59	9.59	8.64	
Santillan, Suzie	Admissions Clerk	9.88	10.45	10.84	11.38	11.96			
Simentel, Yvette	Admissions Clerk						9.59	9.76	9.76
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	25.39	24.46	32.29	33.74	33.74			
Torres, Patricia	Admissions Clerk						10.84	9.76	9.76
Torres, Theresa	Inter. Admin. and Records Clerk	7.74	12.14	12.14	23.62	24.75	25.49		
Ulloa, Dominick	Admissions Clerk							13.79	
Valencia, Erica Ceja	Admissions Clerk							13.79	
Valles, Katie	Admissions Clerk								
Valles, Lisha	Program Facilitator	29.81	31.82	35.37	38.45	33.74	34.75	35.62	36.87
Woszack, Betty	Admissions Clerk								
Average		**15.84**	**16.47**	**19.14**	**21.31**	**20.80**	**19.42**	**18.49**	**19.95**

Conclusion: Findings go forward to EFCW -2

Schedule 3
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		7			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Carrillo, Juan	Student Affairs Technician	3	1	1	5	2	4
Flores, Lina	Financial Aid Technician	2	3	4	4	2	3
Leguizemon, Adriana	Student Affairs Technician	3	2	2	5	3	2
Lipsohn, Rhonda	Financial Aid Specialist	5	7	3	4	6	2
Longoria, Armando	Student Affairs Technician	2	2	1	5	1	3
Lopez, Elena	Financial Aid Specialist	5	7	3	4	6	2
Neal, Eugenia	Student Affairs Technician	3	3	1	5	3	1.5
Quiroz, Jamie	Financial Aid Specialist	2	2	2	3	5	1
Ramirez, Yesenia	Financial Aid Specialist	3	1	1	5	1	3
Tafoya, Yvette	Financial Aid Specialist	3	3	2	3	5	3
Vejar, Yajayra	Student Affairs Technician	5	1	2	5	1	2
Vera, Silvia	Student Affairs Technician	2	2	2	3	2	2
***Westby, Kimberly	Student Affairs Assistant	*4*	*20*	*30*	*10*	*30*	*10*
Average		**3.2**	**2.8**	**2.0**	**4.3**	**3.1**	**2.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Kimberly Westby's time not used, not consistent with rest of the averages received.

Schedule 3
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from distict
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Carrillo, Juan	Student Affairs Technician							
Flores, Lina	Financial Aid Technician			24.77	26.75	30.91	32.86	
Leguizemon, Adriana	Student Affairs Technician	24.45	27.29	29.77	31.30	35.00	35.99	
Lipsohn, Rhonda	Financial Aid Specialist	31.02	33.12	34.79	37.83	42.60	47.58	40.47
Longoria, Armando	Student Affairs Technician					9.28	27.25	
Lopez, Elena	Financial Aid Specialist	25.05	28.02	29.64	31.19	35.65	40.30	43.27
Neal, Eugenia	Student Affairs Technician			23.06	27.86	32.25	34.01	
Quiroz, Jamie	Financial Aid Specialist	21.36	25.46	28.54	30.69	36.47	39.69	
Ramirez, Yesenia	Financial Aid Specialist				19.86	28.56	32.58	
Sanchez, Hector	Custodian							25.42
Tafoya, Yvette	Financial Aid Specialist					9.62	30.09	
Vejar, Yajayra	Student Affairs Technician					11.89	28.61	
Vera, Silvia	Student Affairs Technician					10.71		
Westby, Kimberly	Student Affairs Assistant	32.79	34.12	35.91	37.16	40.98	43.78	45.44
Average		**26.93**	**29.60**	**29.50**	**30.33**	**26.99**	**35.70**	**38.65**

Conclusion: Findings go forward to EFCW-2

Schedule 4
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	55,682	59,994	61,470	64,189	66,680	63,213	60,043
EFC 2	1.8-1 2.	Paid Enrollment fees	34,733	37,109	37,787	37,796	38,273	34,561	30,866
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	20,780	22,662	22,819	25,419	26,985	26,946	27,686
EFC 4	1.8-2 1.	Delinquencies collections	16,782	20,186	22,879	22,101	23,946	22,924	21,118
EFC 5	1.8-2 2.	Refunds	1,543	1,660	1,589	1,498	1,749	1,544	1,749

EFW 6	1.8-3 1.	Waivers Requested	X	Client reported on their EFCW 1.8-3 form that "Financial Aid does not collect this data".					
EFW 7	1.8-3 2.	Waivers Approved	X =	20,696	20,782	22,702	24,920	25,894	26,726
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not able to be calculated due to client not able to provide EFW 6.					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2004 Summer Term

Data Current As Of June 28, 2006 12:31:21

Total Headcount	11,871

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04-05

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2004 Fall Term

Data Current As Of June 28, 2006 12:31:33

Total Headcount	23,827

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2005 Spring Semester

Data Current As Of June 28, 2006 12:31:51

Total Headcount	23,229

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Cerritos College Fiscal Year: 2004-05

Jamie Quiroz — Employee Name

Financial Aid Specialist — Exact Position Title

Financial Aid — Department/Location

X2370 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/01/05	1A (1B) 2A 2B 3 4	Update Web on BOG Waiver Income Criteria	1
03/11/05	1A 1B 2A (2B) 3 4	Staff Training - BOG Waiver On-line Entry	5
03/14/05	1A 1B 2A 2B 3 4	" " " " " "	5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

Duplicate of time reported on 1.6A above

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jamie Quiroz Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Cerritos Community — Fiscal Year: 04/05

Yvette Tafoya — Financial Aid Officer
Employee Name — Exact Position Title

Financial Aid — (562) 860-2457 x2390 — 12mo/11mo/10mo/hrly
Department/Location — Telephone # — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3 23 05	1A 1B 2A (2B) 3 4	conduct training on bwfw process	8
/ /	1A 1B 2A 2B 3 4	in new computer system. How to...	
/ /	1A 1B 2A 2B 3 4	view waiver, how to determine	
/ /	1A 1B 2A 2B 3 4	eligibility	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

} Duplicate of time reported on EFCW 1.6 above — ES

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvette Tafoya Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Cerritos Community College — Fiscal Year: 2004-2005

Kimberly Wesley — Student Affairs Assistant
Employee Name — Exact Position Title

Financial Aid Office — (562) 860-2451 x2393 — 12mo/11mo/10mo/hrly
Department/Location — Telephone # — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/22/05	1A (1B) 2A 2B 3 4	Write Policy & Procedure manual for Fin. Aid Office	8
4/27/05	1A 1B 2A (2B) 3 4	Trained staff on Fee Waiver	8
4/27/05	1A 1B 2A 2B 3 (4)	Prepared & submitted BOGG report for	2
/ /	1A 1B 2A 2B 3 4	Chancellors Office.	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

simplified the above report for EFCW

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly K. Wesley — Date 4/27/2005

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CERRITOS COLLEGE
District

ADMISSIONS & RECORDS
Department/Location

STEPHANIE MURGUIA
Employee Name

DEAN, ADMISSIONS & RECORDS
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 4/12/07 ; TO _____

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Cerritos Community College District
308/95 Enrollment Fee Collections Waivers
Admissions and Records Dept.

Purpose: List of staff involved in the Enrollment Fee Collection and Cashier Functions
Source: EFCW 1.7-2 forms, by fiscal year, provided for each individual on this list.

ref #	NAME	TITLE
1	Hulmaro Agustin	Admissions Clerk
2	Rose Alegre	Division Secretary Clerk - SSA II
3	Rafael Arreola	Admissions Clerk
4	Wendy Ascensio	Admissions Clerk
5	Anthony Ayala	Admissions Clerk
6	Paul Badzey	Intermediate A/R Clerk - SSA I
7	Joyce Bays	Admissions Clerk
8	Francesca Bello	Admissions Clerk
9	Delfina Bernabe	Intermediate A/R Clerk - SSA I
10	Trenain Bland	Intermediate A/R Clerk - SSA II
11	Brian Boss	Admissions Clerk
12	Sue Boss	Intermediate A/R Clerk - SSA I
13	Christina Campbell	Intermediate A/R Clerk - SSA I
14	Joan Cary	Sr. A/R Clerk - SSA II
	Raquel Castillo	Admissions Clerk
	Nancy Castro	Admissions Clerk
17	Matthew Clegg	Admissions Clerk
18	Frances Connelly	Intermediate A/R Clerk
19	Mila David	Intermediate A/R Clerk
20	Juan D. Del Real	Admissions Clerk
21	Susan Deutschman	Intermediate A/R Clerk
22	Corrine Duenas	Admissions Clerk
23	Joey Ear	Intermediate A/R Clerk - SSA I
24	Brian Eckheart	Admissions Clerk
25	Hugo Estrella	A/R Clerk
26	Letty Fehn	Intermediate A/R Clerk
27	Barbara Gaia	Admissions Clerk - A/R Clerk
28	Marisa Gardner	Admissions Clerk
29	Heidy Guevara	Admissions Clerk
30	Niki Hawkins	Admissions Clerk
31	Peter Fernandez	Admissions Clerk
32	Brandon Kanamaki	Admissions Clerk
33	Jill Kapao	Admissions Clerk
34	Gayle Kline	A/R Clerk
35	Amy Krause	Admissions Clerk
36	Barbara Ladmirault	A/R Clerk
37	Josephine Leyh	Admissions Clerk
	Sylvia Leyva	A/R Clerk
	Christina Littrell	Admissions Clerk
40	Sharon Littrell	Admissions Clerk
41	Shawna Littrell	Admissions Clerk
42	Robert Long	Admissions Clerk
43	Dolores Lucio	Admissions Clerk
44	Juan Madan	Admissions Clerk
45	David Matsumoto	Admissions Clerk
46	Joshua Mejia	Admissions Clerk
47	Natasha Mejia	Intermediate A/R Clerk - SSA I
48	Tristan Mejias	Admissions Clerk
49	Marianne Miramonte	Admissions Clerk
50	Edgar Montes	Admissions Clerk
51	Ellie Morry	Admissions Clerk
52	Barbara Nosal	Admissions Clerk - A/R Clerk
53	Jessica Otero	Admissions Clerk
54	Kathleen Otero	Intermediate A/R Clerk - SSA I
55	Doreen Pagano	A/R Clerk
56	Ben Pendleton	Sr. A/R Clerk - SSA II
57	Margaret Pimentel	Admissions Clerk
58	Alejandro Quiroz	Admissions Clerk
59	Liz Ramirez	Admissions Clerk
60	Andrea Reicheart	Admissions Clerk
61	Kevin Roberson	Admissions Clerk
62	George Rodarte	Admissions Clerk
63	Reyes Rodriguez	Admissions Clerk
64	Yolanda Rolan	Admissions Clerk
65	Veronica Rosales	Admissions Clerk
66	Sandra Ruiz	Admissions Clerk
67	Pat Ryan	Admissions Clerk
68	Suzie Santillan	Admissions Clerk
69	Yvette Simentel	Admissions Clerk
70	Lavonne Stillwagon	Intermediate A/R Clerk - SSA II
71	Patricia Torres	Admissions Clerk
72	Theresa Torres	Intermediate A/R Clerk - SSA I
73	Dominick Ulloa	Admissions Clerk
74	Erica Ceja Valencia	Admissions Clerk
75	Katie Valles	Admissions Clerk
76	Lisha Valles	Program Facilitator - SSA II
77	Betty Woszack	Admissions Clerk

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid Office.
Department/Location

Juan C. Carrillo
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451 X2392
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Lina Flores
Employee Name

Financial Aid Tech.
Exact Position Title

562)860-2457 ext. 2104
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature Lina Flores Date 4.27.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College College — District

Financial Aid — Department/Location

Adriana Leguizamón — Employee Name

Student Affairs Technician — Exact Position Title

(562) 860-2451 — Telephone # X 2387

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Adriana L — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College District
District

Financial Aid
Department/Location

Ronda Lipsohn
Employee Name

Financial Aid Specialist
Exact Position Title

(562)860-2451 x2386
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ronda Lipsohn Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College — District

Financial Aid — Department/Location

Armando S. Longoria — Employee Name

Student Affairs Technician — Exact Position Title

(562) 860-2451 Ext 2397 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 Ave		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Armando Longoria Date 4/27/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District

Financial Aid Office — Department/Location

Elena Lopez — Employee Name

Financial Aid Specialist — Exact Position Title

562 860-2451 x2373 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~ & f.

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elena G. Lopez — Date April 27, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Student Affairs/Finaid
Department/Location

Eugenia Neal
Employee Name

Student Affairs Technician
Exact Position Title

562) 860-2451 x2397 12mo/11mo/10mo/hrly work year length(circle)
Telephone #

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eugenia Neal Date 4·26·06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College — District

Financial Aid — Department/Location

Jamie Quiroz — Employee Name

Financial Aid Specialist — Exact Position Title

x2370 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~5~~ 4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1		✓		

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Employee Signature Jamie Quiroz Date 4-27-06

If you have any questions please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Yesenia Ramirez
Employee Name

Financial Aid Specialist
Exact Position Title

562 860 2451 (12mo/11mo/10mo/hrly)
Telephone # x 2387 Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature [signature] Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid Office — Department/Location
Yvette Tafoya — Employee Name
Financial Aid Specialist — Exact Position Title
(562) 8602451 — Telephone # X. 2390
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature Yvette Tafoya Date 04/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid — Department/Location
Yajaura Vejar — Employee Name
Student Affairs Technician — Exact Position Title
(562)860-2451 X2397 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yajaura Vejar Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial aid
Department/Location

Silvia Vera
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Vera Date 4-27-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District

Financial Aid Office — Department/Location

Kimberly Wesley — Employee Name

Student Affairs Assistant — Exact Position Title

562)860-2451 x 2372 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly B. Wesley — Date 4/27/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: CERRITOS CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	11,000	12,626	13,116	13,981	15,067	12,971	12,516	
Fall	22,455	23,965	24,524	25,192	26,219	25,432	24,183	
Winter/ Intersession								
Spring	22,227	23,403	23,830	25,016	25,318	24,810	23,344	
Total	56,682	59,994	61,470	64,189	66,600	63,213	60,043	
2. Number of students who paid enrollment fees:								
Summer	5,953	6,780	7,040	7,266	7,519	6,431	5,648	
Fall	14,677	15,894	16,859	15,845	16,287	14,902	13,659	
Winter/ Intersession								
Spring	13,903	14,435	14,600	14,685	14,471	13,288	11,659	
Total	34,733	37,109	37,787	37,796	38,273	34,561	30,866	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	4,771	5,637	5,608	6,318	6,975	6,013	6,299	
Fall	7,905	8,432	8,424	9,134	9,713	10,120	10,427	
Winter/ Intersession								
Spring	8,204	8,692	8,777	9,967	10,297	10,813	10,960	
Total	20,780	22,761	22,809	25,419	26,985	26,946	27,686	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5-1-6

ALPHONSO MEJIA
Employee Name: (print)

NETWORK ADMINISTRATOR
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT
PAGES EFCW 1.8-1

Term	Students(1)	Paid Fees(2)	Waivers(3)	Receivable(4)	Refunds(5)
	EFCW 1.8-1(1)	EFCW 1.8-1(2)	EFCW 1.8-1(3)	EFCW 1.8-2(1)	EFCW 1.8-2(2)
SU-1998	11,000	5,953	4,771	3,167	178
'A-1998	22,455	14,877	7,805	7,259	918
P-1999	22,227	13,903	8,204	6,356	447
8/9	55,682	34,733	20,780	16,782	1,543
U-1999	12,626	6,780	5,637	3,516	215
A-1999	23,965	15,894	8,433	7,729	1,082
P-2000	23,403	14,435	8,592	8,941	363
9/0	59,994	37,109	22,662	20,186	1,660
U-2000	13,116	7,048	5,608	4,542	133
A-2000	24,524	16,139	8,434	9,556	1,018
P-2001	23,830	14,600	8,777	8,781	438
0/1	61,470	37,787	22,819	22,879	1,589
U-2001	13,981	7,266	6,318	4,405	213
A-2001	25,192	15,845	9,134	9,368	828
P-2002	25,016	14,685	9,967	8,328	457
1/2	64,189	37,796	25,419	22,101	1,498
J-2002	15,067	7,519	6,975	4,738	225
A-2002	26,215	16,283	9,713	10,181	1,097
P-2003	25,398	14,471	10,297	9,027	427
2/3	66,680	38,273	26,985	23,946	1,749
J-2003	12,971	6,431	6,013	4,179	186
A-2003	25,432	14,902	10,120	9,741	962
P-2004	24,810	13,228	10,813	9,004	396
3/4	63,213	34,561	26,946	22,924	1,544
J-20	12,516	5,648	6,299	3,991	198
A-2004	24,183	13,559	10,427	9,003	1,150
P-2005	23,344	11,659	10,960	8,124	401
4/5	60,043	30,866	27,686	21,118	1,749

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w/ adding machine - Staff

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: CERRITOS CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	3,167	3,516	4,542	4,405	4,738	4,179	3,991	
Fall	7,259	7,729	9,556	9,360	10,181	9,741	9,003	
Winter/Intersession								
Spring	6,356	8,941	8,781	8,378	9027	9,004	8,124	
Total	16,782	20,186	22,879	22,101	23,946	22,924	21,118	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	178	215	133	213	225	186	198	
Fall	918	1,082	1,018	828	1,097	962	1,150	
Winter/Intersession								
Spring	447	363	438	457	427	396	401	
Total	1543	1,660	1,589	1,498	1,749	1,544	1,749	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5-1-06

ALPHONSE MEJIA.
Employee Name: (print)

NETWORK ADMINISTRATOR.
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/9b ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT
PAGES EFCW 1.8-1

Term	Students(1)	Paid Fees(2)	Waivers(3)	Receivable(4)	Refunds(5)
	EFCW 1.8-1(1)	EFCW 1.8-1(2)	EFCW 1.8-1(3)	EFCW 1.8-2(1)	EFCW 1.8-2(2)
SU-1998	11,000	5,953	4,771	3,167	178
FA-1998	22,455	14,877	7,805	7,259	918
SP-1999	22,227	13,903	8,204	6,356	447
98/9	**55,682**	**34,733**	**20,780**	**16,782**	**1,543**
SU-1999	12,626	6,780	5,637	3,516	215
FA-1999	23,965	15,894	8,433	7,729	1,082
SP-2000	23,403	14,435	8,592	8,941	363
99/0	**59,994**	**37,109**	**22,662**	**20,186**	**1,660**
SU-2000	13,116	7,048	5,608	4,542	133
FA-2000	24,524	16,139	8,434	9,556	1,018
SP-2001	23,830	14,600	8,777	8,781	438
00/1	**61,470**	**37,787**	**22,819**	**22,879**	**1,589**
SU-2001	13,981	7,266	6,318	4,405	213
FA-2001	25,192	15,845	9,134	9,368	828
SP-2002	25,016	14,685	9,967	8,328	457
01/2	**64,189**	**37,796**	**25,419**	**22,101**	**1,498**
SU-2002	15,067	7,519	6,975	4,738	225
FA-2002	26,215	16,283	9,713	10,181	1,097
SP-2003	25,398	14,471	10,297	9,027	427
02/3	**66,680**	**38,273**	**26,985**	**23,946**	**1,749**
SU-2003	12,971	6,431	6,013	4,179	186
FA-2003	25,432	14,902	10,120	9,741	962
SP-2004	24,810	13,228	10,813	9,004	396
03/4	**63,213**	**34,561**	**26,946**	**22,924**	**1,544**
SU-2004	12,516	5,648	6,299	3,991	198
FA-2004	24,183	13,559	10,427	9,003	1,150
SP-2005	23,344	11,659	10,960	8,124	401
04/5	**60,043**	**30,866**	**27,686**	**21,118**	**1,749**

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Cerritos College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer	3855	4571	4598	5060	5950	5590	5971	
Fall	7514	8099	8002	8495	9258	9904	10167	
Winter/Intersession	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Spring	7630	8026	8182	9147	9717	10400	10588	
Total	19026	20696	20782	22702	24925	25894	26726	

Financial Aid does not collect this data ICW

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Kim Nesby Date 5/31/2006

Kim Nesby
Employee Name: (print)

Student Affairs Assistant
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Cerritos Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 2,852,965	$ 2,254,325	$ 2,191,774	$ 2,460,448	$ 2,643,642	$ 4,021,020	$ 5,806,101	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 45,059	$ 45,086	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$ 157,707	$ 157,803						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

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Employee Signature: Kim West Date 5.8.2006

Kim Wesby — Student Affairs Assistant

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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	SU-04	FA-04	SP-05	2004-05
BOGG-A Students	90	158	175	26
BOGG-B Students	4,442	7,520	7,794	10,90
BOGG-C Students	1,439	2,489	2,619	3,60
Total Unduplicated	5,971	10,167	10,588	14,31
BOGG-A CSID Fee	360.00	1,580.00	1,750.00	3,690.00
Health Fee	729.00	1,976.00	2,158.00	4,863.00
Enrollment Fee	6,858.00	27,612.00	33,319.00	67,789.00
*Total	7,947.00	31,168.00	37,227.00	76,342.00
BOGG-B CSID Fee	17,768.00	75,100.00	77,890.00	170,758.00
Health Fee	34,821.00	94,302.00	96,369.00	225,492.00
Enrollment Fee	356,931.00	1,716,585.00	1,766,934.00	3,840,450.00
*Total	409,520.00	1,885,987.00	1,941,193.00	4,236,700.00
BOGG-C CSID Fee	5,744.00	24,820.00	26,160.00	56,724.00
Health Fee	11,457.00	31,551.00	32,760.00	75,768.00
Enrollment Fee	118,872.00	615,043.00	626,652.00	1,360,567.00
*Total	136,073.00	671,414.00	685,572.00	1,493,059.00
**Grand Total	553,540.00	2,588,569.00	2,663,992.00	5,806,101.00

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Cerritos Community College District

		Fiscal Years:	
Name	**Title**	**04-05**	**05-06**
AGUSTIN, HULMARO	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
ALEGRE, ROSE	STUDENT SERVICES ASST II	$ 30.77	$ 31.85
BADZEY, PAUL	STUDENT SERVICES ASST I	$ 27.35	$ 28.31
BELLO, FRANCESCA	PROGRAM ASSITANT II	$ 27.33	$ 28.45
BERNABE, DELFINA	STUDENT SERVICE ASST I	$ 27.35	$ 28.31
BLAND, TRENAIN	STUDENT SERVICE ASST II	$ 28.59	N/A
BOSS, BRIAN	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
BOSS, SUE	STUDENT SERVICE ASST I	$ 26.68	$ 27.62
CAMPBELL, CHRISTINA	STUDENT SERVICES ASST I	$ 28.02	$ 29.00
CARY, JOAN	STUDENT SERVICES ASST II	$ 32.52	$ 35.11
CASTILLO, RAQUEL	REGISTRATION ACCT CLK	$ 9.76	$ 9.76
CASTRO, NANCY	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
EAR, JOEY	STUDENT SERVICES ASST I	$ 26.68	$ 27.62
GARDNER, MARISA	REGISTRATION ACCT CLK	$ 10.25	$ 10.25
HAWKINS, NIKI	REGISTRATION ACCT CLK	$ 10.77	$ 10.77

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
HERNANDEZ, PETER	A&R ASSISTANT	$ 9.76	$ 9.76
KLINE, GAYLE	ACCOUNT TECHNICIAN III	$ 32.31	$ 33.44
LADMIRAULT, BARBARA	A&R ASSISTANT	$ 28.15	$ 29.14
LEYVA, SYLVIA	STUDENT SERVICES ASST II	$ 26.18	N/A
LITTRELL, CHRISTINIA	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
LITTRELL, SHARON	LEAD REG ACCT CLERK	$ 12.19	$ 12.19
LITTRELL, SHAWNA	CLERK	$ 8.64	$ 8.64
MEIJA, NATASHA	STUDENT SERVICES ASST II	$ 26.68	$ 28.56
MEIJA, TRISTAN	REGISTRATION ACCT CLK	$ 9.56	$ 9.56
MIRAMONTES, MARIANNE	INTERMEDIATE TYPIST CLK	$ 9.56	$ 9.56
MONTES, EDGAR	A&R ASSISTANT	$ 9.76	N/A
OTERO, JESSICA	REGISTRATION ACCT CLK	$ 10.25	
OTERO, KATHLEEN	STUDENT SERVICE ASST I	$ 26.68	$ 27.62
PAGANO, DOREEN	INTERMEDIATE TYPIST CLK	$ 26.23	$ 27.14
PENDLETON, BEN	STUDENT SERVICES ASST II	$ 30.41	$ 31.85
PIMENTEL, MARGARET	CLERK	$ 8.64	$ 8.64
QUIROZ, ALEJANDRO	A&R ASSISTANT	$ 9.76	N/A
RYAN, PAT	CLERK	$ 8.64	N/A
SIMENTEL, YVETTE	REGISTRATION ACCT CLK	$ 9.76	$ 9.76

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
TORRES, PATRICIA	A&R ASSISTANT	$ 9.76	$ 9.76
ULLOA, DOMINICK	STUDENT AFFAIRS TECHNICIAN	$ 13.79	N/A
VALENCIA ERICA CEJA	STUDENT AFFAIRS TECHNICIAN	$ 13.79	N/A
VALLES, LISHA	STUDENT SERVICE ASST II	$ 35.62	$ 36.87

Productive Hourly Rate Update (04-05 & 05-06)

Cerritos Community College

Name	Title	Fiscal Year 04-05	Fiscal Year 05-06
	AVG ADMINISTRATIVE ASSISTANT	30.94	32.02
	AVG DEAN	66.20	68.52
	AVG DIRECTOR	62.77	63.08
	AVE EXECUTIVE SECRETARY	34.28	35.48
	AVG FACULTY MEMBER	51.91	53.73
	AVG SECRETARY	42.32	26.40
	AVG PRESIDENT	124.03	128.37
	AVG VICE PRESIDENT	93.07	96.32
AGUSTIN, HULMARO	ADULT HOURLY - STUDENT AFFAIRS TECH	13.79	13.79
ALEGRE, ROSE	STUDENT SERVICES ASST II	30.77	31.85
ARRELOA, RAFAEL	TERMINATED	-	-
ASCENCIO, WENDY	TERMINATED	-	-
AYALA, ANTHONY	ADULT HOURLY - A & R ASSISTANT	9.76	9.76
BADZEY, PAUL	STUDENT SERVICES ASST I	27.35	28.31
BAYS, JOYCE	TERMINATED	-	-
BELLO, FRANCESCA	PROGRAM ASSISTANT II	27.33	28.45
BERNABE, DELFINA	STUDENT SERVICE ASST I	27.35	28.31
BLAND, TERNAIN	STUDENT SERVICE ASST II (TERM 6/10/05)	28.59	TERMINATED
;S, BRIAN	ADULT HOURLY - REGISTRATION ACCT CLK	10.77	10.77
BOSS, SUE	STUDENT SERVICE ASST I	26.68	27.62
BOYLE, JOHN	INTERM VP, ACADEMIC AFFAIRS (TERM 6/30/04)	76.03	TERMINATED
CAMPBELL, CHRISTINA	STUDENT SERVICES ASST I	28.02	29.00
CARRILLO, JUAN	STUDENT AFFAIRS TECH (DOH 6/16/05)	-	24.83
CARY, JOAN	STUDENT SERVICES ASST II	32.52	35.11
CASTILLO, RAQUEL	ADULT HOURLY - REGISTRATION ACCT CLK	9.76	9.76
CASTRO, NANCY	ADULT HOURLY - STUDENT AFFAIRS TECH	13.79	13.79
CHESTER, ROBERT	FACULTY	79.51	62.89
CHUNING, DENNIS	VP, BUSINESS SERVICES (TERM 6/30/05)	98.55	TERMINATED
CLEGG, MATTHEW	TERMINATED 6/30/04	-	-

Cerritos CCD -- 2004/2005

(PART 1)

EMPLOYEE NAME	POSITION	TOTAL ANNUAL COMPENSATION & BENEFITS	TOTAL ANNUAL COMPENSATION	TOTAL ANNUAL BENEFITS	TOTAL ANNUAL HOURS	LESS ANNUAL HOLIDAY HOURS	LESS ANNUAL SICK LEAVE HOURS	LESS ANNUAL OTHER HOURS	EQUAL ANNUAL PRODUCTIVE HOURS	Productive Hourly Rate
FLORES, LINA	FINANCIAL AID TECH	57,307.35	43,640.40	13,666.95	2080.000	128.000	96.000	112.000	1744.000	$ 32.86
LEGUIZAMON,ADRIANA	STUDENT AFFAIRS TECH	61,981.32	42,576.00	19,405.32	2080.000	128.000	96.000	133.984	1722.016	$ 35.99
LIPSOHN, RONDA	FINANCIAL AID SPECIALIST	80,313.40	58,154.69	22,158.71	2080.000	128.000	96.000	168.000	1688.000	$ 47.58
LONGORIA, ARMANDO	STUDENT AFFAIRS TECH	47,955.87	36,630.37	11,325.50	2080.000	128.000	96.000	96.000	1760.000	$ 27.25
LOPEZ, ELENA	FINANCIAL AID SPECIALIST	69,319.98	48,940.68	20,379.30	2080.000	128.000	96.000	136.000	1720.000	$ 40.30
NEAL, EUGENIA	STUDENT AFFAIRS TECH	59,611.46	41,631.40	17,980.06	2080.000	128.000	96.000	103.131	1752.869	$ 34.01
QUIROZ, JAMIE	FINANCIAL AID SPECIALIST	68,266.67	47,844.00	20,422.67	2080.000	128.000	96.000	136.000	1720.000	$ 39.69
RAMIREZ, YESENIA	FINANCIAL AID SPECIALIST	57,342.39	44,415.36	12,927.03	2080.000	128.000	96.000	96.000	1760.000	$ 32.58
TAFOYA, YVETTE	FINANCIAL AID SPECIALIST	52,957.35	36,850.00	16,107.35	2080.000	128.000	96.000	96.000	1760.000	$ 30.09
VEJAR, YAJAYRA	STUDENT AFFAIRS TECH	50,362.24	37,819.43	12,542.81	2080.000	128.000	96.000	96.000	1760.000	$ 28.61
WESTBY, KIMBERLY	STUDENT AFFAIRS ASST	74,362.00	57,934.56	16,427.44	2080.000	128.000	96.000	157.526	1698.474	$ 43.78

[illegible] Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers						
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,254,325	$ 2,199,774	$ 2,460,448	$ 2,643,642	$ 4,021,020	$ 5,806,101	
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ -
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 157,803						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		For 00-01 through 05-06 - unit fee					
			$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34
Total # of credits	Line 4A divided by unit fee		199,979	223,677	240,331	256,606	248,761	0
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ -
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ -
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 157,803						
1.8-4 5.	Credit Units Waived		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ -
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 202,890**	**$ 225,976**	**$ 252,755**	**$ 271,574**	**$ 313,931**	**$ 342,495**	**$ -**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

Schedule 5A
Cerritos Commu[illegible]ollege District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 263.78	$ 161.94	$ 172.18	$ 179.33	$ 209.39	$ 389.93	
	EFCW-1 B. 1. b.		$ 136.48	$ 102.36	$ 215.46	$ 185.80	$ 286.86	$ 987.86	
	EFCW-1 B. 2. a.					$ 139,827.37			
	EFCW-1 B. 2. b.		$ 113,332.48	$ 113,800.16	$ 123,894.10	$ 74.32	$ 93,029.57	$ 176,511.51	
	EFCW-1 B. 2. c.		$ 68.24	$ 68.24	$ 71.82		$ 81.96	$ 87.56	
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 113,800.98	$ 114,132.70	$ 124,353.56	$ 140,266.82	$ 93,607.78	$ 177,976.86	$ -
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 202,890.00	$ 225,976.00	$ 252,755.00	$ 271,574.00	$ 313,931.00	$ 342,495.00	
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (89,089.02)	$ (111,843.30)	$ (128,401.44)	$ (131,307.18)	$ (220,323.22)	$ (164,518.14)	$ -
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 113,800.98**	**$ 114,132.70**	**$ 124,353.56**	**$ 140,266.82**	**$ 93,607.78**	**$ 177,976.86**	**$ -**

History of Fees in the California Community Colleges

Below is a history of primary student fee charges and associated events that precipitated changes in these fees.

Time Frame	Per Unit Fees	Precipitating Event(s)
Prior to Fall 1984	$0	
Fall 1984 - Spring 1991	$5, capped at $50 per semester	Passage of Prop.13 (1978) Recession in 1982-83
Fall 1991 – Fall 1993	$6, capped at $60 per semester	Recession/State Budget Crisis of 1991-93
Spring 1993	$10, cap eliminated Differential fee of $50/unit for holders of BA/BS degrees	
Fall 1993 to Fall 1995	$13 Differential fee of $50/unit for holders of BA/BS degrees	
Spring 1996 to Fall 1998	$13 Differential fee eliminated	Period of economic boom
Spring 1999 to Fall 1999	$12	
Spring 2000 to Spring 2003	$11	
Fall 2003 – Spring 2003	$18	Recession/State Budget Crisis of 2001-04
Fall 2004 – present	$26	

Analysis of Fee History. A cyclical pattern of fee increases has developed in the CCC system. Budget crises experienced by the State invariably affect fees; during each recessionary period, per unit student fees have been increased by the Legislature. These fee increases tend to raise to levels that go beyond merely keeping up with inflationary pressures, and represent true increases in cost to the consumer.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Cerritos
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$44,819,704	$41,621,250	$-778,780	$40,842,470
ENROLL FEE ADMIN (2%)	109,137	93,858	15,279	109,137
APPRENTICE ALLOWANCE	702,377	589,762	112,615	702,377
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,003,161	2,582,718	420,443	3,003,161
S.F.A.A.	826,127	684,341	141,786	826,127
E.O.P.S.	965,722	829,142	136,580	965,722
C.A.R.E.	93,612	78,692	14,920	93,612
D.S.P.S.	1,108,374	948,542	159,832	1,108,374
STATE HOSPITALS	0	0	0	0
CALWORKS	523,565	433,065	90,500	523,565
MATRICULATION (CREDIT)	686,465	590,359	96,106	686,465
MATRIC. (NONCREDIT)	73,142	62,902	10,240	73,142
FAC. & STAFF DIVERSITY	19,625	13,950	5,675	19,625
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	788,495	678,106	110,389	788,495
BLOCK GRANT (ONE-TIME)	372,058	319,970	52,088	372,058
ECON. DEVELOPMENT	416,573	307,665	42,256	349,921
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	116,555	100,237	16,318	116,555
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	717,911	559,970	43,075	603,045
PLANT & INSTRUCTIONAL	417,322	358,897	58,425	417,322
PRIOR YEAR CORRECTION	1,184,246	1,168,375	15,871	1,184,246
TOTAL	$57,066,074	$52,107,025	$789,289	$52,896,314

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerritos College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 28, 2006 12:45:51

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-3 based on general assistance recipient status	236	65,171
BOGW - Part B based on income standards	9,617	3,651,870
BOGW - Part C based on financial need	3,037	1,245,877

Total Unduplicated Count = 12,543
Total Amount = $ 4,962,918

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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San Diego, CA 92117
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 11, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Cerritos Community College District CC19080

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Cerritos Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2006-2007
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Dan Branwell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

...mmunity College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC19080

(02) Claimant Name: Cerritos Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 11110 Alondra Boulevard

City: Norwalk | State: CA | Zip Code: 90650

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	☐	(09) Reimbursement	X
	(04) Combined	☐	(10) Combined	☐
	(05) Amended	☐	(11) Amended	☐

Fiscal Year of cost	(06)	(12) 2005-2006	(30) EFCW-1, (06)	31
Total Claimed Amount	(07)	(13) $ 456,604	(31) EFCW-1, (07)	165,005
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000	(32) EFCW-1, (09)	103,707
Less: Prior Claim Payment Received		(15) $ -	(33) EFCW-1, (10)	142,518
Net Claimed Amount		(16) $ 446,604	(34)	
Due from State	(08)	(17) $ 446,604	(35)	
Due to State		(18)	(36)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	395,306
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	142,518
(29) EFCW-1, (04)(B)(2)(c)(f)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK): Berlanti 'Lola' Rizkallah

Date: 12/21/07

Berlanti "Lola" Rizkallah
Type or Print Name

Director of Fiscal Services
Title

(38) Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 26	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

) Claimant:

ritos Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2005-2006

) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 395,306.49	$ -	$ -	$ -	$ -	$ 395,306.49
1. E ment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
Waiving student fees	$ 142,518.32	$ -	$ -	$ -	$ -	$ 142,518.32
Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
tal Direct Costs	$ 537,824.81	$ -	$ -	$ -	$ -	$ 537,824.81

t Costs		
direct Cost Rate	[From OMB A-21, FAM-29C, or 7%]	30.68%
tal Indirect Costs	[Line (06) x line (05)(a)]	$ 165,004.65
tal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 702,829.46
eduction		
s: Enrollment Fee Revenue offset		$ 103,707.00
s: Er ent Fee Waiver offsets		$ 142,518.32
l Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 456,604.14

06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

C s Community College District

(02) Fiscal Year

2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$18.95	8,957.7	$ 169,748.42				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$18.95	885.8	$ 16,785.91				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$18.95	6,643.3	$ 125,890.54				
Coll delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$18.95	2,487.9	$ 47,145.71				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$18.95	1,885.8	$ 35,735.91				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 395,306.49	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
C[illegible] Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$31.40	1,308.5	$ 41,086.90				
Receiving waiver applications Financial Aid Office Staff Various	$31.40	1,144.9	$ 35,949.86				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$31.40	817.8	$ 25,678.92				
Ente[illegible]pproved application information into district records; providing student award letter Financial Aid Office Staff Various	$31.40	1,267.6	$ 39,802.64				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 142,518.32	$ -	$ -	$ -	$ -

w 04/06

Cerritos Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

20 06

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	8,957.70	Enrollment Office Staff	Various	$18.95	$169,748.42	Referencing student accounts and records	Calculating and collecting enrollment fe
05-06	885.80	Enrollment Office Staff	Various	$18.95	$16,785.91	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
05-06	6,643.30	Enrollment Office Staff	Various	$18.95	$125,890.54	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
05-06	1,885.80	Enrollment Office Staff	Various	$18.95	$35,735.91	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
05-06	2,487.90	Enrollment Office Staff	Various	$18.95	$47,145.71	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fe
	20,860.50	**Enrollment Office Staff Total**			$395,306.49		
05-06	1,308.50	Financial Aid Office Staff	Various	$31.40	$41,086.90	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	1,144.90	Financial Aid Office Staff	Various	$31.40	$35,949.86	Receiving waiver applications	Waiving student fees
05-06	817.80	Financial Aid Office Staff	Various	$31.40	$25,678.92	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	1,267.60	Financial Aid Office Staff	Various	$31.40	$39,802.64	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,538.80	**Financial Aid Office Staff Total**			$142,518.32		
	25,399.30	**Grand Total**			$537,824.81		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$46,880,732		$46,880,732	$1,049,963	$45,830,769
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,035,772		2,035,772	53,290	1,982,482
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	70,427		70,427		70,427
Other Instructional Administration & Instructional Governance	6090	27,299		27,299		27,299
Instructional Support Services	6100					
Learning Center	6110	200,259		200,259	200,259	0
Library	6120	1,245,581		1,245,581	1,029	1,244,552
Media	6130	296,139		296,139	2,236	293,903
Museums and Galleries	6140	45,259		45,259		45,259
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	1,776,378		1,776,378	28,282	1,748,096
Admissions and Records	6200	1,207,034		1,207,034	55,163	1,151,871
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,299,147		2,299,147		2,299,147
Matriculation and Student Assessment	6320	1,989,961		1,989,961	62,659	1,927,302
Transfer Programs	6330	128,476		128,476		128,476
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,271,611		1,271,611	25,938	1,245,673
Subtotal		$59,474,075	$0	$59,474,075	$1,478,819	$57,995,256

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$330,721		$330,721	$5,049	$325,672
Health Services	6440					
Student Personnel Admin.	6450	993,236		993,236	6,582	986,654
Financial Aid Administration	6460	1,896,033		1,896,033	85,859	1,810,174
Job Placement Services	6470					
Veterans Services	6480	6,518		6,518		6,518
Miscellaneous Student Services	6490	234,137		234,137	2,764	231,373
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,833,211		1,833,211	1,833,211	0
Custodial Services	6530	1,898,277		1,898,277	1,898,277	0
Grounds Maintenance and Repairs	6550	679,111		679,111	679,111	0
Utilities	6570	2,554,295		2,554,295	2,554,295	0
Other	6590	68,486		68,486	68,486	0
Planning, Policy Making, and Coordination	6600					
General Inst. Support Services	6700					
Community Relations	6710	935,216		935,216	935,216	0
Fiscal Operations	6720	2,992,009		2,992,009	2,992,009	0
Human Resources Management	6730	916,809		916,809	916,809	0
Noninstructional Staff Benefits & Incentives	6740	400,330		400,330	400,330	0
Staff Development	6750	210,255		210,255	210,255	0
Staff Diversity	6760	9,726		9,726	9,726	0
Logistical Services	6770	1,298,835		1,298,835	1,298,835	0
Management Information Systems	6780	3,272,122		3,272,122	3,272,122	0
Subtotal		$80,003,402	$0	$80,003,402	$18,647,755	$61,355,647

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: Cerritos Community College District

(02) Period of Claim: 2005-2006

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	579,567		579,567	579,567	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830	135,844		135,844		135,844
Economic Development	6840					
Other Community Services & Economic Development	6890	254,654		254,654	2,703	251,951
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	136,926		136,926		136,926
Farm Operations	6930					
Food Services	6940	156,564		156,564		156,564
Parking	6950					
Student and Co-curricular Activities	6960	884		884		884
Student Housing	6970					
Other	6990	214,788		214,788	1,075	213,713
Auxiliary Operations	7000					
Contract Education	7010	714,665		714,665		714,665
Other Auxiliary Operations	7090	18,801		18,801		18,801
Physical Property Acquisitions	7100	93,370		93,370	93,370	0
(05) Total		$82,309,465	$0	$82,309,465	$19,324,470	$62,984,995
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				30.68%		

(07) Notes

CALIFORN COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,031,143	18,939				1,050,082
Business and Management	0500	3,007,503	299,981	58,415	79,907		3,445,806
Communications	0600	25,713					25,713
Information Technology	0700	1,375,483	69,899	14,507	99,452		1,559,341
Education	0800	3,454,298	1,189,984	342,266	23,396		5,009,944
Engineering and Industrial Tech.	0900	4,925,393	1,598,040	797,962	371,202		7,692,597
Fine and Applied Arts	1000	3,576,033	861,178	132,001	20,262		4,589,474
Foreign Language	1100	870,625	21,574				892,199
Health	1200	2,708,659	663,347	135,187	111,249		3,618,442
Family and Consumer Sciences	1300	991,447	196,015	55,238	4,068		1,246,768
Law	1400	432,417	55,060	810			488,287
Humanities (Letters)	1500	6,365,904	1,067,927	33,798	-357		7,467,272
Library Science	1600	38,991					38,991
Mathematics	1700	3,553,918	203,246	17,757	19,277		3,794,198
Military Studies	1800						
Physical Sciences	1900	2,191,775	434,653	97,959	19,253		2,743,640
Psychology	2000	1,254,776	31,297				1,286,073
Public and Protective Services	2100	304,954	76,966				381,920
Social Sciences	2200	1,779,868	354,833	24,984	8,775		2,168,460
Commercial Services	3000	286,808					286,808
Interdisciplinary Studies	4900	2,233,290	20,731	20,573	214,649		2,489,243
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	232,653					232,653
Subtotal - Instructional Activities	**599**	40,641,651	7,163,670	1,731,457	971,133		50,507,911

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,495,522	643,288	6,586		2,145,396
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		68,010	6,692			74,702
Other Instruct. Admin. & Instruct. Governance	6090			26,743			26,743
Subtotal - Instructional Administration	6000		1,563,532	676,723	6,586		2,246,841
Instructional Support Services (6100)							
Learning Center	6110				199,999		199,999
Library	6120		1,259,872	52,596	113,802		1,426,270
Media	6130		266,339	32,699	9,032		308,070
Museums and Galleries	6140		35,991	2,323			38,314
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		1,289,615	640,324	10,343		1,940,282
Subtotal - Instructional Support Services	6100		2,851,817	727,942	333,176		3,912,935
Admissions and Records	6200		1,158,963	66,955	12,895		1,238,813
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,495,022	53,362			2,548,384
Matriculation and Student Assessment	6320		1,824,093	65,004	1,444		1,890,541
Transfer Programs	6330		131,422	15			131,437
Career Guidance	6340						
Other Student Counseling and Guidance	6390			1,158			1,158
Subtotal - Student Counseling and Guidance	6300		4,450,537	119,539	1,444		4,571,520

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNI OMMUNITY COLLEGES
Annual Financial and Budget Report

Expendi..res by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,003,883	37,280	24,808		1,065,971
Extended Opportunity Prgms. & Services (EOPS)	6430		357,935	46,094	1,683		405,712
Health Services	6440						
Student Personnel Administration	6450		958,988	69,011	9,014		1,037,013
Financial Aid Administration	6460		1,592,147	79,381	4,888		1,676,416
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		196,641	37,445	304		234,390
Subtotal - Other Student Services	**6400**		4,109,594	269,211	40,697		4,419,502
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,354,036	503,687	9,496		1,867,219
Custodial Services	6530		1,791,380	171,684			1,963,064
Grounds Maintenance and Repairs	6550		615,858	79,339	2,117		697,314
Utilities	6570			2,205,122			2,205,122
Other Operation and Maintenance of Plant	6590		36,930	8,369			45,299
Subtotal - Operation and Maintenance of Plant	**6500**		3,798,204	2,968,201	11,613		6,778,018
Planning, Policymaking, and Coordination	**6600**						

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR , COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen..tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		788,147	309,896	6,883		1,104,926
Fiscal Operations	6720		1,614,507	1,355,365	10,761		2,980,633
Human Resources Management	6730		616,333	136,812	1,794		754,939
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		376,307				376,307
Staff Development	6750		236,746	2,918			239,664
Staff Diversity	6760			10,846			10,846
Logistical Services	6770		848,327	451,595	13,435		1,313,357
Management Information Systems	6780		3,081,853	332,373	183,837		3,598,063
Other General Institutional Support Services	6790		586,224	17,620			603,844
Subtotal - General Institutional Support Services	**6700**		8,148,444	2,617,425	216,710		10,982,579
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830		113,102	312			113,414
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		129,131	119,724	62,675		311,530
Subtotal - Community Services	**6800**		242,233	120,036	62,675		424,944

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNI OMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expend. .res by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		130,807	3,440			134,247
Farm Operations	6930						
Food Services	6940		158,418				158,418
Parking	6950						
Student and Co-curricular Activities	6960			114			114
Student Housing	6970						
Other Ancillary Services	6990		266,340	7,281	256		273,877
Subtotal - Ancillary Services	**6900**		555,565	10,835	256		566,656
Auxiliary Operations (7000)							
Contract Education	7010	376,017	250,988	29,354			656,359
Other Auxiliary Operations	7090		15,241	5,148	3,531		23,920
Subtotal - Auxiliary Operations	**7000**	376,017	266,229	34,502	3,531		680,279
Physical Property and Related Acquisitions (7100)	**7100**				388,588		388,588
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,750,000	1,750,000
Student Aid	7320					462,708	462,708
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,212,708	2,212,708
TOTAL EXPENDITURES and OTHER OUTGO	**391**	41,017,668	34,308,788	9,342,826	2,049,304	2,212,708	88,931,294

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	56,575
Avg. time p/account	9.5
Total Time (in minutes)	537463
Per Hour	60
Hours Worked **(**Activity 11)**	**8957.7**
***EFC 2**	26,573
Avg. time p/student	2
Total Time (in minutes)	53146
Per Hour	60
Hours Worked **(**Activity 12)**	**885.8**
***EFC 2**	26,573
Avg. time p/question	15
Total Time (in minutes)	398595
Per Hour	60
Hours Worked **(**Activity 13)**	**6643.3**
***EFC 1**	56,575
Avg. time p/file	2
Total Time (in minutes)	113150
Per Hour	60
Hours Worked **(**Activity 14)**	**1885.8**
***EFC 4**	29,855
Avg. time p/account	5
Total Time (in minutes)	149275
Per Hour	60
Hours Worked **(**Activity 15)**	**2487.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)

Schedule 1B
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	24,534
Avg. time p/question	3.2
Total Time (in minutes)	78509
Per Hour	60
Hours Worked (****Activity 21**)	**1308.5**
***EFW 7**	24,534
Avg. time p/application	2.8
Total Time (in minutes)	68695
Per Hour	60
Hours Worked (****Activity 22**)	**1144.9**
***EFW 7**	24,534
Avg. time p/evaluation	2.0
Total Time (in minutes)	49068
Per Hour	60
Hours Worked (****Activity 23**)	**817.8**
***EFW 8**	
Avg. time p/application	4.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
***EFW 7**	24,534
Avg. time p/application	3.1
Total Time (in minutes)	76055
Per Hour	60
Hours Worked (****Activity 25**)	**1267.6**
***EFW 8**	
Avg. time p/application	2.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2		1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Agustin, Huimaro	Admissions Clerk	9.5	2	15	2	5	0
Alegre, Rose	Division Secretary Clerk	9.5	2	15	2	5	0
Arreola, Rafael	Admissions Clerk	9.5	2	15	2	5	0
Ascensio, Wendy	Admissions Clerk	9.5	2	15	2	5	0
Ayala, Anthony	Admissions Clerk	9.5	2	15	2	5	0
Badzey, Paul	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bays, Joyce	Admissions Clerk	9.5	2	15	2	5	0
Bello, Francesca	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bernabe, Delfina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bland, Trenain	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Boss, Brian	Admissions Clerk	9.5	2	15	2	5	0
Boss, Sue	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Campbell, Christina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Cary, Joan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Castillo, Raquel	Admissions Clerk	9.5	2	15	2	5	0
Castro, Nancy	Admissions Clerk	9.5	2	15	2	5	0
Clegg, Matthew	Admissions Clerk	9.5	2	15	2	5	0
Connelly, Frances	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
David, Mila	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Del Real, Juan David	Admissions Clerk	9.5	2	15	2	5	0
Deutschman, Susan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Duenas, Corrine	Admissions Clerk	9.5	2	15	2	5	0
Ear, Joey	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Eckheart, Brian	Admissions Clerk	9.5	2	15	2	5	0
Estrella, Hugo	Admissions Clerk	9.5	2	15	2	5	0
Fehn, Letty	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Gaia, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Gardner, Marisa	Admissions Clerk	9.5	2	15	2	5	0
Guevara, Heidy	Admissions Clerk	9.5	2	15	2	5	0
Hawkins, Niki	Admissions Clerk	9.5	2	15	2	5	0
Hernandez, Peter	Admissions Clerk	9.5	2	15	2	5	0
Kanamaki, Brandon	Admissions Clerk	9.5	2	15	2	5	0
Kapao, Jill	Admissions Clerk	9.5	2	15	2	5	0
Kline, Gayle	Admissions and Records Clerk	9.5	2	15	2	5	0
Krause, Amy	Admissions Clerk	9.5	2	15	2	5	0
Ladmirault, Barbara	Admissions and Records Clerk	9.5	2	15	2	5	0
Leyh, Josephine	Admissions Clerk	9.5	2	15	2	5	0
Leyva, Sylvia	Admissions and Records Clerk	9.5	2	15	2	5	0
Littrell, Christinia	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Sharon	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Shawna	Admissions Clerk	9.5	2	15	2	5	0
Long, Robert	Admissions Clerk	9.5	2	15	2	5	0
Luico, Dolores	Admissions Clerk	9.5	2	15	2	5	0

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2		1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Madan, Juan	Admissions Clerk	9.5	2	15	2	5	0
Matsumoto, David	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Joshua	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Natasha	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Mejias, Tristan	Admissions Clerk	9.5	2	15	2	5	0
Miramontes, Marianne	Admissions Clerk	9.5	2	15	2	5	0
Montes, Edgar	Admissions Clerk	9.5	2	15	2	5	0
Morry, Ellie	Admissions Clerk	9.5	2	15	2	5	0
Nosal, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Otero, Jessica	Admissions Clerk	9.5	2	15	2	5	0
Otero, Kathleen	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Pagano, Doreen	Admissions and Records Clerk	9.5	2	15	2	5	0
Pendleton, Ben	Sr. Admissions and Records Clerk	9.5	2	15	2	5	0
Pimentel, Margaret	Admissions Clerk	9.5	2	15	2	5	0
Quiroz, Alejandro	Admissions Clerk	9.5	2	15	2	5	0
Ramirez, Liz	Admissions Clerk	9.5	2	15	2	5	0
Reichert, Andrea	Admissions Clerk	9.5	2	15	2	5	0
Roberson, Kevin	Admissions Clerk	9.5	2	15	2	5	0
Rodarte, George	Admissions Clerk	9.5	2	15	2	5	0
Rodriguez, Reyes	Admissions Clerk	9.5	2	15	2	5	0
Roldan, Yolanda	Admissions Clerk	9.5	2	15	2	5	0
Rosales, Veronica	Admissions Clerk	9.5	2	15	2	5	0
Ruiz, Sandra	Admissions Clerk	9.5	2	15	2	5	0
Ryan, Pat	Admissions Clerk	9.5	2	15	2	5	0
Santillan, Suzie	Admissions Clerk	9.5	2	15	2	5	0
Simentel, Yvette	Admissions Clerk	9.5	2	15	2	5	0
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Torres, Patricia	Admissions Clerk	9.5	2	15	2	5	0
Torres, Theresa	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Ulloa, Dominick	Admissions Clerk	9.5	2	15	2	5	0
Valencia, Erica Ceja	Admissions Clerk	9.5	2	15	2	5	0
Valles, Katie	Admissions Clerk	9.5	2	15	2	5	0
Valles, Lisha	Program Facilitator	9.5	2	15	2	5	0
Woszack, Betty	Admissions Clerk	9.5	2	15	2	5	0
Average		**9.5**	**2.0**	**15.0**	**2.0**	**5.0**	**0.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from District.
Findings:

Staff	Title	05-06
Agustin, Hulmaro	Admissions Clerk	13.79
Alegre, Rose	Division Secretary Clerk	31.85
Arreola, Rafael	Admissions Clerk	
Ascensio, Wendy	Admissions Clerk	
Ayala, Anthony	Admissions Clerk	9.76
Badzey, Paul	Inter. Admin. and Records Clerk	28.31
Bays, Joyce	Admissions Clerk	
Bello, Francesca	Inter. Admin. and Records Clerk	28.45
Bernabe, Delfina	Inter. Admin. and Records Clerk	28.31
*Bland, Trenain	Inter. Admin. and Records Clerk	28.59
Boss, Brian	Admissions Clerk	10.77
Boss, Sue	Inter. Admin. and Records Clerk	27.62
Campbell, Christina	Inter. Admin. and Records Clerk	29.00
Cary, Joan	Senior Admissions and Records	35.11
Castillo, Raquel	Admissions Clerk	9.76
Castro, Nancy	Admissions Clerk	13.79
Clegg, Matthew	Admissions Clerk	
Connelly, Frances	Inter. Admin. and Records Clerk	
David, Mila	Inter. Admin. and Records Clerk	
Del Real, Juan David	Admissions Clerk	
Deutschman, Susan	Inter. Admin. and Records Clerk	
Duenas, Corrine	Admissions Clerk	
Ear, Joey	Inter. Admin. and Records Clerk	27.62
Eckheart, Brian	Admissions Clerk	
Estrella, Hugo	Admissions Clerk	
Fehn, Letty	Inter. Admin. and Records Clerk	
Gaia, Barbara	Admissions Clerk	
Gardner, Marisa	Admissions Clerk	10.25
Guevara, Heidy	Admissions Clerk	
Hawkins, Niki	Admissions Clerk	10.77
Hernandez, Peter	Admissions Clerk	9.76
Kanamaki, Brandon	Admissions Clerk	
Kapao, Jill	Admissions Clerk	
Kline, Gayle	Admissions and Records Clerk	33.44
Krause, Amy	Admissions Clerk	
Ladmirault, Barbara	Admissions and Records Clerk	29.14
Leyh, Josephine	Admissions Clerk	
*Leyva, Sylvia	Admissions and Records Clerk	26.18
Littrell, Christinia	Admissions Clerk	10.77
Littrell, Sharon	Admissions Clerk	12.19
Littrell, Shawna	Admissions Clerk	8.64
Long, Robert	Admissions Clerk	
Luico, Dolores	Admissions Clerk	

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Average PHR's

Staff	Title	05-06
Madan, Juan	Admissions Clerk	
Matsumoto, David	Admissions Clerk	
Mejia, Joshua	Admissions Clerk	
Mejia, Natasha	Inter. Admin. and Records Clerk	28.56
Mejias, Tristan	Admissions Clerk	9.56
Miramontes, Marianne	Admissions Clerk	9.56
*Montes, Edgar	Admissions Clerk	9.76
Morry, Ellie	Admissions Clerk	
Nosal, Barbara	Admissions Clerk	
*Otero, Jessica	Admissions Clerk	10.25
Otero, Kathleen	Inter. Admin. and Records Clerk	27.62
Pagano, Doreen	Admissions and Records Clerk	27.14
Pendleton, Ben	Sr. Admissions and Records Clerk	31.85
Pimentel, Margaret	Admissions Clerk	8.64
*Quiroz, Alejandro	Admissions Clerk	9.76
Ramirez, Liz	Admissions Clerk	
Reichert, Andrea	Admissions Clerk	
Roberson, Kevin	Admissions Clerk	
Rodarte, George	Admissions Clerk	
Rodriguez, Reyes	Admissions Clerk	
Roldan, Yolanda	Admissions Clerk	
Rosales, Veronica	Admissions Clerk	
Ruiz, Sandra	Admissions Clerk	
*Ryan, Pat	Admissions Clerk	8.64
Santillan, Suzie	Admissions Clerk	
Simentel, Yvette	Admissions Clerk	9.76
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	
Torres, Patricia	Admissions Clerk	9.76
Torres, Theresa	Inter. Admin. and Records Clerk	
*Ulloa, Dominick	Admissions Clerk	13.79
*Valencia, Erica Ceja	Admissions Clerk	13.79
Valles, Katie	Admissions Clerk	
Valles, Lisha	Program Facilitator	36.87
Woszack, Betty	Admissions Clerk	
Average		**18.95**

*PHR's used were from 2004-2005 since 2005-2006 PHR's were not available.

Conclusion: Findings go forward to EFCW -2

Schedule 3
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		7			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Carrillo, Juan	Student Affairs Technician	3	1	1	5	2	4
Flores, Lina	Financial Aid Technician	2	3	4	4	2	3
Leguizemon, Adriana	Student Affairs Technician	3	2	2	5	3	2
Lipsohn, Rhonda	Financial Aid Specialist	5	7	3	4	6	2
Longoria, Armando	Student Affairs Technician	2	2	1	5	1	3
Lopez, Elena	Financial Aid Specialist	5	7	3	4	6	2
Neal, Eugenia	Student Affairs Technician	3	3	1	5	3	1.5
Quiroz, Jamie	Financial Aid Specialist	2	2	2	3	5	1
Ramirez, Yesenia	Financial Aid Specialist	3	1	1	5	1	3
Tafoya, Yvette	Financial Aid Specialist	3	3	2	3	5	3
Vejar, Yajayra	Student Affairs Technician	5	1	2	5	1	2
Vera, Silvia	Student Affairs Technician	2	2	2	3	2	2
***Westby, Kimberly	Student Affairs Assistant	*4*	*20*	*30*	*10*	*30*	*10*
Average		**3.2**	**2.8**	**2.0**	**4.3**	**3.1**	**2.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

*****Kimberly Westby's** time not used, not consistent with rest of the averages received.

Schedule 3
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from distict
Findings:

Staff	Title	05-06
Carrillo, Juan	Student Affairs Technician	24.83
Flores, Lina	Financial Aid Technician	30.36
Leguizemon, Adriana	Student Affairs Technician	29.62
Lipsohn, Rhonda	Financial Aid Specialist	40.47
Longoria, Armando	Student Affairs Technician	27.34
Lopez, Elena	Financial Aid Specialist	34.16
Neal, Eugenia	Student Affairs Technician	30.36
Quiroz, Jamie	Financial Aid Specialist	33.29
Ramirez, Yesenia	Financial Aid Specialist	33.10
Sanchez, Hector	Custodian	
Tafoya, Yvette	Financial Aid Specialist	29.95
Vejar, Yajayra	Student Affairs Technician	27.51
Vera, Silvia	Student Affairs Technician	26.84
Westby, Kimberly	Student Affairs Assistant	40.39
Average		**31.40**

Conclusion: Findings go forward to EFCW-2

Schedule 4
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-06
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	55,682	59,994	61,470	64,189	66,680	63,213	60,043	56,575
EFC 2	1.8-1	2.	Paid Enrollment fees	34,733	37,109	37,787	37,796	38,273	34,561	30,866	26,573
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	20,780	22,662	22,819	25,419	26,985	26,946	27,686	25,604
EFC 4	1.8-2	1.	Delinquencies collections	16,782	20,186	22,879	22,101	23,946	22,924	21,118	29,855
EFC 5	1.8-2	2.	Refunds	1,543	1,660	1,589	1,498	1,749	1,544	1,749	1,426
EFW 6	1.8-3	1.	Waivers Requested	X	Client reported on their EFCW 1.8-3 form that "Financial Aid does not collect this data".						
EFW 7	1.8-3	2.	Waivers Approved	X -	20,696	20,782	22,702	24,920	25,894	26,726	24,534
EFW 8	1.8-3 (1-2)		Waivers Denied	X	Not able to be calculated due to client not able to provide EFW 6.						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Friday, April 27, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2005 Summer Term

Data Current As Of April 27, 2012 02:19:41

Total Headcount	12,638

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California Home Friday, April 27, 2012

Student Demographics

Student Total Headcount For Cerritos
For 2005 Fall Term

Data Current As Of April 27, 2012 02:19:52

Total Headcount	23,544

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California Home

Friday, April 27, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2006 Spring Semester

Data Current As Of April 27, 2012 02:20:03

Total Headcount	23,543

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CERRITOS COLLEGE
District

ADMISSIONS & RECORDS
Department/Location

STEPHANIE MURGUIA
Employee Name

DEAN, ADMISSIONS & RECORDS
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02
02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature S Murguia Date _____

If you have any questions, please contact Sylvia Perez at SixTen & Assoc., at (951) 514-9444

PLEASE SUBMIT THIS INFORMATION BY 4/12/07 ; TO Deanza Hall

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Cerritos Community College District
308/95 Enrollment Fee Collections Waivers
Admissions and Records Dept.

Purpose: List of staff involved in the Enrollment Fee Collection and Cashier Functions
Source: EFCW 1.7-2 forms, by fiscal year, provided for each individual on this list.

ref #	NAME	TITLE
1	Hulmaro Agustin	Admissions Clerk
2	Rose Alegre	Division Secretary Clerk - SSA II
3	Rafael Arreola	Admissions Clerk
4	Wendy Ascensio	Admissions Clerk
5	Anthony Ayala	Admissions Clerk
6	Paul Badzey	Intermediate A/R Clerk - SSA I
7	Joyce Bays	Admissions Clerk
8	Francesca Bello	Admissions Clerk
9	Delfina Bernabe	Intermediate A/R Clerk - SSA I
10	Trenain Bland	Intermediate A/R Clerk - SSA II
11	Brian Boss	Admissions Clerk
12	Sue Boss	Intermediate A/R Clerk - SSA I
13	Christina Campbell	Intermediate A/R Clerk - SSA I
14	Joan Cary	Sr. A/R Clerk - SSA II
[illegible]	Raquel Castillo	Admissions Clerk
[illegible]	Nancy Castro	Admissions Clerk
17	Matthew Clegg	Admissions Clerk
18	Frances Connelly	Intermediate A/R Clerk
19	Mila David	Intermediate A/R Clerk
20	Juan D. Del Real	Admissions Clerk
21	Susan Deutschman	Intermediate A/R Clerk
22	Corrine Duenas	Admissions Clerk
23	Joey Ear	Intermediate A/R Clerk - SSA I
24	Brian Eckheart	Admissions Clerk
25	Hugo Estrella	A/R Clerk
26	Letty Fehn	Intermediate A/R Clerk
27	Barbara Gaia	Admissions Clerk - A/R Clerk
28	Marisa Gardner	Admissions Clerk
29	Heidy Guevara	Admissions Clerk
30	Niki Hawkins	Admissions Clerk
31	Peter Fernandez	Admissions Clerk
32	Brandon Kanamaki	Admissions Clerk
33	Jill Kapao	Admissions Clerk
34	Gayle Kline	A/R Clerk
35	Amy Krause	Admissions Clerk
36	Barbara Ladmirault	A/R Clerk
37	Josephine Leyh	Admissions Clerk
38	Sylvia Leyva	A/R Clerk
[illegible]	hristina Littrell	Admissions Clerk
40	Sharon Littrell	Admissions Clerk
41	Shawna Littrell	Admissions Clerk
42	Robert Long	Admissions Clerk
43	Dolores Lucio	Admissions Clerk
44	Juan Madan	Admissions Clerk
45	David Matsumoto	Admissions Clerk
46	Joshua Mejia	Admissions Clerk
47	Natasha Mejia	Intermediate A/R Clerk - SSA I
48	Tristan Mejias	Admissions Clerk
49	Marianne Miramonte	Admissions Clerk
50	Edgar Montes	Admissions Clerk
51	Ellie Morry	Admissions Clerk
52	Barbara Nosal	Admissions Clerk - A/R Clerk
53	Jessica Otero	Admissions Clerk
54	Kathleen Otero	Intermediate A/R Clerk - SSA I
55	Doreen Pagano	A/R Clerk
56	Ben Pendleton	Sr. A/R Clerk - SSA II
57	Margaret Pimentel	Admissions Clerk
58	Alejandro Quiroz	Admissions Clerk
59	Liz Ramirez	Admissions Clerk
60	Andrea Reicheart	Admissions Clerk
61	Kevin Roberson	Admissions Clerk
62	George Rodarte	Admissions Clerk
63	Reyes Rodriguez	Admissions Clerk
64	Yolanda Rolan	Admissions Clerk
65	Veronica Rosales	Admissions Clerk
66	Sandra Ruiz	Admissions Clerk
67	Pat Ryan	Admissions Clerk
68	Suzie Santillan	Admissions Clerk
69	Yvette Simentel	Admissions Clerk
70	Lavonne Stillwagon	Intermediate A/R Clerk - SSA II
71	Patricia Torres	Admissions Clerk
72	Theresa Torres	Intermediate A/R Clerk - SSA I
73	Dominick Ulloa	Admissions Clerk
74	Erica Ceja Valencia	Admissions Clerk
75	Katie Valles	Admissions Clerk
76	Lisha Valles	Program Facilitator - SSA II
77	Betty Woszack	Admissions Clerk

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid Office.
Department/Location

Juan C. Camilo
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451 X2392
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/07/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Lina Flores
Employee Name

Financial Aid Tech.
Exact Position Title

562 860-2457 ext. 2104
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature Lina Flores Date 4.27.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College College — District

Financial Aid — Department/Location

Adriana Leguizamón — Employee Name

Student Affairs Technician — Exact Position Title

(562) 860-2451 — Telephone # X2387

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Adriana L. — Date 4/27/04

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College District
District

Financial Aid
Department/Location

Ronda Lipsohn
Employee Name

Financial Aid Specialist
Exact Position Title

(562)860-2451 x2386
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ronda Lipsohn Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cabrillo College
District

Financial Aid
Department/Location

Armando S. Longoria
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451 Ext 2397
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 AV		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Armando Longoria Date 7/27/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Norritos Community College — District
Financial Aid Office — Department/Location
Elena Lopez — Employee Name
Financial Aid Specialist — Exact Position Title
562 860-2451 x2373 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~ & f.

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

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Employee Signature Elena G Lopez — Date April 27, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Student Affairs / Finaid
Department/Location

Eugenia Neal
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451 x2397
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eugenia Neal Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Jamie Quiroz
Employee Name

Financial Aid Specialist
Exact Position Title

x2370
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~X~~ 5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1		✓		

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Employee Signature Jamie Quiroz Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Yesenia Ramirez
Employee Name

Financial Aid Specialist
Exact Position Title

5628602451 (12mo/11mo/10mo/hrly
Telephone # x2384 Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature _____ Date 2-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid Office — Department/Location
Yvette Tafoya — Employee Name
Financial Aid Specialist — Exact Position Title
(562) 860-2451 — Telephone #
X. 2390
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

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Employee Signature Yvette Tafoya — Date 04/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid — Department/Location
Yajayra Vejar — Employee Name
Student Affairs Technician — Exact Position Title
(562)860-2451 X2397 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

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Employee Signature Yajayra Vejar — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial aid
Department/Location

Silvia Vera
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

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Employee Signature Silvia Vera Date 4-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District

Financial Aid Office — Department/Location

Kimberly Westby — Employee Name

Student Affairs Assistant — Exact Position Title

562)860-2451 x2572 — Telephone #

~~12mo~~/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓		

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Employee Signature Kimberly B. Westby — Date 4/27/2006

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: CERRITOS CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	11,000	12,526	13,116	13,961	15,067	12,971	12,516	12,086
Fall	22,455	23,965	24,524	25,197	26,215	25,432	24,183	22,197
Winter/ Intersession								
Spring	22,227	23,403	23,850	25,016	25,398	24,810	23,314	22,292
Total	56,682	59,994	61,470	64,189	66,680	63,213	60,043	56,575
2. Number of students who paid enrollment fees:								
Summer	5,953	6,700	7,040	7,266	7,519	6,431	5,648	4,824
Fall	14,877	15,894	16,859	15,845	16,283	14,902	13,569	11,241
Winter/ Intersession								
Spring	13,987	14,436	14,600	14,685	14,471	13,228	11,689	10,508
Total	34,738	37,109	37,757	37,796	38,273	34,561	30,886	26,573
3. Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	4,771	5,637	5,608	6,318	6,975	6,013	6,299	5,423
Fall	7,905	8,433	8,434	9,134	9,748	10,120	10,427	9,925
Winter/ Intersession								
Spring	9,204	8,992	8,717	9,967	10,297	10,813	10,960	10,256
Total	20,780	23,062	22,759	25,419	26,980	26,946	27,686	25,604

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5-1-06

ALFONSO MEJIA — NETWORK ADMINISTRATOR.

Employee Name: (print) Position or Title

If you have any questions, please contact _____ at _____

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Term	1.2	1.2	1.3	2.1	2.1
SU-2005	12,086	4,824	5,423	5,679	110
A-2005	22,197	11,241	9,925	14,079	972
SP-2006	22,292	10,508	10,256	10,097	344
	56,575	26,573	25,604	29,855	1,426

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: CERRITOS CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	3,167	3,516	4,542	4,405	4,738	4,179	3,991	5,699
Fall	7,259	7,729	9,556	9,360	10,181	9,741	9,003	14,079
Winter/Intersession								
Spring	6,756	8,941	8,701	8,378	9,027	9,004	8,124	10,097
Total	16,782	20,186	22,879	22,101	23,946	22,924	21,118	29,855
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	178	215	133	213	225	186	198	110
Fall	918	1,082	1,018	828	1,097	962	1,150	972
Winter/Intersession								
Spring	447	363	438	457	427	396	401	344
Total	1,543	1,660	1,589	1,498	1,749	1,544	1,749	1,426

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5-1-6

ALPHONSE ARELLA. NETWORK ADMINISTRATOR

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Term	1.2	1.2	1.3	2.1	2.1
SU-2005	12,086	4,824	5,423	5,679	110
[illegible]2005	22,197	11,241	9,925	14,079	972
Sr-2006	22,292	10,508	10,256	10,097	344
	56,575	26,573	25,604	29,855	1,426

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Cerritos College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer	3955	4571	4598	5020	5950	5590	5971	5018
Fall	7514	8099	8002	9495	9253	9904	10167	9703
Winter/Intersession	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Spring	7630	8026	8182	9147	9717	10402	10588	9813
Total	19 022	20 696	20 782	23 702	24 920	25 894	26 726	24 534

Fashion Dept does not collect this data (CW)

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

05-06 11/27/07

Employee Signature: [signature] Date 5/31/2006

Kim Westby — Employee Name: (print)

Student Affairs Assistant — Position or Title

If you have any questions, please contact _____, at _____.

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Cerritos Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 2,252,965	$ 2,254,325	$ 2,199,774	$ 2,460,448	$ 2,643,642	$ 4,021,020	$ 5,806,101	$ 6,173,163
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 45,059	$ 45,086	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ 123,463
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$ 157,707	$ 157,803						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

05-06
11-27-07

Employee Signature: [signature] Date 5-3-2006

Kim Wesley
Employee Name: (print)

Student Affairs Assistant
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
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BY: _____

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2005-2006 BOGG Fee Summary

		FALL 05	SPRING 06	SUMMER 06	2005-2006
BOGG A	STUDENTS	106	104	60	142
BOGG B	STUDENTS	6,892	7,013	3,646	9,250
BOGG C	STUDENTS	2,705	2,696	1,312	3,309
Total Unduplicated:		**9,703**	**9,813**	**5,018**	**12,701**
BOGG A	CSID	$1,060.00	$1,040.00	$236.00	$2,336.00
	HEALTH	$1,484.00	$1,456.00	$649.00	$3,589.00
	ENROLL	$21,957.00	$20,930.00	$7,293.00	$50,180.00
Total		**$24,501.00**	**$23,426.00**	**$8,178.00**	**$56,105.00**
BOGG B	CSID	$68,847.00	$69,620.00	$14,172.00	$152,639.00
	HEALTH	$96,348.00	$97,468.00	$38,973.00	$232,789.00
	ENROLL	$1,726,569.00	$1,743,534.00	$511,719.00	$3,981,822.00
Total		**$1,891,764.00**	**$1,910,622.00**	**$564,864.00**	**$4,367,250.00**
BOGG C	CSID	$27,025.00	$26,810.00	$5,056.00	$58,891.00
	HEALTH	$37,814.00	$37,534.00	$13,904.00	$89,252.00
	ENROLL	$707,200.00	$710,255.00	$184,210.00	$1,601,665.00
Total		**$772,039.00**	**$774,599.00**	**$203,170.00**	**$1,749,808.00**
Grand Total		**$2,688,304.00**	**$2,708,647.00**	**$776,212.00**	**$6,173,163.00**

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Cerritos Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 32.02	
	AVERAGE DEAN	$ 68.52	$ 80.36
	AVERAGE DIRECTOR	$ 63.08	$ 82.60
	AVERAGE EXECUTIVE SECRETARY	$ 35.48	
	AVERAGE FACULTY MEMBER	$ 53.73	
	AVERAGE SECRETARY	$ 26.40	$ 35.09
	AVERAGE VICE PRESIDENT	$ 96.37	
AGUSTIN, HULMARO	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
ALEGRE, ROSE	STUDENT SERVICES ASST II	$ 31.85	$ 35.42
AVALA, ANTHONY	A&R ASSISTANT	$ 9.76	$ 9.76
BADZEY, PAUL	STUDENT SERVICES ASST I	$ 28.31	$ 29.99
BELLO, FRANCESCA	PROGRAM ASSITANT II	$ 28.45	$ 30.65
BERNABE, DELFINA	STUDENT SERVICE ASST I	$ 28.31	$ 29.99
BETTINO, M.L.	DEAN, TECH TRAINING AND DISTANCE	$ 79.00	$ 83.68

Name	Title	05-06	06-07
BOSS, BRIAN	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
BOSS, SUE	STUDENT SERVICE ASST I	$ 27.62	$ 29.26
CAMPBELL, CHRISTINA	STUDENT SERVICES ASST I	$ 29.00	$ 32.26
CARRILLO, JUAN	STUDENT AFFAIRS TECHNICIAN	$ 24.83	$ 28.61
CARY, JOAN	STUDENT SERVICES ASST II	$ 35.11	$ 37.19
CASTILLO, RAQUEL	REGISTRATION ACCT CLK	$ 9.76	$ 9.76
CASTRO, NANCY	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
CHESTER, ROBERT	FACULTY	$ 62.89	$ 62.89
CHOMIAK, RENEE DELONG	DEAN OF COUNSELING SERVICES	$ 56.10	$ 70.31
COMPTON, KATHY	ADMINISTRATIVE SECRETARY	$ 41.45	-----
CONVEY, CYNTHIA	MANAGER	$ 69.86	$ 77.69
DRONEY, DOUGLAS	SENIOR APPLICATIONS ANALYST	$ 62.07	$ 65.75
EAR, JOEY	STUDENT SERVICES ASST I	$ 27.62	$ 30.72
FLORES, LINA	FINANCIAL AID TECHNICIAN	$ 30.36	-----
FLORES-CHURCH, ADRIANA	ASSISTANT DIRECTOR, HUMAN RESOURCES	$ 56.92	$ 62.16
FUJIMOTO, NORMAN	INSTRUCTIONAL DEAN (Terminated 01/03/07)	$ 82.96	$ 87.87
GALE, CHARLES	COORD STUDENT HEALTH & WELFARE (Termated 5/31/07(	$ 58.91	$ 62.40
GARDNER, MARISA	REGISTRATION ACCT CLK	$ 10.25	$ 10.77
GRINDEL, JOHN	VP OF ACADEMIC AFFAIRS	$ 91.17	-----

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
HART, DEANNA	INTERIM PAYROLL MANAGER	$ 44.02	$ 48.23
HAWKINS, NIKI	REGISTRATION ACCT CLK	$ 10.77	------
HERNANDEZ, PETER	A&R ASSISTANT	$ 9.76	$ 10.25
HIGDON, JO ANN	VP OF BUSINESS SERVICES	$ 96.01	$ 104.75
JANKOWSKI, MIKE	OPERATIONS MANAGER TERM 1/31/06	$ 26.39	
JOHNSON, ADOLPH	DEAN OF ACADEMIC AFFAIRS	$ 85.12	$ 90.16
KLINE, GAYLE	ACCOUNT TECHNICIAN III	$ 33.44	$ 37.19
KREMER, NICHOLAS	EX DEAN - C.I.T.E.	$ 77.21	$ 85.87
KRICHMAR, LEE	DIRECTOR, INFORMATION TECHNOLOGY	$ 72.95	$ 83.68
LADMIRAULT, BARBARA	A&R ASSISTANT	$ 29.14	$ 30.87
LEGUIZEMON, ANDRIANA	STUDENT AFFAIRS TECHNICIAN	$ 29.62	$ 32.94
LIPSOHN, RHONDA	FINANCIAL AID SPECIALIST	$ 40.47	$ 42.86
LITTRELL, CHRISTINIA	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
LITTRELL, SHARON	LEAD REG ACCT CLERK	$ 12.19	$ 12.19
LITTRELL, SHAWNA	CLERK	$ 8.64	$ 8.64
LONGORIA, ARMANDO	STUDENT AFFAIRS TECHNICIAN	$ 27.34	$ 30.69
LOPEZ, ELENA	FINANCIAL AID SPECIALIST	$ 34.16	$ 37.02
MEIJA, NATASHA	STUDENT SERVICES ASST II	$ 28.56	$ 32.13
MEIJA, TRISTAN	REGISTRATION ACCT CLK	$ 9.56	------

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
MEJIA, ALPHONSE	NETWORK ADMINISTRATOR	$ 53.53	$ 59.53
MILLER, DONNA	INSTRUCTIONAL DEAN	$ 59.37	$ 62.89
MIRAMONTES, MARIANNE	INTERMEDIATE TYPIST CLK	$ 9.56	$ 9.56
MORRIS, IGERNA	SECRETARY	$ 35.17	$ 39.11
MURGUIA, STEPHANIE	DEAN OF ADMISSIONS AND RECORDS	$ 72.95	$ 77.27
NEAL, EUGENIA	STUDENT AFFAIRS TECHNICIAN	$ 30.36	$ 32.16
OCAMPO, LUZ	SECRETARY CLERK	$ 36.36	$ 31.54
O'ROURKE, DANIEL	ASST DIRECTOR, HUMAN RESOURCES	$ 85.58	$ 93.36
OTERO, KATHLEEN	STUDENT SERVICE ASST I	$ 27.62	$ 29.26
PAGANO, DOREEN	INTERMEDIATE TYPIST CLK	$ 27.14	$ 28.75
PENDLETON, BEN	STUDENT SERVICES ASST II	$ 31.85	$ 33.74
PIMENTEL, MARGARET	CLERK	$ 8.64	$ 8.64
QUIROZ, JAMIE	FINANCIAL AID SPECIALIST	$ 33.29	$ 37.02
RAMIREZ, YESENIA	FINANCIAL AID SPECIALIST	$ 33.10	$ 36.14
RICHEY, TOM	FACILITIES MANAGER	$ 58.75	$ 52.71
RIFFLE, ROBERT	DIRECTOR OF PHYSICAL PLANT	$ 64.55	$ 70.55
RIZKALLAH, BERLANTI "Lola"	DIRECTOR OF FISCAL SERVICES	$ 78.19	$ 82.82
RODRIGUEZ, ELIZABETH	SECRETARY	$ 28.56	$ 30.65
SHELDON, CAROLINE	DIRECTOR OF RESEARCH & PLANNING	$ 66.65	-------

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
SIMENTEL, YVETTE	REGISTRATION ACCT CLK	$ 9.76	$ 10.25
TAFOYN, YVETTE	FINANCIAL AID SPECIALIST	$ 29.95	$ 33.68
THURY, CHERYL	SECRETARY	$ 38.74	$ 43.09
TORRES, PATRICIA	A&R ASSISTANT	$ 9.76	$ 9.76
VALLES, LISHA	STUDENT SERVICE ASST II	$ 36.87	$ 41.01
VEGA, KENNETHIA	SECRETARY	$ 48.42	-------
VEJAR, YAJAYRA	STUDENT AFFAIRS TECHNICIAN	$ 27.51	$ 32.16
VELA, NOELIA	PRESIDENT	$ 128.37	$ 135.97
VERA, SILVIA	STUDENT AFFAIRS TECHNICIAN	$ 26.84	$ 31.37
WESTBY, KIMBERLY	STUDENT AFFAIRS SPECIALIST	$ 40.39	$ 42.78

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
HERNANDEZ, PETER	A&R ASSISTANT	$ 9.76	$ 9.76
KLINE, GAYLE	ACCOUNT TECHNICIAN III	$ 32.31	$ 33.44
LADMIRAULT, BARBARA	A&R ASSISTANT	$ 28.15	$ 29.14
LEYVA, SYLVIA	STUDENT SERVICES ASST II	$ 26.18	N/A
LITTRELL, CHRISTINIA	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
LITTRELL, SHARON	LEAD REG ACCT CLERK	$ 12.19	$ 12.19
LITTRELL, SHAWNA	CLERK	$ 8.64	$ 8.64
MEIJA, NATASHA	STUDENT SERVICES ASST II	$ 26.68	$ 28.56
MEIJA, TRISTAN	REGISTRATION ACCT CLK	$ 9.56	$ 9.56
MIRAMONTES, MARIANNE	INTERMEDIATE TYPIST CLK	$ 9.56	$ 9.56
MONTES, EDGAR	A&R ASSISTANT	$ 9.76	N/A
OTERO, JESSICA	REGISTRATION ACCT CLK	$ 10.25	
OTERO, KATHLEEN	STUDENT SERVICE ASST I	$ 26.68	$ 27.62
PAGANO, DOREEN	INTERMEDIATE TYPIST CLK	$ 26.23	$ 27.14
PENDLETON, BEN	STUDENT SERVICES ASST II	$ 30.41	$ 31.85
PIMENTEL, MARGARET	CLERK	$ 8.64	$ 8.64
QUIROZ, ALEJANDRO	A&R ASSISTANT	$ 9.76	N/A
RYAN, PAT	CLERK	$ 8.64	N/A
SIMENTEL, YVETTE	REGISTRATION ACCT CLK	$ 9.76	$ 9.76

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
TORRES, PATRICIA	A&R ASSISTANT	$ 9.76	$ 9.76
ULLOA, DOMINICK	STUDENT AFFAIRS TECHNICIAN	$ 13.79	N/A
VALENCIA ERICA CEJA	STUDENT AFFAIRS TECHNICIAN	$ 13.79	N/A
VALLES, LISHA	STUDENT SERVICE ASST II	$ 35.62	$ 36.87

Productive Hourly Rate Update (04-05 & 05-06)

Cerritos Community College

Name	Title	Fiscal Year 04-05	05-06
	AVG ADMINISTRATIVE ASSISTANT	30.94	32.02
	AVG DEAN	66.20	68.52
	AVG DIRECTOR	62.77	63.08
	AVE EXECUTIVE SECRETARY	34.28	35.48
	AVG FACULTY MEMBER	51.91	53.73
	AVG SECRETARY	42.32	26.40
	AVG PRESIDENT	124.03	128.37
	AVG VICE PRESIDENT	93.07	96.32
AGUSTIN, HULMARO	ADULT HOURLY - STUDENT AFFAIRS TECH	13.79	13.79
ALEGRE, ROSE	STUDENT SERVICES ASST II	30.77	31.85
ARRELOA, RAFAEL	TERMINATED	-	-
ASCENCIO, WENDY	TERMINATED	-	-
AYALA, ANTHONY	ADULT HOURLY - A & R ASSISTANT	9.76	9.76
BADZEY, PAUL	STUDENT SERVICES ASST I	27.35	28.31
BAYS, JOYCE	TERMINATED	-	-
BELLO, FRANCESCA	PROGRAM ASSISTANT II	27.33	28.45
BERNABE, DELFINA	STUDENT SERVICE ASST I	27.35	28.31
BLAND, TERNAIN	STUDENT SERVICE ASST II (TERM 6/10/05)	28.59	TERMINATED
;S, BRIAN	ADULT HOURLY - REGISTRATION ACCT CLK	10.77	10.77
BOSS, SUE	STUDENT SERVICE ASST I	26.68	27.62
BOYLE, JOHN	INTERM VP, ACADEMIC AFFAIRS (TERM 6/30/04)	76.03	TERMINATED
CAMPBELL, CHRISTINA	STUDENT SERVICES ASST I	28.02	29.00
CARRILLO, JUAN	STUDENT AFFAIRS TECH (DOH 6/16/05)	-	24.83
CARY, JOAN	STUDENT SERVICES ASST II	32.52	35.11
CASTILLO, RAQUEL	ADULT HOURLY - REGISTRATION ACCT CLK	9.76	9.76
CASTRO, NANCY	ADULT HOURLY - STUDENT AFFAIRS TECH	13.79	13.79
CHESTER, ROBERT	FACULTY	79.51	62.89
CHUNING, DENNIS	VP, BUSINESS SERVICES (TERM 6/30/05)	98.55	TERMINATED
CLEGG, MATTHEW	TERMINATED 6/30/04	-	-

Cerritos Community College District
308/95 Enrollment Fee [illegible]ection and Waivers
Fiscal Years: 1999-0[illegible]hrough 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers						
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,254,325	$ 2,199,774	$ 2,460,448	$ 2,643,642	$ 4,021,020	$ 5,806,101	$ 6,173,163
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ 123,463
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 157,803	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34
Total # of credits	Line 4A divided by unit fee		199,979	223,677	240,331	256,606	248,761	264,488
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ 240,684
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ 123,463
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 157,803						
1.8-4 5.	Credit Units Waived		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ 240,684
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 202,890**	**$ 225,976**	**$ 252,755**	**$ 271,574**	**$ 313,931**	**$ 342,495**	**$ 364,147**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Cerritos
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$54,991,022	$49,206,141	$1,396,412	$50,602,553
EQUALIZATION	753,996	693,677	60,319	753,996
ENROLL FEE ADMIN (2%)	103,707	95,412	8,295	103,707
APPRENTICE ALLOWANCE	711,451	723,418	-11,967	711,451
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	503,940	463,624	40,316	503,940
S.F.A.A.	754,059	692,659	61,400	754,059
E.O.P.S.	1,061,661	972,473	89,188	1,061,661
C.A.R.E.	96,166	86,599	9,567	96,166
D.S.P.S.	1,192,008	1,096,648	95,360	1,192,008
STATE HOSPITALS	0	0	0	0
CALWORKS	533,565	463,279	70,286	533,565
MATRICULATION (CREDIT)	703,034	646,792	56,242	703,034
MATRIC. (NONCREDIT)	72,799	66,975	5,824	72,799
FAC.& STAFF DIVERSITY	20,791	17,580	3,211	20,791
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	788,495	725,417	63,078	788,495
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	411,289	378,386	32,903	411,289
ECON. DEVELOPMENT	357,750	300,510	0	300,510
TANF	116,555	107,229	9,326	116,555
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	37,625	31,605	0	31,605
VTEA TITLE I C	917,419	179,498	591,134	770,632
NURSING CARE	179,487	0	179,487	179,487
PRIOR YEAR CORRECTION	3,747,704	3,747,704	0	3,747,704
TOTAL	$68,106,855	$60,729,388	$2,778,951	$63,508,339

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sched A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 263.78	$ 161.94	$ 172.18	$ 179.33	$ 209.39	$ 389.93	
	EFCW-1 B. 1. b.		$ 136.48	$ 102.36	$ 215.46	$ 185.80	$ 286.86	$ 987.86	
	EFCW-1 B. 2. a.					$ 139,827.37			
	EFCW-1 B. 2. b.		$ 113,332.48	$ 113,800.16	$ 123,894.10	$ 74.32	$ 93,029.57	$ 176,511.51	$ 142,518.32
	EFCW-1 B. 2. c.		$ 68.24	$ 68.24	$ 71.82		$ 81.96	$ 87.56	
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 113,800.98	$ 114,132.70	$ 124,353.56	$ 140,266.82	$ 93,607.78	$ 177,976.86	$ 142,518.32
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 202,890.00	$ 225,976.00	$ 252,755.00	$ 271,574.00	$ 313,931.00	$ 342,495.00	$ 364,147.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (89,089.02)	$ (111,843.30)	$ (128,401.44)	$ (131,307.18)	$ (220,323.22)	$ (164,518.14)	$ (221,628.68)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 113,800.98**	**$ 114,132.70**	**$ 124,353.56**	**$ 140,266.82**	**$ 93,607.78**	**$ 177,976.86**	**$ 142,518.32**

California Home

Friday, April 27, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerritos College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of April 27, 2012 02:22:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	179	52,418
BOGW - Part B based on income standards	9,909	4,052,732
BOGW - Part C based on financial need	3,760	1,595,839

Total Amount = $ 5,700,989

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

February 1, 2008

Claim File Copy

CERTIFIED MAIL # 7006 3450 0000 3941 8710

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Cerritos Community College District CC19080

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Cerritos Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers 2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D. Branwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program **267**

(01) Claimant Identification Number: CC19080

(02) Claimant Name: Cerritos Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 11110 Alondra Boulevard

City: Norwalk | State: CA | Zip Code: 90650

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 403,800	(13) $ 367,140
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 367,140
Due from State	(08) $ 403,800	(17) $ 367,140
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	345,625
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	84,657
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	29
(31) EFCW-1, (07)	125,513
(32) EFCW-1, (09)	103,999
(33) EFCW-1, (10)	84,657
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK): Berlanti M. Rizkallah

Date: 1/30/08

Berlanti "Lola" Rizkallah
Type or Print Name

Director of Fiscal Services
Title

38) Name of Contact Person for Claim: Sixten and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

1) Cla

rritos Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2006-2007

3) Leave Blank

rect Costs	Object Accounts					
) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 345,625.43	$ -	$ -	$ -	$ -	$ 345,625.43
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Pr[illegible]g district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 84,657.02	$ -	$ -	$ -	$ -	$ 84,657.02
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
Total Direct Costs	$ 430,282.45	$ -	$ -	$ -	$ -	$ 430,282.45

ect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.17%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 125,513.39
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 555,795.84
Reduction		
ess: Enrollment Fee Revenue offset		$ 103,999.00
ess: Enrollment Fee Waiver offsets		$ 84,657.02
otal C[illegible]ned Amount	[Line (08) - {Line (09) + Line (10)}]	$ 367,139.82

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions Office Staff Various	$17.11	9,003.5	$ 154,049.89				
Calculating total enrollment fee to be collected Admissions Office Staff Various	$17.11	826.0	$ 14,132.86				
Answering student's questions regarding enrollment fee collection Admissions Office Staff Various	$17.11	6,195.0	$ 105,996.45				
Updating written and computer records for enrollment fee information Admissions Office Staff Various	$17.11	1,895.5	$ 32,432.01				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions Office Staff Various	$17.11	2,280.2	$ 39,014.22				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 345,625.43	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$34.18	714.0	$ 24,404.52				
Receiving waiver applications							
Financial Aid Office Staff Various	$34.18	624.8	$ 21,355.66				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$34.18	446.3	$ 15,254.53				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$34.18	691.7	$ 23,642.31				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 84,657.02	$ -	$ -	$ -	$ -

Cerritos Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	9,003.50	Admissions Office Staff	Various	$17.11	$154,049.89	Referencing student accounts and records	Calculating and collecting enrollme
06-07	826.00	Admissions Office Staff	Various	$17.11	$14,132.86	Calculating total enrollment fee to be collected	Calculating and collecting enrollme
06-07	6,195.00	Admissions Office Staff	Various	$17.11	$105,996.45	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollme
06-07	1,895.50	Admissions Office Staff	Various	$17.11	$32,432.01	Updating written and computer records for enrollment fee information	Calculating and collecting enrollme
06-07	2,280.20	Admissions Office Staff	Various	$17.11	$39,014.22	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollme
	20,200.20	**Admissions Office Staff Total**			$345,625.43		
06-07	714.00	Financial Aid Office Staff	Various	$34.18	$24,404.52	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	624.80	Financial Aid Office Staff	Various	$34.18	$21,355.66	Receiving waiver applications	Waiving student fees
06-07	446.30	Financial Aid Office Staff	Various	$34.18	$15,254.53	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	691.70	Financial Aid Office Staff	Various	$34.18	$23,642.31	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,476.80	**Financial Aid Office Staff Total**			$84,657.02		
	22,677.00	**Grand Total**			$430,282.45		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$50,507,911		$50,507,911	$971,133	$49,536,778
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,145,396		2,145,396	6,586	2,138,810
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	74,702		74,702		74,702
Other Instructional Administration & Instructional Governance	6090	26,743		26,743		26,743
Instructional Support Services	6100					
Learning Center	6110	199,999		199,999	199,999	0
Library	6120	1,426,270		1,426,270	113,802	1,312,468
Media	6130	308,070		308,070	9,032	299,038
Museums and Galleries	6140	38,314		38,314		38,314
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	1,940,282		1,940,282	10,343	1,929,939
Admissions and Records	6200	1,238,813		1,238,813	12,895	1,225,918
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,548,384		2,548,384		2,548,384
Matriculation and Student Assessment	6320	1,890,541		1,890,541	1,444	1,889,097
Transfer Programs	6330	131,437		131,437		131,437
Career Guidance	6340					
Other Student Counseling and Guidance	6390	1,158		1,158		1,158
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,065,971		1,065,971	24,808	1,041,163
Subtotal		$63,543,991	$0	$63,543,991	$1,350,042	$62,193,949

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$405,712		$405,712	$1,683	$404,029
Health Services	6440					
Student Personnel Admin.	6450	1,037,013		1,037,013	9,014	1,027,999
Financial Aid Administration	6460	1,676,416		1,676,416	4,888	1,671,528
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	234,390		234,390	304	234,086
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,867,219		1,867,219	1,867,219	0
Custodial Services	6530	1,963,064		1,963,064	1,963,064	0
Grounds Maintenance and Repairs	6550	697,314		697,314	697,314	0
Utilities	6570	2,205,122		2,205,122	2,205,122	0
Other	6590	45,299		45,299	45,299	0
Planning, Policy Making, and Coordination	6600					
General Inst. Support Services	6700					
Community Relations	6710	1,104,926		1,104,926	1,104,926	0
Fiscal Operations	6720	2,980,633		2,980,633	2,980,633	0
Human Resources Management	6730	754,939		754,939	754,939	0
Noninstructional Staff Benefits & Incentives	6740	376,307		376,307	376,307	0
Staff Development	6750	239,664		239,664	239,664	0
Staff Diversity	6760	10,846		10,846	10,846	0
Logistical Services	6770	1,313,357		1,313,357	1,313,357	0
Management Information Systems	6780	3,598,063		3,598,063	3,598,063	0
Subtotal		$84,054,275	$0	$84,054,275	$18,522,684	$65,531,591

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	603,844		603,844	603,844	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830	113,414		113,414		113,414
Economic Development	6840					
Other Community Services & Economic Development	6890	311,530		311,530	62,675	248,855
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	134,247		134,247		134,247
Farm Operations	6930					
Food Services	6940	158,418		158,418		158,418
Parking	6950					
Student and Co-curricular Activities	6960	114		114		114
Student Housing	6970					
Other	6990	273,877		273,877	256	273,621
Auxiliary Operations	7000					
Contract Education	7010	656,359		656,359		656,359
Other Auxiliary Operations	7090	23,920		23,920	3,531	20,389
Physical Property Acquisitions	7100	388,588		388,588	388,588	0
(05) Total		$86,718,586	$0	$86,718,586	$19,581,578	$67,137,008
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				29.17%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,078,079	43,559				1,121,638
Business and Management	0500	3,124,128	341,032	58,237	55,821		3,579,218
Communications	0600	32,108		15,949	13,904		61,961
Information Technology	0700	1,463,926	70,241	270	107,695		1,642,132
Education	0800	3,796,522	1,264,527	354,113	24,282		5,439,444
Engineering and Industrial Tech.	0900	4,945,036	1,746,544	833,249	152,424		7,677,253
Fine and Applied Arts	1000	3,754,823	955,066	128,012	42,968		4,880,869
Foreign Language	1100	887,118	22,358				909,476
Health	1200	2,750,789	743,035	146,862	54,022		3,694,708
Family and Consumer Sciences	1300	960,230	221,449	63,841	923		1,246,443
Law	1400	433,603	50,454	5,771			489,828
Humanities (Letters)	1500	6,570,985	1,052,170	32,110	15,493		7,670,758
Library Science	1600						
Mathematics	1700	3,699,058	273,849	8,069	24,843		4,005,819
Military Studies	1800						
Physical Sciences	1900	2,343,878	439,904	123,068	7,875		2,914,725
Psychology	2000	1,296,830	27,554		2,553		1,326,937
Public and Protective Services	2100	367,337	22,080				389,417
Social Sciences	2200	1,861,166	406,827	48,148	16,741		2,332,882
Commercial Services	3000	296,810					296,810
Interdisciplinary Studies	4900	2,280,167	29,066	41,825	123,269		2,474,327
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	222,905					222,905
Subtotal - Instructional Activities	**599**	42,165,498	7,709,715	1,859,524	642,813		52,377,550

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Cerritos Community College District **810** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,483,419	588,514	2,495		2,074,428
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		70,696	5,330			76,026
Other Instruct. Admin. & Instruct. Governance	6090			32,312			32,312
Subtotal - Instructional Administration	**6000**		1,554,115	626,156	2,495		2,182,766
Instructional Support Services (6100)							
Learning Center	6110						
Library	6120		1,346,672	33,055	339,625		1,719,352
Media	6130		301,648	62,611	21,001		385,260
Museums and Galleries	6140		19,890	5,859			25,749
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		1,403,479	749,352	189,878		2,342,709
Subtotal - Instructional Support Services	**6100**		3,071,689	850,877	550,504		4,473,070
Admissions and Records	**6200**		1,286,648	64,659	12,236		1,363,543
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,363,111	28,812			2,391,923
Matriculation and Student Assessment	6320		2,205,032	94,939	120,611		2,420,582
Transfer Programs	6330		157,050				157,050
Career Guidance	6340						
Other Student Counseling and Guidance	6390			1,180			1,180
Subtotal - Student Counseling and Guidance	**6300**		4,725,193	124,931	120,611		4,970,735

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,137,607	78,909	73,752		1,290,268
Extended Opportunity Prgms. & Services (EOPS)	6430		347,823	49,474	526		397,823
Health Services	6440						
Student Personnel Administration	6450		963,959	80,246			1,044,205
Financial Aid Administration	6460		1,521,254	76,720	12,732		1,610,706
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		226,018	43,867			269,885
Subtotal - Other Student Services	**6400**		4,196,661	329,216	87,010		4,612,887
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,504,948	503,698	30,764		2,039,410
Custodial Services	6530		1,800,404	183,343	11,227		1,994,974
Grounds Maintenance and Repairs	6550		688,229	68,341	25,954		782,524
Utilities	6570			2,518,495			2,518,495
Other Operation and Maintenance of Plant	6590		43,634	3,544			47,178
Subtotal - Operation and Maintenance of Plant	**6500**		4,037,215	3,277,421	67,945		7,382,581
Planning, Policymaking, and Coordination	**6600**		25,898				25,898

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		890,436	248,379	19,863		1,158,678
Fiscal Operations	6720		3,406,848	1,260,006	7,226		4,674,080
Human Resources Management	6730		725,499	121,939	7,505		854,943
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		375,609				375,609
Staff Development	6750		209,489	18,447			227,936
Staff Diversity	6760			9,652	491		10,143
Logistical Services	6770		897,893	425,665	13,555		1,337,113
Management Information Systems	6780		3,278,424	452,884	168,617		3,899,925
Other General Institutional Support Services	6790		578,289	17,744			596,033
Subtotal - General Institutional Support Services	**6700**		10,362,487	2,554,716	217,257		13,134,460
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830		98,210	1,995			100,205
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		139,943	144,881	1,053		285,877
Subtotal - Community Services	**6800**		238,153	146,876	1,053		386,082

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		145,588	20,206	5,091		170,885
Farm Operations	6930						
Food Services	6940		167,569				167,569
Parking	6950						
Student and Co-curricular Activities	6960		684	105			789
Student Housing	6970						
Other Ancillary Services	6990		203,865	9,320	408		213,593
Subtotal - Ancillary Services	**6900**		517,706	29,631	5,499		552,836
Auxiliary Operations (7000)							
Contract Education	7010	405,998	261,578	27,870			695,446
Other Auxiliary Operations	7090		25,288	56,728	137,725		219,741
Subtotal - Auxiliary Operations	**7000**	405,998	286,866	84,598	137,725		915,187
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,535,565	1,535,565
Student Aid	7320					510,706	510,706
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,046,271	2,046,271
TOTAL EXPENDITURES and OTHER OUTGO	**391**	42,571,496	38,012,346	9,948,605	1,845,148	2,046,271	94,423,866

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

Schedule 1A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	56,864
Avg. time p/account	9.5
Total Time (in minutes)	540208
Per Hour	60
Hours Worked **(**Activity 11)**	**9003.5**
***EFC 2**	24,780
Avg. time p/student	2.0
Total Time (in minutes)	49560
Per Hour	60
Hours Worked **(**Activity 12)**	**826.0**
***EFC 2**	24,780
Avg. time p/question	15.0
Total Time (in minutes)	371700
Per Hour	60
Hours Worked **(**Activity 13)**	**6195.0**
***EFC 1**	56,864
Avg. time p/file	2.0
Total Time (in minutes)	113728
Per Hour	60
Hours Worked **(**Activity 14)**	**1895.5**
***EFC 4**	27,362
Avg. time p/account	5.0
Total Time (in minutes)	136810
Per Hour	60
Hours Worked **(**Activity 15)**	**2280.2**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)

Schedule 1B
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	13,388
Avg. time p/question	3.2
Total Time (in minutes)	42842
Per Hour	60
Hours Worked (****Activity 21**)	**714.0**
***EFW 7**	13,388
Avg. time p/application	2.8
Total Time (in minutes)	37486
Per Hour	60
Hours Worked (****Activity 22**)	**624.8**
***EFW 7**	13,388
Avg. time p/evaluation	2.0
Total Time (in minutes)	26776
Per Hour	60
Hours Worked (****Activity 23**)	**446.3**
***EFW 8**	
Avg. time p/application	4.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
***EFW 7**	13,388
Avg. time p/application	3.1
Total Time (in minutes)	41503
Per Hour	60
Hours Worked (****Activity 25**)	**691.7**
***EFW 8**	
Avg. time p/application	2.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Backup in 2005-06 claim.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2		1	4	5
		**Activity Codes					
		11	12	13	14	15	16
Agustin, Hulmaro	Admissions Clerk	9.5	2	15	2	5	0
Alegre, Rose	Division Secretary Clerk	9.5	2	15	2	5	0
Arreola, Rafael	Admissions Clerk	9.5	2	15	2	5	0
Ascensio, Wendy	Admissions Clerk	9.5	2	15	2	5	0
Ayala, Anthony	Admissions Clerk	9.5	2	15	2	5	0
Badzey, Paul	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bays, Joyce	Admissions Clerk	9.5	2	15	2	5	0
Belio, Francesca	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bernabe, Delfina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Bland, Trenain	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Boss, Brian	Admissions Clerk	9.5	2	15	2	5	0
Boss, Sue	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Campbell, Christina	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Cary, Joan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Castillo, Raquel	Admissions Clerk	9.5	2	15	2	5	0
Castro, Nancy	Admissions Clerk	9.5	2	15	2	5	0
Clegg, Matthew	Admissions Clerk	9.5	2	15	2	5	0
Connelly, Frances	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
David, Mila	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Del Real, Juan David	Admissions Clerk	9.5	2	15	2	5	0
Deutschman, Susan	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Duenas, Corrine	Admissions Clerk	9.5	2	15	2	5	0
Ear, Joey	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Eckheart, Brian	Admissions Clerk	9.5	2	15	2	5	0
Estrella, Hugo	Admissions Clerk	9.5	2	15	2	5	0
Fehn, Letty	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Gaia, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Gardner, Marisa	Admissions Clerk	9.5	2	15	2	5	0
Guevara, Heidy	Admissions Clerk	9.5	2	15	2	5	0
Hawkins, Niki	Admissions Clerk	9.5	2	15	2	5	0
Hernandez, Peter	Admissions Clerk	9.5	2	15	2	5	0
Kanamaki, Brandon	Admissions Clerk	9.5	2	15	2	5	0
Kapao, Jill	Admissions Clerk	9.5	2	15	2	5	0
Kline, Gayle	Admissions and Records Clerk	9.5	2	15	2	5	0
Krause, Amy	Admissions Clerk	9.5	2	15	2	5	0
Ladmirault, Barbara	Admissions and Records Clerk	9.5	2	15	2	5	0
Leyh, Josephine	Admissions Clerk	9.5	2	15	2	5	0
Leyva, Sylvia	Admissions and Records Clerk	9.5	2	15	2	5	0
Littrell, Christinia	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Sharon	Admissions Clerk	9.5	2	15	2	5	0
Littrell, Shawna	Admissions Clerk	9.5	2	15	2	5	0
Long, Robert	Admissions Clerk	9.5	2	15	2	5	0
Luico, Dolores	Admissions Clerk	9.5	2	15	2	5	0

Schedule 2
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2		1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Madan, Juan	Admissions Clerk	9.5	2	15	2	5	0
Matsumoto, David	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Joshua	Admissions Clerk	9.5	2	15	2	5	0
Mejia, Natasha	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Mejias, Tristan	Admissions Clerk	9.5	2	15	2	5	0
Miramontes, Marianne	Admissions Clerk	9.5	2	15	2	5	0
Montes, Edgar	Admissions Clerk	9.5	2	15	2	5	0
Morry, Ellie	Admissions Clerk	9.5	2	15	2	5	0
Nosal, Barbara	Admissions Clerk	9.5	2	15	2	5	0
Otero, Jessica	Admissions Clerk	9.5	2	15	2	5	0
Otero, Kathleen	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Pagano, Doreen	Admissions and Records Clerk	9.5	2	15	2	5	0
Pendleton, Ben	Sr. Admissions and Records Clerk	9.5	2	15	2	5	0
Pimentel, Margaret	Admissions Clerk	9.5	2	15	2	5	0
Quiroz, Alejandro	Admissions Clerk	9.5	2	15	2	5	0
Ramirez, Liz	Admissions Clerk	9.5	2	15	2	5	0
Reichert, Andrea	Admissions Clerk	9.5	2	15	2	5	0
Roberson, Kevin	Admissions Clerk	9.5	2	15	2	5	0
Rodarte, George	Admissions Clerk	9.5	2	15	2	5	0
Rodriguez, Reyes	Admissions Clerk	9.5	2	15	2	5	0
Roldan, Yolanda	Admissions Clerk	9.5	2	15	2	5	0
Rosales, Veronica	Admissions Clerk	9.5	2	15	2	5	0
Ruiz, Sandra	Admissions Clerk	9.5	2	15	2	5	0
Ryan, Pat	Admissions Clerk	9.5	2	15	2	5	0
Santillan, Suzie	Admissions Clerk	9.5	2	15	2	5	0
Simentel, Yvette	Admissions Clerk	9.5	2	15	2	5	0
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Torres, Patricia	Admissions Clerk	9.5	2	15	2	5	0
Torres, Theresa	Inter. Admin. and Records Clerk	9.5	2	15	2	5	0
Ulloa, Dominick	Admissions Clerk	9.5	2	15	2	5	0
Valencia, Erica Ceja	Admissions Clerk	9.5	2	15	2	5	0
Valles, Katie	Admissions Clerk	9.5	2	15	2	5	0
Valles, Lisha	Program Facilitator	9.5	2	15	2	5	0
Woszack, Betty	Admissions Clerk	9.5	2	15	2	5	0
Average		**9.5**	**2.0**	**15.0**	**2.0**	**5.0**	**0.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 2A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from District.
Findings:

Staff	Title	06-07	
Agustin, Hulmaro	Admissions Clerk	13.79	
Alegre, Rose	Division Secretary Clerk	35.42	
Arreola, Rafael	Admissions Clerk	14.09	A
Ascensio, Wendy	Admissions Clerk	14.09	A
Ayala, Anthony	Admissions Clerk	14.09	A
Badzey, Paul	Inter. Admin. and Records Clerk	29.99	
Bays, Joyce	Admissions Clerk	14.09	A
Bello, Francesca	Inter. Admin. and Records Clerk	30.65	
Bernabe, Delfina	Inter. Admin. and Records Clerk	29.99	
*Bland, Trenain	Inter. Admin. and Records Clerk	14.09	A
Boss, Brian	Admissions Clerk	10.77	
Boss, Sue	Inter. Admin. and Records Clerk	29.26	
Campbell, Christina	Inter. Admin. and Records Clerk	32.26	
Cary, Joan	Senior Admissions and Records	37.19	
Castillo, Raquel	Admissions Clerk	9.76	
Castro, Nancy	Admissions Clerk	13.79	
Clegg, Matthew	Admissions Clerk	14.09	A
Connelly, Frances	Inter. Admin. and Records Clerk	14.09	A
David, Mila	Inter. Admin. and Records Clerk	14.09	A
Del Real, Juan David	Admissions Clerk	14.09	A
Deutschman, Susan	Inter. Admin. and Records Clerk	14.09	A
Duenas, Corrine	Admissions Clerk	14.09	A
Ear, Joey	Inter. Admin. and Records Clerk	30.72	
Eckheart, Brian	Admissions Clerk	14.09	A
Estrella, Hugo	Admissions Clerk	14.09	A
Fehn, Letty	Inter. Admin. and Records Clerk	14.09	A
Gaia, Barbara	Admissions Clerk	14.09	A
Gardner, Marisa	Admissions Clerk	10.77	
Guevara, Heidy	Admissions Clerk	14.09	A
Hawkins, Niki	Admissions Clerk	14.09	A
Hernandez, Peter	Admissions Clerk	10.25	
Kanamaki, Brandon	Admissions Clerk	14.09	A
Kapao, Jill	Admissions Clerk	14.09	A
Kline, Gayle	Admissions and Records Clerk	37.19	
Krause, Amy	Admissions Clerk	14.09	A
Ladmirault, Barbara	Admissions and Records Clerk	30.87	
Leyh, Josephine	Admissions Clerk	14.09	A
*Leyva, Sylvia	Admissions and Records Clerk	14.09	A
Littrell, Christinia	Admissions Clerk	10.77	
Littrell, Sharon	Admissions Clerk	12.19	
Littrell, Shawna	Admissions Clerk	8.64	
Long, Robert	Admissions Clerk	14.09	A
Luico, Dolores	Admissions Clerk	14.09	A

Schedule 2A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR's

Staff	Title	06-07	
Madan, Juan	Admissions Clerk	14.09	A
Matsumoto, David	Admissions Clerk	14.09	A
Mejia, Joshua	Admissions Clerk	14.09	A
Mejia, Natasha	Inter. Admin. and Records Clerk	32.13	
Mejias, Tristan	Admissions Clerk	14.09	A
Miramontes, Marianne	Admissions Clerk	9.56	
*Montes, Edgar	Admissions Clerk	14.09	A
Morry, Ellie	Admissions Clerk	14.09	A
Nosal, Barbara	Admissions Clerk	14.09	A
*Otero, Jessica	Admissions Clerk	14.09	A
Otero, Kathleen	Inter. Admin. and Records Clerk	29.26	
Pagano, Doreen	Admissions and Records Clerk	28.75	
Pendleton, Ben	Sr. Admissions and Records Clerk	33.74	
Pimentel, Margaret	Admissions Clerk	8.64	
*Quiroz, Alejandro	Admissions Clerk	14.09	A
Ramirez, Liz	Admissions Clerk	14.09	A
Reichert, Andrea	Admissions Clerk	14.09	A
Roberson, Kevin	Admissions Clerk	14.09	A
Rodarte, George	Admissions Clerk	14.09	A
Rodriguez, Reyes	Admissions Clerk	14.09	A
Roldan, Yolanda	Admissions Clerk	14.09	A
Rosales, Veronica	Admissions Clerk	14.09	A
Ruiz, Sandra	Admissions Clerk	14.09	A
*Ryan, Pat	Admissions Clerk	14.09	A
Santillan, Suzie	Admissions Clerk	14.09	A
Simentel, Yvette	Admissions Clerk	10.25	
Stillwagon, Lavonne	Inter. Admin. and Records Clerk	14.09	A
Torres, Patricia	Admissions Clerk	9.76	
Torres, Theresa	Inter. Admin. and Records Clerk	14.09	A
*Ulloa, Dominick	Admissions Clerk	14.09	A
*Valencia, Erica Ceja	Admissions Clerk	14.09	A
Valles, Katie	Admissions Clerk	14.09	A
Valles, Lisha	Program Facilitator	41.01	
Woszack, Betty	Admissions Clerk	14.09	A
Average		**17.11**	

A: Average used.

Conclusion: Findings go forward to EFCW -2

Schedule 3
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Backup paperwork in 2005-06 claim.
Findings:

Staff	Title	*EFW Workload Multiplier					
		7			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Carrillo, Juan	Student Affairs Technician	3	1	1	5	2	4
Flores, Lina	Financial Aid Technician	2	3	4	4	2	3
Leguizemon, Adriana	Student Affairs Technician	3	2	2	5	3	2
Lipsohn, Rhonda	Financial Aid Specialist	5	7	3	4	6	2
Longoria, Armando	Student Affairs Technician	2	2	1	5	1	3
Lopez, Elena	Financial Aid Specialist	5	7	3	4	6	2
Neal, Eugenia	Student Affairs Technician	3	3	1	5	3	1.5
Quiroz, Jamie	Financial Aid Specialist	2	2	2	3	5	1
Ramirez, Yesenia	Financial Aid Specialist	3	1	1	5	1	3
Tafoya, Yvette	Financial Aid Specialist	3	3	2	3	5	3
Vejar, Yajayra	Student Affairs Technician	5	1	2	5	1	2
Vera, Silvia	Student Affairs Technician	2	2	2	3	2	2
***Westby, Kimberly	Student Affairs Assistant	*4*	*20*	*30*	*10*	*30*	*10*
Average		**3.2**	**2.8**	**2.0**	**4.3**	**3.1**	**2.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

***Kimberly Westby's** time not used, not consistent with rest of the averages received.

Schedule 3A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Average PHR's

Purpose: To list PHR's for each year and calculate an average.
Source: PHR's from distict
Findings:

Staff	Title	06-07	
Carrillo, Juan	Student Affairs Technician	28.61	
Flores, Lina	Financial Aid Technician	26.94	A
Leguizemon, Adriana	Student Affairs Technician	32.94	
Lipsohn, Rhonda	Financial Aid Specialist	42.86	
Longoria, Armando	Student Affairs Technician	30.69	
Lopez, Elena	Financial Aid Specialist	37.02	
Neal, Eugenia	Student Affairs Technician	32.16	
Quiroz, Jamie	Financial Aid Specialist	37.02	
Ramirez, Yesenia	Financial Aid Specialist	36.14	
Sanchez, Hector	Custodian		
Tafoya, Yvette	Financial Aid Specialist	33.68	
Vejar, Yajayra	Student Affairs Technician	32.16	
Vera, Silvia	Student Affairs Technician	31.37	
Westby, Kimberly	Student Affairs Assistant	42.78	
Average		**34.18**	

Conclusion: Findings go forward to EFCW-2

A: Average used.

Schedule 4
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-07
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals								
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1. Enrolled Students	55,682	59,994	61,470	64,189	66,680	63,213	60,043	56,575	56,864
EFC 2	1.8-1 2. Paid Enrollment fees	34,733	37,109	37,787	37,796	38,273	34,561	30,866	26,573	24,780
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	20,780	22,662	22,819	25,419	26,985	26,946	27,686	25,604	26,676
EFC 4	1.8-2 1. Delinquencies collections	16,782	20,186	22,879	22,101	23,946	22,924	21,118	29,855	27,362
EFC 5	1.8-2 2. Refunds	1,543	1,660	1,589	1,498	1,749	1,544	1,749	1,426	798
EFW 6	1.8-3 1. Waivers Requested	X	Client reported on their EFCW 1.8-3 form that "Financial Aid does not collect this data".							
EFW 7	1.8-3 2. Waivers Approved	X -	20,696	20,782	22,702	24,920	25,894	26,726	24,534	13,388
EFW 8	1.8-3 (1-2) Waivers Denied	X	Not able to be calculated due to client not able to provide EFW 6.							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos For 2006 Summer Term

Data Current As Of January 22, 2008 09:27:13

Total Headcount	13,214

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Summer 13,214
Fall 23,805
Spring 23,842
Total 60,861

California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2006 Fall Term

Data Current As Of January 22, 2008 09:27:07

Total Headcount	23,805

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California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerritos
For 2007 Spring Semester

Data Current As Of January 22, 2008 09:26:57

Total Headcount	23,842

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CERRITOS COLLEGE
District

ADMISSIONS & RECORDS
Department/Location

STEPHANIE MURGUIA
Employee Name

DEAN, ADMISSIONS & RECORDS
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date _____

If you have any questions, please contact [illegible] at [illegible]

PLEASE SUBMIT THIS INFORMATION BY 4/12/07 ; TO [illegible]

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Cerritos Community College District
308/95 Enrollment Fee Collections Waivers
Admissions and Records Dept.

Purpose: List of staff involved in the Enrollment Fee Collection and Cashier Functions
Source: EFCW 1.7-2 forms, by fiscal year, provided for each individual on this list.

ref #	NAME	TITLE
1	Hulmaro Agustin	Admissions Clerk
2	Rose Alegre	Division Secretary Clerk - SSA II
3	Rafael Arreola	Admissions Clerk
4	Wendy Ascensio	Admissions Clerk
5	Anthony Ayala	Admissions Clerk
6	Paul Badzey	Intermediate A/R Clerk - SSA I
7	Joyce Bays	Admissions Clerk
8	Francesca Bello	Admissions Clerk
9	Delfina Bernabe	Intermediate A/R Clerk - SSA I
10	Trenain Bland	Intermediate A/R Clerk - SSA II
11	Brian Boss	Admissions Clerk
12	Sue Boss	Intermediate A/R Clerk - SSA I
13	Christina Campbell	Intermediate A/R Clerk - SSA I
14	Joan Cary	Sr. A/R Clerk - SSA II
	Raquel Castillo	Admissions Clerk
	Nancy Castro	Admissions Clerk
17	Matthew Clegg	Admissions Clerk
18	Frances Connelly	Intermediate A/R Clerk
19	Mila David	Intermediate A/R Clerk
20	Juan D. Del Real	Admissions Clerk
21	Susan Deutschman	Intermediate A/R Clerk
22	Corrine Duenas	Admissions Clerk
23	Joey Ear	Intermediate A/R Clerk - SSA I
24	Brian Eckheart	Admissions Clerk
25	Hugo Estrella	A/R Clerk
26	Letty Fehn	Intermediate A/R Clerk
27	Barbara Gaia	Admissions Clerk - A/R Clerk
28	Marisa Gardner	Admissions Clerk
29	Heidy Guevara	Admissions Clerk
30	Niki Hawkins	Admissions Clerk
31	Peter Fernandez	Admissions Clerk
32	Brandon Kanamaki	Admissions Clerk
33	Jill Kapao	Admissions Clerk
34	Gayle Kline	A/R Clerk
35	Amy Krause	Admissions Clerk
36	Barbara Ladmirault	A/R Clerk
37	Josephine Leyh	Admissions Clerk
38	Sylvia Leyva	A/R Clerk
	Christina Littrell	Admissions Clerk
40	Sharon Littrell	Admissions Clerk
41	Shawna Littrell	Admissions Clerk
42	Robert Long	Admissions Clerk
43	Dolores Lucio	Admissions Clerk
44	Juan Madan	Admissions Clerk
45	David Matsumoto	Admissions Clerk
46	Joshua Mejia	Admissions Clerk
47	Natasha Mejia	Intermediate A/R Clerk - SSA I
48	Tristan Mejias	Admissions Clerk
49	Marianne Miramonte	Admissions Clerk
50	Edgar Montes	Admissions Clerk
51	Ellie Morry	Admissions Clerk
52	Barbara Nosal	Admissions Clerk - A/R Clerk
53	Jessica Otero	Admissions Clerk
54	Kathleen Otero	Intermediate A/R Clerk - SSA I
55	Doreen Pagano	A/R Clerk
56	Ben Pendleton	Sr. A/R Clerk - SSA II
57	Margaret Pimentel	Admissions Clerk
58	Alejandro Quiroz	Admissions Clerk
59	Liz Ramirez	Admissions Clerk
60	Andrea Reicheart	Admissions Clerk
61	Kevin Roberson	Admissions Clerk
62	George Rodarte	Admissions Clerk
63	Reyes Rodriguez	Admissions Clerk
64	Yolanda Rolan	Admissions Clerk
65	Veronica Rosales	Admissions Clerk
66	Sandra Ruiz	Admissions Clerk
67	Pat Ryan	Admissions Clerk
68	Suzie Santillan	Admissions Clerk
69	Yvette Simentel	Admissions Clerk
70	Lavonne Stillwagon	Intermediate A/R Clerk - SSA II
71	Patricia Torres	Admissions Clerk
72	Theresa Torres	Intermediate A/R Clerk - SSA I
73	Dominick Ulloa	Admissions Clerk
74	Erica Ceja Valencia	Admissions Clerk
75	Katie Valles	Admissions Clerk
76	Lisha Valles	Program Facilitator - SSA II
77	Betty Woszack	Admissions Clerk

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid Office.
Department/Location

Juan C. Carrillo
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451 x2392
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College — District

Financial Aid — Department/Location

Lina Flores — Employee Name

Financial Aid Tech. — Exact Position Title

562/860-2457 ext. 2104 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lina Flores — Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College College
District

Financial Aid
Department/Location

Adriana Leguizamón
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

X2387

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Adriana Leguizamón Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College District
District

Financial Aid
Department/Location

Ronda Lipsohn
Employee Name

Financial Aid Specialist
Exact Position Title

(562)860-2451 x2386
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ronda Lipsohn Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College — District

Financial Aid — Department/Location

Armando S. Longoria — Employee Name

Student Affairs Technician — Exact Position Title

(562) 860-2461 Ext 2397 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 AL		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Armando Longoria Date 7/27/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District

Financial Aid Office — Department/Location

Elena Lopez — Employee Name

Financial Aid Specialist — Exact Position Title

562 860-2451 x2373 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 & 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elena G Lopez — Date April 27 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Merritos College
District

Student Affairs /finaid
Department/Location

Eugenia Neal
Employee Name

Student Affairs Technician
Exact Position Title

562) 860-2451 x2397
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eugenia Neal Date 4·26·06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Jamie Quiroz
Employee Name

Financial Aid Specialist
Exact Position Title

x3370
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~5~~		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jamie Quiroz Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial Aid
Department/Location

Yesenia Ramirez
Employee Name

Financial Aid Specialist
Exact Position Title

5628602451 (12mo/11mo/10mo/hrly)
Telephone # x2389 Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid Office — Department/Location
Yvette Tafoya — Employee Name
Financial Aid Specialist — Exact Position Title
(562) 8602451 — Telephone #
X. 2390
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvette Tafoya Date 04/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District
Financial Aid — Department/Location
Yalaura Vejar — Employee Name
Student Affairs Technician — Exact Position Title
(562)860-2451 X2397 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yalaura Vejar Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos College
District

Financial aid
Department/Location

Silvia Vera
Employee Name

Student Affairs Technician
Exact Position Title

(562) 860-2451
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Vera Date 4-27-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College — District

Financial Aid Office — Department/Location

Kimberly Wesley — Employee Name

Student Affairs Assistant — Exact Position Title

562) 860-2451 x 2573 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly B. Wesley — Date 4/27/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Term	Students(1.1)	Paid Fees (1.2)	Exempt (1.3)	Receivable(2.1)	Refunds(2.2)
SU-2006	12,799	5,205	5,472	5,983	143
FA-2006	21,950	10,746	9,672	10,372	289
SP-2007	22,115	10,725	9,636	11,007	366
	56,864	**24,780**	**26,676**	**27,362**	**798**

EFCW 1.6-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: CERRITOS CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 6,178,162	$ 4,823,954	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 123,563	$ 96,479	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 1-3-2008

Kim Nesbitt
Employee Name: (print)

Admin Dean Student Support Services
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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2006-2007 BOGG Fee Summary								
		FALL 06		SPRING 07		SUMMER 07		2006-2007
BOGG A	STUDENTS	84		87		56		116
BOGG B	STUDENTS	6,574		6,461		3,426		8,743
BOGG C	STUDENTS	2,787		2,733		1,369		3,393
Total Unduplicated:		**9,445**		**9,281**		**4,851**		**12,252**
BOGG A	CSID	$840.00		$870.00		$220.00		$1,930.00
	HEALTH	$0.00		$0.00		$0.00		$0.00
	ENROLL	$16,302.00		$12,500.00		$4,500.00		$33,302.00
Total		**$17,142.00**		**$13,370.00**		**$4,720.00**		**$35,232.00**
BOGG B	CSID	$65,350.00		$64,260.00		$13,332.00		$142,942.00
	HEALTH	$0.00		$0.00				$0.00
	ENROLL	$1,607,151.00		$1,216,370.00		$360,530.00		$3,184,051.00
Total		**$1,672,501.00**		**$1,280,630.00**		**$373,862.00**		**$3,326,993.00**
BOGG C	CSID	$27,790.00		$27,190.00		$5,364.00		$60,344.00
	HEALTH	$0.00		$0.00				$0.00
	ENROLL	$712,855.00		$541,960.00		$146,570.00		$1,401,385.00
Total		**$740,645.00**		**$569,150.00**		**$151,934.00**		**$1,461,729.00**
Grand Total		**$2,430,288.00**		**$1,863,150.00**		**$530,516.00**		**$4,823,954.00**

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Cerritos Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 32.02	
	AVERAGE CLERK		$ 14.09
	AVERAGE DEAN	$ 68.52	$ 80.36
	AVERAGE DIRECTOR	$ 63.08	$ 82.60
	AVERAGE EXECUTIVE SECRETARY	$ 35.48	
	AVERAGE FACULTY MEMBER	$ 53.73	
	AVERAGE SECRETARY	$ 26.40	$ 35.09
	AVERAGE TECHNICIAN		$ 26.94
	AVERAGE VICE PRESIDENT	$ 96.37	
AGUSTIN, HULMARO	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
ALEGRE, ROSE	STUDENT SERVICES ASST II	$ 31.85	$ 35.42
AVALA, ANTHONY	A&R ASSISTANT	$ 9.76	$ 9.76
BADZEY, PAUL	STUDENT SERVICES ASST I	$ 28.31	$ 29.99
BELLO, FRANCESCA	PROGRAM ASSITANT II	$ 28.45	$ 30.65
BERNABE, DELFINA	STUDENT SERVICE ASST I	$ 28.31	$ 29.99

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
BETTINO, M.L.	DEAN, TECH TRAINING AND DISTANCE	$ 79.00	$ 83.68
BOSS, BRIAN	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
BOSS, SUE	STUDENT SERVICE ASST I	$ 27.62	$ 29.26
CAMPBELL, CHRISTINA	STUDENT SERVICES ASST I	$ 29.00	$ 32.26
CARRILLO, JUAN	STUDENT AFFAIRS TECHNICIAN	$ 24.83	$ 28.61
CARLOS, SHARLEEN	ADMIN. SECRETARY		$ 41.73
CARY, JOAN	STUDENT SERVICES ASST II	$ 35.11	$ 37.19
CASTILLO, RAQUEL	REGISTRATION ACCT CLK	$ 9.76	$ 9.76
CASTRO, NANCY	STUDENT AFFAIRS TECHNICIAN	$ 13.79	$ 13.79
CHESTER, ROBERT	FACULTY	$ 62.89	$ 62.89
CHOMIAK, RENEE DELONG	DEAN OF COUNSELING SERVICES	$ 56.10	$ 70.31
COMPTON, KATHY	ADMINISTRATIVE SECRETARY	$ 41.45	-----
CONVEY, CYNTHIA	MANAGER	$ 69.86	$ 77.69
DRONEY, DOUGLAS	SENIOR APPLICATIONS ANALYST	$ 62.07	$ 65.75
EAR, JOEY	STUDENT SERVICES ASST I	$ 27.62	$ 30.72
FARMER, WILLIAM	VICE PRESIDENT ACADEMIC AFFAIRS		$ 106.10
FLORES, LINA	FINANCIAL AID TECHNICIAN	$ 30.36	-----
FLORES-CHURCH, ADRIANA	ASSISTANT DIRECTOR, HUMAN RESOURCES	$ 56.92	$ 62.16
FUJIMOTO, NORMAN	INSTRUCTIONAL DEAN (Terminated 01/03/07)	$ 82.96	$ 87.87

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
GALE, CHARLES	COORD STUDENT HEALTH & WELFARE (Termated 5/31/07(	$ 58.91	$ 62.40
GARDNER, MARISA	REGISTRATION ACCT CLK	$ 10.25	$ 10.77
GRINDEL, JOHN	VP OF ACADEMIC AFFAIRS	$ 91.17	-----
HART, DEANNA	INTERIM PAYROLL MANAGER	$ 44.02	$ 48.23
HAWKINS, NIKI	REGISTRATION ACCT CLK	$ 10.77	------
HERNANDEZ, PETER	A&R ASSISTANT	$ 9.76	$ 10.25
HIGDON, JO ANN	VP OF BUSINESS SERVICES	$ 96.01	$ 104.75
JANKOWSKI, MIKE	OPERATIONS MANAGER TERM 1/31/06	$ 26.39	
JOHNSON, ADOLPH	DEAN OF ACADEMIC AFFAIRS	$ 85.12	$ 90.16
KLINE, GAYLE	ACCOUNT TECHNICIAN III	$ 33.44	$ 37.19
KREMER, NICHOLAS	EX DEAN - C.I.T.E.	$ 77.21	$ 85.87
KRICHMAR, LEE	DIRECTOR, INFORMATION TECHNOLOGY	$ 72.95	$ 83.68
LADMIRAULT, BARBARA	A&R ASSISTANT	$ 29.14	$ 30.87
LEGUIZEMON, ANDRIANA	STUDENT AFFAIRS TECHNICIAN	$ 29.62	$ 32.94
LIPSOHN, RHONDA	FINANCIAL AID SPECIALIST	$ 40.47	$ 42.86
LITTRELL, CHRISTINIA	REGISTRATION ACCT CLK	$ 10.77	$ 10.77
LITTRELL, SHARON	LEAD REG ACCT CLERK	$ 12.19	$ 12.19
LITTRELL, SHAWNA	CLERK	$ 8.64	$ 8.64
LONGORIA, ARMANDO	STUDENT AFFAIRS TECHNICIAN	$ 27.34	$ 30.69

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
LOPEZ, ELENA	FINANCIAL AID SPECIALIST	$ 34.16	$ 37.02
MEIJA, NATASHA	STUDENT SERVICES ASST II	$ 28.56	$ 32.13
MEIJA, TRISTAN	REGISTRATION ACCT CLK	$ 9.56	------
MEJIA, ALPHONSE	NETWORK ADMINISTRATOR	$ 53.53	$ 59.53
MILLER, DONNA	INSTRUCTIONAL DEAN	$ 59.37	$ 62.89
MIRAMONTES, MARIANNE	INTERMEDIATE TYPIST CLK	$ 9.56	$ 9.56
MORRIS, IGERNA	SECRETARY	$ 35.17	$ 39.11
MURGUIA, STEPHANIE	DEAN OF ADMISSIONS AND RECORDS	$ 72.95	$ 77.27
NEAL, EUGENIA	STUDENT AFFAIRS TECHNICIAN	$ 30.36	$ 32.16
NOLAN, JENINE	DEAN HEALTH OCCUPATIONS		$ 87.06
OCAMPO, LUZ	SECRETARY CLERK	$ 36.36	$ 31.54
O'ROURKE, DANIEL	ASST DIRECTOR, HUMAN RESOURCES	$ 85.58	$ 93.36
OTERO, KATHLEEN	STUDENT SERVICE ASST I	$ 27.62	$ 29.26
PAGANO, DOREEN	INTERMEDIATE TYPIST CLK	$ 27.14	$ 28.75
PENDLETON, BEN	STUDENT SERVICES ASST II	$ 31.85	$ 33.74
PIMENTEL, MARGARET	CLERK	$ 8.64	$ 8.64
QUIROZ, JAMIE	FINANCIAL AID SPECIALIST	$ 33.29	$ 37.02
RAMIREZ, YESENIA	FINANCIAL AID SPECIALIST	$ 33.10	$ 36.14
RICHEY, TOM	FACILITIES MANAGER	$ 58.75	$ 52.71

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
RIFFLE, ROBERT	DIRECTOR OF PHYSICAL PLANT	$ 64.55	$ 70.55
RIZKALLAH, BERLANTI "Lola"	DIRECTOR OF FISCAL SERVICES	$ 78.19	$ 82.82
RODRIGUEZ, ELIZABETH	SECRETARY	$ 28.56	$ 30.65
SHELDON, CAROLINE	DIRECTOR OF RESEARCH & PLANNING	$ 66.65	-------
SIMENTEL, YVETTE	REGISTRATION ACCT CLK	$ 9.76	$ 10.25
SMITH, DAN	DEAN PE/ ATHLETICS		$ 93.86
TAFOYA, YVETTE	FINANCIAL AID SPECIALIST	$ 29.95	$ 33.68
THURY, CHERYL	SECRETARY	$ 38.74	$ 43.09
TORRES, PATRICIA	A&R ASSISTANT	$ 9.76	$ 9.76
VALLES, LISHA	STUDENT SERVICE ASST II	$ 36.87	$ 41.01
VEGA, KENNETHIA	SECRETARY	$ 48.42	-------
VEJAR, YAJAYRA	STUDENT AFFAIRS TECHNICIAN	$ 27.51	$ 32.16
VELA, NOELIA	PRESIDENT	$ 128.37	$ 135.97
VERA, SILVIA	STUDENT AFFAIRS TECHNICIAN	$ 26.84	$ 31.37
WESTBY, KIMBERLY	STUDENT AFFAIRS SPECIALIST	$ 40.39	$ 42.78

Schedule 5
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers							
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,254,325	$ 2,199,774	$ 2,460,448	$ 2,643,642	$ 4,021,020	$ 5,806,101	$ 6,173,163	$ 4,809,022
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ 123,463	$ 96,180
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 157,803	For 00-01 through 05-06 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34	$ 24.00
Total # of credits	Line 4A divided by unit fee		199,979	223,677	240,331	256,606	248,761	264,488	200,375
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ 240,684	$ 182,341
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 45,087	$ 43,995	$ 49,209	$ 52,873	$ 80,420	$ 116,122	$ 123,463	$ 96,180
(4A X 7%)	7% of Fees Waived (99-00 only)	$ 157,803							
1.8-4 5.	Credit Units Waived		$ 181,981	$ 203,546	$ 218,701	$ 233,511	$ 226,373	$ 240,684	$ 182,341
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 202,890**	**$ 225,976**	**$ 252,755**	**$ 271,574**	**$ 313,931**	**$ 342,495**	**$ 364,147**	**$ 278,521**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2006-07: Summer and Fall $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average$24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Cerritos
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$64,136,445	$60,733,722	$-642,722	$60,091,000
ENROLL FEE ADMIN (2%)	103,999	95,679	8,320	103,999
APPRENTICE ALLOWANCE	926,928	874,128	52,800	926,928
BASIC SKILLS	361,729	0	361,729	361,729
S.F.A.A.	745,558	685,914	59,644	745,558
E.O.P.S.	1,095,924	1,003,794	92,130	1,095,924
C.A.R.E.	99,217	87,142	12,075	99,217
D.S.P.S.	1,528,975	1,406,657	122,318	1,528,975
STATE HOSPITALS	0	0	0	0
CALWORKS	508,387	467,716	40,671	508,387
MATRICULATION (CREDIT)	1,034,338	951,591	82,747	1,034,338
MATRIC. (NONCREDIT)	168,592	155,104	13,488	168,592
FAC.& STAFF DIVERSITY	18,890	17,378	1,512	18,890
PART-TIME FAC. ALLO.	788,495	725,416	63,079	788,495
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	189,225	174,087	15,138	189,225
SCHDL. MAINT. & REPAIR	189,242	174,102	15,140	189,242
TANF	110,727	101,869	8,858	110,727
ECON. DEVELOPMENT	729,501	511,141	101,640	612,781
NURSING EDUCATION	329,137	187,985	141,152	329,137
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	2,459,873	2,459,873	0	2,459,873
ONE TIME FUNDS				
TRANSITION PAYMENT	212,948	185,790	27,158	212,948
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	335,928	335,928	0	335,928
BASIC SKILLS -REAPPROP	325,937	325,937	0	325,937
CAR. TECH. TRAILER BIL	598,248	598,248	0	598,248
GEN. PUR. TRAILER BILL	1,170,387	1,170,387	0	1,170,387
INST. MATERIAL TRAILER	706,238	706,238	0	706,238
SCHLD.MAINT. TRAILER B	706,238	706,238	0	706,238
FACULTY STAFF DEV	75,179	75,179	0	75,179
TOTAL	$79,708,243	$74,956,005	$590,073	$75,546,078

FISCAL SERVICES:06/22/07 44055.075 12:14 PM:EM
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Schedule 5A
Cerritos Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 263.78	$ 161.94	$ 172.18	$ 179.33	$ 209.39	$ 389.93		
	EFCW-1 B. 1. b.		$ 136.48	$ 102.36	$ 215.46	$ 185.80	$ 286.86	$ 987.86		
	EFCW-1 B. 2. a.					$ 139,827.37				
	EFCW-1 B. 2. b.		$ 113,332.48	$ 113,800.16	$ 123,894.10	$ 74.32	$ 93,029.57	$ 176,511.51		$ 84,657.02
	EFCW-1 B. 2. c.		$ 68.24	$ 68.24	$ 71.82		$ 81.96	$ 87.56		
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 113,800.98	$ 114,132.70	$ 124,353.56	$ 140,266.82	$ 93,607.78	$ 177,976.86	$ -	$ 84,657.02
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 202,890.00	$ 225,976.00	$ 252,755.00	$ 271,574.00	$ 313,931.00	$ 342,495.00		$ 278,521.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (89,089.02)	$ (111,843.30)	$ (128,401.44)	$ (131,307.18)	$ (220,323.22)	$ (164,518.14)	$ -	$ (193,863.98)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 113,800.98**	**$ 114,132.70**	**$ 124,353.56**	**$ 140,266.82**	**$ 93,607.78**	**$ 177,976.86**	**$ -**	**$ 84,657.02**

California Home

Tuesday, January 22, 2008

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerritos College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 09:27:33

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	19	3,560
BOGW - Part A-2 based on SSI recipient status	97	19,015
BOGW - Part A-3 based on general assistance recipient status	8	2,915
BOGW - Part B based on income standards	9,386	3,335,066
BOGW - Part C based on financial need	3,875	1,437,861
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	78
Fee Waiver – Dependent of (children) deceased or disabled Veteran	22	10,527

Total 13,388

Total Amount = $ 4,809,022

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 29, 2009

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8895

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Cerritos Community College District CC19080

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Cerritos Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

) Claimant Identification Number: CC19080

(02) Claimant Name: Cerritos Community College District
County of Location: Los Angeles
Street Address or P.O. Box: 11110 Alondra Boulevard
City: Norwalk | State: CA | Zip Code: 90650

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 390,418
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 380,418
Due from State	(08)	(17) $ 380,418
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	345,625
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	84,657
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	148,792
(32) EFCW-1, (09)	103,999
(33) EFCW-1, (10)	84,657
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**

Berlanti M Rizkallah — 1/28/09

Berlanti "Lola" Rizkallah — Director of Fiscal Services
Type or Print Name — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

) Claimant

ritos Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 345,625.43	$ -	$ -	$ -	$ -	$ 345,625.43
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Prep district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
Waiving student fees	$ 84,657.02	$ -	$ -	$ -	$ -	$ 84,657.02
Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
tal Direct Costs	$ 430,282.45	$ -	$ -	$ -	$ -	$ 430,282.45

t Costs		
direct Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.58%
tal Indirect Costs	[Line (06) x line (05)(a)]	$ 148,791.67
tal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 579,074.12
duction		
s: Enrollment Fee Revenue offset		$ 103,999.00
s: Enrollment Fee Waiver offsets		$ 84,657.02
l Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 390,418.10

06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions Office Staff Various	$17.11	9,003.5	$ 154,049.89				
Calculating total enrollment fee to be collected Admissions Office Staff Various	$17.11	826.0	$ 14,132.86				
Answering student's questions regarding enrollment fee collection Admissions Office Staff Various	$17.11	6,195.0	$ 105,996.45				
Updating written and computer records for enrollment fee information Admissions Office Staff Various	$17.11	1,895.5	$ 32,432.01				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions Office Staff Various	$17.11	2,280.2	$ 39,014.22				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 345,625.43	$ -	$ -	$ -	$ -

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Cerritos Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$34.18	714.0	$ 24,404.52				
Receiving waiver applications Financial Aid Office Staff Various	$34.18	624.8	$ 21,355.66				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$34.18	446.3	$ 15,254.53				
Enter approved application information into district records; providing student award letter Financial Aid Office Staff Various	$34.18	691.7	$ 23,642.31				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 84,657.02	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	9,003.50	Admissions Office Staff	Various	$17.11	$154,049.89	Referencing student accounts and records	Calculating and collecting enrollment
06-07	826.00	Admissions Office Staff	Various	$17.11	$14,132.86	Calculating total enrollment fee to be collected	Calculating and collecting enrollment
06-07	6,195.00	Admissions Office Staff	Various	$17.11	$105,996.45	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment
06-07	1,895.50	Admissions Office Staff	Various	$17.11	$32,432.01	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment
06-07	2,280.20	Admissions Office Staff	Various	$17.11	$39,014.22	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment
	20,200.20	**Admissions Office Staff Total**			$345,625.43		
06-07	714.00	Financial Aid Office Staf	Various	$34.18	$24,404.52	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	624.80	Financial Aid Office Staf	Various	$34.18	$21,355.66	Receiving waiver applications	Waiving student fees
06-07	446.30	Financial Aid Office Staf	Various	$34.18	$15,254.53	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	691.70	Financial Aid Office Staf	Various	$34.18	$23,642.31	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,476.80	**Financial Aid Office Staff Total**			$84,657.02		
	22,677.00	**Grand Total**			$430,282.45		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$52,377,550		$52,377,550	$642,813	$51,734,737
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,074,428		2,074,428	2,495	2,071,933
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	76,026		76,026		76,026
Other Instructional Administration & Instructional Governance	6090	32,312		32,312		32,312
Instructional Support Services	6100					
Learning Center	6110					
Library	6120	1,719,352		1,719,352	339,625	1,379,727
Media	6130	385,260		385,260	21,001	364,259
Museums and Galleries	6140	25,749		25,749		25,749
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	2,342,709		2,342,709	189,878	2,152,831
Admissions and Records	6200	1,363,543		1,363,543	12,236	1,351,307
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,391,923		2,391,923		2,391,923
Matriculation and Student Assessment	6320	2,420,582		2,420,582	120,611	2,299,971
Transfer Programs	6330	157,050		157,050		157,050
Career Guidance	6340					
Other Student Counseling and Guidance	6390	1,180		1,180		1,180
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,290,268		1,290,268	73,752	1,216,516
Subtotal		$66,657,932	$0	$66,657,932	$1,402,411	$65,255,521

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$397,823		$397,823	$526	$397,297
Health Services	6440					
Student Personnel Admin.	6450	1,044,205		1,044,205		1,044,205
Financial Aid Administration	6460	1,610,706		1,610,706	12,732	1,597,974
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	269,885		269,885		269,885
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,039,410		2,039,410	2,039,410	0
Custodial Services	6530	1,994,974		1,994,974	1,994,974	0
Grounds Maintenance and Repairs	6550	782,524		782,524	782,524	0
Utilities	6570	2,518,495		2,518,495	2,518,495	0
Other	6590	47,178		47,178	47,178	0
Planning, Policy Making, and Coordination	6600	25,898		25,898	25,898	0
General Inst. Support Services	6700					
Community Relations	6710	1,158,678		1,158,678	1,158,678	0
Fiscal Operations	6720	4,674,080		4,674,080	4,674,080	0
Human Resources Management	6730	854,943		854,943	854,943	0
Noninstructional Staff Benefits & Incentives	6740	375,609		375,609	375,609	0
Staff Development	6750	227,936		227,936	227,936	0
Staff Diversity	6760	10,143		10,143	10,143	0
Logistical Services	6770	1,337,113		1,337,113	1,337,113	0
Management Information Systems	6780	3,899,925		3,899,925	3,899,925	0
Subtotal		$89,927,457	$0	$89,927,457	$21,362,575	$68,564,882

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Cerritos Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	596,033		596,033	596,033	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830	100,205		100,205		100,205
Economic Development	6840					
Other Community Services & Economic Development	6890	285,877		285,877	1,053	284,824
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	170,885		170,885	5,091	165,794
Farm Operations	6930					
Food Services	6940	167,569		167,569		167,569
Parking	6950					
Student and Co-curricular Activities	6960	789		789		789
Student Housing	6970					
Other	6990	213,593		213,593	408	213,185
Auxiliary Operations	7000					
Contract Education	7010	695,446		695,446		695,446
Other Auxiliary Operations	7090	219,741		219,741	137,725	82,016
Depreciation or Use Allowance - Building					1,801,231	
Depreciation or Use Allowance - Equipment					397,820	
(05) Total		$92,377,595	$0	$92,377,595	$24,301,936	$70,274,710
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.58%		
(07) Notes						

CERRITOS COMMUNITY COLLEGE DISTRICT

NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2007

NOTE 5 - CAPITAL ASSETS

Capital asset activity for the District for the fiscal year ended June 30, 2007, was as follows:

	Balance Beginning of Year	Additions	Deductions	Balance End of Year
Capital Assets Not Being Depreciated				
Land	$ 3,570,212	$ -	$ -	$ 3,570,212
Construction in progress	35,054,086	8,217,465	35,259,806	8,011,745
Total Capital Assets Not Being Depreciated	38,624,298	8,217,465	35,259,806	11,581,957
Capital Assets Being Depreciated				
Land improvements	54,920,894	32,723,380	-	87,644,274
Buildings and improvements	7,176,708	430,353	80,191	7,526,870
Total Capital Assets Being Depreciated	62,097,602	33,153,733	80,191	95,171,144
Total Capital Assets	100,721,900	41,371,198	35,339,997	106,753,101
Less Accumulated Depreciation				
Buildings and improvements	23,940,626	1,801,231	-	25,741,857
Furniture and equipment	5,161,327	397,820	78,690	5,480,457
Total Accumulated Depreciation	29,101,953	2,199,051	78,690	31,222,314
Net Capital Assets	$ 71,619,947	$ 39,172,147	$ 35,261,307	$ 75,530,787

Depreciation expense for the year was $2,199,051.

NOTE 6 - ACCOUNTS PAYABLE

Accounts payable for the District consisted of the following:

Accrued payroll and benefits	$ 5,347,315
Apportionment	2,481,200
Construction	535,959
Vendor payables	1,408,027
Other liabilities	125,447
Total	$ 9,897,948

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,078,079	43,559				1,121,638
Business and Management	0500	3,124,128	341,032	58,237	55,821		3,579,218
Communications	0600	32,108		15,949	13,904		61,961
Information Technology	0700	1,463,926	70,241	270	107,695		1,642,132
Education	0800	3,796,522	1,264,527	354,113	24,282		5,439,444
Engineering and Industrial Tech.	0900	4,945,036	1,746,544	833,249	152,424		7,677,253
Fine and Applied Arts	1000	3,754,823	955,066	128,012	42,968		4,880,869
Foreign Language	1100	887,118	22,358				909,476
Health	1200	2,750,789	743,035	146,862	54,022		3,694,708
Family and Consumer Sciences	1300	960,230	221,449	63,841	923		1,246,443
Law	1400	433,603	50,454	5,771			489,828
Humanities (Letters)	1500	6,570,985	1,052,170	32,110	15,493		7,670,758
Library Science	1600						
Mathematics	1700	3,699,058	273,849	8,069	24,843		4,005,819
Military Studies	1800						
Physical Sciences	1900	2,343,878	439,904	123,068	7,875		2,914,725
Psychology	2000	1,296,830	27,554		2,553		1,326,937
Public and Protective Services	2100	367,337	22,080				389,417
Social Sciences	2200	1,861,166	406,827	48,148	16,741		2,332,882
Commercial Services	3000	296,810					296,810
Interdisciplinary Studies	4900	2,280,167	29,066	41,825	123,269		2,474,327
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	222,905					222,905
Subtotal - Instructional Activities	**599**	42,165,498	7,709,715	1,859,524	642,813		52,377,550

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Cerritos Community College District **810** District Code No.

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,483,419	588,514	2,495		2,074,428
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		70,696	5,330			76,026
Other Instruct. Admin. & Instruct. Governance	6090			32,312			32,312
Subtotal - Instructional Administration	**6000**		1,554,115	626,156	2,495		2,182,766
Instructional Support Services (6100)							
Learning Center	6110						
Library	6120		1,346,672	33,055	339,625		1,719,352
Media	6130		301,648	62,611	21,001		385,260
Museums and Galleries	6140		19,890	5,859			25,749
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		1,403,479	749,352	189,878		2,342,709
Subtotal - Instructional Support Services	**6100**		3,071,689	850,877	550,504		4,473,070
Admissions and Records	**6200**		1,286,648	64,659	12,236		1,363,543
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,363,111	28,812			2,391,923
Matriculation and Student Assessment	6320		2,205,032	94,939	120,611		2,420,582
Transfer Programs	6330		157,050				157,050
Career Guidance	6340						
Other Student Counseling and Guidance	6390			1,180			1,180
Subtotal - Student Counseling and Guidance	**6300**		4,725,193	124,931	120,611		4,970,735

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District | 810 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,137,607	78,909	73,752		1,290,268
Extended Opportunity Prgms. & Services (EOPS)	6430		347,823	49,474	526		397,823
Health Services	6440						
Student Personnel Administration	6450		963,959	80,246			1,044,205
Financial Aid Administration	6460		1,521,254	76,720	12,732		1,610,706
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		226,018	43,867			269,885
Subtotal - Other Student Services	**6400**		4,196,661	329,216	87,010		4,612,887
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,504,948	503,698	30,764		2,039,410
Custodial Services	6530		1,800,404	183,343	11,227		1,994,974
Grounds Maintenance and Repairs	6550		688,229	68,341	25,954		782,524
Utilities	6570			2,518,495			2,518,495
Other Operation and Maintenance of Plant	6590		43,634	3,544			47,178
Subtotal - Operation and Maintenance of Plant	**6500**		4,037,215	3,277,421	67,945		7,382,581
Planning, Policymaking, and Coordination	**6600**		25,898				25,898

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		890,436	248,379	19,863		1,158,678
Fiscal Operations	6720		3,406,848	1,260,006	7,226		4,674,080
Human Resources Management	6730		725,499	121,939	7,505		854,943
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		375,609				375,609
Staff Development	6750		209,489	18,447			227,936
Staff Diversity	6760			9,652	491		10,143
Logistical Services	6770		897,893	425,665	13,555		1,337,113
Management Information Systems	6780		3,278,424	452,884	168,617		3,899,925
Other General Institutional Support Services	6790		578,289	17,744			596,033
Subtotal - General Institutional Support Services	**6700**		10,362,487	2,554,716	217,257		13,134,460
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830		98,210	1,995			100,205
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		139,943	144,881	1,053		285,877
Subtotal - Community Services	**6800**		238,153	146,876	1,053		386,082

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		145,588	20,206	5,091		170,885
Farm Operations	6930						
Food Services	6940		167,569				167,569
Parking	6950						
Student and Co-curricular Activities	6960		684	105			789
Student Housing	6970						
Other Ancillary Services	6990		203,865	9,320	408		213,593
Subtotal - Ancillary Services	**6900**		517,706	29,631	5,499		552,836
Auxiliary Operations (7000)							
Contract Education	7010	405,998	261,578	27,870			695,446
Other Auxiliary Operations	7090		25,288	56,728	137,725		219,741
Subtotal - Auxiliary Operations	**7000**	405,998	286,866	84,598	137,725		915,187
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,535,565	1,535,565
Student Aid	7320					510,706	510,706
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,046,271	2,046,271
TOTAL EXPENDITURES and OTHER OUTGO	**391**	42,571,496	38,012,346	9,948,605	1,845,148	2,046,271	94,423,866

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Cerritos Community College District **810** District Code No.

SixTen and Associates
Mandate Reimbursement Services

K H B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Citrus Community College District CC19090

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Citrus Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19090

(02) Claimant Name: Citrus Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1000 West Foothill Blvd.

City: Glendora | State: CA | Zip Code: 91741-1899

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	X	(09) Reimbursement	X
	(04) Combined		(10) Combined	
	(05) Amended		(11) Amended	
Fiscal Year of cost	(06) 2005-2006		(12) 2004-2005	
Total Claimed Amount	(07) $ 508,500		(13) $ 462,325	
Less : 10% Late Penalty			(14) $ -	
Less : Prior Claim Payment Received			(15) $ -	
Net Claimed Amount			(16) $ 462,325	
Due from State	(08) $ 508,500		(17) $ 462,325	
Due to State			(18)	

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	1,406
(23) EFCW-1, (04)(A)(1)(b)(f)	1,262
(24) EFCW-1, (04)(A)(2)(a)(f)	333,334
(25) EFCW-1, (04)(B)(1)(a)(f)	254
(26) EFCW-1, (04)(B)(1)(b)(f)	254
(27) EFCW-1, (04)(B)(2)(a)(f)	300
(28) EFCW-1, (04)(B)(2)(b)(f)	87,060
(29) EFCW-1, (04)(B)(2)(c)(f)	3,616
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	173,474
(32) EFCW-1, (09)	47,151
(33) EFCW-1, (10)	91,485
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Date 7/17/06

Carol R. Horton
Type or Print Name

Vice President, Financial and Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Citrus Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 1,405.90	$ -	$ -	$ -	$ -	$ 1,405.90
b. Staff training (One time per employee)	$ 1,261.82	$ -	$ -	$ -	$ -	$ 1,261.82
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 333,334.36	$ -	$ -	$ -	$ -	$ 333,334.36
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 254.39	$ -	$ -	$ -	$ -	$ 254.39
b. Staff training (One time per employee)	$ 254.39	$ -	$ -	$ -	$ -	$ 254.39
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 299.80	$ -	$ -	$ -	$ -	$ 299.80
b. Waiving student fees	$ 87,060.43	$ -	$ -	$ -	$ -	$ 87,060.43
c. Reporting BOG fee waiver data to CCC	$ 3,615.59	$ -	$ -	$ -	$ -	$ 3,615.59
05) Total Direct Costs	$ 427,486.68	$ -	$ -	$ -	$ -	$ 427,486.68

ndirect Costs		
06) Indirect Cost Rate	{From OMB A-21, FAM-29C, or 7%}	40.58%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 173,474.09
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 600,960.77
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 47,151.00
0) Le[illegible] Enrollment Fee Waiver offsets		$ 91,484.60
1) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 462,325.17

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Papner, Lois	Dean of Admin. and Records	$74.51	2.0	$ 149.02				
Zuniga, Rosalind	District Bursar	$31.92	8.0	$ 255.36				
Cernal, Clarence	Account Clerk	$27.82	36.0	$ 1,001.52				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 1,405.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Papner, Lois — Dean of Admin. and Records	$74.51	2.0	$ 149.02				
Cernal, Clarence — Account Clerk	$27.82	40.0	$ 1,112.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,261.82	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
(Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office Staff Collecting Fees	$28.93	2,957.0	$ 85,546.01				
Calculating total enrollment fee to be collected Various Enrollment Office Staff Collecting Fees	$28.93	2,631.4	$ 76,126.40				
Answering student's questions regarding enrollment fee collection Various Enrollment Office Staff Collecting Fees	$28.93	2,547.5	$ 73,699.18				
Ur[illegible]g written and computer records for enrollment fee information Various Enrollment Office Staff Collecting Fees	$28.93	1,115.5	$ 32,271.42				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office Staff Collecting Fees	$28.93	2,184.6	$ 63,200.48				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office Staff Collecting Fees	$28.93	86.1	$ 2,490.87				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 333,334.36	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Papner, Lois — Dean of Admin. and Records	$74.51	1.0	$ 74.51				
Medina, Lilia — Director of Financial Aid	$59.96	3.0	$ 179.88				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 254.39	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Papner, Lois	Dean of Admin. and Records	$74.51	1.0	$ 74.51				
Medina, Lilia	Director of Financial Aid	$59.96	3.0	$ 179.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 254.39	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
trus Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Medina, Lilia Director of Financial Aid	$59.96	5.0	$ 299.80				
(05) Total ☒ Subtotal ☐			$ 299.80	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Various Financial Office Staff Waiving Enrollment Fees	$27.05	672.0	$ 18,177.60				
Receiving waiver applications Various Financial Office Staff Waiving Enrollment Fees	$27.05	616.0	$ 16,662.80				
Evaluating waiver applications and verifying application documents Various Financial Office Staff Waiving Enrollment Fees	$27.05	1,101.3	$ 29,790.17				
[illegible]g students of additional documentation requirements and how to obtain information Various Financial Office Staff Waiving Enrollment Fees	$27.05	72.8	$ 1,969.24				
Entering approved application information into district records; providing student award letter Various Financial Office Staff Waiving Enrollment Fees	$27.05	692.4	$ 18,729.42				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Various Financial Office Staff Waiving Enrollment Fees	$27.05	64.0	$ 1,731.20				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 87,060.43	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]s Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers Medina, Lilia Director of Financial Aid	$59.96	60.3	$ 3,615.59				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 3,615.59	$ -	$ -	$ -	$ -

Citrus Community College District
308/95 ENROLLMENT OLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	36.00	Cernal, Clarence	Account Clerk	$27.82	$1,001.52	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Cernal, Clarence	Account Clerk	$27.82	$1,112.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	76.00	**Cernal, Clarence Total**			$2,114.32		
04-05	3.00	Medina, Lilia	Director of Financial Aid	$59.96	$179.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Medina, Lilia	Director of Financial Aid	$59.96	$179.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Medina, Lilia	Director of Financial Aid	$59.96	$299.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	60.30	Medina, Lilia	Director of Financial Aid	$59.96	$3,615.59	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	71.30	**Medina, Linda Total**			$4,275.15		
04-05	2.00	Papner, Lois	Dean of Admin. and Records	$74.51	$149.02	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Papner, Lois	Dean of Admin. and Records	$74.51	$74.51	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Papner, Lois	Dean of Admin. and Records	$74.51	$149.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	1.00	Papner, Lois	Dean of Admin. and Records	$74.51	$74.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Papner, Lois Total**			$447.06		
04-05	2,957.00	Various Enrollment Office Staff	Collecting Fees	$28.93	$85,546.01	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	2,631.40	Various Enrollment Office Staff	Collecting Fees	$28.93	$76,126.40	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	2,547.50	Various Enrollment Office Staff	Collecting Fees	$28.93	$73,699.18	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	1,115.50	Various Enrollment Office Staff	Collecting Fees	$28.93	$32,271.42	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	2,184.60	Various Enrollment Office Staff	Collecting Fees	$28.93	$63,200.48	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	86.10	Various Enrollment Office Staff	Collecting Fees	$28.93	$2,490.87	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	11,522.10	**Various Enrollment Office Staff Total**			$333,334.36		
04-05	672.00	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$18,177.60	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	616.00	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$16,662.80	Receiving waiver applications	Waiving student fees
04-05	1,101.30	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$29,790.17	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	72.80	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$1,969.24	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	692.40	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$18,729.42	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	64.00	Various Financial Office Staff	Waiving Enrollment Fees	$27.05	$1,731.20	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	3,218.50	**Various Financial Office Staff Total**			$87,060.43		
04-05	8.00	Zuniga, Rosalind	District Bursar	$31.92	$255.36	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	8.00	**Zuniga, Rosalind Total**			$255.36		
	14,901.90	**Grand Total**			$427,486.68		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$22,450,060		$22,450,060	$531,996	$21,918,064
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,015,813		2,015,813	19,651	1,996,162
Course and Curriculum Development	6020	83,500		83,500		83,500
Academic/Faculty Senate	6030	108,444		108,444	1,570	106,874
Other Instructional Administration & Instructional Governance	6090	694,872		694,872	4,329	690,543
Instructional Support Services	6100					
Learning Center	6110	315,895		315,895		315,895
Library	6120	911,307		911,307	38,727	872,580
Media	6130	134,100		134,100	13,647	120,453
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,124,911		1,124,911	14,230	1,110,681
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	850,462		850,462	5,254	845,208
Matriculation and Student Assessment	6320	602,195		602,195		602,195
Transfer Programs	6330	242,242		242,242	4,545	237,697
Career Guidance	6340	178,837		178,837	4,545	174,292
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	465,713		465,713		465,713
Subtotal		$30,178,351	$0	$30,178,351	$638,494	$29,539,857

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,092,136	$438,849	$653,287	$13,097	$640,190
Health Services	6440	256,330		256,330	1,070	255,260
Student Personnel Admin.	6450	266,572		266,572		266,572
Financial Aid Administration	6460	719,560		719,560	30,338	689,222
Job Placement Services	6470	227,765		227,765		227,765
Veterans Services	6480					
Miscellaneous Student Services	6490	424,319		424,319	48,041	376,278
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	952,212		952,212	952,212	0
Custodial Services	6530	1,336,033		1,336,033	1,336,033	0
Grounds Maintenance and Repairs	6550	709,887		709,887	709,887	0
Utilities	6570	1,503,266		1,503,266	1,503,266	0
Other	6590	565,482		565,482	565,482	0
Planning, Policy Making, and Coordination	6600	1,428,963		1,428,963	1,428,963	0
General Inst. Support Services	6700					
Community Relations	6710	811,984		811,984	811,984	0
Fiscal Operations	6720	1,249,529		1,249,529	1,249,529	0
Human Resources Management	6730	1,120,997		1,120,997	1,120,997	0
Noninstructional Staff Benefits & Incentives	6740	78,787		78,787	78,787	0
Staff Development	6750	20,043		20,043	20,043	0
Staff Diversity	6760	15,870		15,870	15,870	0
Logistical Services	6770	1,635,073		1,635,073	1,635,073	0
Management Information Systems	6780	1,746,578		1,746,578	1,746,578	0
Subtotal		$46,339,737	$438,849	$45,900,888	$13,905,744	$31,995,144

Table 4 *Indirect Cost Rate for Community Colleges*

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830	20,085		20,085	6,762	13,323
Economic Development	6840	242,095		242,095		242,095
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	182,282		182,282		182,282
Farm Operations	6930					
Food Services	6940					
Parking	6950	642,952		642,952	35,870	607,082
Student and Co-curricular Activities	6960	650,699		650,699	7,281	643,418
Student Housing	6970					
Other	6990	743,615		743,615	9,452	734,163
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$48,821,465	$438,849	$48,382,616	$13,965,109	$34,417,507
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				40.58%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	18,295					18,295
Architecture and Environmental Design	0200						
Biological Sciences	0400	705,266	51,021	37,840	12,970		807,097
Business and Management	0500	430,077		1,504	118		431,699
Communications	0600	173,084		3,533			176,617
Computer and Information Science	0700	543,699	2,909	7,787			554,395
Education	0800	924,012	515,001	9,479	17,275		1,465,767
Engineering and Related Industrial Tech.	0900	833,476	120,585	167,679	77,101		1,198,841
Fine and Applied Arts	1000	2,457,567	566,076	227,827	49,094		3,300,564
Foreign Language	1100	429,041		452			429,493
Health	1200	804,409	206,884	54,886	19,071		1,085,250
Consumer Education and Home Economics	1300	330,926	1,894	4,488			337,308
Law	1400						
Humanities (Letters)	1500	2,137,393	1,525	6,649			2,145,567
Library Science	1600	5,690		1,077			6,767
Mathematics	1700	1,945,885	12,198	7,641			1,965,724
Military Studies	1800						
Physical Sciences	1900	802,696	137,785	22,103	12,258		974,842
Psychology	2000	655,959	11,954	1,205			669,118
Public Affairs and Services	2100	185,557		182			185,739
Social Sciences	2200	932,604		1,438			934,042
Commercial Services	3000	924,936	316,221	99,530	1,910		1,342,597
Interdisciplinary Studies	4900	3,346,245	380,409	218,843	342,199		4,287,696
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	132,642					132,642
Subtotal - Instructional Activities	**599**	18,719,459	2,324,462	874,143	531,996		22,450,060

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Fir cial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expend tures by Activity
S10 Gene Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,956,711	39,451	19,651		2,015,813
Course and Curriculum Development	6020		66,338	17,162			83,500
Academic/Faculty Senate	6030		98,704	8,170	1,570		108,444
Other Instruct. Admin. & Instruct. Governance	6090		683,856	6,687	4,329		694,872
Subtotal - Instructional Administration	6000		2,805,609	71,470	25,550		2,902,629
Instructional Support Services (6100)							
Learning Center	6110		313,262	2,633			315,895
Library	6120		794,012	78,568	38,727		911,307
Media	6130		111,352	9,101	13,647		134,100
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	6100		1,218,626	90,302	52,374		1,361,302
Admissions and Records	6200		1,027,910	82,771	14,230		1,124,911
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		826,557	18,651	5,254		850,462
Matriculation and Student Assessment	6320		582,001	20,194			602,195
Transfer Programs	6330		225,753	11,944	4,545		242,242
Career Guidance	6340		165,876	8,416	4,545		178,837
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	6300		1,800,187	59,205	14,344		1,873,736

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Fin ial and Budget Report

Expenditures by Activity

S10 Gene Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		450,621	15,092			465,713
Extended Opportunity Prgms. & Services (EOPS)	6430		589,410	50,780	13,097	438,849	1,092,136
Health Services	6440		171,222	84,038	1,070		256,330
Student Personnel Administration	6450		254,570	12,002			266,572
Financial Aid Administration	6460		520,937	168,285	30,338		719,560
Job Placement Services	6470		226,540	1,225			227,765
Veterans Services	6480						
Miscellaneous Student Services	6490		316,657	59,621	48,041		424,319
Subtotal - Other Student Services	6400		2,529,957	391,043	92,546	438,849	3,452,395
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		630,198	281,560	40,454		952,212
Custodial Services	6530		1,206,607	102,035	27,391		1,336,033
Grounds Maintenance and Repairs	6550		626,444	64,190	19,253		709,887
Utilities	6570			1,503,266			1,503,266
Other Operation and Maintenance of Plant	6590		372,599	167,738	25,145		565,482
Subtotal - Operation and Maintenance of Plant	6500		2,835,848	2,118,789	112,243		5,066,880
Planning, Policymaking, and Coordination	6600		1,025,287	396,403	7,273		1,428,963

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		622,091	181,921	7,972		811,984
Fiscal Operations	6720		853,052	370,165	26,312		1,249,529
Human Resources Management	6730		775,875	345,122			1,120,997
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		78,787				78,787
Staff Development	6750		1,214	18,829			20,043
Staff Diversity	6760		220	15,650			15,870
Logistical Services	6770		871,837	732,888	30,348		1,635,073
Management Information Systems	6780		1,124,199	404,706	217,673		1,746,578
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	6700		4,327,275	2,069,281	282,305		6,678,861
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830		11,295	2,028	6,762		20,085
Economic Development	6840		183,770	58,325			242,095
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	6800		195,065	60,353	6,762		262,180

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920			182,282			182,282
Farm Operations	6930						
Food Services	6940						
Parking	6950		573,913	33,169	35,870		642,952
Student and Co-curricular Activities	6960		540,093	103,325	7,281		650,699
Student Housing	6970						
Other Ancillary Services	6990		627,749	106,414	9,452		743,615
Subtotal - Ancillary Services	6900		1,741,755	425,190	52,603		2,219,548
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	7000						
Physical Property and Related Acquisitions (7100)	7100						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,218,077	1,218,077
Student Aid	7320						
Other Outgo	7330					5,896	5,896
Subtotal - Transfers, Student Aid, and Other Outgo	7300					1,223,973	1,223,973
TOTAL EXPENDITURES and OTHER OUTGO	391	18,719,459	21,831,981	6,638,950	1,192,226	1,662,822	50,045,438

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Community College District
Indirect Cost Rates

CCD	Method	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
Al[illegible]lancock Joint CCD	FAM-29C	37.59	37.07	35.76	36.14	32.00	32.46	31.81		
Cerritos CCD	FAM-29C	39.30	40.33	32.78	31.58	29.26	28.16	34.11		
Chabot CCD	FAM-29C			39.36	42.24	39.41	35.87	34.89		
Citrus CCD	FAM-29C	51.75	44.86	44.70	45.74	41.72	45.53	40.58		
Contra Costa CCD	*FED rate*	***34.00***	***34.00***	***34.00***	***34.00***	***32.80***	***32.80***	***32.80***	***32.80***	*32.80*
College of the Sequoias CCD	FAM-29C	48.43	45.68	41.58	38.40	31.24	29.83	31.91		
El Camino CCD	FAM-29C	39.18	41.40	37.55	36.24	30.38	29.10	35.22		
Foothill-De Anza CCD	FAM-29C	28.67	30.09	31.67	35.50	32.28	31.11	29.66		
Gavilan CCD	FAM-29C		34.23	36.55	35.86	32.88	36.29	33.96		
Glendale CCD Glendale CCD	*FED rate* FAM-29C		*?*	*?*	*?*	***45.00***	***45.00***	***45.00***		
Hartnell CCD	FAM-29C		49.16	46.72	42.33	35.08	34.74	36.34		
Kern CCD	FAM-29C	66.87	55.25	51.24	49.63	48.94	39.43	42.89		
Los Rios CCD Los Rios CCD	*FED rate* FAM-29C	33.73	33.68	34.00	32.79	31.09	30.88	31.96	***30.0***	***30.0***
Long Beach CCD	FAM-29C		36.80	37.27	38.71	35.01	33.40	32.33		
Mon[illegible]ey Peninsula CCD	FAM-29C					34.91	38.94	43.85		
North Orange County CCD	*FED rate*	***38.00***	***38.00***	***38.00***	***38.00***	***39.00***	***39.00***	***39.00***		
Palomar CCD	FAM-29C	32.61	32.87	35.16	35.41	33.72	29.56	27.57		
Palo Verde CCD	FAM-29C	47.29	41.20	43.03	39.17	63.70	53.57	45.81		
Pasadena Area CCD	*FED rate*	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***32.80***		
Redwoods CCD	FAM-29C		39.44	41.42	41.43	38.92	38.64	37.90		
Mt. San Jacinto CCD	FAM-29C	47.02	50.15	42.92	42.47	40.14	38.81	36.94		
San Bernardino CCD	FAM-29C	51.36	45.57	51.88	46.95	49.18	44.42	45.62		
San Mateo CCD	***FED rate***		***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***		
Santa Monica CCD	FAM-29C	43.56	45.96	41.72	42.07	39.82	34.07	36.91		
Sierra Joint CCD	FAM-29C	45.92	42.04	41.34	36.18	36.79	38.41	40.90		
State Center CCD State Center CCD	*FED rate* FAM-29C	38.96	38.26	34.59	36.70	34.62	31.33	***36.50*** 32.25		
West Valley-Mission CCD	FAM-29C	40.47	44.02	42.99	44.15	33.37	34.89	35.80		
West Kern CCD	FAM-29C	33.92	37.65	37.64	39.73	37.46	31.79	38.32		
Yose[illegible] CCD	FAM-29C	33.05	32.67	30.93	30.98	26.87	26.35	34.88		

CR taken from previously filed claims

Schedule 1A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	27295
Avg. time p/account	6.5
Total Time (in minutes)	177418
Per Hour	60
Hours Worked **(** 11)**	**2957.0**
***EFC 2**	17161
Avg. time p/student	9.2
Total Time (in minutes)	157881
Per Hour	60
Hours Worked **(** 12)**	**2631.4**
***EFC 1**	27295
Avg. time p/question	5.6
Total Time (in minutes)	152852
Per Hour	60
Hours Worked **(** 13)**	**2547.5**
***EFC 2**	17161
Avg. time p/file	3.9
Total Time (in minutes)	66928
Per Hour	60
Hours Worked **(** 14)**	**1115.5**
***EFC 4**	943
Avg. time p/account	139
Total Time (in minutes)	131077
Per Hour	60
Hours Worked **(** 15)**	**2184.6**
***EFC 5**	771
Avg. time p/student	6.7
Total Time (in minutes)	5166
Per Hour	60
Hours Worked **(** 16)**	**86.1**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	11200
Avg. time p/question	3.6
Total Time (in minutes)	40320
Per Hour	60
Hours Worked (** **21**)	**672.0**
***EFW 6**	11200
Avg. time p/application	3.3
Total Time (in minutes)	36960
Per Hour	60
Hours Worked (** **22**)	**616.0**
***EFW 6**	11200
Avg. time p/evaluation	5.9
Total Time (in minutes)	66080
Per Hour	60
Hours Worked (** **23**)	**1101.3**
***EFW 8**	1066
Avg. time p/application	4.1
Total Time (in minutes)	4371
Per Hour	60
Hours Worked (** **24**)	**72.8**
***EFW 7**	5935
Avg. time p/application	7.0
Total Time (in minutes)	41545
Per Hour	60
Hours Worked (** **25**)	**692.4**
***EFW 8**	1066
Avg. time p/application	3.6
Total Time (in minutes)	3838
Per Hour	60
Hours Worked (** **26**)	**64.0**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Amundson, Peggy	Office Assistant 2			5			
Cernal, Clarence D.	Account Clerk, Cashier	1	6	4	1	240	11
Dusch, Laurie	Account Clerk, Cashier	1	6	4	1	240	11
Egbert, Ida M.	Cashier Aide	10	12	5	1		5
Gonsalves, Patti	A & R Tech. 3	2		2			
Gordon, Judith	Admissions Tech.	8	5	7	3		3
Hatfield, Jamie	Cashier Aide	10	12	5			5
Hatfield, Sheila	Admissions Tech.			8			3
Heinrichs-Harmon, Judith	Registrar	1	6	4	2	3	1
Jimenez, Elizabeth	Cashier	1	6	4	1	240	11
Matzen, Cerise G.	Cashier Aide	10	12	5			5
Medley, Tara	Cashier Aide	10	12	5			5
Miranda, Julianne	A & R Tech. 3	8		7			
Napoli, Cathy	A & R Coordinator	6	5	7	3		3
Olson, Margaret	Admin. Secretary 2	7		8	5		6
Paulus, Sherrill	Cashier Aide	10	12	5			5
Ramirez, Anna	Admin. Tech. 2	5	6	5	5	5	5
Ramirez, Sally	A & R Tech 1	10	10	15	10		15
Rodriguez, Martha	A & R Tech 2	3	5	4	4	5	7
Roskos, Marian	Admin. Tech. 2	3		9.5	10		5
Salce, Angelita	Cashier Aide	10	12	5	1		5
Seubert, Elaine A.	Office Asst. 1	20	20	5	10		10
Smith, Susan	A & R Team Leader	3		2			
Vela, Marilou	Cashier Aide	10	12	5			5
Zuniga, Rosalinda	District Bursar/District Cashier	1	6	4	1	240	15
Average		6.5	9.2	5.6	3.9	139.0	6.7

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Average PHR'S

Purpose: To calculate an average PHR for staff doing the collection fee functions.
Sou rce: PHR lists provided by client by fiscal year.
Findings:

	Staff	Title	PHR
	Amundson, Peggy	Office Assistant 2	31.47
	Cernal, Clarence	Account Clerk, Cashier	25.19
	Dusch, Laurie	Account Clerk, Cashier	25.19
Cashier	Egbert, Ida	Dept. Aide 3, Cashier	25.19
	Gonsalves, Patti	A & R Tech. 3	23.39
	Gordon, Judith	Admissions Tech. 2	31.47
Cashier	Hatfield, Jamie	Dept Aide 3, Admin Clerk 1	25.19
	Hatfield, Sheila	Admissions Tech. 2	31.47
	Heinrichs-Harmon, Judith	Registrar	58.05
	Jimenez, Elizabeth	Cashier	25.19
Cashier	Matzen, Cerise G.	Dept Aide 3, Admin Clerk 1	25.19
Cashier	Medley, Tara	Dept Aide 3, Admin Clerk 1	25.19
	Miranda, Julianne	A & R Tech. 3	23.39
	Napoli, Cathy	A & R Coordinator	27.81
	Olson, Margaret	Admin. Secretary 2	27.14
Cashier	Paulus, Sherrill	Dept Aide 3, Admin Clerk 1	25.19
	Ramirez, Anna	Admissions Tech. 2	31.47
	Ramirez, Sally	Admission Tech 1	31.47
	Rodriguez, Martha	Admin. Asst. 2	31.47
	Roskos, Marian	Admin. Asst. 2	31.47
Cashier	Salce, Angelita	Dept Aide 3, Admin Clerk 1, A & R Tech 1	25.19
	Seubert, Elaine A.	Office Asst. 1	31.47
	Smith, Susan	A & R Team Leader	27.81
Cashier	Vela, Marilou	Dept Aide 3, Admin Clerk 1	25.19
	Zuniga, Rosalinda	District Bursar/District Cashier	31.92
	Average		**28.93**

Conclusion: Findings go forward to EFCW-2.

1. Office Assist. = Amin. Assist.
2. Admin. Tech. = Amin. Assist.
2. Admin. Clerk = Amin. Assist.
3. Dept. Aide = Admin. Assist.
4. Clerk Typist = Acct. Clerks

Schedule 3
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Adamiak, Felicia	Financial Aide Tech.	2	2	10	5	10	10
Chavez, Diana	Financial Aide Tech.	5	5	10	7	7	3
Coulter, Wendy	Financial Aid Advisor	2	5	1	1	5	1
Hewitt, Katrina	Financial Aid Tech.	3	1	2	3	5	2
Martinez, Julie	Financial Aid Tech.	7	5	10	7	10	3
Ong, Brandon	Financial Aid Advisor	4	3	6	4	7	4
Sanchez, Manuel	Financial Aid Tech.	2	2	2	2	5	2
Average		**3.6**	**3.3**	**5.9**	**4.1**	**7.0**	**3.6**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Average PHR'S

Purpose: To calculate an average PHR for staff doing Enrollment Fee Waiver functions.
Source: PHR lists provided by client by fiscal year.
Findings:

Staff	Title	PHR
Adamiak, Felicia	Financial Aid Tech.	26.47
Chavez, Diana	Financial Aid Tech.	26.47
Coulter, Wendy	Financial Aid Advisor	28.51
Hewitt, Katrina	Financial Aid Tech.	26.47
Martinez, Julie	Financial Aid Tech.	26.47
Ong, Brandon	Financial Aid Advisor	28.51
Sanchez, Manuel	Financial Aid Tech.	26.47
Average		**$27.05**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals						
		98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1. Enrolled Students	24,246	25,446	25,048	25,546	27,766	24,755	27,295
EFC 2	1.8-1 2. Paid Enrollment fees	17,046	18,314	17,975	18,073	19,104	16,483	17,161
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	X	7,132	7,073	7,473	8,662	8,272	10,134
EFC 4	1.8-2 1. Delinquencies collections	297	358	560	394	381	313	943
EFC 5	1.8-2 2. Refunds	-	-	-	631	630	613	771
EFW 6	1.8-3 1. Waivers Requested	X	7,550	7,701	8,435	9,618	8,949	11,200
EFW 7	1.8-3 2. Waivers Approved	X -	7,132	7,073	7,473	8,662	8,272	10,134
EFW 8	1.8-3 1-2 Waivers Denied	X	418	628	962	956	677	1,066

Conclusion: Findings go forward to Schedules 1A and 1B.

Not used in calculation see following page

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

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CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus CCD
For 2004 Summer Term

Data Current As Of June 23, 2006 09:42:26

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	8,893

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus CCD
For 2004 Fall Term

Data Current As Of June 23, 2006 09:42:39

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	13,761

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Citrus CCD
For 2005 Spring Semester

Data Current As Of June 23, 2006 09:42:56

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	13,559

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus College

Clarence Cerna | Account Clerk/Cashier
Employee Name | Exact Position Title

Fisal Service | 626-9148896 | 12mo/11mo/10mo/hrly
College/Department/Location | Telephone # | Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					9	12	36	
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					40	40	40	
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Clarence Cerna Date 4/20/04

If you have any questions, please contact Carol Cone, at (626) 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus Community College

Lilia R. Medina — Employee Name

Director of Financial Aid — Exact Position Title

Citrus College / Fin. Aid — College/Department/Location

(626) 9148591 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			3hrs	3hrs	3hrs	3hrs	3hrs	3hrs	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			3hrs	3hrs	3hrs	3hrs	3hrs	3hrs	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			5hrs	5hrs	5hrs	5hrs	5hrs	5hrs	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			60.25	60.25	60.25	60.25	60.25	60.25	
TOTALS:			71.25	71.25	71.25	71.25	71.25	71.25	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilia R. Medina — Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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* Please Note: Director of Fin. Aid started 4/05 Therefore, all administrative activities for prior years are based on activities in 2003-04.

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: CITRUS

Lois Papner	Dean of Admissions & Records
Employee Name	Exact Position Title

Citrus College/Admissions	626-914-8517	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	3hrs	3hrs	3hrs	2hrs	2hrs	2hrs	2hrs	2hrs
B. Enrollment Waiver Process:	1hr	1hr	1hr	1hr	1hr	1hr	1hr	1hr
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	4hrs	4hrs	4hrs	4hrs	3hrs	3hrs	2hrs	2hrs
B. Enrollment Waiver Process:	1hr	1hr	1hr	1hr	1hr	1hr	1hr	1hr
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTALS:	9hrs	9hrs	9hrs	8hrs	7hrs	7hrs	5hrs	5hrs

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lois Papner Date 5/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus College

Rosalind Zuniga — Employee Name

District Bursar / Cashier — Exact Position Title

Fiscal Services — College/Department/Location

626-914-8896 — Telephone #

(12mo)/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	(98-99)	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	24	24	16	16	16	16	8	0
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	120	120	120	120	120	120	0	160
Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature ~~Rosalind Zuniga~~ Carol Cone Date 4/12/16

If you have any questions, please contact Carol Cone, at 626-914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Admissions & Records
Department/Location

Peggy Amundson
Employee Name

Transcript Evaluator
Exact Position Title

(626)914-8513
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min.	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Peggy Amundson Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fiscal Services / Cashier's Office
Department/Location

Clarence D. Cernal
Employee Name

Account Clerk / Cashier
Exact Position Title

626-914-8896
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1.0	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240.0				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Clarence Cernal Date 3/15/2006

If you have any questions, please contact Carol Cone, at 6269148885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

FISCAL SERVICES / CASHIER OFFICE
Department/Location

LAURIE DUSCH
Employee Name

ACCOUNT CLERK / CASHIER
Exact Position Title

(626) 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and r eligibility, and printing out a list of enrolled courses.	1.00	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.00		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.00	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.00		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240.00				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.00					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LAURIE DUSCH / [illegible] Date 03/15/06

If you have any questions, please contact CAROL COVE, at (626) 914-8885

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Pt 2 - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A&R — Department/Location

IDA M EGBERT — Employee Name

DEPT. AIDE III — Exact Position Title

626-914-8896 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ida M Egbert Date April 3, 2006

If you have any questions, please contact Carol Cole, at (626) 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A&R
Department/Location

PATTI GONSALVES
Employee Name

Exact Position Title

8518
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patti Gonsalves Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus School District — District

Admissions — Department/Location

Judith M. Gorden — Employee Name

Admissions Tech II — Exact Position Title

626 857 4134 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith M Gorden — Date 3/28/06

If you have any questions, please contact _____, at _____

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PHK cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

A+R
Department/Location

JANIE HATFIELD
Employee Name

DEPT. A (DE III, ADMIN. CLERK I
Exact Position Title

(626) 914-8885 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janie Hatfield Date 4-3-06

If you have any questions, please contact CAROL CONE, at (626) 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

ADMISSIONS/ADMINISTRATION
Department/Location

SHEILA HATFIELD
Employee Name

ADMISSIONS TECH II
Exact Position Title

(626) 914-8510 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila M Hatfield Date 3/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community College district
District

Admissions & Records Office / Admin Building
Department/Location

Judith A. Heinrichs-Harmon
Employee Name

Registrar
Exact Position Title

626-914-8516
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith A. Heinrichs-Harmon Date 4/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community College
District

Fiscal Services
Department/Location

Elizabeth Jimenez
Employee Name

Cashier
Exact Position Title

626.914.8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4.5.06

If you have any questions, please contact Carol Cone, at 626.914.8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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PHK - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

A+R
Department/Location

CERISE G. MATZEN
Employee Name

DEPT. AIDE III; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cerise G. Matzen Date 4-3-06

If you have any questions, please contact Carol Cone, at 626 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PHR - cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A&R
Department/Location

Tara Medley
Employee Name

DEPT. AIDE III; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T. Medley Date 4/3/06

If you have any questions, please contact Carol Cone, at 626 914 8883

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

ADMISSIONS
Department/Location

JULIANNE MIRANDA
Employee Name

ADMISSIONS & RECORDS TECH III
Exact Position Title

(626) 852-4132
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Miranda Date 3-28-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College.
District

Admissions & Records.
Department/Location

Cathy Napoli.
Employee Name

Admissions & Registration Coordinator.
Exact Position Title

626 9148512
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy J Napoli. Date 3/31/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Admissions & Records
Department/Location

Margaret Olson
Employee Name

Administrative Secretary II
Exact Position Title

626-914-8519
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Olson Date 3/31/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

A & R
Department/Location

SHERRILL F. PAULUS
Employee Name

DEPT. AIDE III; ADMIN. CLERK I
Exact Position Title

(626) 914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherrill F Paulus Date 4/3/06

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Admissions & Records
Department/Location

Anna Ramirez
Employee Name

Admissions Tech II
Exact Position Title

914 8514
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anna M Ramirez Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community College
District

Admissions And Records
Department/Location

Sally Ramirez
Employee Name

Tech. I
Exact Position Title

626-914-8511
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sally Ramirez Date 3-30-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus CC
District

Adm & Rec
Department/Location

Martha Rodriguez
Employee Name

Adm & Rec Tech II
Exact Position Title

626-914-8573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Martha A Rodriguez Date 3/30/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community College
District

Admissions & Records
Department/Location

Marian Malagon-Rosales
Employee Name

Admissions Tech II
Exact Position Title

(626) 914-8511 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.0	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	9.5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10.0		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5.0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M. T. L. R. Date 04-05-06

If you have any questions, please contact _____, at _____

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PHK - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Angelita Salce
Employee Name

DEPT. AIDE III; ADMIN. CLERK I; A+R TECH I
Exact Position Title

26) 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Salce Date 4-3-06

If you have any questions, please contact Carol Cone, at 626 914 8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cerritos Community College
District

Admissions / Records
Department/Location

ELAINE A. SEUBERT
Employee Name

Office Assistant I
Exact Position Title

626-914-8510
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.20		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.05	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.10		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine A. Seubert Date 3/28/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

ADMISSIONS & RECORDS/ADMINISTRATION
Department/Location

SUSAN SMITH
Employee Name

ADMISSIONS & RECORDS TEAM LEADER
Exact Position Title

(626) 914-8515
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	Ø					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	Ø					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Smith Date 3/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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PHR cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Marilou Vela
Employee Name

DEPT. AIDE III; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marilou Vela Date 4-3-06

If you have any questions, please contact Carol Cone, at 626 914 8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fiscal Services
Department/Location

Rosalind Zuniga
Employee Name

District Bursar / District Cashier
Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible]er eligibility, and printing out a list of enrolled courses.	1	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					x

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Employee Signature Rosalind Zuniga Date 4/5/06

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid Office
Department/Location

Felicia A. Adamiak
Employee Name

Financial Aid Tech.
Exact Position Title

(626)914-8592
Telephone #

12mo/~~XXmo/10mo/nrly~~
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min.	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min.	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10 min.	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min.			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10 min.		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10 min.			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Felicia A. Adamiak Date April 10, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community
District

Financial Aid
Department/Location

Diana Chavez
Employee Name

Financial Aid Technician
Exact Position Title

(626) 914-8692
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	x			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	x			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	x			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			x	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		x		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			x	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diana Chavez Date 04/10/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid Department
Department/Location

Wendi Coulter
Employee Name

Financial Aid Advisor
Exact Position Title

(626) 914-8593
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.00	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.00	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.00	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.00			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.00		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.00			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/25/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid
Department/Location

Katrina Hewitt
Employee Name

Financial Aid Technician
Exact Position Title

914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katrina Hewitt Date 4/6/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid
Department/Location

Lilie Martinez
Employee Name

Financial Aid Technician
Exact Position Title

626 914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilie Martinez Date 4-10-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

CITRUS FINANCIAL AID OFFICE
Department/Location

BRANDON DNG
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

626-914-8592
Telephone #

(12mo/11mo/10mo/hrly)
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4 MIN	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 MIN	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6 MIN	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4 MIN			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7 MIN		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4 MIN			X	

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Employee Signature Brandon Ong Jr. Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid
Department/Location

Manuel Sanchez
Employee Name

Financial Aid Technician
Exact Position Title

626 914 8592
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/6/06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.8-1

ENROLLMENT STATISTICS REPORT

District: CITRUS

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	3,400	3,718	3,511	3,701	4,234	2,604	5,406	5,461
Fall	11,015	10,699	10,688	11,159	11,703	10,067	10,639	10,087
Winter/ Intersession								
Spring	9,831	11,029	10,849	10,686	11,829	12,084	11,250	11,811
Total	24,246	25,446	25,048	25,546	27,766	24,755	27,295	27,359
2. Number of students who paid enrollment fees:								
Summer	2,122	2,372	2,188	2,242	2,680	1,763	3,659	3,450
Fall	8,162	7,887	7,805	8,115	8,002	6,474	6,242	5,600
Winter/ Intersession								
Spring	6,762	8,055	7,982	7,716	8,422	8,246	7,260	7,280
Total	17,046	18,314	17,975	18,073	19,104	16,483	17,161	16,330
3. Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	1,278	1,346	1,323	1,459	1,554	841	1,747	2,011
Fall	2,853	2,812	2,883	3,044	3,701	3,593	4,397	4,487
Winter/ Intersession								
Spring	3,069	2,974	2,867	2,970	3,407	3,838	3,990	4,531
Total	7,200	7,132	7,073	7,473	8,662	8,272	10,134	11,029

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lois Papner Date 5/2/06

Lois Papner
Employee Name: (print)

Dean of Admissions & Records
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

EFCW 1.8-2

District: Citrus College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	15	79	75	21	25	44	37	
Fall	98	116	239	197	182	169	890	
Winter/Intersession	/	/	/	/	/	/	/	
Spring	184	163	246	176	174	100	16	
Total	297	358	559	394	381	313	943	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer				40	138	64	160	
Fall				379	329	380	462	
Winter/Intersession				/	/	/	/	
Spring				212	163	169	149	
Total				631	630	613	771	

* 98-99 - should be 500

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rosalind Zuniga Date 4/7/06

Employee Name: (print) Rosalind Zuniga Position or Title District Bursar

If you have any questions, please contact Carol Cone, at 626-914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Citrus Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer		1521	1498	1634	1729	1016	1922	
Fall		2987	3058	3219	3876	3768	4572	
Winter/Intersession								
Spring		3042	3145	3582	4013	4165	4706	
Total		7550	7701	8435	9618	8949	11200	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer		1346	1323	1459	1554	841	1747	
Fall		2812	2883	3044	3401	3593	4397	
Winter/Intersession								
Spring		2974	2867	2970	3407	3838	3990	
Total		7132	7073	7473	8662	8272	10134	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lilia R. Medina Date 4/25/06

Lilia R. Medina
Employee Name: (print)

Director of Financial Aid
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

Corrected Copy

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Citrus College FAX

CITRUS COMMUNITY COLLEGE DISTRICT
Office of the Vice President of Finance and Administrative Services
1000 West Foothill Blvd., Glendora, CA 91741-1899

626 - 914-8805

Date: Tuesday, July 11, 2006

To: Sergio Perez
Fax: 858 514.8645

From: Carol Cone
Fax: 626 914.8604

Subject: Enrollment Fee Collection

Pages: 1 (including coversheet)

Hi Sergio:
Well, we have been looking over the figures you sent and are comfortable with you using the Chancellor's data for students enrolled and number of enrollment fee waivers. For the total enrollment fees waived there are conflicting figures. The following represent data I received from financial aid yesterday and can be substantiated. Please look them over and let me know how you want to proceed. It is the consensus of many that reporting to the Chancellor's office has not always been accurate or at the least incomplete.

1.8-4 4A

99-00 = $724,019.00
00-01 = $739,833.00
01-02 = $769,930.00
02-03 = $1,443,175.00
03-04 = $1,472,740.00
04-05 = $2,532,435.00

These figures more accurately match the Chancellor's except for 02-03 year. Again they can be substantiated. Thank you for your help with this most (crazy?) mandate!

SixTen and Associates

Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

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FAX TRANSMITTAL June 15, 06

2 Page(s) this memo
0 Page(s) attachment

DATE: ~~June 1, 2006~~

FAX TO: ~~Rosalinda Buchwald~~ Sergio Perez
~~Citrus Community College District~~
~~626-914-8822~~

FROM: ~~Sergio Perez~~ Carol Cone

CC: ~~Caroline Young~~

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fees Collection and Waivers
Fiscal Year: 1998-99 through 2004-05

PLEASE RESPOND BY: June 15, 2006

We have received some salary/PHR data for 05-06 and a blended (for 7 years) PHR for F/A, cashier, and student help. However, we cannot prepare the claims with these blended rates, but instead need mid-step PHR's for these positions for each fiscal year. Please provide the mid level salary + benefits (or PHR) for the following positions in the F/Y's noted:

Title	PHR	98-9	99-0	00-1	01-2	02-3	03-4	04-5
A&R Coordinator	98-9 to 04-5	21.61	22.53	22.84	25.11	26.41	27.73	27.81
A&R Team Leader	99-0 to 04-5	21.61	22.53	22.84	25.11	26.41	27.73	27.81
A&R Technician	98-9 to 04-5	18.19	18.96	19.23	21.14	22.23	23.34	23.39
Account Clerk, ~~Assistant~~ INTERN	98-9 to 04-5	19.57	20.40	20.69	22.76	23.92	25.12	25.19
Admin. ~~Technician~~	98-9 to 04-5	24.46	25.51	25.86	28.47	29.89	31.38	31.47
Admin. Secretary	98-9 to 04-5	21.07	21.97	22.28	24.75	25.76	27.05	27.14
Admin. Office Attendant	02-3	X	X	X	X	20.08	X	X
Cashier	~~98-9~~ to 04-5	19.57	20.40	20.69	22.76	23.92	25.12	25.19
District Bursar	~~98-9 to 04-5~~	See Kelly				Zoning		
Financial Technician	99-0 to 04-5	X	21.42	21.72	23.92	25.11	26.36	26.47
Financial Advisor	99-0 to 04-5	X	23.11	23.43	25.76	27.08	28.44	28.51
Office Assistant	98-9 to 04-5	don't have such a title						
Registrar	98-9 to 04-5	37.84	40.31	45.70	51.34	53.93	56.63	58.05

Judith Hennessy

To: Sergio Perez
From:
Carol Cone

In addition, the following staff submitted actual time for the fiscal years noted, therefore, we will need their actual salary + benefits or PHR for those years.

Name & Title	PHR	98-9	99-0	00-1	01-2	02-3	03-4	04-5
Clarence Cernal, Acct. Clerk	02-3 to 04-5	X	X	X	X	9.55	10.03	27.82
Lillia R. Medina, Dir. of Financial Aid	98-9 to 04-5	X	X	X	X	X	X	59.46
Lois Papner, Dean of A & R	99-0 to 04-5	48.82	52.73	54.12	64.24	70.15	71.95	74.61
Rosalind Zuniga, District Bursar	98-9 to 04-5	22.02	25.39	27.42	29.34	30.95	31.09	31.92

Schedule 5
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 1,756,194	$ 1,688,916	$ 1,575,286	$ 1,602,803	$ 2,372,730	$ 2,284,261
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 35,124	$ 33,778	$ 31,506	$ 32,056	$ 47,455	$ 45,685
		Used CCCO Report - see following page					
1.8-4 line 4A	Enrollment Fees Waived	$ 724,019	$ 739,833	$ 769,930	$ 1,443,175	$ 1,472,740	$ 2,532,435
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 50,681	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		67,257	69,993	131,197	93,984	108,501
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 50,681					
1.8-4 5.	Credit Units Waived		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736
Total Offset Savings	**Forward to Sch. 5A**	**$ 65,161**	**$ 76,001**	**$ 79,093**	**$ 148,253**	**$ 114,980**	**$ 149,385**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 2003-04: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 2004-05: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Citrus
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$27,985,796	$25,054,672	$447,706	$25,502,378
ENROLL FEE ADMIN (2%)	47,151	40,550	6,601	47,151
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,955,791	1,681,980	273,811	1,955,791
S.F.A.A.	387,951	333,638	54,313	387,951
E.O.P.S.	768,469	660,883	107,586	768,469
C.A.R.E.	210,200	180,772	29,428	210,200
D.S.P.S.	556,563	476,304	80,259	556,563
STATE HOSPITALS	0	0	0	0
CALWORKS	290,670	239,656	51,014	290,670
MATRICULATION (CREDIT)	365,123	314,005	51,118	365,123
MATRIC. (NONCREDIT)	222,102	191,008	31,094	222,102
FAC. & STAFF DIVERSITY	15,153	10,772	4,381	15,153
PART-TIME FACULTY INS.	862	0	862	862
PART-TIME FACULTY OFFIC	21,275	0	21,275	21,275
PART-TIME FACULTY ALLOC	519,462	446,737	72,725	519,462
BLOCK GRANT (ONE-TIME)	240,589	206,907	33,682	240,589
ECON. DEVELOPMENT	178,875	153,833	-3,578	150,255
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	64,219	55,228	8,991	64,219
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	289,086	225,487	17,345	242,832
PLANT & INSTRUCTIONAL	269,859	232,079	37,780	269,859
PRIOR YEAR CORRECTION	753,754	741,500	12,254	753,754
TOTAL	$35,264,853	$31,331,235	$1,364,318	$32,695,553

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch 5A
Citrus County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

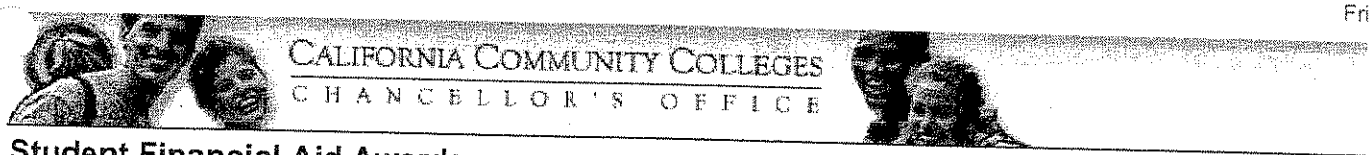
Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39
2	Staff Training	(04)(B)(1)(b)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 263.65	$ 270.60	$ 321.20	$ 350.75	$ 382.25	$ 299.80
4	Waiving student fees	(04)(B)(2)(b)	$ 40,403.97	$ 43,683.25	$ 59,104.86	$ 70,405.20	$ 67,996.33	$ 87,060.43
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 3,179.62	$ 3,263.44	$ 3,873.67	$ 4,230.05	$ 4,609.94	$ 3,615.59
6	EFCW - Fee Waiver Costs	Total	$ 44,163.62	$ 47,542.01	$ 63,685.17	$ 75,406.90	$ 73,447.22	$ 91,484.60
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 65,161.00	$ 76,001.00	$ 79,093.00	$ 148,253.00	$ 114,980	$ 149,385.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (20,997.38)	$ (28,458.99)	$ (15,407.83)	$ (72,846.10)	$ (41,532.78)	$ (57,900.40)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 44,163.62**	**$ 47,542.01**	**$ 63,685.17**	**$ 75,406.90**	**$ 73,447.22**	**$ 91,484.60**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Fri



Student Financial Aid Awards

Citrus College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 09, 2006 08:16:58

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	339	121,545
BOGW - Part B based on income standards	3,924	1,631,124
BOGW - Part C based on financial need	1,721	772,063

Total Unduplicated Count = 5,935
Total Amount = $ 2,524,732

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 15, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Citrus Community College District CC19090

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Citrus Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19090

(02) Claimant Name: Citrus Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1000 West Foothill Blvd.

City: Glendora | State: CA | Zip Code: 91741-1899

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [x]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 360,700	(13) $ 327,925
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 327,925
Due from State	(08) $ 360,700	(17) $ 327,925
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,060
(23) EFCW-1, (04)(A)(1)(b)(f)	1,796
(24) EFCW-1, (04)(A)(2)(a)(f)	235,571
(25) EFCW-1, (04)(B)(1)(a)(f)	92
(26) EFCW-1, (04)(B)(1)(b)(f)	92
(27) EFCW-1, (04)(B)(2)(a)(f)	1,934
(28) EFCW-1, (04)(B)(2)(b)(f)	86,825
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	133,318
(32) EFCW-1, (09)	44,819
(33) EFCW-1, (10)	88,943
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 12-1-06

Carol R. Horton
Type or Print Name

V.P. Financial and Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 2[illegible]

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant:

itrus Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2005-2006

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,059.94	$ -	$ -	$ -	$ -	$ 2,059.94
b. Staff training (One time per employee)	$ 1,795.73	$ -	$ -	$ -	$ -	$ 1,795.73
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 235,570.52	$ -	$ -	$ -	$ -	$ 235,570.52
1. E[illegible]llment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 91.96	$ -	$ -	$ -	$ -	$ 91.96
b. Staff training (One time per employee)	$ 91.96	$ -	$ -	$ -	$ -	$ 91.96
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 1,933.66	$ -	$ -	$ -	$ -	$ 1,933.66
b. Waiving student fees	$ 86,825.26	$ -	$ -	$ -	$ -	$ 86,825.26
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
Total Direct Costs	$ 328,369.03	$ -	$ -	$ -	$ -	$ 328,369.03

ect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	40.60%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 133,317.83
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 461,686.86
Reduction		
ess: Enrollment Fee Revenue offset		$ 44,819.00
ess: E[illegible]llment Fee Waiver offsets		$ 88,942.84
otal Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 327,925.02

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Cernal, Clarence D	Account Clerk/Cashier	$30.19	6.0	$ 181.14				
Papner, Lois	Dean	$91.96	2.0	$ 183.92				
Zuniga, Rosalinda	District Bursar/District Cashier	$35.31	48.0	$ 1,694.88				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,059.94	$ -	$ -	$ -	$ -

ew 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Paulus, Sherrill	Cashier Aide	$12.15	3.0	$ 36.45				
Matzen, Cerise	Cashier Aide	$12.15	3.0	$ 36.45				
Kaczur, Linda	Cashier Aide	$12.15	3.0	$ 36.45				
McMullen, Gloria	Cashier Aide	$12.15	3.0	$ 36.45				
Medley, Tara	Cashier Aide	$12.15	3.0	$ 36.45				
Vela, Marilou	Cashier Aide	$12.15	3.0	$ 36.45				
Egbert, Ida	Cashier Aide	$13.08	3.0	$ 39.24				
Salce, Angie	Cashier Aide	$13.08	3.0	$ 39.24				
Oceguera, Joanna	Student Aide	$7.69	1.0	$ 7.69				
Bujan, Jessica	Student Aide	$7.69	1.0	$ 7.69				
Jimenez, Elizabeth	Cashier	$15.55	1.0	$ 15.55				
Cernal, Clarence D	Account Clerk/Cashier	$30.19	8.0	$ 241.52				
Manfre-Campillo, Rose	Account Clerk/Cashier	$26.29	5.0	$ 131.45				
Napoli, Cathy	A&R Coordinator	$34.45	2.0	$ 68.90				
Olson, Peggy	Administrative Secretary	$38.75	3.5	$ 135.63				
Papner, Lois	Dean	$91.96	2.0	$ 183.92				
Zuniga, Rosalinda	District Bursar/District Cashier	$35.31	20.0	$ 706.20				
(05) Total ☒ Subtotal ☐				$ 1,795.73	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
C Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [x] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$24.75	2,963.9	$ 73,356.53				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$24.75	2,503.9	$ 61,971.53				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$24.75	2,553.5	$ 63,199.13				
Upda[illegible] written and computer records for enrollment fee information Enrollment Office Staff Various	$24.75	1,061.5	$ 26,272.13				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$24.75	373.0	$ 9,231.75				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$24.75	62.2	$ 1,539.45				
(05) Total [x] Subtotal [ ]	Page 1 of 1		$ 235,570.52	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Papner, Lois Dean	$91.96	1.0	$ 91.96				
5) Total ☒ Subtotal ☐	Page 1 of 1		$ 91.96	$ -	$ -	$ -	$ -

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State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
C ommunity College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Papner, Lois Dean	$91.96	1.0	$ 91.96				
(05) Total ☒ Subtotal ☐			$ 91.96	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ci ommunity College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
King, William	Info Systems Specialist	$58.38	0.8	$ 46.70				
Olson, Peggy	Administrative Secretary	$38.75	5.0	$ 193.75				
Adamiak, Felicia	Financial Aid Technician	$16.75	5.0	$ 83.75				
Chavez, Diana	Financial Aid Technician	$26.99	11.0	$ 296.89				
Coulter, Wendy	Financial Aid Technician	$36.36	11.0	$ 399.96				
Hewitt, Katrina	Financial Aid Technician	$32.48	2.0	$ 64.96				
Martinez, Julie	Financial Aid Technician	$32.19	6.0	$ 193.14				
Sanchez, Manuel	Financial Aid Technician	$25.87	25.3	$ 654.51				
)5) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,933.66	$ -	$ -	$ -	$ -

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Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
C Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. A.

☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. B.

☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

☐ Adopting Procedures, Recording, and Maintaining Records

☒ Waiving Student Fees

☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Office Staff Various	$29.24	637.6	$ 18,643.42				
Receiving waiver applications							
Financial Office Staff Various	$29.24	584.4	$ 17,087.86				
Evaluating waiver applications and verifying application documents							
Financial Office Staff Various	$29.24	1,044.9	$ 30,552.88				
Enter approved application information into district records; providing student award letter							
Financial Office Staff Various	$29.24	702.5	$ 20,541.10				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 86,825.26	$ -	$ -	$ -	$ -

Citrus Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

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Sorted by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	5.00	Adamiak, Felicia .	Financial Aid Technician	$16.75	$83.75	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	5.00	**Adamiak, Felicia Total**			$83.75		
3/20/2006	1.00	Bujan, Jessica	Student Aide	$7.69	$7.69	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1.00	**Bujan, Jessica Total**			$7.69		
05-06	6.00	Cernal, Clarence D	Account Clerk/Cashier	$30.19	$181.14	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	8.00	Cernal, Clarence D	Account Clerk/Cashier	$30.19	$241.52	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	14.00	**Cernal, Clarence D Total**			$422.66		
05-06	11.00	Chavez, Diana	Financial Aid Technician	$26.99	$296.89	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	11.00	**Chavez, Diana Total**			$296.89		
05-06	11.00	Coulter, Wendy	Financial Aid Technician	$36.36	$399.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining re
	11.00	**Coulter, Wendy Total**			$399.96		
2/9/2006	3.00	Egbert, Ida	Cashier Aide	$13.08	$39.24	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Egbert, Ida Total**			$39.24		
05-06	2,963.90	Enrollment Office Staff	Various	$24.75	$73,356.53	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	2,503.90	Enrollment Office Staff	Various	$24.75	$61,971.53	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	2,553.50	Enrollment Office Staff	Various	$24.75	$63,199.13	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	1,061.50	Enrollment Office Staff	Various	$24.75	$26,272.13	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	373.00	Enrollment Office Staff	Various	$24.75	$9,231.75	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	62.20	Enrollment Office Staff	Various	$24.75	$1,539.45	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	9,518.00	**Enrollment Office Staff Total**			$235,570.52		
05-06	637.60	Financial Office Staff	Various	$29.24	$18,643.42	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	584.40	Financial Office Staff	Various	$29.24	$17,087.86	Receiving waiver applications	Waiving student fees
05-06	1,044.90	Financial Office Staff	Various	$29.24	$30,552.88	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	702.50	Financial Office Staff	Various	$29.24	$20,541.10	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,969.40	**Financial Office Staff Total**			$86,825.26		
05-06	2.00	Hewitt, Katrina	Financial Aid Technician	$32.48	$64.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	2.00	**Hewitt, Katrina Total**			$64.96		
3/20/2006	1.00	Jimenez, Elizabeth	Cashier	$15.55	$15.55	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1.00	**Jimenez, Elizabeth Total**			$15.55		
2/9/2006	3.00	Kaczur, Linda	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Kaczur, Linda Total**			$36.45		
05-06	0.80	King, William	Info Systems Specialist	$58.38	$46.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	0.80	**King, William Total**			$46.70		
05-06	5.00	Manfre-Campillo, Rose	Account Clerk/Cashier	$26.29	$131.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	5.00	**Manfre-Campillo, Rose Total**			$131.45		
05-06	6.00	Martinez, Julie	Financial Aid Technician	$32.19	$193.14	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	6.00	**Martinez, Julie Total**			$193.14		
2/9/2006	3.00	Matzen, Cerise	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Matzen, Cerise Total**			$36.45		
2/9/2006	3.00	McMullen, Gloria	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**McMullen, Gloria Total**			$36.45		
2/9/2006	3.00	Medley, Tara	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Medley, Tara Total**			$36.45		
1/21/2006	2.00	Napoli, Cathy	A&R Coordinator	$34.45	$68.90	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection

...ra Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

...2006

Sorted by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	2.00	**Napoli, Cathy Total**			$68.90		
3/20/2006	1.00	Oceguera, Joanna	Student Aide	$7.69	$7.69	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1.00	**Oceguera, Joanna Total**			$7.69		
1/31/2006	2.00	Olson, Peggy	Administrative Secretary	$38.75	$77.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/15/2006	1.50	Olson, Peggy	Administrative Secretary	$38.75	$58.13	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
4/11/2006	3.00	Olson, Peggy	Administrative Secretary	$38.75	$116.25	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
4/26/2006	2.00	Olson, Peggy	Administrative Secretary	$38.75	$77.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	8.50	**Olson, Peggy Total**			$329.38		
05-06	2.00	Papner, Lois	Dean	$91.96	$183.92	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Papner, Lois	Dean	$91.96	$91.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Papner, Lois	Dean	$91.96	$183.92	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	1.00	Papner, Lois	Dean	$91.96	$91.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Papner, Lois Total**			$551.76		
2/9/2006	3.00	Paulus, Sherrill	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Paulus, Sherrill Total**			$36.45		
2/9/2006	3.00	Salce, Angie	Cashier Aide	$13.08	$39.24	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Salce, Angie Total**			$39.24		
05-06	25.30	Sanchez, Manuel	Financial Aid Technician	$25.87	$654.51	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	25.30	**Sanchez, Manuel Total**			$654.51		
2/9/2006	3.00	Vela, Marilou	Cashier Aide	$12.15	$36.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	3.00	**Vela, Marilou Total**			$36.45		
05-06	48.00	Zuniga, Rosalinda	District Bursar/District Cashier	$35.31	$1,694.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	20.00	Zuniga, Rosalinda	District Bursar/District Cashier	$35.31	$706.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	68.00	**Zuniga, Rosalinda Total**			$2,401.08		
	12,679.00	**Grand Total**			$328,369.03		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$25,707,162		$25,707,162	$864,452	$24,842,710
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,164,343		2,164,343	18,828	2,145,515
Course and Curriculum Development	6020	138,709		138,709	1,796	136,913
Academic/Faculty Senate	6030	133,313		133,313		133,313
Other Instructional Administration & Instructional Governance	6090	398,414		398,414	316	398,098
Instructional Support Services	6100					
Learning Center	6110	414,074		414,074	3,550	410,524
Library	6120	908,493		908,493	35,132	873,361
Media	6130	147,133		147,133	16,762	130,371
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,050,362		1,050,362	4,660	1,045,702
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,020,653		1,020,653	13,641	1,007,012
Matriculation and Student Assessment	6320	800,225		800,225	60,706	739,519
Transfer Programs	6330	227,940		227,940	4,330	223,610
Career Guidance	6340	170,165		170,165	3,826	166,339
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	474,532		474,532	12,021	462,511
Subtotal		$33,755,518	$0	$33,755,518	$1,040,020	$32,715,498

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,094,355	$429,539	$664,816	$6,269	$658,547
Health Services	6440	220,117		220,117	3,898	216,219
Student Personnel Admin.	6450	270,531		270,531		270,531
Financial Aid Administration	6460	832,749		832,749	4,047	828,702
Job Placement Services	6470	184,618		184,618		184,618
Veterans Services	6480					
Miscellaneous Student Services	6490	470,041		470,041	44,809	425,232
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,026,484		1,026,484	1,026,484	0
Custodial Services	6530	1,368,157		1,368,157	1,368,157	0
Grounds Maintenance and Repairs	6550	785,302		785,302	785,302	0
Utilities	6570	1,526,214		1,526,214	1,526,214	0
Other	6590	642,549		642,549	642,549	0
Planning, Policy Making, and Coordination	6600	1,693,357		1,693,357	1,693,357	0
General Inst. Support Services	6700					
Community Relations	6710	801,657		801,657	801,657	0
Fiscal Operations	6720	1,068,887		1,068,887	1,068,887	0
Human Resources Management	6730	1,022,549		1,022,549	1,022,549	0
Noninstructional Staff Benefits & Incentives	6740	698,899		698,899	698,899	0
Staff Development	6750	22,205		22,205	22,205	0
Staff Diversity	6760	15,153		15,153	15,153	0
Logistical Services	6770	1,767,219		1,767,219	1,767,219	0
Management Information Systems	6780	1,721,404		1,721,404	1,721,404	0
Subtotal		$50,987,965	$429,539	$50,558,426	$15,259,079	$35,299,347

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	228,540		228,540		228,540
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	120,881		120,881		120,881
Farm Operations	6930					
Food Services	6940					
Parking	6950	591,475		591,475	5,980	585,495
Student and Co-curricular Activities	6960	675,216		675,216	6,167	669,049
Student Housing	6970					
Other	6990	805,609		805,609	27,962	777,647
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$53,409,686	$429,539	$52,980,147	$15,299,188	$37,680,959
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				40.60%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	35,099		444	869		36,411
Architecture and Environmental Design	0200						
Biological Sciences	0400	677,583	73,026	34,363	11,554		796,526
Business and Management	0500	609,980	3,252	3,383			616,615
Communications	0600	178,844		9,013			187,857
Computer and Information Science	0700	522,859	3,029	8,963			534,851
Education	0800	911,131	498,167	9,979	19,409		1,438,686
Engineering and Related Industrial Tech.	0900	820,468	93,083	100,981	104,698		1,119,230
Fine and Applied Arts	1000	2,988,266	485,285	231,257	65,423		3,770,231
Foreign Language	1100	467,404		1,402			468,806
Health	1200	940,760	227,490	47,576	15,025		1,230,851
Consumer Education and Home Economics	1300	357,533	1,905	1,318			360,756
Law	1400						
Humanities (Letters)	1500	2,134,819	',233	5,296	273		2,141,621
Library Science	1600	12,467		2,817			15,284
Mathematics	1700	2,203,375	16,839	6,862			2,227,076
Military Studies	1800						
Physical Sciences	1900	885,902	146,446	39,175	35,856		1,107,379
Psychology	2000	709,237	',265	1,858			712,360
Public Affairs and Services	2100	212,372		1,045			213,417
Social Sciences	2200	1,085,766		1,459			1,087,225
Commercial Services	3000	1,016,691	303,882	92,907	5,647		1,419,127
Interdisciplinary Studies	4900	4,308,845	375,255	204,102	605,698		5,493,900
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	728,953					728,953
Subtotal - Instructional Activities	**599**	21,808,353	2,230,157	804,200	864,452		25,707,162

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,139,123	6,392	18,828		2,164,343
Course and Curriculum Development	6020		127,118	9,795	1,796		138,709
Academic/Faculty Senate	6030		127,839	5,474			133,313
Other Instruct. Admin. & Instruct. Governance	6090		390,535	7,563	316		398,414
Subtotal - Instructional Administration	6000		2,784,615	29,224	20,940		2,834,779
Instructional Support Services (6100)							
Learning Center	6110		408,389	2,135	3,550		414,074
Library	6120		787,441	85,870	35,132		908,493
Media	6130		118,731	11,640	16,762		147,133
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	6100		1,314,561	99,645	55,494		1,469,700
Admissions and Records	6200		1,000,483	45,219	4,660		1,050,362
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		962,987	24,025	13,641		1,020,653
Matriculation and Student Assessment	6320		672,643	66,876	60,706		800,225
Transfer Programs	6330		213,833	9,777	4,330		227,940
Career Guidance	6340		155,212	11,127	3,826		170,165
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	6300		2,024,675	111,805	82,503		2,218,983

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District | 820 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	NonInstructional** (2)				
Other Student Services (5400)							
Disabled Students Program & Services (DSPS)	6420		442,247	20,264	12,021		474,532
Extended Opportunity Prgms. & Services (EOPS)	6430		622,528	36,019	6,269	429,539	1,094,355
Health Services	6440		197,427	18,792	3,898		220,117
Student Personnel Administration	6450		254,346	16,185			270,531
Financial Aid Administration	6460		722,932	105,770	4,047		832,749
Job Placement Services	6470		184,341	277			184,618
Veterans Services	6480						
Miscellaneous Student Services	6490		352,270	72,962	44,809		470,041
Subtotal - Other Student Services	**6400**		2,776,091	270,269	71,044	429,539	3,546,943
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		710,108	287,385	28,991		1,026,484
Custodial Services	6530		1,240,296	116,539	11,322		1,368,157
Grounds Maintenance and Repairs	6550		631,333	61,340	92,629		785,302
Utilities	6570			1,526,214			1,526,214
Other Operation and Maintenance of Plant	6590		373,834	259,976	8,739		642,549
Subtotal - Operation and Maintenance of Plant	**6500**		2,955,571	2,251,454	141,681		5,348,706
Planning, Policymaking, and Coordination	**6600**		1,103,474	580,396	9,487		1,693,357

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		587,758	209,252	4,647		801,657
Fiscal Operations	6720		828,988	238,384	1,515		1,068,887
Human Resources Management	6730		727,296	292,677	2,576		1,022,549
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		698,899				698,899
Staff Development	6750			22,205			22,205
Staff Diversity	6760		3,982	11,171			15,153
Logistical Services	6770		925,063	690,917	151,239		1,767,219
Management Information Systems	6780		1,234,653	354,410	132,341		1,721,404
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		5,006,639	1,819,016	292,318		7,117,973
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		189,677	38,863			228,540
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		189,677	38,863			228,540

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (5000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930			120,88			120,881
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960		556,061	29,434	5,980		591,475
Student Housing	6970		562,124	106,925	6,167		675,216
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		659,008	118,639	27,962		805,609
Auxiliary Operations (7000)			1,777,193	375,879	40,109		2,193,181
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					2,723,220	2,723,220
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					12,081	12,081
TOTAL EXPENDITURES and OTHER OUTGO	**391**	21,808,353	23,163,136	6,425,970	1,582,688	2,735,301	2,735,301
						3,164,840	56,144,987

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Citrus Community College District | 820 | District Code No.

Community College District
Indirect Cost Rates

CCD	Method	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
n Hancock Joint CCD	FAM-29C	37.59	37.07	35.76	36.14	32.00	32.46	31.81	32.71	
ritos CCD	FAM-29C	39.30	40.33	32.78	31.58	29.26	28.16	34.11	30.68	
bot CCD	FAM-29C	34.57	38.76	39.36	42.24	39.41	35.87	34.89	34.69	
us CCD	FAM-29C	51.75	44.86	44.70	45.74	41.72	45.53	40.58	40.60	
tra Costa CCD	*FED rate*	*34.00*	*34.00*	*34.00*	*34.00*	*32.80*	*32.80*	*32.80*	*32.80*	*32.80*
ege of the Sequoias CCD	FAM-29C	48.43	45.68	41.58	38.40	31.24	29.83	31.91	35.36	
amino CCD	FAM-29C	39.18	41.40	37.55	36.24	30.38	29.10	35.22	35.02	
hill-De Anza CCD	FAM-29C	28.67	30.09	31.67	35.50	32.28	31.11	29.66	28.90	
lan CCD	FAM-29C	35.68	34.23	36.55	35.86	32.88	36.29	33.96	36.92	
dale CCD	*FED rate*					*45.00*	*45.00*	*45.00*	*45.00*	*45.00*
dale CCD	FAM-29C	39.13	38.41	38.15	34.20					
CCD	FAM-29C	66.87	55.25	51.24	49.63	48.94	39.43	42.89	39.91	
lios CCD	*FED rate*								*30.00*	*30.00*
lios CCD	FAM-29C	33.73	33.68	34.00	32.79	31.09	30.88	31.96	*32.61*	
Beach CCD	FAM-29C		36.80	37.27	38.71	35.01	33.40	32.33	33.86	
rey Peninsula CCD	FAM-29C					34.91	38.94	43.85		
Orange County CCD	*FED rate*	*38.00*	*38.00*	*38.00*	*38.00*	*39.00*	*39.00*	*39.00*	*39.00*	*29.50*
ar CCD	FAM-29C	32.61	32.87	35.16	35.41	33.72	29.56	27.57	25.48	
erde CCD	FAM-29C	47.29	41.20	43.03	39.17	63.70	53.57	45.81	39.76	
ena Area CCD	*FED rate*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*32.80*	*32.80*	*32.80*
ods CCD	FAM-29C	42.74	39.44	41.42	41.43	38.92	38.64	37.90	37.45	
n Jacinto CCD	FAM-29C	47.02	50.15	42.92	42.47	40.14	38.81	36.94		
rnardino CCD	FAM-29C	51.36	45.57	51.88	46.95	49.18	44.42	45.62	47.74	
uteo CCD	*FED rate*		*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*
Monica CCD	FAM-29C	43.56	45.96	41.72	42.07	39.82	34.07	36.91	34.25	
oint CCD	FAM-29C	45.92	42.04	41.34	36.18	36.79	38.41	40.90	35.70	
enter CCD	*FED rate*							*36.50*	*36.50*	*36.50*
enter CCD	FAM-29C	38.96	38.26	34.59	36.70	34.62	31.33	32.25		
alley CCD	FAM-29C	57.90	58.96	58.45	61.28	55.20	53.91	45.61	46.57	
lley-Mission CCD	FAM-29C	40.47	44.02	42.99	44.15	33.37	34.89	35.80	37.57	
rn CCD	FAM-29C	33.92	37.65	37.64	39.73	37.46	31.79	38.32	34.32	
e CCD	FAM-29C	33.05	32.67	30.93	30.98	26.87	26.35	34.88	36.38	

.en from previously filed claims

Schedule 1A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	27359
Avg. time p/account	6.5
Total Time (in minutes)	177834
Per Hour	60
Hours Worked **(** 11)**	**2963.9**
***EFC 2**	16330
Avg. time p/student	9.2
Total Time (in minutes)	150236
Per Hour	60
Hours Worked **(** 12)**	**2503.9**
***EFC 1**	27359
Avg. time p/question	5.6
Total Time (in minutes)	153210
Per Hour	60
Hours Worked **(** 13)**	**2553.5**
***EFC 2**	16330
Avg. time p/file	3.9
Total Time (in minutes)	63687
Per Hour	60
Hours Worked **(** 14)**	**1061.5**
***EFC 4**	161
Avg. time p/account	139
Total Time (in minutes)	22379
Per Hour	60
Hours Worked **(** 15)**	**373.0**
***EFC 5**	557
Avg. time p/student	6.7
Total Time (in minutes)	3732
Per Hour	60
Hours Worked **(** 16)**	**62.2**

EFC Workload Multiplier (Default)
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	10626
Avg. time p/question	3.6
Total Time (in minutes)	38254
Per Hour	60
Hours Worked **(** 21)**	**637.6**
***EFW 6**	10626
Avg. time p/application	3.3
Total Time (in minutes)	35066
Per Hour	60
Hours Worked **(** 22)**	**584.4**
***EFW 6**	10626
Avg. time p/evaluation	5.9
Total Time (in minutes)	62693
Per Hour	60
Hours Worked **(** 23)**	**1044.9**
***EFW 8**	
Avg. time p/application	4.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	6021
Avg. time p/application	7.0
Total Time (in minutes)	42147
Per Hour	60
Hours Worked **(** 25)**	**702.5**
***EFW 8**	
Avg. time p/application	3.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2. Used same time study for 04/05 and 05/06.
Findings:

		*Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Amundson, Peggy	Office Assistant 2			5			
Cernal, Clarence D.	Account Clerk, Cashier	1	6	4	1	240	11
Dusch, Laurie	Account Clerk, Cashier	1	6	4	1	240	11
Egbert, Ida M.	Cashier Aide	10	12	5	1		5
Gonsalves, Patti	A & R Tech. 3	2		2			
Gordon, Judith	Admissions Tech.	8	5	7	3		3
Hatfield, Jamie	Cashier Aide	10	12	5			5
Hatfield, Sheila	Admissions Tech.			8			3
Heinrichs-Harmon, Judith	Registrar	1	6	4	2	3	1
Jimenez, Elizabeth	Cashier	1	6	4	1	240	11
Matzen, Cerise G.	Cashier Aide	10	12	5			5
Medley, Tara	Cashier Aide	10	12	5			5
Miranda, Julianne	A & R Tech. 3	8		7			
Napoli, Cathy	A & R Coordinator	6	5	7	3		3
Olson, Margaret	Admin. Secretary 2	7		8	5		6
Paulus, Sherrill	Cashier Aide	10	12	5			5
Ramirez, Anna	Admin. Tech. 2	5	6	5	5	5	5
Ramirez, Sally	A & R Tech 1	10	10	15	10		15
Rodriguez, Martha	A & R Tech 2	3	5	4	4	5	7
Roskos, Marian	Admin. Tech. 2	3		9.5	10		5
Salce, Angelita	Cashier Aide	10	12	5	1		5
Seubert, Elaine A.	Office Asst. 1	20	20	5	10		10
Smith, Susan	A & R Team Leader	3		2			
Vela, Marilou	Cashier Aide	10	12	5			5
Zuniga, Rosalinda	District Bursar/District Cashier	1	6	4	1	240	15
Average		**6.5**	**9.2**	**5.6**	**3.9**	**139.0**	**6.7**

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Average PHR'S

Purpose: To calculate an average PHR for staff doing the collection fee functions.
Sou rce: PHR lists provided by client by fiscal year.
Findings:

	Staff	Title	04-05	05-06
	Amundson, Peggy	Office Assistant 2	31.47	32.81
	Cernal, Clarence	Account Clerk, Cashier	25.19	30.19
	Dusch, Laurie	Account Clerk, Cashier	25.19	26.45
Cashier	Egbert, Ida	Dept. Aide 3, Cashier	25.19	13.08
	Gonsalves, Patti	A & R Tech. 3	23.39	34.09
	Gordon, Judith	Admissions Tech. 2	31.47	14.03
Cashier	Hatfield, Jamie	Dept Aide 3, Admin Clerk 1	25.19	12.15
	Hatfield, Sheila	Admissions Tech. 2	31.47	14.13
	Heinrichs-Harmon, Judith	Registrar	58.05	63.59
	Jimenez, Elizabeth	Cashier	25.19	15.55
	Johnson, Cheryl	Admissions & Records Tech		27.35
Cashier	Manfre-Campillo, Rose	Accounts Clerk		26.29
Cashier	Matzen, Cerise G.	Dept Aide 3, Admin Clerk 1	25.19	12.15
Cashier	Medley, Tara	Dept Aide 3, Admin Clerk 1	25.19	12.15
	Miranda, Julianne	A & R Tech. 3	23.39	34.09
	Napoli, Cathy	A & R Coordinator	27.81	34.45
	Olson, Margaret	Admin. Secretary 2	27.14	38.75
Cashier	Paulus, Sherrill	Dept Aide 3, Admin Clerk 1	25.19	12.15
	Ramirez, Anna	Admissions Tech. 2	31.47	28.71
	Ramirez, Sally	Admission Tech 1	31.47	13.09
	Rodriguez, Martha	Admin. Asst. 2	31.47	29.43
	Roskos, Marian	Admin. Asst. 2	31.47	14.29
Cashier	Salce, Angelita	Dept Aide 3, Admin Clerk 1, A & R Tech 1	25.19	13.08
	Seubert, Elaine A.	Office Asst. 1	31.47	30.88
	Smith, Susan	A & R Team Leader	27.81	37.81
Cashier	Vela, Marilou	Dept Aide 3, Admin Clerk 1	25.19	12.15
	Zuniga, Rosalinda	District Bursar/District Cashier	31.92	35.31
	Average		**28.93**	**24.75**

Conclusion: Findings go forward to EFCW-2.

1. Office Assist. = Admin. Assist.
2. Admin. Tech. = Admin. Assist.
3. Admin. Clerk = Admin. Assist.
4. Dept. Aide = Admin. Assist.
5. Clerk Typist = Acct. Clerks

Schedule 3
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3. Used same time study for 04/05 and 05/06.
Findings:

Staff	Title	*Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Adamiak, Felicia	Financial Aid Tech.	2	2	10	5	10	10
Chavez, Diana	Financial Aid Tech.	5	5	10	7	7	3
Coulter, Wendy	Financial Aid Advisor	2	5	1	1	5	1
Hewitt, Katrina	Financial Aid Tech.	3	1	2	3	5	2
Martinez, Julie	Financial Aid Tech.	7	5	10	7	10	3
Ong, Brandon	Financial Aid Tech.	4	3	6	4	7	4
Sanchez, Manuel	Financial Aid Tech.	2	2	2	2	5	2
Average		**3.6**	**3.3**	**5.9**	**4.1**	**7.0**	**3.6**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Average PHR'S

Purpose: To calculate an average PHR for staff doing Enrollment Fee Waiver functions.
Source: PHR lists provided by client by fiscal year.
Findings:

Staff	Title	04-05	05-06
Adamiak, Felicia	Financial Aid Tech.	26.47	16.75
Chavez, Diana	Financial Aid Tech.	26.47	26.99
Coulter, Wendy	Financial Aid Advisor	28.51	36.36
Hewitt, Katrina	Financial Aid Tech.	26.47	32.48
Martinez, Julie	Financial Aid Tech.	26.47	32.19
Ong, Brandon	Financial Aid Advisor	26.36	34.01
Sanchez, Manuel	Financial Aid Tech.	26.47	25.87
Average		**$26.75**	**$29.24**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, EFCW 1.8-3 and chancellor's website.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	24,246	25,446	25,048	25,546	27,766	24,755	27,295	27359
EFC 2	1.8-1 2.	Paid Enrollment fees	17,046	18,314	17,975	18,073	19,104	16,483	17,161	16330
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X	7,132	7,073	7,473	8,662	8,272	10,134	11029
EFC 4	1.8-2 1.	Delinquencies collections	297	358	560	394	381	313	943	161
EFC 5	1.8-2 2.	Refunds	-	-	-	631	630	613	771	557
EFW 6	1.8-3 1.	Waivers Requested	X	7,550	7,701	8,435	9,618	8,949	11,200	10626
EFW 7	1.8-3 2.	Waivers Approved	X -	7,132	7,073	7,473	8,662	8,272	10,134	11039
EFW 8	1.8-3 1-2	Waivers Denied	X	418	628	962	956	677	1,066	-413

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus For 2005 Summer Term

Data Current As Of October 28, 2006 02:14:14

Total Headcount	8,935

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

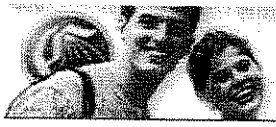
Student Demographics

Student Total Headcount For Citrus
For 2006 Spring Semester

Data Current As Of October 28, 2006 02:14:52

Total Headcount	12,313

© 2001 State of California. California Community Colleges, Chancellor's Office



CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus For 2005 Fall Term

Data Current As Of October 28, 2006 02:14:31

Total Headcount	13,545

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EFCW 1.8B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
3088/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS CCD

ADAMIAK, FELICIA — FINANCIAL AID TECH

Employee Name — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Felicia Adamiak Date 11-06-06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS CCD

CHAVEZ, DIANA — Employee Name

FINANCIAL AID TECH — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								11
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diana Chavez Date 11.03.06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

Clarence D. Ceenal — Employee Name

Account Clerk / Cashier — Exact Position Title

Fiscal Services — College/Department/Location

(626) 914-8896 — Telephone #

(12mo)/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								6
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								8
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature C. Ceenal Date 10/5/2006

If you have any questions, please contact Carol Cone at 914 8885

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

COULTER, WENDY — FINANCIAL AID TECH
Employee Name — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								11
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/03/2006

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

HEWITT, KATRINA — Employee Name

FINANCIAL AID TECH — Exact Position Title

College/Department/Location | Telephone # | 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for post accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katrina Hewitt Date 11/3/06

If you have any questions, please contact _____, at _____

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MRP 1.6a

Employee Time Record Sheet for Mandated Costs of
~~4867/6 Mandate Reimbursement Process~~ 98/95 EFCW
Annual Reimbursement Claims

District: Citrus Fiscal Year: 05-06

William King
Employee Name

Info Systems Specialist III
Exact Position Title

MIS
School/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
3-13-06	(1) 2 3 4 5 6	BOGB collection data	EFCW	.75	
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature William King Date 11 May 2006

If you have any questions, please contact _____ at _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

ROSE ANN MANFRE-CAMPILLO — Employee Name

ACCOUNT CLERK / CASHIER — Exact Position Title

FISCAL SERVICES — College/Department/Location

(626) 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								5
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rose Ann Manfre-Campillo Date Oct. 5, 2006

If you have any questions, please contact CAROL COVE, at (626) 914-8885

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EFCW 1.68

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

MARTINEZ, JULIE — Employee Name

FINANCIAL AID TECH — Exact Position Title

College/Department/Location | Telephone # | 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance. 6

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Martinez Date 11-6-06

If you have any questions, please contact _____, at _____

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MRP 1.6a

Employee Time Record Sheet for Mandated Costs of

486/75 Mandate Reimbursement Process

Annual Reimbursement Claims

District: Citrus

Fiscal Year: 05-06

Cathy Napoli
Employee Name

A & R Team Leader
Exact Position Title

School/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
1/31/06	1 2 (3) 4 5 6	Training Workshop	EFCW	2	
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Cathy Napoli Date 2/8/06

If you have any questions, please contact _____, at _____.

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MRP 1.6a

Employee Time Record Sheet for Mandated Costs of
486/75 Mandate Reimbursement Process
Annual Reimbursement Claims

District: Citrus

Margaret Olson
Employee Name

Fiscal Year: 05-06

Admin. Secretary II
Exact Position Title

School/Department/Location | Telephone # | 12mo/11mo/10mo/hrly Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
1/31/06	1 2 (3) 4 5 6	Training Workshop	EFCW	2	
3/15/06	(1) 2 3 4 5 6	STAFF TRAINING	"	1 1/2	
4/11/06	(1) 2 3 4 5 6	COLLECTING MATERIALS	"	3	
4/26/06	(1) 2 3 4 5 6	REVIEWING EVERYTHING	"	2	
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

may have these

Attach: All documentation available to substantiate include meeting agendas, seminar agendas, expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires data for state mandates in order for the district to receive reimb you have reported actual data or have provided a good faith es be true and correct based on your personal knowledge or infor

Employee Signature Margaret Olson Date 5/8/06

If you have any questions, please contact _____, at _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

Lois Paynes — Employee Name

Dean of Admissions & Records — Exact Position Title

Citrus College/Admissions — College/Department/Location

626-914-8517 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								2 hrs.
B. Enrollment Waiver Process:								1 hr.
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2 hrs.
B. Enrollment Waiver Process:								1 hr.
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								N/A
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								N/A
TOTALS:								5 hrs.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lois Paynes — Date 9/18/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

SANCHEZ, MANUEL — FINANCIAL AID TECH
Employee Name — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance. 25.25

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Manuel Sanchez Jr. Date 11/3/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS

Rosalind Zuniga — Employee Name

District Borsar / Cash Control Clerk — Exact Position Title

Fiscal Services — College/Department/Location

(626)914-8896 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								48
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								20
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosalind Zuniga Date 10-6-6

If you have any questions, please contact Carol Cone, at (626)914-8855

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Peggy Amundson
Employee Name

Transcript Evaluator
Exact Position Title

626-914-8513
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Peggy Amundson Date 9/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fiscal Services / Cashier's Office
Department/Location

Clarence D. Cernal
Employee Name

Account Clerk / Cashier
Exact Position Title

626-914-8896 (12mo/11mo/10mo/hrly)
Telephone # ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and w[illegible]r eligibility, and printing out a list of enrolled courses.	1.0	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240.0				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/15/2006

If you have any questions, please contact Carol Cone, at 626 914 8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

FISCAL SERVICES / CASHIER OFFICE
Department/Location

LAURIE DUSCH
Employee Name

ACCOUNT CLERK / CASHIER
Exact Position Title

(626) 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and other eligibility, and printing out a list of enrolled courses.	1.00	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.00		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.00	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.00		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240.00				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.00					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LAURIE DUSCH / [signature] Date 03/15/06

If you have any questions, please contact CAROL COVE, at (626) 914-8885

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Pt. 2 - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A+R — Department/Location

IDA M EGBERT — Employee Name

DEPT. AIDE III — Exact Position Title

626-914-8896 — Telephone #

12mo/11mo/10mo/(hrly) — Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ida M Egbert Date April 6, 2006

If you have any questions, please contact Carol Cose, at (626) 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A&R
Department/Location

PATTI GONSALVES
Employee Name

Exact Position Title

8518
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	Ø					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	Ø					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patti Gonsalves Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Judith M. Gorden
Employee Name

Admissions & Records Technician II
Exact Position Title

626-857-4134
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith M Gorden Date 9/18/06

If you have any questions, please contact _____, at _____

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PHK cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS College
District

A+R
Department/Location

JANIE HATFIELD
Employee Name

DEPT. AIDE III, ADMIN. CLERK I
Exact Position Title

626 914-8885
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janie Hatfield Date 4-3-06

If you have any questions, please contact CAROL CONE, at (626) 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS — District

Admissions & Records — Department/Location

Sheila Hatfield — Employee Name

Admissions & Records Technician II — Exact Position Title

626-914-8510 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila M. Hatfield Date 9/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS — District

Admissions & Records — Department/Location

Judith A. Heinrichs-Harmon — Employee Name

Registrar — Exact Position Title

626-914-8516 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith A Heinrichs-Harmon Date 9/18/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community College
District

Fiscal Services
Department/Location

Elizabeth Jimenez
Employee Name

Cashier
Exact Position Title

626 914 8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and other eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4.5.06

If you have any questions, please contact Carol Cone, at 626.914.8885

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PHK - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

A.R
Department/Location

CERISE G. MATZEN
Employee Name

DEPT. AIDE III; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cerise G. Matzen Date 4-3-06

If you have any questions, please contact Carol Cone, at (626) 914-8885

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PHK - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Tara Medley
Employee Name

DEPT. AIDE II; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T. Medley Date 4/3/06

If you have any questions, please contact Carol Cone, at 626 914 8883

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Julianne Miranda
Employee Name

Admissions & Records Technician III
Exact Position Title

626-857-4132
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Cathy Napoli
Employee Name

Admissions Registration Coordinator
Exact Position Title

626-914-8512
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy Napoli Date 9/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Margaret Olson
Employee Name

Administrative Secretary II
Exact Position Title

626-914-8519
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Olson Date 9/18/06

If you have any questions, please contact _____, at _____

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THK - Ashley

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE — District

A & R — Department/Location

SHERRILL F. PAULUS — Employee Name

DEPT. AIDE III, ADMIN. CLERK I — Exact Position Title

(626) 914-8896 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and w[illegible]r eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherrill F. Paulus Date 4/3/06

If you have any questions, please contact Carol Cone, at (626) 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Anna Ramirez
Employee Name

Admissions & Records Technician II
Exact Position Title

626-914-8514
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anna M Ramirez Date 9/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Tonso Community College
District

Admissions And Records
Department/Location

Sally Ramirez
Employee Name

Tech. I
Exact Position Title

626-914-8511
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sally Ramirez Date 3-30-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus CC
District

Adm & Rec
Department/Location

Martha Rodriguez
Employee Name

Adm & Rec Tech II
Exact Position Title

626-914-8573 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Martha A Rodriguez Date 3/30/04

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS — District

Admissions & Records — Department/Location

Marian Maliglig-Roskos — Employee Name

Admissions & Records Technician II — Exact Position Title

626-914-8510 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	9.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M. T. L. Te. Date 9/18/06

If you have any questions, please contact _____, at _____

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PHK - Cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Angelita Salce
Employee Name

DEPT. AIDE III; ADMIN-CLERK I; A+R TECH I
Exact Position Title

914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Salce Date 4-3-06

If you have any questions, please contact Carol Conn, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cuyamaca Community College — District

Admissions / Records — Department/Location

Elaine A Seubert — Employee Name

Officer Assistant II — Exact Position Title

626-914-8510 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.05					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine A. Seubert Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Admissions & Records
Department/Location

Susan Smith
Employee Name

Admissions & Records Team Leader
Exact Position Title

626-914-8515
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04 05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/18/06

If you have any questions, please contact _____, at _____

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PHR cashier

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Marilou Vela
Employee Name

DEPT. A, DE III; ADMIN. CLERK I
Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/a					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marilou Vela Date 4-3-06

If you have any questions, please contact Carol Cone, at 626 914 8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fiscal Services
Department/Location

Rosalind Zuniga
Employee Name

District Bursar / District Cashier
Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		x			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		x			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	240				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or iformation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature Rosalind Zuniga Date 4/5/06

you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid Office
Department/Location

Felicia A. Adamiak
Employee Name

Financial Aid Tech.
Exact Position Title

(626)914-8592
Telephone #

12mo/~~11mo/10mo/nrk~~
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min.	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min.	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10 min.	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min.			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10 min.		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10 min.			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Felicia A. Adamiak Date April 10, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus Community — District

Financial Aid — Department/Location

Diana Chavez — Employee Name

Financial Aid Technician — Exact Position Title

(626) 914-8592 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	x			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	x			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	x			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			x	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		x		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			x	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diana Chavez — Date 04/10/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Financial Aid
Department/Location

Wendy Coulter
Employee Name

Financial Aid Advisor
Exact Position Title

626-914-8593
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.0				
Code 22 Receiving Applications from students by mail, fax, computer/online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/15/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Financial Aid
Department/Location

Katrina Hewitt
Employee Name

Financial Aid Technician
Exact Position Title

914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	x			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	x			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	x			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			x	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		x		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			x	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katrina Hewitt Date 4/6/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS
District

Financial Aid
Department/Location

Julie Martinez
Employee Name

Financial Aid Advisor
Exact Position Title

626 914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Martinez Date 9-11-06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

CITRUS FINANCIAL AID OFFICE
Department/Location

BRANDON ONG
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

626-914-8592
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4 MIN	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 MIN	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6 MIN	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4 MIN			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7 MIN		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4 MIN			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Brandon Ong Jr. Date 4/25/06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: CITRUS

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								5,461
Fall								10,087
Winter/ Intersession								
Spring								11,811
Total								27,359
2. Number of students who paid enrollment fees:								
Summer								3,450
Fall								5,600
Winter/ Intersession								
Spring								7,280
Total								16,330
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								2,011
Fall								4,487
Winter/ Intersession								
Spring								4,531
Total								11,029

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lois Papner Date 9/18/06

Lois Papner
Employee Name: (print)

Dean of Admissions & Records
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: CITRUS

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								18
Fall								49
Winter/Intersession								N/A
Spring								94
Total								161
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								105
Fall								333
Winter/Intersession								N/A
Spring								119
Total								557

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rosalind Zuniga Date 10/5/16

Rosalind Zuniga — District Bursar

Employee Name: (print) Position or Title

If you have any questions, please contact Carol Cone, at (626) 914-8885

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Citrus College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								1063
Fall								4532
Winter/Intersession								
Spring								4981
Total								10626
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								2013
Fall								4494
Winter/Intersession								
Spring								4532
Total								11039

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lilia R. Medina Date 10/18/06

Employee Name: (print) Lilia R. Medina

Position or Title: Director of Financial Aid

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: CITRUS

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$ 3,746,695
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$ 429118
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rosalind Zuniga Date 10/5/6

Rosalind Zuniga — DISTRICT BURSAR

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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CITRUS

BOGG by TERM 2006.10.02

2005-2006

055	BOGG 1	12,194.00	97
055	BOGG 2	175,656.00	1,328
055	BOGG 3	79,625.00	583
055	BOGG ?	403.00	5
055	TOTALS	267,878.00	2,013
057	BOGG 1	40,196.00	175
057	BOGG 2	781,924.00	2,889
057	BOGG 3	400,868.00	1,423
057	BOGG ?	1,664.00	7
057	TOTALS	1,224,652.00	4,494
063	BOGG 1	41,886.00	164
063	BOGG 2	812,890.00	2,945
063	BOGG 3	406,822.00	1,422
063	BOGG ?	156.00	1
063	TOTALS	1,261,754.00	4,532

Term key:

yyt = 2 digit year and 1 digit term

055 = 2005 Summer
057 = 2005 Fall
063 = 2006 Spring

Fee per unit 05-06 $26.00

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid
Department/Location

Manuel Sanchez
Employee Name

Financial Aid Technician
Exact Position Title

626 914 8592
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature _____ Date 4/6/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: Citrus College

Fiscal Year: 2005-2006

Data Collection for Fee Processing
Activity

Recording Arts Conference Room
Location

February 9, 2006
Date

1-4 pm 3 H
Time

NAME	POSITION/TITLE	LOCATION	PREP TIME
Sherrill Paulus		Citrus College	
Cerise Matzen	Dept Aide	Admissions & Records	
Linda Karzer		Admissions & Records	
Gloria McMullen		Admissions & Records	
Tara Medley		Citrus College	
Marilou Vela	Admission Records	Citrus College	
Ida Eckert	Cashier	✓ ✓	
Angie Salas	Cashier	✓ ✓	
ROSEANN MANFRE-CAMPBELL	ACCT CLERK/CASHIER	FISCAL SERVS. CITRUS COLLEGE	
CLARENCE D. CORNAL	Account/Clerk/Cashier	Fiscal Services	
Rosalind Zuniga	Bursar		

Dup
Dup
Dup

Brief description of the purpose of the meeting: Met w/ CASHIERS to brainstorm fee collection processing during Registration.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rosalind Zuniga Date 2.9.6

Rosalind Zuniga
Employee Name: (print)

Bursar
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: CITRUS

Fiscal Year: 05-06

Staff meeting
Activity

Admn 220
Location

3/30/6
Date

12 - 1 1HR
Time

NAME	POSITION/TITLE	LOCATION	PREP TIME	
Joanna Occhiera				
Jessica Bynum				
Elizabeth Jimenez				
ROSEANN MANFRE-CAMPILLO				-Dup
Clarence Cernal				-Dup

Brief description of the purpose of the meeting:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rozalind Zuniga Date 5/8/6

Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Si_en and Associates
MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Citrus Community College District

Name	Title	Fiscal Years: 04-05		05-06
	AVERAGE ADMINISTRATIVE SECRETARY	$	33.42	37.73
	AVERAGE CUSTODIAN	$	24.56	25.60
	AVERAGE DEAN	$	91.80	96.89
	AVERAGE DIRECTOR	$	81.03	88.48
	AVERAGE EXECUTIVE SECRETARY	$	45.48	49.82
	AVERAGE DEAN OF FACULTY	$	100.42	100.42
	AVERAGE VICE PRESIDENT	$	112.99	123.58
ADAMIAK, FELICIA	FINANCIAL AID TECHNICIAN	$	15.72	16.75
AMUNDSON, PEGGY	OFFICE ASSISTANT II	$	29.96	32.81
ARMSTRONG, THOM	VICE PRESIDENT OF INSTRUCTION (Retired)			
ARNOLD, LESLIE	CUSTODIAN SUPERVISOR		43.3	45.16
BARRETT, ANTOINETTE	ADMINISTRATIVE SECRETARY	$	35.60	
BLADES, LUCIA	ACCOUNTING SUPERVISOR	$	55.26	60.56
BOHATCH, EUGENE	INTERNATIONAL TRADE MANAGER	$	68.26	78.94
BOLLINGER, BERNARD	DEAN	$	93.03	

KACZUR LINDA
McMULLEN, GLORIA → CASHIER AIDE $12.15
PHR the same as other

Name	Title	Fiscal Years: 04-05	05-06
BRIONES, ARTHUR	DEAN OF COUNSELING	$ 96.74	
BUCHWALD, ROSALINDA	DIRECTOR OF FISCAL SERVICES	$ 82.14	95.00
BUJAN, JESSICA	STUDENT AIDE		7.69
CARGANILLO, FE (See LOPEZ)	ACCOUNT CLERK III-PAYROLL	$ 35.36	39.53
CERNAL, CLARENCE D.	ACCOUNT CLERK, CASHIER	$ 28.66	30.19
CHAVEZ, DIANA	FINANCIAL AID TECHNICIAN	$ 25.87	26.99
CLARK, DAWN	PERSONNEL TECHNICIAN	$ 32.13	37.33
CONE, CAROL	BUDGET SUPERVISOR	$ 43.28	49.79
COON, SANDRA	ADMINISTRATIVE ASSISTANT	$ 28.10	33.71
COPE, JAMES	SUPV. ENVIRON. HEALTH PROGRAM	$ 53.91	53.91
COULTER, WENDY	FINANCIAL AID ADVISOR	$ 34.17	36.36
COX, MELANIE	DEAN OF ADMISSIONS AND FINANCIAL AID (Retired)		
CROSBY, TINA	SECRETARY	$ 31.14	34.98
CUNNINGHAM, WANDA	DIRECTOR OF CONTINUING EDUCATION/DEAN	$ 76.46	88.43
DAMRON, TERRENCE	DEAN	$ 93.03	107.59
DEBRAAL, SHIRLEY	FACILITIES COORDINATOR (Retired)		
DeYOUNG, MARTHA	TECHNOLOGY COORDINATOR	$ 41.22	47.44
DIZON, AMIE	ACCOUNT CLERK	$ 26.37	31.06
DUSCH, LAURIE	ACCOUNT CLERK, CASHIER	$ 27.27	

Name	Title	Fiscal Years: 04-05	05-06
ECKERT, SUSAN	SECRETARY	$ 19.56	
EGBERT, IDA M.	CASHIER, AIDE	$ 13.08	13.08
EICHLER, JEFFERY	SUPV. ENVIRONMENTAL PROG.	$ 37.39	39.00
ELHAJ, NADINE	ADMINISTRATIVE SECRETARY		
FEHRS, MIKE	DIRECTOR OF FOUNDATIONS AND GRANTS	$ 85.60	99.01
FINK, BRENDA	HUMAN RESOURCES STAFF DIVERSITY	$ 73.70	88.05
FRASURE, JULIE	CASHIER/ACCT. CLERK I	$ 20.76	
GARCIA, MARY	ADMINISTRATIVE SECRETARY	$ 38.07	41.53
GILHAM, BETTY	ADMINISTRATIVE SECRETARY		
GOLDSTEIN, TODD	STUDENT EMPLOYER SUPERVISOR	$ 50.12	52.28
GONSALVES, PATTI	A&R TECHNICIAN III	$ 32.03	34.09
GORDON, JUDITH	A&R TECHNICIAN II	$ 13.17	14.03
GULLI, JAMES	DEAN OF FACULTY	$ 96.74	
GUZMAN, ERIC	COORDINATOR OF RISK MANAGEMENT	$ 39.28	45.16
HALL, CHERYL	ADMINISTRATIVE SECRETARY	$ 27.29	29.89
HAMILTON, JEANNE	VICE PRESIDENT OF STUDENT SERVICES	$ 115.41	133.48
HARRINGTON, MICHAEL	DIRECTOR OF FACILITIES	$ 81.43	94.17
HATFIELD, JAMIE	CASHIER, AIDE	$ 12.15	12.15
HATFIELD, SHEILA	A&R TECHNICIAN II	$ 12.77	14.13

Name	Title	Fiscal Years: 04-05	05-06
HEINRICHS-HARMON, JUDITH	RIGISTRAR	$ 60.95	63.59
HEMING, ANN	ARTS COORDINATOR	$ 41.22	45.16
HEWITT, KATRINA	FINANCIAL AID TECHNICIAN	$ 30.53	32.48
HINRICHSEN, GREG	DIRECTOR OF THE PERFORMING ARTS	$ 65.24	75.45
HIPPIE, THOMAS	DIRECTOR OF PURCHASING/WAREHOUSE	$ 71.89	83.15
HODSON, ELLENOR	DIRECTOR CHILD DEVELOPMENT CENTER	$ 65.04	
HOLLAND, KIM	DIRECTOR, VOCATIONAL EDUCATION	$ 78.88	91.23
HORTON, CAROL	VICE PRESIDENT OF FINANCE	$ 112.60	130.22
HUGHES, LINDA	PERSONNEL TECHNICIAN	$ 37.36	40.95
HURTADO, MICHAEL	DEAN OF CONTINUING EDUCATION	$ 99.17	110.28
JAMISON, LYNN	STUDY ABROAD SPECIALIST	$ 36.97	40.33
JIMENEZ, ELIZABETH	CASHIER	$ 15.55	15.55
JOHNSON, CHERYL	A&R TECHNICIAN II	$ 25.96	27.35
KIRBY, LARI LEE	DISTANCE EDUCATION SUPERVISOR	$ 41.32	45.16
LINDOERFER, SANDRA	DIRECTOR OF HUMAN RESOURCES	$ 89.23	103.20
LINDSEY, STEVE	DEAN	$ 99.17	110.28
LINK, CHRISTINE	EXECUTIVE SECRETARY	$ 45.48	49.82
LOPEZ, FE	ACCOUNTING TECHNICIAN	$ 35.36	39.53
LOPEZ, ROBERT	PURCHASING ASSISTANT/BUYER	$ 34.95	40.20

Name	Title	Fiscal Years: 04-05	05-06
LOW, EUNICE	SECRETARY	$ 32.18	35.11
MALONE, JEAN	VICE PRESIDENT OF HUMAN RESOURCES	$ 110.97	
MANFRE-CAMPILLO, ROSE	ACCOUNT CLERK/CASHIER	$ 24.00	26.29
MAPES, JULIE	STUDENT AIDE		7.94
MARTINEZ, JULIE	FINANCIAL AID TECHNICIAN	$ 28.66	32.19
MATZEN, CERISE G.	CASHIER AIDE	$ 12.15	12.15
McCUSKER, WILLIAM	DIRECTOR OF COMPUTER CENTER	$ 97.92	
McGUERN, PAM	ADMINISTRATIVE SECRETARY	$ 38.08	41.73
MEDINA, LILLA	DIRECTOR, FINANCIAL AID		66.69
MEDLEY, TARA	CASHIER AIDE	$ 12.15	12.15
MILLER, LINDA	ADMINISTRATIVE SECRETARY	$ 34.58	36.36
MIRANDA, JULIANNE	A&R TECHNICIAN III	$ 32.03	34.09
MORRIS, MARCY	LEARNING CENTER SUPERVISOR	$ 52.64	54.92
NAPOLI, CATHY	A & R COORDINATOR	$ 31.43	34.45
NEWBY, BARBARA	CHILD DEVELOPMENT SPECIALIST	$ 55.26	
OCEGUERA, JOANNA	STUDENT AIDE		7.69
OLSON, MARGARET (PEGGY)	ADMINISTRATIVE SECRETARY	$ 35.53	38.75
ONG, BRANDON	FINANCIAL AID ADVISOR	$ 32.65	34.01
OVER, LUCINDA	DEAN	$ 76.46	88.43

Name	Title	Fiscal Years: 04-05	05-06
PAPNER, LOIS	DEAN	$ 79.52	91.96
PAULUS, SHERRILL	CASHIER AIDE	$ 12.15	12.15
RAMIREZ, ANNA	A&R TECHNICIAN II	$ 26.98	28.71
RAMIREZ, SALLY	A&R TECHNICIAN I	$ 11.98	13.09
REILLY, COLLEEN	CHILD DEVELOPMENT SUPERVISOR		
RODRIGUEZ, MARTHA	A&R TECHNICIAN II	$ 27.65	29.43
ROJAS, JUDY	ADMINISTRATIVE SECRETARY	$ 32.44	38.86
ROLLIN, DOUGLAS	DIRECTOR OF STUDENT SERVICES	$ 95.35	110.28
ROSKOS, MARIAN	A&R TECHNICIAN II	$ 13.02	14.29
SALCE, ANGELITA	CASHIER AIDE	$ 13.08	13.08
SANCHEZ, MANUEL	FINANCIAL AID TECHNICIAN	$ 24.75	25.87
SEUBERT, ELAINE A.	A&R TECHNICIAN II	$ 29.02	30.88
SEWELL, PAMELA	ADMINISTRATIVE SECRETARY	$ 43.28	47.42
SMALL, MICHELLE	PUBLICATIONS DIRECTOR (Retired)		
SMITH, SUSAN	A&R TEAM LEADER	$ 35.53	37.81
TAYLOR, VICKIE	ADMINISTRATIVE SECRETARY	$ 33.42	36.71
THOMPSON, ADRIENNE	STUDENT AFFAIRS SUPERVISOR	$ 37.32	39.25
THOMPSON, JOHN	DEAN	$ 95.35	110.28
VELA, MARILOU	CASHIER AIDE	$ 12.15	12.15

Name	Title	Fiscal Years: 04-05	05-06
VIERA, MICHAEL	SUPERINTENDENT/PRESIDENT	$ 143.87	143.87
WHARTON, MARY	FINANCIAL AID TEAM LEADER	$ 41.01	43.64
WILLIAMS, JAMES	DEAN OF FACULTY	$ 104.10	
WISE,JODY	DEAN	$ 76.46	88.43
ZUNIGA, ROSALINDA	DISTRICT BURSAR/DISTRICT CASHIER	$ 33.18	35.31

CITRUS MANDATE REIMBURSEMENT 2005-2006			8/29/2006
NAME	POSITION	SALARY/BENEFITS	60 PHR
Adamiak, Felicia	Financial Aid Technician	$29,483.73	16.75
Amundson, Peggy	Transcript Evaluator	$56,175.41	32.81
Arnold, Leslie	Custodial Supervisor	$75,509.08	45.16
Blades, Lucia	Accounting Supervisor	$101,259.43	60.56
Bohatch, Eugene	International Trade Manager	$131,993.19	78.94
Buchwald, Rosalinda	Director of Fiscal Services	$158,834.13	95.00
Cernal, Clarence	Account Clerk/Cashier	$52,655.04	30.19
Chavez, Diana	Financial Aid Technician	$47,286.56	26.99
Clark, Dawn	Personnel Technician	$65,107.68	37.33
Cone, Carol	Budget Supervisor	$83,249.26	49.79
Coon, Sandra	Administrative Assistant	$56,362.86	33.71
Cope, James	Supv. Environmental Health Prog.	$90,140.16	53.91
Coulter, Wendy	Financial Aid Advisor	$61,674.28	36.36
Crosby, Tina	Secretary	$60,169.86	34.98
Cunnyngham, Wanda	Dean	$147,852.37	88.43
Damron, Terrance	Dean	$179,888.86	107.59
DeYoung, Martha	Technology Coordinator	$79,326.10	47.44
Dizon, Amie	Account Clerk	$53,181.53	31.06
Eichler, Jeffrey	Supervisor Environmental Prog.	$65,208.88	39.00
Fehrs, Mike	Director of Foundation & Grants	$165,544.41	99.01
Fink, Brenda	Human Resources Staff Diversity	$148,215.95	88.65
Garcia Mary	Administrative Assistant	$69,778.62	41.53
Goldstein, Todd	Student Employment Supervisor	$87,414.76	52.28
Gonsalves, Patti	A & R Technician III	$57,270.66	34.09
Gorden, Judith	A & R Technician II	$24,803.21	14.03
Guzman, Eric	Coordinator of Risk Management	$75,509.08	45.16
Hall, Cheryl	Administrative Secretary	$52,133.62	29.89
Hamilton, Jeanne	Vice-President Student Services	$223,179.66	133.48
Harrington, Michael	Director of Facilities	$157,455.75	94.17
Hatfield, Sheila	A & R Technician II	$24,198.16	14.13
Heinrich, Judith	Registrar	$106,318.63	63.59
Heming, Ann	Coordinator of Fine & Performing Art	$75,509.08	45.16
Hewitt, Katrina	Financial Aid Technician	$55,879.69	32.48
Hinrichsen, Gregory	Director of Performing Arts	$126,146.28	75.45
Hippie, Thomas	Director of Purchasing/Warehouse	$139,021.45	83.15
Holland, Kim	Director of Vocational Education	$152,539.89	91.23
Horton, Carol	Vice-President of Finance	$217,726.67	130.22
Hughes, Linda	Personnel Technician	$69,778.62	40.95
Hurtado, Michael	Dean	$184,387.59	110.28
Jamison, Lynn	Study Abroad Specialist	$68,076.73	40.33
Johnson, Cheryl	A & R Technician II	$47,702.70	27.35
King, William	Info Systems Specialist III	$97,619.12	58.38
Kirby, Lori Lee	Distance Education Supervisor	$75,509.08	45.16
Lindoerfer, Sandra	Director Human Resources	$172,542.47	103.20
Lindsey, Steve	Dean	$184,387.59	110.28
Link, Christine	Executive Secretary	$83,294.71	49.82
Lopez, Fe	Accounting Technician	$66,416.37	39.53
Lopez, Robert	Purchasing Assistant/Buyer	$70,113.89	40.20
Low, Eunice	Secretary	$58,702.33	35.11
Malmgren, Irene	Vice President of Instruction	$178,964.81	107.04
Monfre-Campillo, Rose	Account Clerk/Cashier	$45,008.08	26.29
Martinez, Julie	Financial Aid Technician	$56,142.16	32.19
McGuern, Pamela	Administrative Assistant	$69,778.62	41.73
Medina, Lilia	Director Financial Aid	$111,498.93	66.69
Miller, Linda	Administrative Secretary	$61,674.28	36.36
Miranda, Julianne	A & R Technician III	$57,270.66	34.09
Morris, Marcy	Learning Center Supervisor	$91,822.59	54.92
Napoli, Cathy	A & R Coordinator	$58,702.33	34.45
Olson, Margaret(Peggy)	Administrative Secretary	$64,796.37	38.75
Ong, Brandon	Financial Aid Advisor	$57,955.27	34.01
Over, Lucinda	Dean	$147,852.37	88.43
Papner, Lois	Dean	$153,759.83	91.96
Ramirez, Anna	A & R Technician II	$49,384.12	28.71
Ramirez, Sally	A & R Technician I	$23,032.20	13.09

Citrus Community College District
308/95 Enrollment F[illegible]ollection and Waivers
Fiscal Years: 19[illegible]0 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 1,756,194	$ 1,688,916	$ 1,575,286	$ 1,602,803	$ 2,372,730	$ 2,284,261	$ 3,746,695.00
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 35,124	$ 33,778	$ 31,506	$ 32,056	$ 47,455	$ 45,685	$ 74,934
1.8-4 line 4A	Enrollment Fees Waived	$ 724,019	$ 739,833	$ 769,930	$ 1,443,175	$ 1,472,740	$ 2,532,435	$ 2,754,284.00
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649	$ 55,086
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 50,681	For 00-01 through 04-05 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		67,257	69,993	131,197	93,984	108,501	105,934
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736	$ 96,400
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649	$ 55,086
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 50,681						
1.8-4 5.	Credit Units Waived		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736	$ 96,400
Total Offset Savings	**Forward to Sch. 5A**	**$ 65,161**	**$ 76,001**	**$ 79,093**	**$ 148,253**	**$ 114,980**	**$ 149,385**	**$ 151,486**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Citrus
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$33,664,031	$29,612,819	$1,364,709	$30,977,528
EQUALIZATION	248,757	228,858	19,899	248,757
ENROLL FEE ADMIN (2%)	44,819	41,235	3,584	44,819
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	328,188	301,933	26,255	328,188
S.F.A.A.	366,243	335,869	30,374	366,243
E.O.P.S.	822,628	756,817	65,811	822,628
C.A.R.E.	208,137	191,486	16,651	208,137
D.S.P.S.	547,841	504,013	43,828	547,841
STATE HOSPITALS	0	0	0	0
CALWORKS	302,670	256,378	46,292	302,670
MATRICULATION (CREDIT)	432,319	397,735	34,584	432,319
MATRIC. (NONCREDIT)	206,385	189,875	16,510	206,385
FAC.& STAFF DIVERSITY	16,647	14,075	2,572	16,647
PART-TIME FAC. INS.	855	0	855	855
PART-TIME FAC. OFF. HRS	7,866	0	7,866	7,866
PART-TIME FAC. ALLO.	519,462	477,905	41,557	519,462
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	270,617	248,967	21,650	270,617
ECON. DEVELOPMENT	178,875	150,255	0	150,255
TANF	64,219	59,083	5,136	64,219
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	63,210	0	63,210
VTEA TITLE I C	337,071	221,616	61,524	283,140
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	1,734,747	1,734,747	0	1,734,747
TOTAL	$40,429,959	$35,820,638	$1,828,227	$37,648,865

FISCAL SERVICES:06/19/06 08:18
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Sc e 5A
Citrus County Co...unity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39	$ 91.96
2	Staff Training	(04)(B)(1)(b)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39	$ 91.96
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 263.65	$ 270.60	$ 321.20	$ 350.75	$ 382.25	$ 299.80	$ 1,933.66
4	Waiving student fees	(04)(B)(2)(b)	$ 40,403.97	$ 43,683.25	$ 59,104.86	$ 70,405.20	$ 67,996.33	$ 87,060.43	$ 86,825.26
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 3,179.62	$ 3,263.44	$ 3,873.67	$ 4,230.05	$ 4,609.94	$ 3,615.59	
6	EFCW - Fee Waiver Costs	Total	$ 44,163.62	$ 47,542.01	$ 63,685.17	$ 75,406.90	$ 73,447.22	$ 91,484.60	$ 88,942.84
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 65,161.00	$ 76,001.00	$ 79,093.00	$ 148,253.00	$ 114,980	$ 149,385.00	$ 151,486.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (20,997.38)	$ (28,458.99)	$ (15,407.83)	$ (72,846.10)	$ (41,532.78)	$ (57,900.40)	$ (62,543.16)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 44,163.62**	**$ 47,542.01**	**$ 63,685.17**	**$ 75,406.90**	**$ 73,447.22**	**$ 91,484.60**	**$ 88,942.84**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Citrus College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 13, 2006 03:43:50

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	259	92,716
BOGW - Part B based on income standards	3,944	1,732,341
BOGW - Part C based on financial need	1,818	877,266

HEP-count 6021

Total Amount = $ 2,702,323

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

December 21, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8666

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Citrus Community College District CC19090

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Citrus Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D. D. Bramwell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

...mmunity College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

Claimant Identification Number: CC19090

(02) Claimant Name: Citrus Community College district

County of Location: Los Angeles

Street Address or P.O. Box: 1000 West Foothill Boulevard

City: Glendora | State: CA | Zip Code: 91741-1899

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 354,600	(13) $ 322,419
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 322,419
Due from State	(08) $ 354,600	(17) $ 322,419
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	35,330
(23) EFCW-1, (04)(A)(1)(b)(f)	32,477
(24) EFCW-1, (04)(A)(2)(a)(f)	159,428
(25) EFCW-1, (04)(B)(1)(a)(f)	193
(26) EFCW-1, (04)(B)(1)(b)(f)	193
(27) EFCW-1, (04)(B)(2)(a)(f)	1,932
(28) EFCW-1, (04)(B)(2)(b)(f)	122,010
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	42
(31) EFCW-1, (07)	147,480
(32) EFCW-1, (09)	52,906
(33) EFCW-1, (10)	123,718
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 12-19-07

Carol R. Horton
Type or Print Name

Vice President, Financial and Administrative Services
Title

(38) Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 2?7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

itrus Community College district

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2006-2007

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 35,329.76	$ -	$ -	$ -	$ -	$ 35,329.76
b. Staff training (One time per employee)	$ 32,476.87	$ -	$ -	$ -	$ -	$ 32,476.87
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 159,428.41	$ -	$ -	$ -	$ -	$ 159,428.41
1 rollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 192.98	$ -	$ -	$ -	$ -	$ 192.98
b. Staff training (One time per employee)	$ 192.98	$ -	$ -	$ -	$ -	$ 192.98
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 1,931.59	$ -	$ -	$ -	$ -	$ 1,931.59
b. Waiving student fees	$ 122,009.60	$ -	$ -	$ -	$ -	$ 122,009.60
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
Total Direct Costs	$ 351,562.19	$ -	$ -	$ -	$ -	$ 351,562.19

rect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	41.95%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 147,480.34
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 499,042.53
t Reduction		
Less: Enrollment Fee Revenue offset		$ 52,906.00
Less rollment Fee Waiver offsets		$ 123,717.76
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 322,418.77

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
us Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Jimenez, Elizabeth	Cashier	$17.02	80.0	$ 1,361.60				
Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	120.0	$ 3,325.20				
Papner, Lois	Dean	$96.49	4.0	$ 385.96				
Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	800.0	$ 29,904.00				
Cernal, Clarence D.	Account Clerk/Cashier	$35.30	10.0	$ 353.00				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 35,329.76	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ıs Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Jimenez, Elizabeth	Cashier	$17.02	40.0	$ 680.80				
Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	40.0	$ 1,108.40				
Papner, Lois	Dean	$96.49	3.0	$ 289.47				
Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	800.0	$ 29,904.00				
Cernal, Clarence D.	Account Clerk/Cashier	$35.30	14.0	$ 494.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 32,476.87	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
is Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admin. & Records staff Various	$23.71	1,211.7	$ 28,729.41				
Calculating total enrollment fee to be collected Admin. & Records staff Various	$23.71	1,643.8	$ 38,974.50				
Answering student's questions regarding enrollment fee collection Admin. & Records staff Various	$23.71	2,468.2	$ 58,521.02				
ing written and computer records for enrollment fee information Admin. & Records staff Various	$23.71	876.7	$ 20,786.56				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admin. & Records staff Various	$23.71	480.4	$ 11,390.28				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admin. & Records staff Various	$23.71	43.3	$ 1,026.64				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 159,428.41	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

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MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Papner, Lois Dean	$96.49	2.0	$ 192.98				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 192.98	$ -	$ -	$ -	$ -

New 04/06

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MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

is Community College district

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Papner, Lois Dean	$96.49	2.0	$ 192.98				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 192.98	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
us Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Adamiak, Felicia	Financial Aid Technician	$17.99	5.0	$ 89.95				
Chavez, Diana	Financial Aid Technician	$29.87	12.0	$ 358.44				
Coulter, Wendy	Financial Aid Advisor	$39.06	6.0	$ 234.36				
Hewitt, Katrina	Financial Aid Technician	$34.89	6.0	$ 209.34				
Martinez, Julie	Financial Aid Technician	$35.30	6.0	$ 211.80				
Medina, Lilia	Director, Financial Aid	$72.77	3.0	$ 218.31				
Flores, Jose	Financial Aid Technician	$23.81	12.0	$ 285.72				
Mercado, Juan	Financial Aid Technician	$23.81	12.0	$ 285.72				
Rangel, Enrique	Student Services Assistant	$12.65	3.0	$ 37.95				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,931.59	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

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MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

us Community College district

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office staff Various	$27.17	809.7	$ 21,999.55				
Receiving waiver applications Financial Aid Office staff Various	$27.17	899.7	$ 24,444.85				
Evaluating waiver applications and verifying application documents Financial Aid Office staff Various	$27.17	1,349.5	$ 36,665.92				
ng students of additional documentation requirements and how to obtain information Financial Aid Office staff Various	$27.17	27.2	$ 739.02				
Entering approved application information into district records; providing student award letter Financial Aid Office staff Various	$27.17	1,380.9	$ 37,519.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office staff Various	$27.17	23.6	$ 641.21				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 122,009.60	$ -	$ -	$ -	$ -

New 04/06

Citrus Community College district
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	5.00	Adamiak, Felicia	Financial Aid Technician	$17.99	$89.95	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	5.00	**Adamiak, Felicia Total**			$89.95		
06-07	43.30	Admin. & Records staff	Various	$23.71	$1,026.64	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
06-07	1,211.70	Admin. & Records staff	Various	$23.71	$28,729.41	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	1,643.80	Admin. & Records staff	Various	$23.71	$38,974.50	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,468.20	Admin. & Records staff	Various	$23.71	$58,521.02	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	876.70	Admin. & Records staff	Various	$23.71	$20,786.56	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	480.40	Admin. & Records staff	Various	$23.71	$11,390.28	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	6,724.10	**Admin. & Records staff Total**			$159,428.41		
06-07	10.00	Cernal, Clarence D.	Account Clerk/Cashier	$35.30	$353.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV
06-07	14.00	Cernal, Clarence D.	Account Clerk/Cashier	$35.30	$494.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	24.00	**Cernal, Clarence D. Total**			$847.20		
06-07	12.00	Chavez, Diana	Financial aid Technician	$29.87	$358.44	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**Chavez, Diana Total**			$358.44		
06-07	6.00	Coulter, Wendy	Financial Aid Advisor	$39.06	$234.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	6.00	**Coulter, Wendy Total**			$234.36		
0607	899.70	Financial Aid Office staf	Various	$27.17	$24,444.85	Receiving waiver applications	Waiving student fees
06-07	809.70	Financial Aid Office staf	Various	$27.17	$21,999.55	Answering student's questions regarding enrollment fee waivers/referring to appropriate perso	Waiving student fees
06-07	23.60	Financial Aid Office staf	Various	$27.17	$641.21	In case of denied applications, reviewing and evaluating information if denial is appealed by st	Waiving student fees
06-07	1,349.50	Financial Aid Office staf	Various	$27.17	$36,665.92	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	27.20	Financial Aid Office staf	Various	$27.17	$739.02	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,380.90	Financial Aid Office staf	Various	$27.17	$37,519.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,490.60	**Financial Aid Office staff Total**			$122,009.60		
06-07	12.00	Flores, Jose	Financial Aid Technician	$23.81	$285.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**Flores, Jose Total**			$285.72		
06-07	6.00	Hewitt, Katrina	Financial Aid Technician	$34.89	$209.34	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	6.00	**Hewitt, Katrina Total**			$209.34		
06-07	40.00	Jimenez, Elizabeth	Cashier	$17.02	$680.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	80.00	Jimenez, Elizabeth	Cashier	$17.02	$1,361.60	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV. .
	120.00	**Jimenez, Elizabeth Total**			$2,042.40		
06-07	40.00	Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	$1,108.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	120.00	Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	$3,325.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	160.00	**Manfre-Campillo, Rose Total**			$4,433.60		
06-07	6.00	Martinez, Julie	Financial Aid Technician	$35.30	$211.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	6.00	**Martinez, Julie Total**			$211.80		
9/15/2006	3.00	Medina, Lilia	Director, Financial Aid	$72.77	$218.31	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3.00	**Medina, Lilia Total**			$218.31		
06-07	12.00	Mercado, Juan	Financial Aid Technician	$23.81	$285.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**Mercado, Juan Total**			$285.72		
06-07	4.00	Papner, Lois	Dean	$96.49	$385.96	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	2.00	Papner, Lois	Dean	$96.49	$192.98	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Papner, Lois	Dean	$96.49	$289.47	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	2.00	Papner, Lois	Dean	$96.49	$192.98	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
	11.00	**Papner, Lois Total**			$1,061.39		

Citrus Community College district
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	3.00	Rangel, Enrique	Student Services Assistant	$12.65	$37.95	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3.00	**Rangel, Enrique Total**			$37.95		
06-07	800.00	Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	$29,904.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	800.00	Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	$29,904.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1,600.00	**Zuniga, Rosalinda Total**			$59,808.00		
	13,194.70	**Grand Total**			$351,562.19		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$26,985,194		$26,985,194	$707,007	$26,278,187
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,289,716		2,289,716	37,652	2,252,064
Course and Curriculum Development	6020	440,427		440,427	16,521	423,906
Academic/Faculty Senate	6030	141,297		141,297	1,278	140,019
Other Instructional Administration & Instructional Governance	6090	332,239		332,239		332,239
Instructional Support Services	6100					
Learning Center	6110	619,080		619,080	1,309	617,771
Library	6120	976,758		976,758	37,618	939,140
Media	6130	153,054		153,054	18,145	134,909
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,075,334		1,075,334	3,538	1,071,796
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,028,708		1,028,708	4,994	1,023,714
Matriculation and Student Assessment	6320	840,371		840,371	17,499	822,872
Transfer Programs	6330	219,082		219,082	2,997	216,085
Career Guidance	6340	167,233		167,233		167,233
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	467,128		467,128	8,147	458,981
Subtotal		$35,735,621	$0	$35,735,621	$856,705	$34,878,916

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,151,191	$409,355	$741,836		$741,836
Health Services	6440	201,616		201,616	2,804	198,812
Student Personnel Admin.	6450	300,132		300,132	386	299,746
Financial Aid Administration	6460	822,730		822,730	16,074	806,656
Job Placement Services	6470	191,127		191,127		191,127
Veterans Services	6480					
Miscellaneous Student Services	6490	524,211		524,211	57,340	466,871
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,005,373		1,005,373	1,005,373	0
Custodial Services	6530	1,504,094		1,504,094	1,504,094	0
Grounds Maintenance and Repairs	6550	735,335		735,335	735,335	0
Utilities	6570	1,694,955		1,694,955	1,694,955	0
Other	6590	644,279		644,279	644,279	0
Planning, Policy Making, and Coordination	6600	2,015,454		2,015,454	2,015,454	0
General Inst. Support Services	6700					
Community Relations	6710	1,046,354		1,046,354	1,046,354	0
Fiscal Operations	6720	1,231,890		1,231,890	1,231,890	0
Human Resources Management	6730	1,115,653		1,115,653	1,115,653	0
Noninstructional Staff Benefits & Incentives	6740	656,481		656,481	656,481	0
Staff Development	6750	31,546		31,546	31,546	0
Staff Diversity	6760	28,901		28,901	28,901	0
Logistical Services	6770	2,044,721		2,044,721	2,044,721	0
Management Information Systems	6780	1,941,094		1,941,094	1,941,094	0
Subtotal		$54,622,758	$409,355	$54,213,403	$16,629,439	$37,583,964

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810	181,431		181,431	5,761	175,670
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	610,891		610,891	72,687	538,204
Student and Co-curricular Activities	6960	715,809		715,809	4,986	710,823
Student Housing	6970					
Other	6990	849,992		849,992	6,093	843,899
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$56,980,881	$409,355	$56,571,526	$16,718,966	$39,852,560
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				41.95%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Non nstructional** (2)				
Agriculture and Natura Resources	0100	27,368		432			27,800
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	808,117	78,444	44,825	18,276		949,662
Business and Management	0500	681,875	4,095	3,623	282		689,875
Communications	0600	212,084		5,849	3,360		221,293
Information Technology	0700	546,616		7,899	365		554,879
Education	0800	1,001,374	662,475	10,313	18,967		1,693,129
Engineering and Industrial Tech.	0900	744,352	82,152	90,963	108,998		1,026,465
Fine and Applied Arts	1000	3,010,668	468,591	217,279	65,964		3,752,902
Foreign Language	1100	543,639		1,387	1,180		546,206
Health	1200	1,009,414	279,514	71,122	81,391		1,441,441
Family and Consumer Sciences	1300	342,561	681	1,596			345,138
Law	1400						
Humanities (Letters)	1500	2,219,528		13,812	620		2,233,960
Library Science	1600	10,817		2,629			13,446
Mathematics	1700	2,297,663	15,366	12,270			2,325,298
Military Studies	1800						
Physical Sciences	1900	845,209	149,617	31,104	34,273		1,060,503
Psychology	2000	716,500		1,819			718,319
Public and Protective Services	2100	234,972		622			235,594
Social Sciences	2200	1,266,982		4,271			1,271,253
Commercial Services	3000	1,057,034	404,818	85,301	25,662		1,572,815
Interdisciplinary Studies	4900	4,501,589	529,243	253,598	347,679		5,632,109
Instruct. Staff-Retir's Bnfts.& Retire. Incents	5900	773,116					773,116
Subtotal - Instructional Activities	599	22,851,478	2,565,995	860,714	707,007		26,985,194

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Citrus Community College District | 620 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA

For Actual Year: 2005-06

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,226,081	25,983	37,652		2,289,716
Course and Curriculum Development	6020		12',447	302,459	16,521		440,427
Academic/Faculty Senate	6030		130,951	9,068	1,278		141,297
Other Instruct. Admin. & Instruct. Governance	6090		327,159	5,080			332,239
Subtotal - Instructional Administration	**6000**		2,805,638	342,590	55,451		3,203,679
Instructional Support Services (6100)							
Learning Center	6110	204,768	406,324	6,679	1,309		619,080
Library	6120		847,909	91,231	37,618		976,758
Media	6130		120,945	13,964	18,145		153,054
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	204,768	1,375,178	111,874	57,072		1,748,892
Admissions and Records	**6200**		1,032,882	38,914	3,538		1,075,334
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		998,540	25,174	4,994		1,028,708
Matriculation and Student Assessment	6320		769,038	53,834	17,499		840,371
Transfer Programs	6330		209,264	6,821	2,997		219,082
Career Guidance	6340		157,118	10,115			167,233
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,133,960	95,944	25,490		2,255,394

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		402,433	56,548	8,147		467,128
Extended Opportunity Prgms. & Services (EOPS)	6430		690,326	51,510		409,355	1,151,191
Health Services	6440		143,307	55,505	2,804		201,616
Student Personnel Administration	6450		289,347	10,399	386		300,132
Financial Aid Administration	6460		716,674	89,982	16,074		822,730
Job Placement Services	6470		190,220	907			191,127
Veterans Services	6480						
Miscellaneous Student Services	6490		367,120	99,751	57,340		524,211
Subtotal - Other Student Services	6400		2,799,427	364,602	84,751	409,355	3,658,135
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		744,714	256,187	4,472		1,005,373
Custodial Services	6530		1,334,302	147,489	22,303		1,504,094
Grounds Maintenance and Repairs	6550		657,535	72,582	5,218		735,335
Utilities	6570			1,694,955			1,694,955
Other Operation and Maintenance of Plant	6590		392,272	214,716	37,291		644,279
Subtotal - Operation and Maintenance of Plant	6500		3,128,823	2,385,929	69,284		5,584,036
Planning, Policymaking, and Coordination	6600		1,514,896	484,187	16,371		2,015,454

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District | 820 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710						
Fiscal Operations	6720		740,986	299,772	5,596		1,046,354
Human Resources Management	6730		923,124	292,682	16,084		1,231,890
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		757,255	344,747	13,651		1,115,653
Staff Development	6750		656,481				656,481
Staff Diversity	6760		431	31,115			31,546
Logistical Services	6770		1,548	27,353			28,901
Management Information Systems	6780		1,044,153	909,463	91,105		2,044,721
Other General Institutional Support Services	6790		1,384,717	412,538	143,839		1,941,094
Subtotal - General Institutional Support Services	6700		5,508,695	2,317,670	270,275		8,096,640
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		141,037	34,633	5,761		181,431
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	6800		141,037	34,633	5,761		181,431

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 Genera Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		489,536	48,668	72,687		610,391
Student and Co-curricular Activities	6960		588,388	122,435	4,986		715,309
Student Housing	6970						
Other Ancillary Services	6990		720,092	123,807	6,093		849,992
Subtotal - Ancillary Services	6900		1,798,016	294,910	83,766		2,176,692
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	7000						
Physical Property and Related Acquisitions (7100)	7100						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					2,368,597	2,368,597
Other Outgo	7330					63,182	63,182
Subtotal - Transfers, Student Aid, and Other Outgo	7300					2,431,779	2,431,779
TOTAL EXPENDITURES and OTHER OUTGO	391	23,056,246	24,804,547	7,331,967	1,378,766	2,841,134	59,412,660

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Indirect Cost Rates

CCD	Method	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07	07-08	08-09
AHCCD	*FED rate*							*45.0*	*45.0*	*45.0*	*45.0*	
	FAM-29C	**37.59**	**37.07**	**35.76**	**36.14**	**32.00**	**32.46**	31.81	32.71	30.33		
	w/deprec.								33.14	36.9		
C[illegible]C	**FAM-29C**	**39.3**	**40.33**	**32.78**	**31.58**	**29.26**	**28.16**	**34.11**	30.68	29.17		
	w/deprec.								**30.81**	**34.58**		
Citrus	**FAM-29C**	**51.75**	**44.86**	**44.7**	**45.74**	**41.72**	**45.53**	**40.58**	40.6	41.95		
	w/deprec.								**48.98**	**52.46**		
Contra	**FED rate**	**34.00**	**34.00**	**34.00**	**34.00**	**32.80**	**32.80**	**32.80**	**32.8**	**32.5**	**32.5**	
ElCam	**FAM-29C**	**39.18**	**41.4**	**37.55**	**36.24**	**30.38**	**29.10**	**35.22**	35.02	32.00		
	w/deprec.								**34.99**	**35.65**		
Foot	**FAM-29C**	**28.67**	**30.09**	**31.67**	**35.5**	**32.28**	**31.11**	**29.66**	28.9	29.69		
	w/deprec.								**33.96**	**39.45**		
Gavilan	**FAM-29C**	**35.68**	**34.23**	**36.55**	**35.86**	**32.88**	**36.29**	**33.96**	36.92	36.45		
	w/deprec.								**39.74**	**39.55**		
Glendale	*FED rate*					*45.00*	*45.00*	*45.00*	*45.00*	*45.00*	*45.00*	*43.30*
	FAM-29C	**39.13**	**38.41**	**38.15**	**34.20**							
Kern	**FAM-29C**	**66.87**	**55.25**	**51.24**	**49.63**	**48.94**	**39.43**	**42.89**	39.91	37.49		
	w/deprec.								**41.26**	**42.33**		
LRios	*FED rate*								*30.00*	*30.00*		
	FAM-29C	**33.73**	**33.68**	**34.00**	**32.79**	**31.09**	**30.88**	**31.96**	*32.61*			
	w/deprec (per client)								**36.95**	**37.7**	**36.16**	
LongB	**FAM-29C**		**36.8**	**37.27**	**38.71**	**35.01**	**33.40**	**32.33**	33.86	32.7		
	w/deprec.								**36.33**	**35.37**		
NOrg	*FED rate*	***38.00***	***38.00***	***38.00***	***38.00***	***39.00***	***39.00***	***39.00***	***39.00***	***29.50***	***29.50***	***29.50***
PalC	**FAM-29C**	**32.61**	**32.87**	**35.16**	**35.41**	**33.72**	**29.56**	**27.57**	25.48	26.35		
	w/deprec.								**29.08**	**28.44**		
PASA	*FED rate*	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***32.80***	***32.80***	***32.80***	***31.70***	
Rancho	*FED rate*							***30.00***	***30.00***	***30.00***	***30.00***	***30.00***
Rwoods	**FAM-29C**	**42.74**	**39.44**	**41.42**	**41.43**	**38.92**	**38.64**	**37.90**	37.45	39.6		
	w/deprec.								**48.2**	**39.53**		
SanJac	**FAM-29C**	**47.02**	**50.15**	**42.92**	**42.47**	**40.14**	**38.81**	**36.94**	**34.02**	**38.69**		
	w/deprec.											
SBC	**FAM-29C**	**51.36**	**45.57**	**51.88**	**46.95**	**49.18**	**44.42**	**45.62**	47.74	45.3		
	w/deprec.								**50.11**	**53.93**		
SMateo	***FED rate***		***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	
StMon	**FAM-29C**	**43.56**	**45.96**	**41.72**	**42.07**	**39.82**	**34.07**	**36.91**	34.25	35.53		
	w/deprec.								**38.95**	**35.32**		
Sierra	**FAM-29C**	**45.92**	**42.04**	**41.34**	**36.18**	**36.79**	**38.41**	**40.90**	35.70	38.49		
	w/deprec.								**42.58**	**37.83**		
StateC	*FED rate*							***36.50***	***36.50***	***36.50***	***36.50***	
	FAM-29C	**38.96**	**38.26**	**34.59**	**36.70**	**34.62**	**31.33**	32.25				
VC	**FAM-29C**	**57.9**	**58.96**	**58.45**	**61.28**	**55.20**	**53.91**	**45.61**	46.57	41.33		
	w/deprec.								**48.58**	**59.52**		
VVM	**FAM-29C**	**40.47**	**44.02**	**42.99**	**44.15**	**33.37**	**34.89**	**35.80**	37.57	38.86		
	w/deprec.								**41.1**	**41.22**		
WestK	**FAM-29C**	**33.92**	**37.65**	**37.64**	**39.73**	**37.46**	**31.79**	**38.32**	34.32	34.87		
	w/deprec.								**36.3**	**41.07**		
CC	**FAM-29C**	**33.05**	**32.67**	**30.93**	**30.98**	**26.87**	**26.35**	**34.88**	36.38	32.23		
	w/deprec.											

Schedule 1A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	26926
Avg. time p/account	2.7
Total Time (in minutes)	72700
Per Hour	60
Hours Worked (** **11**)	**1211.7**
***EFC 2**	16438
Avg. time p/student	6.0
Total Time (in minutes)	98628
Per Hour	60
Hours Worked (** **12**)	**1643.8**
***EFC 1**	26926
Avg. time p/question	5.5
Total Time (in minutes)	148093
Per Hour	60
Hours Worked (** **13**)	**2468.2**
***EFC 2**	16438
Avg. time p/file	3.2
Total Time (in minutes)	52602
Per Hour	60
Hours Worked (** **14**)	**876.7**
***EFC 4**	315
Avg. time p/account	91.5
Total Time (in minutes)	28823
Per Hour	60
Hours Worked (** **15**)	**480.4**
***EFC 5**	394
Avg. time p/student	6.6
Total Time (in minutes)	2600
Per Hour	60
Hours Worked (** **16**)	**43.3**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	10796
Avg. time p/question	4.5
Total Time (in minutes)	48582
Per Hour	60
Hours Worked (** **21**)	**809.7**
***EFW 6**	10796
Avg. time p/application	5
Total Time (in minutes)	53980
Per Hour	60
Hours Worked (** **22**)	**899.7**
***EFW 6**	10796
Avg. time p/evaluation	7.5
Total Time (in minutes)	80970
Per Hour	60
Hours Worked (** **23**)	**1349.5**
***EFW 8**	308
Avg. time p/application	5.3
Total Time (in minutes)	1632
Per Hour	60
Hours Worked (** **24**)	**27.2**
***EFW 7**	10488
Avg. time p/application	7.9
Total Time (in minutes)	82855
Per Hour	60
Hours Worked (** **25**)	**1380.9**
***EFW 8**	308
Avg. time p/application	4.6
Total Time (in minutes)	1417
Per Hour	60
Hours Worked (** **26**)	**23.6**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

		*Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Amundson, Peggy	Transcript Evaluator			5.0			
Cernal, Clarence D.	Account Clerk/Cashier	1.0	6.0	4.0	1.0	120.0	11.0
Cole, Mary	Administrative Clerk	1.0	6.0	5.0			5.0
Egbert, Ida	Cashier Aide	1.0	6.0	4.0	1.0	120.0	11.0
Espinoza, Melinda	Administrative Clerk	1.0	6.0	5.0			5.0
Gonsalves, Patti	A&R Technician			3.0			
Gordon, Judith M.	A&R Technician	8.0	5.0	7.0	3.0		3.0
Grande, Jocelyn	Account Clerk/Cashier	1.0	6.0	4.0	1.0	120.0	11.0
Hatfield, Jaime	Cashier Aide	1.0	6.0	5.0			5.0
Hatfield, Sheila	Admissions Technician			8.0			
Heinrichs-Harmon, Judith	Registrar	1.0	6.0	4.0	2.0	3.0	1.0
Houser, Tamara	Administrative Clerk	1.0	6.0	5.0			5.0
Jimenez, Elizabeth	Cashier	1.0	6.0	4.0	1.0	120.0	11.0
Johnson, Cheryl	A&R Technician			3.5			
Kaczur, Linda	Cashier Aide	1.0	6.0	5.0	1.0		5.0
Lefler, Abigail	Administrative Clerk	1.0	6.0	5.0			5.0
Manfre-Campillo, Rose Ann	Account Clerk/Cashier	1.0	6.0	4.0	1.0	120.0	11.0
Matzen, Cerise	Cashier Aide	1.0	6.0	5.0			5.0
Medley, Tara	Cashier Aide	1.0	6.0	4.0	1.0	120.0	11.0
Miranda, Julianne	A&R Technician			7.0			
Napoli, Cathy	Admissions Registration Coor.	7.0	4.0	8.0	4.0		3.0
Olson, Margaret	Administrative Secretary	10.0		12.0	6.0		12.0
Paulus, Sherrill	Cashier Aide	1.0	6.0	5.0			5.0
Ramirez, Anna	A&R Technician	9.0	10.0	6.0	9.0	9.0	9.0
Rodriquez, Martha	A&R Technician	6.0		8.0			6.0
Roskos, Marian Maliglig	A&R Technician	8.0		15.0	13.0		5.0
Salce, Angie	Cashier Aide	1.0	6.0	5.0	1.0		5.0
Schonland, Julie	Administrative Clerk	1.0	6.0	5.0			5.0
Seubert, Elaine	Admissions Office Assistant			3.0			
Smith, Susan	A&R Team Leader	2.0		3.0			
Vela, Marilou	Cashier Aide	1.0	6.0	5.0			5.0
Wells, Susan	Administrative Clerk	1.0	6.0	5.0			5.0
** ***Zuniga, Rosalind***	***Bursar***	***1.0***	***6.0***	***4.0***	***1.0***	***120.0***	***15.0***
Average		**2.7**	**6.0**	**5.5**	**3.2**	**91.5**	**6.6**

** Average staff-time reported by Rosalind Zuniga has not been included in the average hour extrapolation because of the high number of actual staff hours reported for other reimbursable activities.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR'S

Purpose: To calculate an average PHR for staff doing the collection fee functions.
Sou rce: PHR lists provided by client by fiscal year.
Findings:

	Staff	Title	06-07
	Amundson, Peggy	Office Assistant 2	34.59
	Cernal, Clarence	Account Clerk, Cashier	35.30
	Cole, Mary	Administrative Clerk	14.32
Cashier	Egbert, Ida	Dept. Aide 3, Cashier	14.32
	Espinoza, Melinda	Administrative Clerk	13.30
	Gonsalves, Patti	A & R Tech. 3	37.35
	Gordon, Judith	Admissions Tech. 2	15.03
	Grande, Jocelyn	Account Clerk/Cashier	17.02
Cashier	Hatfield, Jamie	Dept Aide 3, Admin Clerk 1	14.32
	Hatfield, Sheila	Admissions Tech. 2	15.11
	Heinrichs-Harmon, Judith	Registrar	70.01
	Houser, Tamara	Administrative Clerk	13.30
	Jimenez, Elizabeth	Cashier	17.02
	Johnson, Cheryl	Admissions & Records Tech	30.41
	Kaczur, Linda	Cashier Aide	14.32
	Lefler, Abigail	Administrative Clerk	13.30
Cashier	Manfre-Campillo, Rose	Accounts Clerk	27.71
Cashier	Matzen, Cerise G.	Dept Aide 3, Admin Clerk 1	13.30
Cashier	Medley, Tara	Dept Aide 3, Admin Clerk 1	13.30
	Miranda, Julianne	A & R Tech. 3	37.35
	Napoli, Cathy	A & R Coordinator	37.93
	Olson, Margaret	Admin. Secretary 2	41.43
Cashier	Paulus, Sherrill	Dept Aide 3, Admin Clerk 1	13.30
	Ramirez, Anna	Admissions Tech. 2	30.84
	Rodriguez, Martha	Admin. Asst. 2	31.61
	Roskos, Marian	Admin. Asst. 2	15.34
Cashier	Salce, Angelita	Dept Aide 3, Admin Clerk 1, A & R Tech 1	14.32
	Schonland, Julie	Administrative Clerk	13.30
	Seubert, Elaine A.	Office Asst. 1	33.02
	Smith, Susan	A & R Team Leader	40.42
Cashier	Vela, Marilou	Dept Aide 3, Admin Clerk 1	13.30
	Wells, Susan	Administrative Clerk	13.30
	Average		**23.71**

Conclusion: Findings go forward to EFCW-2.

1. **Office Assist. = Admin. Assist.**
2. **Admin. Tech. = Admin. Assist.**
3. **Admin. Clerk = Admin. Assist.**
4. **Dept. Aide = Admin. Assist.**
5. **Clerk Typist = Acct. Clerks**

Schedule 3
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Adamiak, Felicia	Financial Aid Technician	2	2	12	5	12	12
Chavez, Diana	Financial Aid Technician	5	7	9	7	8	5
Coulter, Wendy	Financial Aid Advisor	2	5	2	1	5	1
Flores, Jose	Financial Aid Technician	5	7	9	7	8	5
Hewitt, Katrina	Financial Aid Technician	5	4	4	5	7	3
Martinez, Julie	Financial Aid Advisor	7	5	10	7	10	3
Mercado, Juan	Financial Aid Technician	5	7	9	7	8	5
Rangel, Enrique	Student Services Assistant	5	3	5	3	5	3
Average		4.5	5.0	7.5	5.3	7.9	4.6

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR'S

Purpose: To calculate an average PHR for staff doing Enrollment Fee Waiver functions.
Source: PHR lists provided by client by fiscal year.
Findings:

Staff	Title	06-07
Adamiak, Felicia	Financial Aid Tech.	17.99
Chavez, Diana	Financial Aid Tech.	29.87
Coulter, Wendy	Financial Aid Advisor	39.06
Flores, Jose	Financial Aid Technician	23.81
Hewitt, Katrina	Financial Aid Tech.	34.89
Martinez, Julie	Financial Aid Tech.	35.30
Mercado, Juan	Financial Aid Technician	23.81
Rangel, Enrique	Student Services Assistant	12.65
Average		**$27.17**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Citrus Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1.	Enrolled Students	24,246	25,446	25,048	25,546	27,766	24,755	27,295	27359	26926
EFC 2	1.8-1 2.	Paid Enrollment fees	17,046	18,314	17,975	18,073	19,104	16,483	17,161	16330	16438
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X	7,132	7,073	7,473	8,662	8,272	10,134	11029	10488
EFC 4	1.8-2 1.	Delinquencies collections	297	358	560	394	381	313	943	161	315
EFC 5	1.8-2 2.	Refunds	-	-	-	631	630	613	771	557	394
EFW 6	1.8-3 1.	Waivers Requested	X	7,550	7,701	8,435	9,618	8,949	11,200	10626	10796
EFW 7	1.8-3 2.	Waivers Approved	X -	7,132	7,073	7,473	8,662	8,272	10,134	11039	10488
EFW 8	1.8-3 1-2	Waivers Denied	X	418	628	962	956	677	1,066	-413	308

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Friday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus
For 2006 Summer Term

Data Current As Of October 26, 2007 02:38:01

Total Headcount	7,417

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7,417
11,979
13,098
32,494

California Home

Friday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus
For 2006 Fall Term

Data Current As Of October 26, 2007 02:37:52

Total Headcount	13,098

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13098
7,417
11,979
32,494

total

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Citrus
For 2007 Spring Semester

Data Current As Of October 26, 2007 02:37:24

Total Headcount	11,979

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus

Felicia A. Adamiak — Financial Aid Tech
Employee Name — Exact Position Title

Citrus/Fin Aid/EDC102 (626)914-8592 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Felicia A Adamiak Date 09/17/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28; TO Carol Cone

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus College

Clarence Cernal — Employee Name

Account Clerk / Cashier — Exact Position Title

Fiscal Services — College/Department/Location

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:		10	
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			14
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/19/2007

If you have any questions, please contact Carol Cone, at 626 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus

Diana Chavez — Financial Aid Technician
Employee Name — Exact Position Title

Citrus / Financial Aid (626) 914-8593, 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:	____	____	____
B. Enrollment Waiver Process:	____	____	____
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:	____	____	____
B. Enrollment Waiver Process:	____	____	____
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.	____	____	12
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	____	____	____
TOTALS:	____	____	____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Diana Chavez Date 09/18/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus

Wendy Coulter
Employee Name

Financial Aid Advisor
Exact Position Title

Citrus/ Financial Aid / ED102 626-914-8593 (12mo)/11mo/10mo/hrly
College/Department/Location Telephone # Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			6
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/14/2007

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus

Jose Flores
Employee Name

Financial Aid Technician
Exact Position Title

Financial Aid - E.D.
College/Department/Location

(626) 914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		12hrs	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jose Flores Date 10/5/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28; TO Carol Cone

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus

Employee Name: Katrina Hewett — Exact Position Title: Financial Aid Tech

College/Department/Location: Citrus / FAO / Glendora CA — Telephone #: (626) 914-8598 — 12mo/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- ~~Report time~~ in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			6
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Katrina Hewett — Date: 9-17-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus College

Elizabeth Jimenez
Employee Name

Cashier
Exact Position Title

Fiscal Service
College/Department/Location

626-914-8885
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:		30hr.	
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:		40hr.	
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

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Employee Signature _____ Date 9/19/07

If you have any questions, please contact Carol Cone, at 626-914-8885

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CITRUS COLLEGE

ROSE ANN MARIE CAMPILLO — Employee Name

ACCOUNT CLERK / CASHIER — Exact Position Title

FISCAL SERVICES — College/Department/Location

(626) 914-5996 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:		120	
B. Enrollment Waiver Process:		—	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:		40	
B. Enrollment Waiver Process:		—	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

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Employee Signature Rose Ann Marie Campillo Date Sept 19, 2007

If you have any questions, please contact CAROL LOWE, at (626) 914-5995

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus

Martinez, Julie
Employee Name

Financial Aid Advisor
Exact Position Title

CITRUS/FIN AID/CP102
College/Department/Location

6 914-8592
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:	____	____	____
B. Enrollment Waiver Process:	____	____	____
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:	____	____	____
B. Enrollment Waiver Process:	____	____	____
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.	____	____	40
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	____	____	____
TOTALS:	____	____	____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Martinez Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28 ; TO Carol Cone

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: CITRUS Fiscal Year: 2006-2007

LILIA MEDINA
Employee Name

FINANCIAL AID DIRECTOR
Exact Position Title

FINANCIAL AID
Department/Location

(626) 914 8591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9 11/5/06	1A 1B 2A 2B 3 4	PREPARE CLAIMS REPORT	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilia R. Medina Date 10/05/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus

Juan Mercado — Financial Aid Technician

Employee Name — Exact Position Title

Citrus College — (626) 914-8691 — 12mo/11mo/10mo/hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		12hrs	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Juan Mercado/Jm — Date 10/5/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus

Lois Papner
Employee Name

Dean of Admissions & Records
Exact Position Title

Citrus College/Admissions
College/Department/Location

626-914-8517
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:	____	____	4 hrs
B. Enrollment Waiver Process:	____	____	2 hrs
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:	____	____	3 hrs
B. Enrollment Waiver Process:	____	____	2 hrs.
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.	____	____	N/A
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	____	____	N/A
TOTALS:	____	____	11 hrs

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lois Papner Date 9/25/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Citrus

Enrique Rangel
Employee Name

Student Services Assistant
Exact Position Title

Library / Rm. 1hd / Glendora CA
College/Department/Location

(626) 914-8592
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			3
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/17/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Citrus College

Rosalind Zuniga — Bursar

Employee Name — Exact Position Title

Fiscal Services — (626) 914-8896 — 12mo/11mo/10mo/hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:		800	
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:		800	
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:			

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Employee Signature Rosalind Zuniga Date 9/19/7

If you have any questions, please contact Carol Cone, at (626) 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Subj: **RE: Clarification on stafftime for EFCW 06-07**
Date: 12/13/2007 4:49:05 P.M. Pacific Standard Time
From: RZuniga@CITRUSCOLLEGE.EDU
To: smpsixten@aol.com
CC: CCone@CITRUSCOLLEGE.EDU

Hi Sergio,

My part in the Enterprise Resource Planning system started in February 2006 and the 06-07 fiscal year was definitely affected by Wingspan (the new campus database system).

Wingspan changed the entire fee collection process—the greatest impact for enrollment fee collection was my desk. I oversee all areas of the cash collection/accounts receivable on campus but am now 90% + on Wingspan and provide only guidance for other A/R areas so my hours in comparison to other staff show the greatest change. All hours will probably change for any staff member that collects fees since processing a student in the new system actually takes longer—we just hope that eventually students will use our self-service system.

The implementation of Wingspan impacted all of our policies and procedures since it is now where fee collection and student accounts are contained. SunGardHE provided a shell, so to speak, but all rules, policies and procedures needed to be created, entered and tested so that fees assessed correctly. This was done repeatedly in different environments: Train, Mock, Test, PROD and Patch. Since only the framework was provided in Wingspan inputting all aspects of fee collection was necessary.

I will give you a quick list of activities that were affected by Wingspan and in turn created the change in the mandated activity hours.

Wingspan Procedures:

- Conversion of old fee information to Wingspan
- Detail codes (with a general ledger interface) were built—charges and payments are built on these codes
- Bill-schedule built so students receive a receipt of payment for collection of enrollment fees
- Run daily processes in Banner so student accounts (affecting fee payments) are correct and updated.
- Troubleshooting to correct any errors or problems associated with an incorrect fee due to a new system
- Create and prepare rules that affect fee collection: 3rd party payments, BOGW, installment plans, invoices, schedules, etc.

Staff training:

- Attended training on average 6-9 days each month (during fiscal year 06-07 from July 2007 to April 2007-GO live was May 2007)
- Training "homework" assignments were given and completed on days not physically in training (e.g. reviewing 15+ Wingspan training manuals)
- Conducted 32 hours of training for staff
- Train new employees intermittently

Change and update all fee payment policies and procedures in:

- Class schedule
- Web site
- Student handouts
- Forms

Data standards
Procedure books for staff

We also changed credit card processors during this time and did training to implement the policies and procedures for this aspect of fee collection as well.

We were also running our regular business from July 2006 to May 2007 in the old system since we did not go live until May 2007. I am missing so much more but this is just a quick overview of why the hours changed so dramatically. Please let me know if you have any questions or need further information--basically I eat sleep and dream about Wingspan. ☺

Rosalind Zuniga
Bursar
Fiscal Services
Citrus College
1000 W. Foothill Blvd.
Glendora, CA 91741-1899
(626) 914-8896

From: Carol Cone
Sent: Wednesday, December 12, 2007 10:00 AM
To: Smpsixten@aol.com
Cc: alind Zuniga
Subject: RE: Clarification on stafftime for EFCW 06-07

Hi Sergio,
Our college has gone live on a new Enterprise Resource Planning system called WingSpan. WingSpan is built on an application product named, Banner. Rosalind confirmed with me that most of her time is spent on Banner. Banner tracks everything having to do with enrollment and fee collection. I don't want any red flags raised with the Controller's office, if you need to speak to Rosalind for more clarification her number is 626 914-8896 and email rzuniga@citruscollege.edu.

Carol J. Cone
Budget Supervisor
Citrus Community College
000 W. Foothill Blvd.
Glendora, Ca 91741
26 914-8885
26 914-8604 - fax
cone@citruscollege.edu

---

om: Smpsixten@aol.com [mailto:Smpsixten@aol.com]
ent: Tuesday, December 11, 2007 2:43 PM
o: l Cone
c: rbuchwald@citruscollege.eud; Djbsixten@aol.com
ubject: Clarification on stafftime for EFCW 06-07

Hello Carol,

I'm presently reviewing your district's 06-07 EFCW claim and I noted that Rosalind Zuniga, District Bursar, reported a total of 1,600 hours of "actual" time on the attached 1.6B form. We will need clarification on this reported time, since a 12 month employee usually works approximately only 1,800 hours in a year. Including this amount of time for one individual would definitely raise a red flag at the Controller's Office in Sacramento.

Please contact Ms. Zuniga and ask her to clarify or revise the reported time. If needed, she can simply revise and initial the original amounts noted on this 1.6B form. For reference, I've included the form from the previous fiscal year for an idea of what she's reported before.

Please call me if you have any questions.

Thank you.

Sergio M. Perez, Associate
SixTen and Associates
858-514-8605

See AOL's top rated recipes and easy ways to stay in shape for winter.

Subj: **RE: Clarification on stafftime for EFCW 06-07**
Date: 12/13/2007 4:49:05 P.M. Pacific Standard Time
Fro: RZuniga@CITRUSCOLLEGE.EDU
To: smpsixten@aol.com
CC: CCone@CITRUSCOLLEGE.EDU

Hi Sergio,

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Training "homework" assignments were given and completed on days not physically in training (e.g. reviewing 15+ Wingspan training manuals)
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Class schedule
Web site
Student handouts
Forms

Data standards
Procedure books for staff

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We were also running our regular business from July 2006 to May 2007 in the old system since we did not go live until May 2007. I am missing so much more but this is just a quick overview of why the hours changed so dramatically. Please let me know if you have any questions or need further information--basically I eat sleep and dream about Wingspan. ☺

Rosalind Zuniga
Bursar
Fiscal Services
Citrus College
1000 W. Foothill Blvd.
Glendora, CA 91741-1899
(626) 914-8896

From: Carol Cone
Sent: Wednesday, December 12, 2007 10:00 AM
To: Smpsixten@aol.com
Cc: Rosalind Zuniga
Subject: RE: Clarification on stafftime for EFCW 06-07

Hi Sergio,
Our college has gone live on a new Enterprise Resource Planning system called WingSpan. WingSpan is built on an application product named, Banner. Rosalind confirmed with me that most of her time is spent on Banner. Banner tracks everything having to do with enrollment and fee collection. I don't want any red flags raised with the Controller's office, if you need to speak to Rosalind for more clarification her number is 626 914-8896 and email rzuniga@citruscollege.edu.

Carol J. Cone
Budget Supervisor
Citrus Community College
1000 W. Foothill Blvd.
Glendora, Ca 91741
626 914-8885
626 914-8604 - fax
cone@citruscollege.edu

From: Smpsixten@aol.com [mailto:Smpsixten@aol.com]
Sent: Tuesday, December 11, 2007 2:43 PM
To: Carol Cone
Cc: [illegible]chwald@citruscollege.eud; Djbsixten@aol.com
Subject: Clarification on stafftime for EFCW 06-07

Hello Carol,

I'm currently reviewing your district's 06-07 EFCW claim and I noted that Rosalind Zuniga, District Bursar, reported a total of 1,60[illegible] hours of "actual" time on the attached 1.6B form. We will need clarification on this reported time, since a 12 month employee usually works approximately only 1,800 hours in a year. Including this amount of time for one individual would definitely raise a red flag at the Controller's Office in Sacramento.

Please contact Ms. Zuniga and ask her to clarify or revise the reported time. If needed, she can simply revise and initial the original amounts noted on this 1.6B form. For reference, I've included the form from the previous fiscal year for an idea of what she's reported before.

Please call me if you have any questions.

Thank you.

Sergio M. Perez, Associate
SixTen and Associates
858-514-8605

See AOL's top rated recipes and easy ways to stay in shape for winter.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Peggy Amundson
Employee Name

Transcript Evaluator
Exact Position Title

626-857-4014
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Peggy Amundson Date 09/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28 ; TO Carol Cone

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

Fiscal Services / Cashier Office — Department/Location

Clarence Cernal — Employee Name

Account Clerk / Cashier — Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-19-07

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Mary Cole
Employee Name

Exact Position Title

626-914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Cole /Rdz Date 9.20.7

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A&R / Fiscal Services — Department/Location

Ida Egbert — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ida M Egbert Date Sept 19, 2007

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A & R — Department/Location

Melinda Espinoza — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE ~~INK~~

Employee Signature Melinda Espinoza /Rdz Date 9/20/07

If you have any questions, please contact Carol Cone, at 626.914.8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Patti Gonsalves
Employee Name

Admissions & Records Technician III
Exact Position Title

626-914-8518
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be ~~true~~ and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patti Gonsalves Date 9-24-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus — District

Admissions & Records — Department/Location

Judith M. Gordon — Employee Name

Admissions & Records Tech II — Exact Position Title

626 857-4171 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

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Employee Signature Judith M Gordon Date 9/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS College
District

Fiscal Services/Cashier Office
Department/Location

JOCELYN GRANDE
Employee Name

ACCOUNT CLERK/CASHIER
Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/19/07

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Jaime Hatfield
Employee Name

Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

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Employee Signature Jaime Hatfield/RDZ Date 10/1/17

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

ADMISSIONS / ADMINISTRATION
Department/Location

SHEILA HATFIELD
Employee Name

ADMISSIONS TECHNICIAN II
Exact Position Title

(626) 914-8510
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila M. Hatfield Date 9/28/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Judith A Heinrichs-Harmon
Employee Name

Registrar
Exact Position Title

626-914-8516
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Judith A Heinrichs-Harmon Date 9/28/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District
A & R — Department/Location
Tamara Houser — Employee Name
Exact Position Title
626 914-8896 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tamara Houser /Rot Date 9/19/7

If you have any questions, please contact Carol Crone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fisical Services
Department/Location

Elizabeth Jimenez
Employee Name

Cashier
Exact Position Title

626-914-8886
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/19/07

If you have any questions, please contact Carol Cone, at (626) 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Cheryl Johnson
Employee Name

Admissions & Records Technician II
Exact Position Title

(626) 914-8510
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 09/20/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A&R — Department/Location

Linda Kaczur — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda Kaczur Date 9-19-07

If you have any questions, please contact Carol Cone, at 626-914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A&R — Department/Location

Abigail Lefler — Employee Name

Exact Position Title

(626) 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Abigail Lefler | Rolz Date 9.19.7

If you have any questions, please contact Carol Cone, at 626 914.8885

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CITRUS COLLEGE
District

FISCAL SERVICES
Department/Location

ROSE ANN MANFRE-CAMPILLO
Employee Name

ACCOUNT CLERK / CASHIER
Exact Position Title

(626) 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rose Ann Manfre-Campillo Date Sept. 19, 2007

If you have any questions, please contact CAROL COVE, at (626) 914-8555

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A & R
Department/Location

Cerise Matzen
Employee Name

Exact Position Title

626 914. 8896 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cerise Matzen Indy Date 9.19.7

If you have any questions, please contact Carol Cone, at 626.914-8885

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

A&R / Fiscal Services
Department/Location

Tara Medley
Employee Name

Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	11.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature T. Medley Date 9/19/07

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Alliance Miranda
Employee Name

Admissions & Records Technician III
Exact Position Title

626-857-4132
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	ϕ					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	ϕ					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	ϕ					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	ϕ					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	ϕ					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alliance Miranda Date 9/20/07

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records.
Department/Location

Cathy Napoli
Employee Name

Admissions Registration Coordinator.
Exact Position Title

626 914-8512
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy Napoli Date 9/25/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Margaret Olson
Employee Name

Administrative Secretary II
Exact Position Title

626-914-8519
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Olson Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A&R — Department/Location

Sherrill Pavlus — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly (12mo) — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherrill Pavlus Jr/Sr Date 9.19.7

If you have any questions, please contact Carol Cone, at 626-914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions
Department/Location

Anna Ramirez
Employee Name

Exact Position Title

9148514
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6+					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	9					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anna M Ramirez Date 9/26/07

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Adm & Rec
Department/Location

Martha Rodriguez
Employee Name

Adm v. Rec Tech II
Exact Position Title

8513
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Martha A Rodriguez Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Marian Mabiglia-Kostos
Employee Name

Admissions & Records Tech II
Exact Position Title

(626) 914-8510
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	Ø					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M T L R Date 9-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A & R — Department/Location

Angie Salce — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Salce Date 9-19-07

If you have any questions, please contact Carol Cone, at 626 914-8885

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District
A&R — Department/Location
Julie Schonland — Employee Name
Exact Position Title
626 914 8896 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Schonland / Adz — Date 9.19.7

If you have any questions, please contact Carol Cone, at 626-914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

Elaine A. Seubert
Employee Name

Admissions Office Assistant I
Exact Position Title

626-914-8513
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 apprx					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine A Seubert Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Admissions & Records
Department/Location

SUSAN SMITH
Employee Name

Admissions & Records Team Leader
Exact Position Title

626.914.8515
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Smith Date 9.25.07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College — District

A & R — Department/Location

Marilou Vela — Employee Name

Exact Position Title

626.914.8896 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marilou Vela /Rdz — Date 9.19.7

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gtews College — District

A&R — Department/Location

Susan Wells — Employee Name

Exact Position Title

626 914-8896 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Wells Rdr's — Date 9/19/7

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus College
District

Fiscal Services
Department/Location

Rosalind Zuniga
Employee Name

Bursar
Exact Position Title

626 914-8896
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	120					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosalind Zuniga Date 9/19/7

If you have any questions, please contact Carol Cone, at 626 914-8885

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid Office
Department/Location

Felicia A. Adamiak
Employee Name

Financial Aid Tech.
Exact Position Title

(626)914-8592
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min.			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	12 min.			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12 min			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	12 min			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Felicia A. Adamiak Date 09-17-2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid
Department/Location

Diana Chavez
Employee Name

Financial Aid Technician
Exact Position Title

(626) 914-8593
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diana Ch Date 09/15/07

If you have any questions, please contact ____, at ____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid
Department/Location

Wendy Coulter
Employee Name

Financial Aid Advisor
Exact Position Title

626-914-8593
Telephone #

(12mo/11mo/10mo/hrly)
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.0			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/14/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid / ED 102
Department/Location

Jose Flores
Employee Name

Financial Aid Technician
Exact Position Title

(626) 9148592
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9 min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Jose Flores / Jfm Date 10/05/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid Office
Department/Location

Katrina Hewitt
Employee Name

Financial Aid Tech
Exact Position Title

626 914-8592
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katrina Hewitt Date 9-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid
Department/Location

Julie Martinez
Employee Name

Financial Aid Advisor
Exact Position Title

626) 914-8592
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Martinez Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28; TO Carol Cone

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

Financial Aid IED 102
Department/Location

Juan Mercado
Employee Name

Financial Aid Technician
Exact Position Title

(626) 914-8691
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Juan Mercado / JM Date 10/5/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28; TO Carol Cone.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Citrus
District

FIN. Aid
Department/Location

Enrique Ramirez
Employee Name

Student Service Assistant
Exact Position Title

(909) 914-8597
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

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Employee Signature [signature] Date 9/17/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Citrus

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer		5,641	
Fall		10,623	✓
Winter/ Intersession			
Spring		10,662	10,666
Total		26,962	26,928
2. Number of students who paid enrollment fees:			
Summer		3,736	
Fall		6,330	
Winter/ Intersession			
Spring		6,372	
Total		16,438	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer		1,905	
Fall		4,293	
Winter/ Intersession			
Spring		4,290	
Total		10,488	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lois Papner Date 9/25/07

Lois Papner
Employee Name: (print)

Dean of Admissions & Records
Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Citrus College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		51	
Fall		106	
Winter/Intersession		N/A	
Spring		158	
Total		315	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		94	
Fall		188	
Winter/Intersession		N/A	
Spring		112	
Total		394	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rosalind Zuniga Date 10/17

Rosalind Zuniga
Employee Name: (print)

Bursar
Position or Title

If you have any questions, please contact Carol Cone, at 626 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Citrus

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer		2,008	
Fall		4,396	
Winter/Intersession			
Spring		4,392	
Total		10,796	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer		1,905	
Fall		4,293	
Winter/Intersession			
Spring		4,290	
Total		10,488	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature: Hilia R. Medina Date 10/5/07

Employee Name: (print) Hilia R. Medina

Position or Title Director of Financial Aid

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY 9/28; TO Carol Cone.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Citrus

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer		5,641	
Fall		10,623	
Winter/ Intersession			
Spring		10,662	
Total		26,962	
2. Number of students who paid enrollment fees:			
Summer		3,736	
Fall		6,330	
Winter/ Intersession			
Spring		6,372	
Total		16,438	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer		1,905	
Fall		4,293	
Winter/ Intersession			
Spring		4,290	
Total		10,488	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lois Papner Date 9/25/07

Lois Papner
Employee Name: (print)

Dean of Admissions & Records
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 9/28 ; TO Carol Cone

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Citrus College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$3,391,895.	$
2. Enrollment Fees Refunded	$	$ 84,417.	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 10/1/7

Rosalva Zuniga Bursar

Employee Name: (print) Position or Title

If you have any questions, please contact Carol Cone, at 626 914-8885

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Board of Governor's Waiver
2006 -2007
update by RB on 9/25/07

	I		II		III		Total	
Term	Amount	# of Students	Amount	# of Students	Amount	# of Students	Amount	# of Students
Summer 06	8970	73	176982	1230	81367	602	267319	1905
Fall 06	38454	167	742131	2683	409526	1443	1190111	4293
Spring 07	27300	153	586190	2727	310130	1410	923620	4290
Total	74724	393	1505303	6640	801023	3455	2381050	10488

06-07 Unduplicated Students = 17952
06-07 Unduplicated BOGw Recipients = 5862

Citrus Community College District
Enrollment Worksheet
2006-2007

Full-Time Students

	Total Enrolled	Adjustments for Religious, Apprent., BOGG	Difference
SUM 2006	2017	635	1382
FALL 2006	4022	1431	2591
SPR 2007	3858	1430	2428

Part-Time Students

	Total Enrolled	Adjustments for Religious, Apprent., BOGG	Difference
SUM 2006	3436	1270	2166
FALL 2006	6685	2862	3823
SPR 2007	6893	2860	4033

TOTAL STUDENTS SERVED BY SEMESTER

	Total Enrolled	Adjustments		Difference	
SUM 2006	5453	1905	$13,335.00	3548	$39,028.00
FALL 2006	10707	4293	$42,930.00	6414	$96,210.00
SPR 2007	10751	4290	$42,900.00	6461	$96,915.00
			$99,165.00		**$232,153.00**

Summer 06 Fee = $11 & BOGW students = $7
Fall 06 Fee = $15 & BOGW students = $10
Spring 07 Fee = $15 & BOGW students = $10

Health Fees Collected in 06-07 = **$331,318**

Student Insurance paid by District $10,942

Unduplicated Recipients of BOG Fee Waivers for 2006-07
(Including Summer 2006, Fall 2006 and Spring 2007) = 5,862

Actual Dollar Value of all BOG Fee Waivers for 2006-07
(Including Summer 2006, Fall 2006 and Spring 2007) = $2,381,050

Rosalinda Buchwald

From: Lois Papner
Sent: Tuesday, October 09, 2007 10:46 AM
To: Rosalinda Buchwald
Subject: RE: 06-07 Research information for the Health Fee Elimination Mandate

	Part time		Full time		
Fall 06	6633	62%	3990	38%	= 10623
Spring 07	6839	64%	3827	36%	= 10666
Summer 06		63%		37%	

Lois Papner
Dean of Admissions and Records
Citrus College
626 914-8517

From: Rosalinda Buchwald
Sent: Tuesday, October 09, 2007 9:51 AM
To: Lois Papner
Subject: RE: 06-07 Research information for the Health Fee Elimination Mandate

Thanks! rb

From: Lois Papner
Sent: Tuesday, October 09, 2007 7:55 AM
To: Rosalinda Buchwald
Subject: RE: 06-07 Research information for the Health Fee Elimination Mandate

Rosi,

These are numbers of credit student only.

Summer 06	5,332	+ 121 = 5453
Fall 06	10,623	+ 84 = 10707
Spring 07	10,666	+ 85 = 10751

Lois Papner
Dean of Admissions and Records
Citrus College
626 914-8517

From: Rosalinda Buchwald
Sent: Monday, October 08, 2007 3:08 PM
To: Lois Papner
Subject: 06-07 Research information for the Health Fee Elimination Mandate

Lois,

Can you tell me how many students were enrolled in the following terms:

Summer 2006 =
Fall 2006 =
Spring 2007 =

Thanks, Rosi

SixTen and Associates

Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

E-Mail: Kbpsixten@aol.com
3841 North Freeway Blvd. Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

rec'd 10/31/07

FAX TRANSMITTAL

10/31/07

1 Page (s) this memo
0 Page(s) attachment

DATE: October 26, 2007

FAX TO: ~~Carol Gene~~ Diane Bramwell / Brad Lantz
Citrus Community College District
626-914-8823

CC: Brad Lantz

FROM: ~~Keith Petersen~~ KBP Carol Cone

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection & Waiver
Fiscal Year: 2006-2007

PLEASE RESPOND BY: November 8, 2007

In order to continue processing the above referenced claim we need the following PHR's:

2006-2007

Name	Title	~~2005-06 PHR~~
Cole, Mary	ADMIN. CLERK II	$ 14.32
Espinoza, Melinda	ADMIN. CLERK I	$ 13.30
Flores, Jose	Financial Aid Technician	$ 23.81
Grande, Jocelyn	Acct. CLERK/CASHIER	$ 17.02
Houser, Tamara	ADMIN CLERK I	$ 13.30
Lefler, Abigail	ADMIN CLERK I	$ 13.30
Mercado, Juan	Financial Aid Technician	$ 23.81
Rangel, Enrique	Student Services Assistant	$ 12.65
Schonland, Julie	ADMIN CLERK I	$ 13.30
Wells, Susan	ADMIN CLERK I	$ 13.30

Thank you. AS requested
KBP:te

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME Citrus Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE SECRETARY	$ 37.73	$ 39.06
	AVERAGE CUSTODIAN	$ 25.60	$ 27.69
	AVERAGE DEAN	$ 96.89	$ 105.17
	AVERAGE DIRECTOR	$ 88.48	$ 90.52
	AVERAGE EXECUTIVE SECRETARY	$ 49.82	$ 52.27
	AVERAGE DEAN OF FACULTY	$ 100.42	$ 104.25
	AVERAGE VICE PRESIDENT	$ 123.58	$ 129.66
ADAMIAK, FELICIA	FINANCIAL AID TECHNICIAN	$ 16.75	$ 17.99
AMUNDSON, PEGGY	OFFICE ASSISTANT II	$ 32.81	$ 34.59
ARNOLD, LESLIE	CUSTODIAN SUPERVISOR	$ 45.16	$ 47.38
BLADES, LUCIA	ACCOUNTING SUPERVISOR	$ 60.56	$ 66.71
BOHATCH, EUGENE	INTERNATIONAL TRADE MANAGER	$ 78.94	$ 82.82
BUCHWALD, ROSALINDA	DIRECTOR OF FISCAL SERVICES	$ 95.00	$ 99.67
BUJAN, JESSICA	STUDENT AIDE	$ 7.69	$ 8.25
CERNAL, CLARENCE D.	ACCOUNT CLERK, CASHIER	$ 30.19	$ 35.30

Name	Title	Fiscal Years: 05-06	06-07
CHAVEZ, DIANA	FINANCIAL AID TECHNICIAN	$ 26.99	$ 29.87
CLARK, DAWN	PERSONNEL TECHNICIAN	$ 37.33	$ 41.12
CONE, CAROL	BUDGET SUPERVISOR	$ 49.79	$ 52.24
COON, SANDRA	ADMINISTRATIVE ASSISTANT	$ 33.71	$ 35.37
COPE, JAMES	SUPV. ENVIRON. HEALTH PROGRAM	$ 53.91	$ 55.26
COULTER, WENDY	FINANCIAL AID ADVISOR	$ 36.36	$ 39.06
CROSBY, TINA	SECRETARY	$ 34.98	$ 39.48
CUNNINGHAM, WANDA	DIRECTOR OF CONTINUING EDUCATION/DEAN	$ 88.43	$ 92.78
DAMRON, TERRENCE	DEAN (RETIRED)	$ 107.59	$ 107.59
DeYOUNG, MARTHA	TECHNOLOGY COORDINATOR	$ 47.44	$ 49.78
DIZON, AMIE	ACCOUNT CLERK	$ 31.06	$ 33.37
EGBERT, IDA M.	CASHIER, AIDE	$ 13.08	$ 14.32
EICHLER, JEFFERY	SUPV. ENVIRONMENTAL PROG.	$ 39.00	$ 42.99
FEHRS, MIKE	DIRECTOR OF FOUNDATIONS AND GRANTS	$ 99.01	$ 103.87
FINK, BRENDA	HUMAN RESOURCES STAFF DIVERSITY	$ 88.05	$ 93.01
GARCIA, MARY	ADMINISTRATIVE SECRETARY	$ 41.53	$ 44.40
GOLDSTEIN, TODD	STUDENT EMPLOYER SUPERVISOR	$ 52.28	$ 54.85
GONSALVES, PATTI	A&R TECHNICIAN III	$ 34.09	$ 37.35
GORDON, JUDITH	A&R TECHNICIAN II	$ 14.03	$ 15.03

Name	Title	Fiscal Years: 05-06	06-07
GUZMAN, ERIC	COORDINATOR OF RISK MANAGEMENT	$ 45.16	$ 47.38
HALL, CHERYL	ADMINISTRATIVE SECRETARY	$ 29.89	$ 32.78
HAMILTON, JEANNE	VICE PRESIDENT OF STUDENT SERVICES	$ 133.48	$ 140.05
HARRINGTON, MICHAEL	DIRECTOR OF FACILITIES	$ 94.17	$ 98.81
HATFIELD, JAMIE	CASHIER, AIDE	$ 12.15	$ 14.32
HATFIELD, SHEILA	A&R TECHNICIAN II	$ 14.13	$ 15.11
HEINRICHS-HARMON, JUDITH	RIGISTRAR	$ 63.59	$ 70.01
HEMING, ANN	ARTS COORDINATOR	$ 45.16	$ 49.75
HEWITT, KATRINA	FINANCIAL AID TECHNICIAN	$ 32.48	$ 34.89
HINRICHSEN, GREG	DIRECTOR OF THE PERFORMING ARTS	$ 75.45	$ 79.16
HIPPIE, THOMAS	DIRECTOR OF PURCHASING/WAREHOUSE	$ 83.15	$ 87.31
HOLLAND, KIM	DIRECTOR, VOCATIONAL EDUCATION	$ 91.23	$ 95.72
HORTON, CAROL	VICE PRESIDENT OF FINANCE	$ 130.22	$ 136.63
HUGHES, LINDA	PERSONNEL TECHNICIAN	$ 40.95	$ 45.08
HURTADO, MICHAEL	DEAN OF CONTINUING EDUCATION	$ 110.28	$ 115.71
JAMISON, LYNN	STUDY ABROAD SPECIALIST	$ 40.33	$ 43.11
JIMENEZ, ELIZABETH	CASHIER	$ 15.55	$ 17.02
JOHNSON, CHERYL	A&R TECHNICIAN II	$ 27.35	$ 30.41
KACZUR, LINDA	CASHIER AIDE	$ 13.68	$ 14.32

Name	Title	Fiscal Years: 05-06	06-07
KING, WILLIAM	INFO SYSTEMS SPECIALIST	$ 58.38	$ 66.23
KIRBY, LARI LEE	DISTANCE EDUCATION SUPERVISOR	$ 45.16	$ 49.75
LEE, SAMUEL	DEAN	$ 99.17	$ 108.54
LINDOERFER, SANDRA	DIRECTOR OF HUMAN RESOURCES	$ 103.20	$ 108.27
LINDSEY, STEVE	DEAN	$ 110.28	$ 115.71
LINK, CHRISTINE	EXECUTIVE SECRETARY	$ 49.82	$ 52.27
LOPEZ, FE	ACCOUNTING TECHNICIAN	$ 39.53	$ 42.47
LOPEZ, ROBERT	PURCHASING ASSISTANT/BUYER	$ 40.20	$ 42.18
LOW, EUNICE	SECRETARY	$ 35.11	$ 38.47
MANFRE-CAMPILLO, ROSE	ACCOUNT CLERK/CASHIER	$ 26.29	$ 27.71
MARTINEZ, JULIE	FINANCIAL AID TECHNICIAN	$ 32.19	$ 35.30
MATZEN, CERISE G.	CASHIER AIDE	$ 12.15	$ 13.30
McGUERN, PAM	ADMINISTRATIVE SECRETARY	$ 41.73	$ 44.62
MEDINA, LILIA	DIRECTOR, FINANCIAL AID	$ 66.69	$ 72.77
MEDLEY, TARA	CASHIER AIDE	$ 12.15	$ 13.30
MILLER, LINDA	ADMINISTRATIVE SECRETARY	$ 36.36	$ 38.88
MIRANDA, JULIANNE	A&R TECHNICIAN III	$ 34.09	$ 37.35
MORRIS, MARCY	LEARNING CENTER SUPERVISOR	$ 54.92	$ 57.62
NAPOLI, CATHY	A & R COORDINATOR	$ 34.45	$ 37.93

Name	Title	Fiscal Years: 05-06	06-07
OCEGUERA, JOANNA	STUDENT AIDE	$ 7.69	Resigned
OLSON, MARGARET (PEGGY)	ADMINISTRATIVE SECRETARY	$ 38.75	$ 41.43
ONG, BRANDON	FINANCIAL AID ADVISOR	$ 34.01	$ 37.22
OVER, LUCINDA	DEAN	$ 88.43	$ 92.78
PAPNER, LOIS	DEAN	$ 91.96	$ 96.49
PAULUS, SHERRILL	CASHIER AIDE	$ 12.15	$ 13.30
RAMIREZ, ANNA	A&R TECHNICIAN II	$ 28.71	$ 30.84
RAMIREZ, SALLY	A&R TECHNICIAN I	$ 13.09	$ 14.05
RODRIGUEZ, MARTHA	A&R TECHNICIAN II	$ 29.43	$ 31.61
ROJAS, JUDY	ADMINISTRATIVE SECRETARY	$ 38.86	$ 45.13
ROLLIN, DOUGLAS	DIRECTOR OF STUDENT SERVICES	$ 110.28	$ 115.71
ROSKOS, MARIAN	A&R TECHNICIAN II	$ 14.29	$ 15.34
SALCE, ANGELITA	CASHIER AIDE	$ 13.08	$ 14.32
SANCHEZ, MANUEL	FINANCIAL AID TECHNICIAN	$ 25.87	$ 25.99
SEUBERT, ELAINE A.	A&R TECHNICIAN II	$ 30.88	$ 33.02
SEWELL, PAMELA	ADMINISTRATIVE SECRETARY	$ 47.42	$ 49.75
SMITH, JUDITH	PAYROLL TECHNICIAN (Retired)	$ 37.63	$ 37.63
SMITH, SUSAN	A&R TEAM LEADER	$ 37.81	$ 40.42
THOMPSON, ADRIENNE	STUDENT AFFAIRS SUPERVISOR	$ 39.25	$ 45.14

Name	Title	Fiscal Years: 05-06	06-07
THOMPSON, JOHN	DEAN	$ 110.28	$ 115.71
VELA, MARILOU	CASHIER AIDE	$ 12.15	$ 13.30
VIERA, MICHAEL	SUPERINTENDENT/PRESIDENT	$ 143.87	$ 143.87
WHARTON, MARY	FINANCIAL AID TEAM LEADER	$ 43.64	$ 46.87
WISE,JODY	DEAN	$ 88.43	$ 92.78
ZUNIGA, ROSALINDA	DISTRICT BURSAR/DISTRICT CASHIER	$ 35.31	$ 37.38

Citrus Community College District
308/95 Enrollment Fee [illegible]ction and Waivers
Fiscal Years: 1999-0[illegible]ough 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 1,756,194	$ 1,688,916	$ 1,575,286	$ 1,602,803	$ 2,372,730	$ 2,284,261	$ 3,746,695.00	$ 3,307,473.00
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 35,124	$ 33,778	$ 31,506	$ 32,056	$ 47,455	$ 45,685	$ 74,934	$ 66,149
1.8-4 line 4A	Enrollment Fees Waived	$ 724,019	$ 739,833	$ 769,930	$ 1,443,175	$ 1,472,740	$ 2,532,435	$ 2,754,284.00	$ 2,381,050.00
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649	$ 55,086	$ 47,621
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 50,681	For 00-01 through 04-05 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 24.00
Total # of credits	Line 4A divided by unit fee		67,257	69,993	131,197	93,984	108,501	105,934	99,210
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736	$ 96,400	$ 90,281
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 14,480	$ 14,797	$ 15,399	$ 28,864	$ 29,455	$ 50,649	$ 55,086	$ 47,621
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 50,681							
1.8-4 5.	Credit Units Waived		$ 61,204	$ 63,694	$ 119,389	$ 85,525	$ 98,736	$ 96,400	$ 90,[illegible]
Total Offset Savings	**Forward to Sch. 5A**	**$ 65,161**	**$ 76,001**	**$ 79,093**	**$ 148,253**	**$ 114,980**	**$ 149,385**	**$ 151,486**	**$ 137,902**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 2003-04: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 2004-05: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00
FY 2006-07: Summer and fall $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

APPENDIX 1

Resolution of the Board of Governors of the California Community Colleges No. 2006-02

Whereas, California Education Code section 76300 was recently amended by Assembly Bill 1802 (Stats. 2006, ch. 79) to reduce the enrollment fee from $26 per unit to "($20) per unit per semester, effective with the spring term of the 2006-07 academic year;" and

Whereas, There are indications that the Legislature actually intended to have the reduction in the enrollment fee begin with any term beginning on or after January 1, 2007, even if that term begins before the "Spring 2007" semester or quarter; and

Whereas, Many colleges with intersessions beginning before the Spring 2007 term will soon begin early registration during which students will be simultaneously enrolling in classes for both the intersession and for the regular Spring term; and

Whereas, Under these circumstances it will be administratively difficult and confusing to students to require colleges to charge $26 per unit for intersessions and $20 for the Spring term; and

Whereas, California Education Code section 76300 also gives the Board of Governors authority to proportionately adjust the per unit enrollment fee for intersessions; *now therefore, be it*

Resolved, That the Board of Governors of the California Community Colleges hereby takes the following actions:

For any term or intersession beginning on or after January 1, 2007, and prior to the Spring 2007 semester or quarter, a community college district may charge an enrollment fee of $20 per semester unit or $13 per quarter unit. In addition, for any subsequent term or intersession for which the Legislature has authorized a fee of $20 per semester unit, a community college district shall charge an enrollment fee of $13 per quarter unit if applicable.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Citrus
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$44,120,665	$40,715,570	$622,158	$41,337,728
ENROLL FEE ADMIN (2%)	52,906	48,673	4,233	52,906
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	253,869	0	253,869	253,869
S.F.A.A.	404,741	372,361	32,380	404,741
E.O.P.S.	895,111	823,502	71,609	895,111
C.A.R.E.	209,436	192,681	16,755	209,436
D.S.P.S.	658,867	637,740	21,127	658,867
STATE HOSPITALS	0	0	0	0
CALWORKS	503,257	353,278	149,979	503,257
MATRICULATION (CREDIT)	619,054	569,529	49,525	619,054
MATRIC. (NONCREDIT)	243,586	224,099	19,487	243,586
FAC.& STAFF DIVERSITY	15,360	14,132	1,228	15,360
PART-TIME FAC. ALLO.	519,462	477,905	41,557	519,462
PART-TIME FAC. OFF. HRS	6,954	0	6,954	6,954
PART-TIME FAC. INS.	1,023	0	1,023	1,023
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	131,658	121,126	10,532	131,658
SCHDL. MAINT. & REPAIR	131,670	121,137	10,533	131,670
TANF	61,008	56,128	4,880	61,008
ECON. DEVELOPMENT	563,365	473,226	1	473,227
NURSING EDUCATION	500,000	420,000	80,000	500,000
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	158,232	158,232	0	158,232
PRIOR YEAR CORRECTION	2,506,430	2,506,430	0	2,506,430
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	233,730	233,730	0	233,730
BASIC SKILLS -REAPPROP	223,012	223,012	0	223,012
CAR. TECH. TRAILER BIL	416,246	416,246	0	416,246
GEN. PUR. TRAILER BILL	814,325	814,325	0	814,325
INST. MATERIAL TRAILER	491,382	491,382	0	491,382
SCHLD.MAINT. TRAILER B	491,382	491,382	0	491,382
FACULTY STAFF DEV	52,308	52,308	0	52,308
TOTAL	$55,330,997	$51,046,896	$1,411,026	$52,457,922

FISCAL SERVICES:06/22/07 44055.075 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch. 5A
Citrus County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39	$ 91.96	$ 192.98
2	Staff Training	(04)(B)(1)(b)	$ 158.19	$ 162.36	$ 192.72	$ 210.45	$ 229.35	$ 254.39	$ 91.96	$ 192.98
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 263.65	$ 270.60	$ 321.20	$ 350.75	$ 382.25	$ 299.80	$ 1,933.66	$ 1,931.59
4	Waiving student fees	(04)(B)(2)(b)	$ 40,403.97	$ 43,683.25	$ 59,104.86	$ 70,405.20	$ 67,996.33	$ 87,060.43	$ 86,825.26	$ 122,009.60
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 3,179.62	$ 3,263.44	$ 3,873.67	$ 4,230.05	$ 4,609.94	$ 3,615.59		
6	EFCW - Fee Waiver Costs	Total	$ 44,163.62	$ 47,542.01	$ 63,685.17	$ 75,406.90	$ 73,447.22	$ 91,484.60	$ 88,942.84	$ 124,327.15
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 65,161.00	$ 76,001.00	$ 79,093.00	$ 148,253.00	$ 114,980	$ 149,385.00	$ 151,486.00	$ 137,902.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (20,997.38)	$ (28,458.99)	$ (15,407.83)	$ (72,846.10)	$ (41,532.78)	$ (57,900.40)	$ (62,543.16)	$ (13,574.85)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 44,163.62**	**$ 47,542.01**	**$ 63,685.17**	**$ 75,406.90**	**$ 73,447.22**	**$ 91,484.60**	**$ 88,942.84**	**$ 124,327.15**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Monday, N

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Citrus College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 26, 2007 01:39:58

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	241	73,264
BOGW - Part B based on income standards	3,711	1,485,367
BOGW - Part C based on financial need	1,840	792,792

Total Amount = $ 2,351,423

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 30, 2009

CERTIFIED MAIL #7006 3450 0000 3941 9007

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250
Sacramento, CA 94250

Re: Annual Reimbursement Claims
Citrus Community College District CC19090

Enclosed please find the original claims and extra copies of the FAM-27 for Citrus Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19090

(02) Claimant Name: Citrus Community College district

County of Location: Los Angeles

Street Address or P.O. Box: 1000 West Foothill Boulevard

City: Glendora | State: CA | Zip Code: 91741-1899

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 359,368
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 349,368
Due from State	(08)	(17) $ 349,368
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	35,330
(23) EFCW-1, (04)(A)(1)(b)(f)	32,477
(24) EFCW-1, (04)(A)(2)(a)(f)	159,428
(25) EFCW-1, (04)(B)(1)(a)(f)	193
(26) EFCW-1, (04)(B)(1)(b)(f)	193
(27) EFCW-1, (04)(B)(2)(a)(f)	1,932
(28) EFCW-1, (04)(B)(2)(b)(f)	122,010
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	52
(31) EFCW-1, (07)	184,430
(32) EFCW-1, (09)	52,906
(33) EFCW-1, (10)	123,718
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1/28/09

Carol R. Horton
Type or Print Name

Vice President, Financial and Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

1) Cla

trus Community College district

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year 2006-2007

3) Leave Blank

rect Costs	Object Accounts					
) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 35,329.76	$ -	$ -	$ -	$ -	$ 35,329.76
b. Staff training (One time per employee)	$ 32,476.87	$ -	$ -	$ -	$ -	$ 32,476.87
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 159,428.41	$ -	$ -	$ -	$ -	$ 159,428.41
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Pre[illegible] district policies & procedures for § IV.B.	$ 192.98	$ -	$ -	$ -	$ -	$ 192.98
Staff training (One time per employee)	$ 192.98	$ -	$ -	$ -	$ -	$ 192.98
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ 1,931.59	$ -	$ -	$ -	$ -	$ 1,931.59
Waiving student fees	$ 122,009.60	$ -	$ -	$ -	$ -	$ 122,009.60
Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
otal Direct Costs	$ 351,562.19	$ -	$ -	$ -	$ -	$ 351,562.19

ct Costs		
ndirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	52.46%
otal Indirect Costs	[Line (06) x line (05)(a)]	$ 184,429.52
otal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 535,991.71
eduction		
ss: Enrollment Fee Revenue offset		$ 52,906.00
ss: Enrollment Fee Waiver offsets		$ 123,717.76
al C[illegible]ed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 359,367.95

/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Jimenez, Elizabeth	Cashier	$17.02	80.0	$ 1,361.60				
Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	120.0	$ 3,325.20				
Papner, Lois	Dean	$96.49	4.0	$ 385.96				
Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	800.0	$ 29,904.00				
Cernal, Clarence D.	Account Clerk/Cashier	$35.30	10.0	$ 353.00				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 35,329.76	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Jimenez, Elizabeth	Cashier	$17.02	40.0	$ 680.80				
Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	40.0	$ 1,108.40				
Papner, Lois	Dean	$96.49	3.0	$ 289.47				
Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	800.0	$ 29,904.00				
Cernal, Clarence D.	Account Clerk/Cashier	$35.30	14.0	$ 494.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 32,476.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admin. & Records staff Various	$23.71	1,211.7	$ 28,729.41				
Calculating total enrollment fee to be collected Admin. & Records staff Various	$23.71	1,643.8	$ 38,974.50				
Answering student's questions regarding enrollment fee collection Admin. & Records staff Various	$23.71	2,468.2	$ 58,521.02				
Updating written and computer records for enrollment fee information Admin. & Records staff Various	$23.71	876.7	$ 20,786.56				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admin. & Records staff Various	$23.71	480.4	$ 11,390.28				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admin. & Records staff Various	$23.71	43.3	$ 1,026.64				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 159,428.41	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Papner, Lois Dean	$96.49	2.0	$ 192.98				
05) Total ☒ Subtotal ☐		Page 1 of 1	$ 192.98	$ -	$ -	$ -	$ -

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Papner, Lois Dean	$96.49	2.0	$ 192.98				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 192.98	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Citrus Community College district

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Adamiak, Felicia	Financial Aid Technician	$17.99	5.0	$ 89.95				
Chavez, Diana	Financial Aid Technician	$29.87	12.0	$ 358.44				
Coulter, Wendy	Financial Aid Advisor	$39.06	6.0	$ 234.36				
Hewitt, Katrina	Financial Aid Technician	$34.89	6.0	$ 209.34				
Martinez, Julie	Financial Aid Technician	$35.30	6.0	$ 211.80				
Medina, Lilia	Director, Financial Aid	$72.77	3.0	$ 218.31				
Flores, Jose	Financial Aid Technician	$23.81	12.0	$ 285.72				
Mercado, Juan	Financial Aid Technician	$23.81	12.0	$ 285.72				
Rangel, Enrique	Student Services Assistant	$12.65	3.0	$ 37.95				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,931.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Citrus Community College district

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office staff Various	$27.17	809.7	$ 21,999.55				
Receiving waiver applications							
Financial Aid Office staff Various	$27.17	899.7	$ 24,444.85				
Evaluating waiver applications and verifying application documents							
Financial Aid Office staff Various	$27.17	1,349.5	$ 36,665.92				
Notifying students of additional documentation requirements and how to obtain information							
Financial Aid Office staff Various	$27.17	27.2	$ 739.02				
Entering approved application information into district records; providing student award letter							
Financial Aid Office staff Various	$27.17	1,380.9	$ 37,519.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office staff Various	$27.17	23.6	$ 641.21				
(05) Total ☒ Subtotal ☐			$ 122,009.60	$ -	$ -	$ -	$ -

Citrus Community College district

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

06-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	5.00	Adamiak, Felicia	Financial Aid Technician	$17.99	$89.95	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	5.00	**Adamiak, Felicia Total**			$89.95		
06-07	43.30	Admin. & Records staff	Various	$23.71	$1,026.64	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
06-07	1,211.70	Admin. & Records staff	Various	$23.71	$28,729.41	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	1,643.80	Admin. & Records staff	Various	$23.71	$38,974.50	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,468.20	Admin. & Records staff	Various	$23.71	$58,521.02	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	876.70	Admin. & Records staff	Various	$23.71	$20,786.56	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	480.40	Admin. & Records staff	Various	$23.71	$11,390.28	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	6,724.10	**Admin. & Records staff Total**			$159,428.41		
06-07	10.00	Cernal, Clarence D.	Account Clerk/Cashier	$35.30	$353.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § I'
06-07	14.00	Cernal, Clarence D.	Account Clerk/Cashier	$35.30	$494.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	24.00	**Cernal, Clarence D. Total**			$847.20		
06-07	12.00	Chavez, Diana	Financial aid Technician	$29.87	$358.44	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
	12.00	**Chavez, Diana Total**			$358.44		
06-07	6.00	Coulter, Wendy	Financial Aid Advisor	$39.06	$234.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
	6.00	**Coulter, Wendy Total**			$234.36		
0607	899.70	Financial Aid Office staf	Various	$27.17	$24,444.85	Receiving waiver applications	Waiving student fees
06-07	809.70	Financial Aid Office staf	Various	$27.17	$21,999.55	Answering student's questions regarding enrollment fee waivers/referring to appropriate perso	Waiving student fees
06-07	23.60	Financial Aid Office staf	Various	$27.17	$641.21	In case of denied applications, reviewing and evaluating information if denial is appealed by st	Waiving student fees
06-07	1,349.50	Financial Aid Office staf	Various	$27.17	$36,665.92	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	27.20	Financial Aid Office staf	Various	$27.17	$739.02	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,380.90	Financial Aid Office staf	Various	$27.17	$37,519.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,490.60	**Financial Aid Office staff Total**			$122,009.60		
06-07	12.00	Flores, Jose	Financial Aid Technician	$23.81	$285.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	12.00	**Flores, Jose Total**			$285.72		
06-07	6.00	Hewitt, Katrina	Financial Aid Technician	$34.89	$209.34	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	6.00	**Hewitt, Katrina Total**			$209.34		
06-07	40.00	Jimenez, Elizabeth	Cashier	$17.02	$680.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	80.00	Jimenez, Elizabeth	Cashier	$17.02	$1,361.60	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.
	120.00	**Jimenez, Elizabeth Total**			$2,042.40		
06-07	40.00	Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	$1,108.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	120.00	Manfre-Campillo, Rose	Account Clerk/Cashier	$27.71	$3,325.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	160.00	**Manfre-Campillo, Rose Total**			$4,433.60		
06-07	6.00	Martinez, Julie	Financial Aid Technician	$35.30	$211.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recorc
	6.00	**Martinez, Julie Total**			$211.80		
9/15/2006	3.00	Medina, Lilia	Director, Financial Aid	$72.77	$218.31	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recorc
	3.00	**Medina, Lilia Total**			$218.31		
06-07	12.00	Mercado, Juan	Financial Aid Technician	$23.81	$285.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	12.00	**Mercado, Juan Total**			$285.72		
06-07	4.00	Papner, Lois	Dean	$96.49	$385.96	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	2.00	Papner, Lois	Dean	$96.49	$192.98	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Papner, Lois	Dean	$96.49	$289.47	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	2.00	Papner, Lois	Dean	$96.49	$192.98	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
	11.00	**Papner, Lois Total**			$1,061.39		

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	3.00	Rangel, Enrique	Student Services Assistant	$12.65	$37.95	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	3.00	**Rangel, Enrique Total**			$37.95		
06-07	800.00	Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	$29,904.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	800.00	Zuniga, Rosalinda	District Bursar/District Cashier	$37.38	$29,904.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1,600.00	**Zuniga, Rosalinda Total**			$59,808.00		
	13,194.70	**Grand Total**			$351,562.19		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$31,176,648		$31,176,648	$1,602,167	$29,574,481
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,508,046		2,508,046	44,555	2,463,491
Course and Curriculum Development	6020	1,013,214		1,013,214	263,172	750,042
Academic/Faculty Senate	6030	158,321		158,321		158,321
Other Instructional Administration & Instructional Governance	6090	315,355		315,355	194	315,161
Instructional Support Services	6100					
Learning Center	6110	438,852		438,852		438,852
Library	6120	1,060,714		1,060,714	40,457	1,020,257
Media	6130	138,897		138,897	18,080	120,817
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,096,170		1,096,170	5,180	1,090,990
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,166,669		1,166,669	73,832	1,092,837
Matriculation and Student Assessment	6320	1,101,100		1,101,100	66,007	1,035,093
Transfer Programs	6330	235,665		235,665	3,888	231,777
Career Guidance	6340	169,632		169,632	3,794	165,838
Other Student Counseling and Guidance	6390	19,419		19,419	2,131	17,288
Other Student Services	6400					
Disabled Students Programs & Services	6420	612,965		612,965	33,359	579,606
Subtotal		$41,211,667	$0	$41,211,667	$2,156,816	$39,054,851

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,235,866	$407,252	$828,614	$1,229	$827,385
Health Services	6440	276,997		276,997	1,802	275,195
Student Personnel Admin.	6450	333,033		333,033	1,607	331,426
Financial Aid Administration	6460	874,713		874,713	4,035	870,678
Job Placement Services	6470	267,439		267,439	9,602	257,837
Veterans Services	6480					
Miscellaneous Student Services	6490	488,558		488,558	76,461	412,097
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,100,757		1,100,757	1,100,757	0
Custodial Services	6530	1,616,675		1,616,675	1,616,675	0
Grounds Maintenance and Repairs	6550	846,257		846,257	846,257	0
Utilities	6570	1,815,170		1,815,170	1,815,170	0
Other	6590	724,785		724,785	724,785	0
Planning, Policy Making, and Coordination	6600	1,660,136		1,660,136	1,660,136	0
General Inst. Support Services	6700					
Community Relations	6710	1,210,483		1,210,483	1,210,483	0
Fiscal Operations	6720	1,480,774		1,480,774	1,480,774	0
Human Resources Management	6730	937,840		937,840	937,840	0
Noninstructional Staff Benefits & Incentives	6740	1,168,446		1,168,446	1,168,446	0
Staff Development	6750	33,292		33,292	33,292	0
Staff Diversity	6760	18,252		18,252	18,252	0
Logistical Services	6770	2,598,313		2,598,313	2,598,313	0
Management Information Systems	6780	2,166,202		2,166,202	2,166,202	0
Subtotal		$62,065,655	$407,252	$61,658,403	$19,628,934	$42,029,469

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Citrus Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	182,546		182,546		182,546
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	525,492		525,492	15,275	510,217
Student and Co-curricular Activities	6960	943,158		943,158	4,461	938,697
Student Housing	6970					
Other	6990	945,021		945,021	31,791	913,230
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Depreciation or Use Allowance - Building					2,474,861	
Depreciation or Use Allowance - Equipment					1,226,198	
(05) Total		$64,661,872	$407,252	$64,254,620	$23,381,520	$44,574,159
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				52.46%		
(07) Notes						

NOTE 5 - CAPITAL ASSETS:

The following provides a summary of changes in capital assets for the year ended June 30, 2007:

	Balance July 1, 2006	Additions	Deletions	Adjustments*	Balance June 30, 2007
Capital Assets					
Land and improvements	$ 6,339,173	$	$	$	$ 6,339,173
Site and site improvements	69,331,548	3,291,762			72,623,310
Equipment	8,748,724	154,338	(22,320)		8,880,742
Construction in progress	1,981,141	14,495,454	(1,905,280)	2,440,154	17,011,469
Total Cost	86,400,586	17,941,554	(1,927,600)	2,440,154	104,854,694
Accumulated Depreciation					
Land improvements	5,860,789	30,906			5,891,695
Site and site improvements	25,334,837	2,474,861			27,809,698
Equipment	7,174,356	1,226,198	(22,320)		8,378,234
Depreciation	38,369,982	3,731,965	(22,320)		42,079,627
Net Capital Assets	$48,030,604	$ 14,209,589	$ (1,905,280)	$ 2,440,154	$62,775,067

* Adjustments were made to construction in progress for the Enterprise System previously excluded.

CALIFORI COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	38,215		56			38,271
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	810,463	93,028	50,588	31,773		985,852
Business and Management	0500	784,393		2,780	631		787,804
Communications	0600	254,446	200	5,122			259,768
Information Technology	0700	461,878		8,316			470,194
Education	0800	1,101,476	637,589	15,104	28,001		1,782,170
Engineering and Industrial Tech.	0900	831,203	37,149	52,157	21,537		942,046
Fine and Applied Arts	1000	3,095,064	479,467	307,354	377,768		4,259,653
Foreign Language	1100	551,601		2,039			553,640
Health	1200	944,779	460,348	157,439	305,573		1,868,139
Family and Consumer Sciences	1300	294,743	3,594	3,281			301,618
Law	1400						
Humanities (Letters)	1500	2,309,900	42,958	7,624	272		2,360,754
Library Science	1600	12,960		2,584			15,544
Mathematics	1700	2,521,814	28,151	7,958			2,557,923
Military Studies	1800						
Physical Sciences	1900	1,028,484	192,530	39,179	17,942		1,278,135
Psychology	2000	717,260	4,225	4,998			726,483
Public and Protective Services	2100	248,815		1,797			250,612
Social Sciences	2200	1,335,247		2,676	3,586		1,341,509
Commercial Services	3000	1,187,323	437,449	92,774	15,097		1,732,643
Interdisciplinary Studies	4900	5,196,372	1,003,378	650,544	799,987		7,650,281
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,013,609					1,013,609
Subtotal - Instructional Activities	**599**	24,740,045	3,420,066	1,414,370	1,602,167		31,176,648

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Citrus Community College District **820** District Code No.

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expen[illegible]tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,426,625	36,866	44,555		2,508,046
Course and Curriculum Development	6020		420,915	329,127	263,172		1,013,214
Academic/Faculty Senate	6030		148,285	10,036			158,321
Other Instruct. Admin. & Instruct. Governance	6090		304,709	10,452	194		315,355
Subtotal - Instructional Administration	**6000**		3,300,534	386,481	307,921		3,994,936
Instructional Support Services (6100)							
Learning Center	6110		437,829	1,023			438,852
Library	6120		921,804	98,453	40,457		1,060,714
Media	6130		104,455	16,362	18,080		138,897
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		1,464,088	115,838	58,537		1,638,463
Admissions and Records	**6200**		1,061,142	29,848	5,180		1,096,170
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,066,450	26,387	73,832		1,166,669
Matriculation and Student Assessment	6320		929,841	105,252	66,007		1,101,100
Transfer Programs	6330		202,042	29,735	3,888		235,665
Career Guidance	6340		156,106	9,732	3,794		169,632
Other Student Counseling and Guidance	6390		9,236	8,052	2,131		19,419
Subtotal - Student Counseling and Guidance	**6300**		2,363,675	179,158	149,652		2,692,485

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District 820 District Code No.

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper[illegible]tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		537,434	42,172	33,359		612,965
Extended Opportunity Prgms. & Services (EOPS)	6430		768,463	58,922	1,229	407,252	1,235,866
Health Services	6440		221,121	54,074	1,802		276,997
Student Personnel Administration	6450		307,419	24,007	1,607		333,033
Financial Aid Administration	6460		787,391	83,287	4,035		874,713
Job Placement Services	6470		243,270	14,567	9,602		267,439
Veterans Services	6480						
Miscellaneous Student Services	6490		332,824	79,273	76,461		488,558
Subtotal - Other Student Services	**6400**		3,197,922	356,302	128,095	407,252	4,089,571
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		816,552	284,205			1,100,757
Custodial Services	6530		1,470,013	138,377	8,285		1,616,675
Grounds Maintenance and Repairs	6550		751,833	70,492	23,932		846,257
Utilities	6570			1,815,170			1,815,170
Other Operation and Maintenance of Plant	6590		462,794	219,154	42,837		724,785
Subtotal - Operation and Maintenance of Plant	**6500**		3,501,192	2,527,398	75,054		6,103,644
Planning, Policymaking, and Coordination	**6600**		926,213	725,360	8,563		1,660,136

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District 820 District Code No.

CALIFO[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe[illegible]itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		907,299	292,745	10,439		1,210,483
Fiscal Operations	6720		1,163,399	306,424	10,951		1,480,774
Human Resources Management	6730		805,219	131,967	654		937,840
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,168,446				1,168,446
Staff Development	6750		880	32,412			33,292
Staff Diversity	6760		4,400	13,852			18,252
Logistical Services	6770		1,219,700	1,177,927	200,686		2,598,313
Management Information Systems	6780		1,553,960	349,161	263,081		2,166,202
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		6,823,303	2,304,488	485,811		9,613,602
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		153,620	28,926			182,546
Subtotal - Community Services	**6800**		153,620	28,926			182,546

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District | 820 | District Code No.

CALIFOI A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expei..itures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		485,891	24,326	15,275		525,492
Student and Co-curricular Activities	6960		793,831	144,866	4,461		943,158
Student Housing	6970						
Other Ancillary Services	6990		750,249	162,981	31,791		945,021
Subtotal - Ancillary Services	**6900**		2,029,971	332,173	51,527		2,413,671
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					2,798,391	2,798,391
Student Aid	7320						
Other Outgo	7330					19,638	19,638
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,818,029	2,818,029
TOTAL EXPENDITURES and OTHER OUTGO	**391**	24,740,045	28,241,726	8,400,342	2,872,507	3,225,281	67,479,901

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Citrus Community College District | 820 | District Code No.

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Contra Costa Community College District CC07030

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Contra Costa Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC07030

(02) Claimant Name: Contra Costa Community College District

County of Location: Contra Costa

Street Address or P.O. Box: 500 Court Street

City: Martinez | State: CA | Zip Code: 94553

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [x]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 1,348,700	(13) $ 1,226,106
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,226,106
Due from State	(08) $ 1,348,700	(17) $ 1,226,106
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,743
(23) EFCW-1, (04)(A)(1)(b)(f)	1,074
(24) EFCW-1, (04)(A)(2)(a)(f)	838,077
(25) EFCW-1, (04)(B)(1)(a)(f)	1,550
(26) EFCW-1, (04)(B)(1)(b)(f)	2,435
(27) EFCW-1, (04)(B)(2)(a)(f)	8,192
(28) EFCW-1, (04)(B)(2)(b)(f)	276,748
(29) EFCW-1, (04)(B)(2)(c)(f)	2,460
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	370,465
(32) EFCW-1, (09)	48,713
(33) EFCW-1, (10)	228,926
(34)	
(35)	
(36)	

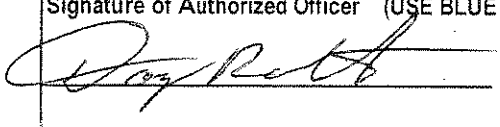
(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)



Date 6-30-06

Doug Roberts
Type or Print Name

V.C., Finance and Administration
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Contra Costa Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,743.01	$ -	$ -	$ -	$ -	$ 2,743.01
b. Staff training (One time per employee)	$ 1,073.73	$ -	$ -	$ -	$ -	$ 1,073.73
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 838,077.19	$ -	$ -	$ -	$ -	$ 838,077.19
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 1,549.79	$ -	$ -	$ -	$ -	$ 1,549.79
b. Staff training (One time per employee)	$ 2,435.32	$ -	$ -	$ -	$ -	$ 2,435.32
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 4,378.10	$ 3,814.00	$ -	$ -	$ -	$ 8,192.10
b. Waiving student fees	$ 276,748.43	$ -	$ -	$ -	$ -	$ 276,748.43
c. Reporting BOG fee waiver data to CCC	$ 2,460.18	$ -	$ -	$ -	$ -	$ 2,460.18
(05) Total Direct Costs	$ 1,129,465.75	$ 3,814.00	$ -	$ -	$ -	$ 1,133,279.75

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 370,464.77
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,503,744.52
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 48,713.00
(10) Less: Enrollment Fee Waiver offsets		$ 228,926.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,226,105.52

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant: a Costa Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Hernandez, Frank	Dean of Student Services	$73.75	35.0	$ 2,581.25				
Hernandez, Tania	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$29.57	1.0	$ 29.57				
Rosas, Carla	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,743.01	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Hernandez, Frank	Dean of Student Services	$73.75	10.0	$ 737.50				
Hernandez, Tania	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$29.57	2.0	$ 59.14				
Rosas, Carla	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Salmeron, Marian	Student Worker	$12.71	1.0	$ 12.71				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,073.73	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Co[illegible]osta Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Admissions & Records Staff Collecting Fees	$27.33	9,309.9	$ 254,439.57				
Calculating total enrollment fee to be collected Various Admissions & Records Staff Collecting Fees	$27.33	7,736.5	$ 211,438.55				
Answering student's questions regarding enrollment fee collection Various Admissions & Records Staff Collecting Fees	$27.33	6,469.6	$ 176,814.17				
Updating written and computer records for enrollment fee information Various Admissions & Records Staff Collecting Fees	$27.33	6,786.4	$ 185,472.31				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Admissions & Records Staff Collecting Fees	$27.33	215.8	$ 5,897.81				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Admissions & Records Staff Collecting Fees	$27.33	146.9	$ 4,014.78				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 838,077.19	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Hernandez, Frank	Dean of Student Services	$73.75	18.0	$ 1,327.50				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	1.0	$ 60.53				
Hernandez, Tania	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$29.57	1.0	$ 29.57				
Rosas, Carla	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,549.79	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Hernandez, Frank	Dean of Student Services	$73.75	26.0	$ 1,917.50				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	3.0	$ 181.59				
Hernandez, Tania	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$29.57	2.0	$ 59.14				
Rosas, Carla	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Salmeron, Marian	Student Worker	$12.71	1.0	$ 12.71				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,435.32	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Contra Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Hernandez, Frank	Dean of Student Services	$73.75	40.0	$ 2,950.00				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	2.0	$ 121.06				
Giovanni, Marcia	Financial Aid Specialist	$29.57	24.0	$ 709.68				
Rosas, Carla	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Data Tel	AR Support Services	$1.00	3,814.0		$ 3,814.00			
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,378.10	$ 3,814.00	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ra Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	1,432.2	$ 39,829.48				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	1,284.1	$ 35,710.82				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,074.2	$ 57,683.50				
Notifying students of additional documentation requirements and how to obtain information							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,494.0	$ 69,358.14				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,383.2	$ 66,276.79				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	283.7	$ 7,889.70				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 276,748.43	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Hernandez, Frank	Dean of Student Services	$73.75	3.0	$ 221.25				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	1.0	$ 60.53				
Giovanni, Marcia	Financial Aid Specialist	$29.57	40.0	$ 1,182.80				
Rosas, Carla	Financial Aid Assistant I	$24.89	40.0	$ 995.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,460.18	$ -	$ -	$ -	$ -

Contra Costa Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3,814.00	Data Tel	AR Support Services	$1.00	$3,814.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3,814.00	**Data Tel Total**			$3,814.00		
04-05	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Franco, Dennis Total**			$164.82		
04-05	1.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$29.57	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$29.57	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$59.14	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$59.14	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	24.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$709.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$1,182.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Giovanni, Marcia Total**			$2,069.90		
04-05	35.00	Hernandez, Frank	Dean of Student Services	$73.75	$2,581.25	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	18.00	Hernandez, Frank	Dean of Student Services	$73.75	$1,327.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	10.00	Hernandez, Frank	Dean of Student Services	$73.75	$737.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	26.00	Hernandez, Frank	Dean of Student Services	$73.75	$1,917.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	40.00	Hernandez, Frank	Dean of Student Services	$73.75	$2,950.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	3.00	Hernandez, Frank	Dean of Student Services	$73.75	$221.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	132.00	**Hernandez, Frank Total**			$9,735.00		
04-05	1.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Hernandez, Tania Total**			$149.34		
04-05	1.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Mc Clung, Catherine Total**			$164.82		
04-05	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Rodriguez, Faidra Total**			$164.82		
04-05	1.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	24.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$995.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Rosas, Carla Total**			$1,742.30		
04-05	1.00	Salmeron, Marian	Student Worker	$12.71	$12.71	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	1.00	Salmeron, Marian	Student Worker	$12.71	$12.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Salmeron, Marian Total**			$25.42		
04-05	1.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$60.53	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$181.59	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	2.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$121.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	1.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$60.53	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC

Contra Costa Community College District
308/95 ENROLLMENT F[illegible]LLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	7.00	**Torres Jr., Felipe Total**			$423.71		
04-05	9,309.90	Various Admissions & Records Staff	Collecting Fees	$27.33	$254,439.57	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	7,736.50	Various Admissions & Records Staff	Collecting Fees	$27.33	$211,438.55	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	6,469.60	Various Admissions & Records Staff	Collecting Fees	$27.33	$176,814.17	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	6,786.40	Various Admissions & Records Staff	Collecting Fees	$27.33	$185,472.31	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	215.80	Various Admissions & Records Staff	Collecting Fees	$27.33	$5,897.81	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	146.90	Various Admissions & Records Staff	Collecting Fees	$27.33	$4,014.78	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	30,665.10	**Various Admissions & Records Staff Total**			$838,077.19		
04-05	1,432.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$39,829.48	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	1,284.10	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$35,710.82	Receiving waiver applications	Waiving student fees
04-05	2,074.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$57,683.50	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	2,494.00	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$69,358.14	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	2,383.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$66,276.79	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	283.70	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$7,889.70	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	9,951.40	**Various Financial Office Staff Total**			$276,748.43		
	44,735.50	**Grand Total**			$1,133,279.75		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: January 8, 2004

STITUTION:
Contra Costa Community College District
500 Court Street

FILING REF.: The preceding Agreement was dated February 21, 2002

Martinez CA 94553

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/06	32.8	On-Campus	All Programs
PROV.	07/01/06	06/30/07	32.8	On-Campus	All Programs

*BASE:
Direct salaries and wages including all fringe benefits.

U70191

Schedule 1A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	94,677
Avg. time p/account	5.9
Total Time (in minutes)	558594
Per Hour	60
Hours Worked (** **Activity 11**)	**9,309.9**
***EFC 2**	81,437
Avg. time p/student	5.7
Total Time (in minutes)	464191
Per Hour	60
Hours Worked (** **Activity 12**)	**7,736.5**
***EFC 1**	94,677
Avg. time p/question	4.1
Total Time (in minutes)	388176
Per Hour	60
Hours Worked (** **Activity 13**)	**6,469.6**
***EFC 2**	81,437
Avg. time p/file	5.0
Total Time (in minutes)	407185
Per Hour	60
Hours Worked (** **Activity 14**)	**6,786.4**
***EFC 4**	1,349
Avg. time p/account	9.6
Total Time (in minutes)	12950
Per Hour	60
Hours Worked (** **Activity 15**)	**215.8**
***EFC 5**	1,175
Avg. time p/student	7.5
Total Time (in minutes)	8813
Per Hour	60
Hours Worked (** **Activity 16**)	**146.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student accountor record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	14,816
Avg. time p/question	5.8
Total Time (in minutes)	85933
Per Hour	60
Hours Worked (** **Activity 21)**	**1,432.2**
***EFW 6**	14,816
Avg. time p/application	5.2
Total Time (in minutes)	77043
Per Hour	60
Hours Worked (** **Activity 22)**	**1,284.1**
***EFW 6**	14,816
Avg. time p/evaluation	8.4
Total Time (in minutes)	124454
Per Hour	60
Hours Worked (** **Activity 23)**	**2,074.2**
***EFW 6**	14,816
Avg. time p/application	10.1
Total Time (in minutes)	149642
Per Hour	60
Hours Worked (** **Activity 24)**	**2,494.0**
***EFW 7**	13,240
Avg. time p/application	10.8
Total Time (in minutes)	142992
Per Hour	60
Hours Worked (** **Activity 25)**	**2,383.2**
***EFW 8**	1,576
Avg. time p/application	10.8
Total Time (in minutes)	17021
Per Hour	60
Hours Worked (** **Activity 26)**	**283.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Alvarado, B	Admissions & Records Assistant II	4	3	3	4		5
Alves, Stephanie	Lead A&R Assistant	4	3	5	3	10	5
Armendaz, Kay	Senior Admissions and Records Assistant	4	9	12	3	15	4
Betsekas, Julie	Senior Account Clerk	9	7	6	4	15	10
Burkholder, Deborah	Admissions & Records Assistant I	2	3	5	5	4	
Cardenas, Alma	Senior Account Clerk	5	3	3		11	6
Coleman, Farrah	Admissions & Records Assistant II	3	1	3	2		5
Conley, Jim	Cashier Office Supervisor	9	7	6	4	15	10
Do, Binh	Admissions & Records Assistant II	4	5	3	4	2	5
Do-Florendo, Mai	Senior Account Clerk	9	7	6	4	15	10
French, Carole	Senior Admissions and Records Assistant	6	5	4	5	6	5
Gursky, Mary	Senior Account Clerk	2	2	1.5		5	3
Hamilton, Denise	Admissions and Records II	4	3	3	4		5
Herrera, Lorma	Senior Admissions and Records Assistant	20	18	4	22	18	30
Herstein, Margaret	Senior Admissions and Records Assistant	8	8	5	4	4	5
Hughes, Kimberly	Interim Lead Admissions	5	5	3	3		10
Ledesma, Trinidad	Senior Admissions and Records Assistant	5	10	1	5		5
Martinez, Marianne	Senior Admissions and Records Assistant	5	5	5	5		
McEwen, Linda	Lead A&R Assistant	5	5	8	8		10
Nelson-Jones, Eugenia	Admissions and Records II			3			
Nilsen, Sonja	Senior Admissions and Records Assistant	7	3	3	2		5
Paniagua-Budd, Dana	Lead A&R Assistant	1	2	1	1		
Purdy, Susie	Senior Admissions and Records Assistant	9	6	4	5	5	3
Robertson, L.	Senior Account Clerk	9	7	6	4	15	10
Shelton, Jeanette	Senior Account Clerk	9	7	6	4	15	10
Simmons, Monica	Senior Admissions and Records Assistant	5	10	1	5		15
Starkie, Ann	Lead Account Clerk	1.5	2	1.5		6	2
West, Shondra	Senior Admissions and Records Assistant	9	13	5	10	8	
Zerck, Kay	Lead Account Clerk	1.5	1.5	1		4	2.5
Average		**5.9**	**5.7**	**4.1**	**5.0**	**9.6**	**7.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided (Default used for Code 11-14))**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05
Alvarado, B	Admissions & Records Assistant II	$24.89
Alves, Stephanie	Lead A&R Assistant	$31.07
Armendaz, Kay	Senior Admissions and Records Assistant	$27.47
Betsekas, Julie	Senior Account Clerk	$27.47
Burkholder, Deborah	Admissions & Records Assistant I	$22.55
Cardenas, Alma	Senior Account Clerk	$27.47
Coleman, Farrah	Admissions & Records Assistant II	$24.89
Conley, Jim	Cashier Office Supervisor	$31.85
Do, Binh	Admissions & Records Assistant II	$24.89
Do-Florendo, Mai	Senior Account Clerk	$27.47
French, Carole	Senior Admissions and Records Assistant	$27.47
Gursky, Mary	Senior Account Clerk	$27.47
Hamilton, Denise	Admissions and Records II	$24.89
Herrera, Lorrna	Senior Admissions and Records Assistant	$27.47
Herstein, Margaret	Senior Admissions and Records Assistant	$27.47
Hughes, Kimberly	Interim Lead Admissions	$31.07
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47
McEwen, Linda	Lead A&R Assistant	$31.07
Nelson-Jones, Eugenia	Admissions and Records II	$24.89
Nilsen., Sonja	Senior Admissions and Records Assistant	$27.47
Paniagua-Budd, Dana	Lead A&R Assistant	$31.07
Purdy, Susie	Senior Admissions and Records Assistant	$27.47
Robertson, L.	Senior Account Clerk	$24.89
Shelton, Jeanette	Senior Account Clerk	$24.89
Simmons, Monica	Senior Admissions and Records Assistant	$27.47
Starkie, Ann	Lead Account Clerk	$30.31
West, Shondra	Senior Admissions and Records Assistant	$27.47
Zerck, Kay	Lead Account Clerk	$24.89
AVERAGE		$27.33

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6				7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Alvarado, B	Admissions and Records II	3					
Coleman, Farrah	Admissions and Records II	1					
Connell, Carmen	Finacial Aid Assistant II	5	5	7	10	10	10
Do, Binh	Admissions and Records II	4					
Giovanni, Marcia	Fianacial Aid Specialist	4	1	2	5	5	5
Hamilton, Denise	Admissions and Records II	3					
Hernandez-Cruz, Tania	Financial Aid Assistant I	4	2	2	5	5	5
Hughes, Kimberly	Interim Lead Admissions	5	2				
LaMothe, Vivian	Student Service & Instructional Coordinator	20	15	25	20	30	35
Ledesma, Trinidad	Senior Admissions and Records Assistant	2	1	10			
Lucero, Pablo	Technical Expert	9	10	10	5	20	15
Martinez, Marianne	Senior Admissions and Records Assistant	5					
McClung, Catherine	Financial Aid Assistant II	3	0.5	1	3	5	3
McEwen, Linda	Lead A&R Assistant	4					
Monteverde, Eva	Finacial Aid Specialist	3	1	7	5	3	7
Nelson-Jones, Eugenia	Admissions and Records II	12					
Nguyen, Anh	Financial Aid Assistant I	20	15	10	30	10	20
Nilsen, Sonja	Senior Admissions and Records Assistant	5					2
Rance, Barbara	Finacial Aid Assistant	11	15	30	25	35	32
Rodriguez, Faidra	Financial Aid Assistant II	3	1	1	3	4	3
Rosas, Carla	Financial Aid Assistant I	4	1	3	4	2	3
Salmeron, Marian	Student Worker	5	6	6	6	6	6
Simmons, Monica	Senior Admissions and Records Assistant	1					
Torres Jr. , Felipe	Director, Special Programs & Services	4	3	4	10	5	5
Average		**5.8**	**5.2**	**8.4**	**10.1**	**10.8**	**10.8**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05
Alvarado, B	Admissions and Records II	$24.89
Coleman, Farrah	Admissions and Records II	$24.89
Connell, Carmen	Finacial Aid Assistant II	$27.47
Do, Binh	Admissions and Records II	$24.89
Giovanni, Marica	Fianacial Aid Specialist	$27.47
Hamilton, Denise	Admissions and Records II	$24.89
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.89
Hughes, Kimberly	Interim Lead Admissions	$31.07
LaMothe, Vivian	Student Service & Instructional Coordinator	$34.30
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47
Lucero, Pablo	Technical Expert	$21.77
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47
McClung, Catherine	Financial Aid Assistant II	$27.47
McEwen, Linda	Lead A&R Assistant	$31.07
Monteverde, Eva	Finacial Aid Specialist	$29.57
Nelson-Jones, Eugenia	Admissions and Records II	$24.89
Nguyen, Anh	Financial Aid Assistant I	$24.89
Nilsen, Sonja	Senior Admissions and Records Assistant	$27.47
Rance, Barbara	Finacial Aid Assistant	$27.47
Rodriguez, Faidra	Financial Aid Assistant II	$27.47
Rosas, Carla	Financial Aid Assistant I	$24.89
Salmeron, Marian	Student Worker	$12.71
Simmons, Monica	Senior Admissions and Records Assistant	$27.47
Torres Jr. , Felipe	Director, Special Programs & Services	$60.53
Average PHR		**$27.81**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	100,433	96,437	99,189	106,636	109,761	97,853	94,677
EFC 2	1.8-1	2.	Paid Enrollment fees	92,352	89,202	91,916	98,593	100,475	86,363	81,437
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	8,081	7,235	7,273	8,043	9,286	11,490	13,240
EFC 4	1.8-2	1.	Delinquencies collections					770	838	1,349
EFC 5	1.8-2	2.	Refunds							1,175
EFW 6	1.8-3	1.	Waivers Requested*	X	7,413	7,480	8,271	9,891	12,457	14,816
			*(Waivers Approved used where Waivers Requested not supplied)							
EFW 7	1.8-3	2.	Waivers Approved	X	7,235	7,273	8,043	9,286	11,490	13,240
EFW 8	1.8-3 (1-2)		Waivers Denied	X	178	207	228	605	967	1,576

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Contra Costa For 2004-2005

Data Current As Of May 15, 2012 11:40:10

Download The Result In Comma Delimited Format

Headcount
12,577

Back to Top of Page

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Diablo Valley For 2004-2005

Data Current As Of May 15, 2012 11:44:54

Download The Result In Comma Delimited Format

Headcount
32,784

Back to Top of Page

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California Home Tuesday, May 15, 2012

Student Demographics By Academic Year

Student Headcount
For Los Medanos For 2004-2005
Data Current As Of May 15, 2012 11:45:24

Download The Result In Comma Delimited Format

Headcount
13,861

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Dennis Franco — Employee Name

Financial Aid Asst II. — Exact Position Title

Diablo Valley College — College/Department/Location

925-685-1230 x2224 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	___	1	1	1	1
B. Enrollment Waiver Process:	___	___	___	___	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	___	2	2	2	2
B. Enrollment Waiver Process:	___	___	___	___	2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	6	___	___	___
TOTALS:	___	___	___	___	6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco Date 4/26/06

If you have any questions, please contact _____, at _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: CCCCD

Marcia Giovanni — Financial Aid Specialist
Employee Name — Exact Position Title

Diablo Valley College / FAO — (925) 685-1230 x 20655 — (12mo)/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					24	24	24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					40	40	40	40
TOTALS:					70	70	70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 4/26/06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Frank Hernandez — Employee Name

Senior Student Services — Exact Position Title

Contra Costa Extension Svc 235-7800 x4438 — College/Department/Location / Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	50	45	40	35	25
B. Enrollment Waiver Process:	50	45	40	40	33	28	18	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	40	30	20	10	5
B. Enrollment Waiver Process:	70	60	50	47	42	33	26	21
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	80	75	65	56	48	44	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	15	10	6	5	3	2
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

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Employee Signature _____ Date 4/26/06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Tania M Hernandez-Cruz (925) — Financial Aid Assistant I
Employee Name — Exact Position Title

Diablo Valley College Financial Aid office — 1085-030 x2100 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz — Date 4/26/06

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Catherine McClung — Financial Aid Asst. II
Employee Name — Exact Position Title

Diablo Valley College/Financial Aid (925)685-1230 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 4-26-06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Faidra Rodriguez — Employee Name

Financial Aid Asst. II — Exact Position Title

Diablo Valley Coll. Financial Aid 925-685-1230 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	___	1	1	1	1
B. Enrollment Waiver Process:	___	___	___	___	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	___	2	2	2	2
B. Enrollment Waiver Process:	___	___	___	___	2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 4-26-06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

CARLA ROSAS — Employee Name

FA ASST I — Exact Position Title

DVC / FAO — College/Department/Location

925 685-1230 x2049 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							2	2
B. Enrollment Waiver Process:							2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							40	40
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas — Date 4-26-06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Marian Salmeron — Employee Name

Student worker — Exact Position Title

Diablo Valley College/Financial Aid Office — College/Department/Location

(925) 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							2	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Salmeron Date 4-26-06

If you have any questions, please contact _____, at _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

L-Felipe Torres, Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

Los Medanos Colg/FAO — College/Department/Location

(925) 439-2181 x3290 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	20	15	10	5	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	25	15	8	6	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	20	15	10	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	5	1	1	1	1	1
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A/R - DUC
Department/Location

B. ALVARADO
Employee Name

A/R II
Exact Position Title

686-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/2006

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm.
District

A+R / LMC
Department/Location

Stephanie Alves
725 Employee Name

Lead A+R Asst
Exact Position Title

4392181 x325 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie Alves Date 3/27/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Co College
District

Admissions + Records
Department/Location

Kay Clemendor
Employee Name

Senior Admissions + Records
Exact Position Title

4501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Clemendor Date 3-28-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JULIE BETSERAS
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Beteras Date 3-29

If you have any questions, please contact J. Beteras, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm College
District

Admissions & Records / Link
Department/Location

Deborah Burkholder
Employee Name

A & R Asst I
Exact Position Title

439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Deborah Burkholder Date 3/29/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College District
District

Cashier's Office - CCC
Department/Location

Alma A. Cardenas
Employee Name

Sr. Account Clerk
Exact Position Title

510-235-7800 X424
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	11				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/17/06

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

A&R / DVC
Department/Location

Farrah Coleman
Employee Name

A&R II
Exact Position Title

x2635
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) N/A					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A 5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/28/06

ou have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JOHN CONLEY
Employee Name

~~Senior Clerk~~ Cashier Office Supervisor
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 Min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 Min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-29

If you have any questions, please contact J. Conley, at [redacted] 2270

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Binh Do
Employee Name

Admission and Records Assistance II
Exact Position Title

(925) 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

MAI DO / FLORENDO
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mai Do Date 3-29

If you have any questions, please contact Mai Do, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions and Records/Time
Department/Location

Carole French
Employee Name

Sr. Admissions and Records Asst.
Exact Position Title

432-2181-7506
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carole French Date

ou have any questions, please contact , at

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Mary Gursky
Employee Name

Senior Account Clerk
Exact Position Title

925 439-2181 X 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cook, at 439-2181 x 3328

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

rccd — District

DVC Admissions & Records — Department/Location

Denise Hamilton — Employee Name

Admissions Records II Assistant — Exact Position Title

925 685-1310 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

Admissions / CCC
Department/Location

Lorena Herrera
Employee Name

Sr. Admissions / Records
Exact Position Title

235.7800 4694
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	18	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	04	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	02	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	30					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lorena Herrera Date 3.16.06

If you have any questions, please contact FRANK HERNANDEZ, at X-4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Admissions / LMC
Department/Location

Margaret Hertstein
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

(925) 439-2181 x3129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Hertstein Date 3-29-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admission & Records
Department/Location

Kimberly Hughes
Employee Name

Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A-0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Kimberly A Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

A&R / DVC
Department/Location

TRINIDAD CEDESMA
Employee Name

Senior Assistant
Exact Position Title

925 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work year length~~(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A&R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions & Records Assistant
Exact Position Title

(925)685-1230, x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone # 2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eugenia nelsonjones
Employee Name

Admissions Records II - substitute
Exact Position Title

(925) 685 1230
Telephone #
X2637

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	n/a	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	n/a	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/a	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature eugenia nelsonjones Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist.
District

DVC
Department/Location

Sonja Nilson
Employee Name

Senior A+R Asst.
Exact Position Title

925-685-1310
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature Sonja Nilson — PLEASE USE BLUE INK

Date 3/28/16

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A+R / DVC
Department/Location

Dana Paniagua-Budd
Employee Name

Lead A+R Assistant
Exact Position Title

685-1230 x2328
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dana Paniagua-Budd Date 3/28/06

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. — District

Admissions / LMC — Department/Location

Susie Purdy — Employee Name

Senior Admissions & Records Assist. — Exact Position Title

439-2181 x3119 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Purdy — Date 3/29/06

you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

DVC
Department/Location

L. Robertson
Employee Name

Sr Acct Clerk
Exact Position Title

685-1230
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Robertson Date 3-29

If you have any questions, please contact J. Colley, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JEANETTE SHELTON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Shelton Date 3-29

If you have any questions, please contact J. Cathey, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Monica Simmons
Employee Name

Sr. A&R Assistant
Exact Position Title

X 2632
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and vaiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MSimmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Ann Starkie
Employee Name

Lead Account Clerk
Exact Position Title

925 439 -2181 X 3207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Starkie Date 3/27/06

If you have any questions, please contact Bruce Cole, at 439 2181 x 3206

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions/Records - CCC
Department/Location

Shondra West
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

X4500
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shondra West Date 9/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
Cashier/Los Medanos College — Department/Location
Kay Zerck — Employee Name
Lead Account Clerk — Exact Position Title
925-439-2181 X 3207 — Telephone #
12mo/11mo/10mo/hrly Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cole, at 439-2181 ext 3222

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCC
District

A/R
Department/Location

B. Alvarado
Employee Name

A/R II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

AER / DVC
Department/Location

Farrah Coleman
Employee Name

AER II
Exact Position Title

X2635
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	0-1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A		✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A		✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A		✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A			✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A				✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID-LMC
Department/Location

CARMEN CONNELL
Employee Name

FINANCIAL AID ASST II
Exact Position Title

925-439-2181 x 3291
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carmen Connell Date 3/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Bill Do
Employee Name

Admission and Records Assistant II
Exact Position Title

(925) 685-1230
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid - DVC
Department/Location

Marcia Giovanni
Employee Name

Financial Aid Specialist
Exact Position Title

x 2655
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

(925) 685-1230

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3-5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1-2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 3/27/06.

If you have any questions, please contact Marcia Giovanni, at 2655

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD — District
DVC Admissions & Records — Department/Location
Denise Hamilton — Employee Name
Admissions & Records II Assistant — Exact Position Title
925-685-1310 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College
District

Financial Aid Office / DVC
Department/Location

Tania Hernandez-Cruz
Employee Name

Financial Aid Assistant I
Exact Position Title

(925)685-1230 X2100
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez Cruz Date 03/28/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admissions & Records
Department/Location

Kimberly Hughes
Employee Name

Sr Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A-0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A-0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A-0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A-0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCS — District

Financial Aid — Department/Location

[illegible] J — Employee Name

Financial Aid Services & Instructional Support Coor — Exact Position Title

x4293 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College — District

A&R / DVC — Department/Location

TRINIDAD LEDESMA — Employee Name

Senior Assistant — Exact Position Title

925-685-1230 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — Financial Aid
District — Department/Location

Pablo Lucero — Technical Expert
Employee Name — Exact Position Title

(50) — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	9	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03-20-06

If you have any questions, please contact (510) 236-7800, at x4374

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A & R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions / Records Asst.
Exact Position Title

(925)685-1230 x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. College
District

Financial Aid / DVC
Department/Location

Catherine McClung
Employee Name

Financial Aid Asst. II
Exact Position Title

925 685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	30 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min.	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min.			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone #2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community District
District

FAO / Los Medanos College
Department/Location

Eva Monteverde
Employee Name

Financial Aid Specialist
Exact Position Title

(925) 439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva Monteverde Date Mar. 24, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____: TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eupnia nelson
Employee Name

Admissions Records II-substitute
Exact Position Title

925)685-1230 x2637
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	12	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. waivers	n/a	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eupnia nelson Date 3/18/6

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Financial Aid / CCC
Department/Location

Anh Nguyen
Employee Name

FA Asst 1
Exact Position Title

235-7800 x 4295
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/21/06

If you have any questions, please contact 235-7800 x 4295, at 4295

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist. (District) | DVC (Department/Location)

Sonja Nilsen (Employee Name) | Senior A+R Asst. (Exact Position Title)

(Telephone #) | 12mo/11mo/10mo/hrly (Work year length(circle)) | Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date _____

you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Barbara Rance
Employee Name

Financial Aid Assy.
Exact Position Title

510-235-7800 ext 4425
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	11	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	35		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	32			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Rance Date 3-20-06

you have any questions, please contact Barbara RANCE, at X 4425

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

FAO / Diablo Valley College
Department/Location

Faidra Rodriguez
Employee Name

Financial Aid Asst. II
Exact Position Title

925-686-1230
X2399
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	50 seconds	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 3-24-06

If you have any questions, please contact 925-685-1230, at 2399

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA CCD
District

DVC FINANCIAL AID
Department/Location

CARLA ROSAS
Employee Name

FINANCIAL AID ASST I
Exact Position Title

925 685-1230 x 2049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa.
District

Financial Aid office Diablo Valley College
Department/Location

Marian Solmeron
Employee Name

Student worker
Exact Position Title

2290
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Solmeron Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions/DVC
Department/Location

Monica Simmons
Employee Name

Sr. Aer Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District

FAO/Los Medanos College — Department/Location

L. Felipe Torres Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

(925) 439-2181 x 3280 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

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Employee Signature _____ Date 3/29/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	19,896	20,384	20,119	22,205	25,222	19,110	19,304	19,064
Fall	39,549	38,224	38,521	40,475	43,801	39,324	38,059	36,580
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	40,988	37,829	40,549	43,956	40,738	39,419	37,314	—
Total	100,433	96,437	99,189	106,636	109,761	97,853	94,677	55,644
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	92,352	89,202	91,916	98,593	100,475	86,363	81,437	40,533
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Craig Date 3/30/06

CRAIG A. LEE — Director of IT

Employee Name: (print) — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	CCC	DVC	LMC	Total	
SU98	3,956	11,468	4,472	19,896	
FA98	8,521	22,094	8,934	39,549	100,433
SPR99	8,625	22,569	9,794	40,988	
SU99	3,440	11,857	5,087	20,384	
FA99	7,798	21,694	8,732	38,224	96,437
SP00	7,871	20,593	9,365	37,829	
SU00	3,773	11,945	4,401	20,119	
FA00	7,921	21,365	9,235	38,521	99,189
SP01	8,787	21,689	10,073	40,549	
SU01	4,238	12,873	5,094	22,205	
FA01	8,449	21,737	10,289	40,475	106,636
SP02	9,755	23,510	10,691	43,956	
SU02	4,913	13,882	6,427	25,222	
FA02	10,117	23,260	10,424	43,801	109,761
SP03	8,797	22,910	9,031	40,738	
SU03	3,490	12,470	3,150	19,110	
FA03	8,210	22,137	8,977	39,324	97,853
SP04	8,557	21,847	9,015	39,419	
SU04	3,818	11,465	4,021	19,304	
FA04	8,048	21,112	8,899	38,059	94,677
SP05	8,099	20,779	8,436	37,314	
SU[illegible]	4,088	11,386	3,590	19,064	
FA	7,380	20,704	8,496	36,580	55,644

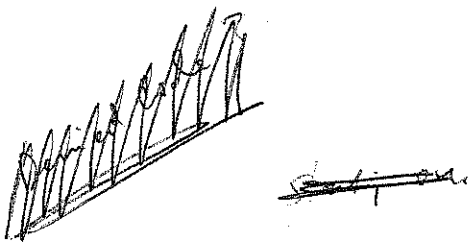
Contra 8197
LCS main 8524
DIABLO 20230

Backup for EFCW 1.8-1 #1

FINANCIAL AID FEE WAIVERS BY FISCAL YEAR
UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06 *
CCC:	2,886	2,500	2,281	2,588	2,891	3,551	3,434	
DVC:	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
LMC:	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
Total:	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

* query done by Derek Smith, IT



BACKUP for EFCW 1.8-1 #3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

EFCW 1.8-2

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer					135	118	139	781
Fall					322	448	608	1628
Winter/Intersession N/A								
Spring					292	272	602	2826
Total					770	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
~~Summer~~ LMC							650	600
~~Fall~~ DVC								2,404
~~Winter/Intersession~~ CCC							525	600
~~Spring~~								
Total							1,175	3604

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

u have any questions, please contact Krista Ducharme, at (925)229-1000 x1229

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College: CCC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer					21	26	41	338
Fall					64	127	232	490
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					78	61	197	840
Total	0	0	0	0	163	214	470	1668
Number of enrollment fee funds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: All 1.6-2 #1

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer	0	0	0	0	156	118	139	781
Fall	0	0	0	0	322	448	608	1628
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring	0	0	0	0	292	272	602	2826
Total	0	0	0	0	770	838	1349	5235
Number of enrollment fee funds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

Contra Costa Community College District
Enrollment Fee Workload Statistics Report

College: DVC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer					135	90	96	388
Fall					192	273	307	815
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					161	195	343	1678
Total	0	0	0	0	488	558	746	2881
Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: LMC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer						2	2	55
Fall					66	48	69	323
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					53	16	62	308
Total	0	0	0	0	119	66	133	686
Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

✓ 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart; District colleague; FA Office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
~~Summer~~ CCC		2500	2281	2588	2891	3551	3434	
~~Fall~~ DVC		2920	2873	3125	4,357	5,649	6,702	
~~Winter/Intersession~~ LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	
~~Spring~~								
Total		7413	7480	8271	989[illegible]	1245[illegible]	14816	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
~~Summer~~ CCC	2,886	2,500	2,281	2,588	2,891	3,551	3,434	
~~Fall~~ DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
~~Winter/Intersession~~ LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
~~Spring~~								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 3/30/06

Employee Name: (print) CRAIG A. LEE

Position or Title: Director of IT

If you have any questions, please contact ________, at ________.

PLEASE SUBMIT THIS INFORMATION BY ________

See CCC email attached to use estimate: BOGGS denied = 30%. Divide approved BOGGS by .70 to get total requested [illegible]

✱ Note – Highlighted Data = 's Approved Waivers used where Requested Waivers not supplied

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CADA- original directly below

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: CCCCD (source Calif. State Chancellor's Office Data Mart; District colleague; FA Office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer CCC								
Fall DVC					4,389	5,649	6,702	
Winter/Intersession LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer CCC	2,886	2,500	2,281	2,588	2,891	3,551	3,434	
Fall DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
Winter/Intersession LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

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Employee Signature: [signature] Date 3/30/06

CRAIG A LEE — Employee Name: (print)

Director of IT — Position or Title

If you have any questions, please contact ______________________, at __________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________

See CCC email attached to use estimated BOGG denied = 30% Divide approved BOGG by .70 to get total requested Kirsten [illegible]

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CCC

Lee, Craig

From: LaMothe, Viviane

Sent: Wednesday, March 29, 2006 12:00 PM

To: Lee, Craig

Cc: Hernandez, Frank; Chang, Sharon; Elejalde, Tatianna; Rance, Barbara; Nguyen, Anh; Lucero, Pablo

Subject: Reimbursement

Craig,

CCC has not tracked the number of BOGW applications requested or the number of applications denied. After speaking with the staff, discussing the issue and including all input, our educated guess is that 3 out of 10 applications are denied or approximately 30%.

For the coming academic year 06-07 we will be documenting that information on Datatel and retaining all applications that are denied.

Viviane

BACKUP for EFCW 1.8-3

Lee, Craig

(LMC)

From: Torres, Felipe
Sent: Thursday, March 30, 2006 11:49 AM
To: Lee, Craig
Cc: Smith, Derek; Ducharme, Krista
Subject: RE: Mandated Costs

Based on data below from academic years 2002-03 to 2004-05 the average rate of student BOGW applicants denied is 8.91304%. I used the aforementioned rate to determine the amount of denied BOGW applicants for academic years 1998-99 to 2001-02. Below is data as requested:

	Academic Year	Student BOGW Approved	Student BOGW Denied	Total Applications
1.	1998-1990	2171	212	2383
2.	1999-2000	1815	178	1993.
3.	2000-2001	2119	207	2326
4.	2001-2002	2330	228	2558
5.	2002-2003	2526	117	2643
6.	2003-2004	3007	250	3257
7.	2004-2005	4104	576	4680
8.	2005-2006	To Be Determined	737 (as of 3/29/2006)	To Be Determined

---

From: Smith, Derek
Sent: Wednesday, March 29, 2006 12:32 PM
To: Torres, Felipe
Subject: RE: Mandated Costs

Felipe,

Here are the numbers (not in Excel format, because I can't pull these as a single spreadsheet; each year is stored in a separate file):

1998-1999: No data
1999-2000: No data
2000-2001: No data
2001-2002: No data
2002-2003: 117
2003-2004: 250
2004-2005: 576
2005-2006: 737

--Derek

BACKUP RE EFCW 1.8-3

Ducharme, Krista

Fr Torres, Felipe
Sent: Tuesday, May 16, 2006 1:25 PM
To: Ducharme, Krista
Subject: RE: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim

or 2004-05 LMC process about 650 students for refund due to BOGG eligibility who had previously paid.

or 20054-06 LMC has processed to date about 600 students for refund due to BOGG eligibility who had previously paid.

---

rom: Ducharme, Krista
ent: Monday, May 15, 2006 5:21 PM
o: Alves, Stephanie; Fincher, Gary; Hernandez, Frank; Torres, Felipe; Jerez, Brenda; LaMothe, Viviane
ubject: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim
nportance: High

ell, this is the final week to get the claim submitted and I have one more request for you. Have any of your departments llected information regarding the number of student refunds to be processed due to the BOGG waivers? These are students no paid their tuition and subsequently received their waivers. I believe these are the students that A&R would have to run BILL get the students' accounts to reflect the credit. This is a required statistic for the claim and the information is not accessible on atatel. The information is needed back to 98-99; however, any available data would be tremendously helpful. If you have any ormation, I would be very grateful if you could submit it to me by Thursday, May 18. Thanks in advance for your cooperation.

ista Ducharme
scal rations Specialist
25) 2[illegible]-1000 x1229

Ducharme, Krista

Fro Giovanni, Marcia
Sent: Friday, May 19, 2006 3:39 PM
To: Ducharme, Krista
Cc: Jerez, Brenda
Subject: REBILL COUNT 05-06

Krista,

Here is the rebill count that I have. I began gathering the data 8/2005 and the numbers inlcude rebills for the 05-06 academic year to date.

2,404

Marcia

Ducharme, Krista

Fro LaMothe, Viviane
Sent: Friday, May 19, 2006 2:55 PM
To: Ducharme, Krista
Cc: Hernandez, Frank
Subject: BOGW REFUNDS

Ii Krista,

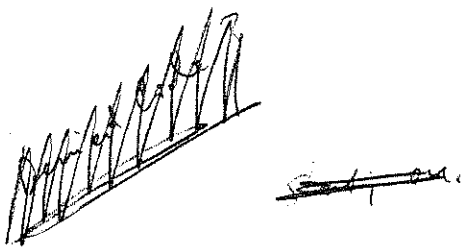
'o our best knowledge we believe we have processed the following refunds for the years noted. We have no ıformation for other years in question.

004-2005 525
005-2006 600

hanks, Viviane

FINANCIAL AID FEE WAIVERS BY FISCAL YEAR
UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
CCC:	2,886	2,500	2,281	2,588	2,891	3,551	3,434
DVC:	3,024	2,920	2,873	3,125	3,869	4,932	5,702
LMC:	2,171	1,815	2,119	2,330	2,526	3,007	4,104
Total:	8,081	7,235	7,273	8,043	9,286	11,490	13,240



BACKUP for EFCW 1.8-3 #2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.8-4

ENROLLMENT FEE REVENUES REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See Attached Spreadsheet

See Attached Spreadsheet - No term data available.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925) 229-1000 x 1229

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

Statistical Data

	FISCAL YEARS								
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1. Enrollment Fees Collected	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2. Enrollment Fees Refunded	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
3. Enrollment Fee Revenue (line 1 subtract line 2)	$ 6,926,710.57	$ 5,981,415.15	$ 6,360,339.77	$ 5,587,180.58	$ 7,048,008.28	$ 10,816,351.91	$ 15,544,427.18	$ 16,291,075.15
4A. Total enrollment Fees Waived (BOGG, etc)	$ 1,681,274.00	$ 1,357,125.00	$ 1,249,724.00	$ 1,413,400.00	$ 1,224,520.00	$ 1,488,235.00	$ 3,880,840.00	$ 4,000,307.05
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 33,625.48	$ 27,142.50	$ 24,994.48	$ 28,268.00	$ 24,490.40	$ 29,764.70	$ 77,616.80	$ 80,006.14
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	117,689.18	94,998.75		$ -	$ -	$ -	$ -	$ -
5. Total Number of credit units for which enrollment fees were waived (All Semesters) (Line 4a divided by $ per unit)			113,611.27	128,490.91	111,320.00	94,993.72	166,321.71	153,857.96
Total x .91 per credit			103,386.26	116,926.73	101,301.20	$ 86,444.29	151,352.76	140,010.75

Source: Line #3 from GL reports. Line #4A from state chancellors website DATA mart.

Fiscal Years 99 - 03 $ per Unit is $11
FY 04-05 $ per Unit is (18 + 26 + 26) / 3 = 23.34
FY 03-04 $ per Unit is (11 + 18 + 18) / 3 = 15.67
FY 05-06 $ per unit is $26

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFCW 1.7.2 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Leetha Robertson	Admissions & Records Assistant I	05/06	12 mo		-	1800	-
Deborah Burkholder	Admissions & Records Assistant I	00/01-05/06	Hrly	33,540.00	7,043.40	1800	22.55
Natalie Hotton	Customer Services Clerk	05/06	Hrly		-	1800	-
Ann Starkie	Lead Account Clerk	04/05	12 mo	37,020.00	7,774.20	1800	24.89
Kay Zerck	Lead Account Clerk	98/99-04/05	12 mo.	37,020.00	7,774.20	1800	24.89
Stephanie Alves	Lead Admissions & Records Assistant	98/99-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Ann Starkie	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Regina Garza	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Marlene Randle	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Mary Gursky	Senior Account Clerk	98/99-04/05	12 mo	40,860.00	8,580.60	1800	27.47
Susie Purdy	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Herstein	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Carole French	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Mouang Saeyang	Admissions & Records Assistant I	05/06	12 mo	33540	7,043.40	1800	22.55
Joanne Solano	Admissions & Records Assistant II	99/00-05/06	12 mo	37020	7,774.20	1800	24.89
Alma Cardenas	Senior Account Clerk	00/01-05/06	12 mo	40860	8,580.60	1800	27.47

Lorena Herrera	Senior Admissions & Records Assistant	02/03-05/06	12 mo	40860	8,580.60	1800	27.47
Kay Armendaz	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Gwendolyn Moppin	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Shondra West	Senior Admissions & Records Assistant	99/00-05/06	12 mo	40860	8,580.60	1800	27.47

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Do Binh	Admissions & Records Assistant II	00/01-05/06	12 mo	37020	7,774.20	1800	24.89
Stephanie Morgado	Admissions & Records Assistant II	05/06	12 mo	37020	7,774.20	1800	24.89
Beatrice Alvarado	Admissions & Records Assistant II	00/01-05/06	12 mo	37020	7,774.20	1800	24.89
Farrah Coleman	Admissions & Records Assistant II	04/05-05/06	12 mo	37020	7,774.20	1800	24.89
Denise Hamilton	Admissions & Records Assistant II	98/99-05/06	12 mo	37020	7,774.20	1800	24.89
Euginia Nelson-Jones	Admissions & Records Assistant II-Substitute	98/99-05/06	Hrly	37020	7,774.20	1800	24.89
Dana Paniagua-Rudd	Lead Admissions & Records Assistant	98/99-05/06	12 mo	46224	9,707.04	1800	31.07
Linda McEwen	Lead Admissions & Records Assistant	99-00-05/06	12 mo	46224	9,707.04	1800	31.07
Trinidad Ledesma	Senior Admissions & Records Assistant	03/04-05/06	12 mo	40860	8,580.60	1800	27.47
Monica Simmons	Senior Admissions & Records Assistant	04/05-05/06	12 mo	0	-	1800	-
Marianne Martinez	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Sonja Nilsen	Senior Admissions & Records Assistant	99-00-05/06	12 mo	40860	8,580.60	1800	27.47
Kimberly Hughes	Sr. Interim Lead Admissions	01/02-05/06	12 mo	46224	9,707.04	1800	31.07
Julie Betsekas	Senior Account Clerk	98/99-05/06	12mo	40860	8,580.60	1800	27.47
Jim Conley	Cashier Office Supervisor	00/01-05/06	12 mo	47376	9,948.96	1800	31.85
Mai Do	Senior Account Clerk	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Jeanette Shelton	Account Clerk	02/03-05/06	12 mo	37020	7,774.20	1800	24.89
Leetha Robertson	Account Clerk	03/04-05/60	12 mo	37020	7,774.20	1800	24.89

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFCW 1.7.3 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Eva Monteverde	Financial Aid Specialist	99/00-05/06	12 mo	43,992.00	9,238.32	1800	29.57
Carmen Connell	Financial Aid Assistant II	99/00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Chunni Leung	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Dennis Mallillin	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Luis Felipe Torres	Director Special Programs & Services	99/00-05/06	12 mo	90,048.00	18,910.08	1800	60.53

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Pablo Lucero	Technical Expert	04/05-05/06	Hrly	32,382.00	6,800.22	1800	21.77
Hsui-Chi Chang	Financial Aid Assistant I	05/06	12mo	-	-	1800	-
Tatianna Elejalde	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Barbara Rance	Financial Aid Assistant II	01/02-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Viviane LaMothe	Student Services & Instructional Coordinator	99/00-05/06	12 mo	51,024.00	10,715.04	1800	34.30
Anh Nguyen	Financial Aid Assistant I	03/04-05/06	Hrly	37,020.00	7,774.20	1800	24.89

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Do Binh	Admissions & Records Assistant II	00/01-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Stephanie Morgado	Admissions & Records Assistant II	05/06	12 mo	-	-	1800	-
Beatrice Alvarado	Admissions & Records Assistant II	00/01-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Farrah Coleman	Admissions & Records Assistant II	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89

Denise Hamilton	Admissions & Records Assistant II	99/00-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Euginia Nelson-Jones	Admissions & Records Assistant II-Substitute	99/00-05/06	Hrly	37,020.00	7,774.20	1800	24.89
Dana Paniagua-Rudd	Lead Admissions & Records Assistant	99/00-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Linda McEwen	Lead Admissions & Records Assistant	99-00-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Trinidad Ledesma	Senior Admissions & Records Assistant	03/04-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Monica Simmons	Senior Admissions & Records Assistant	04/05-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Marianne Martinez	Senior Admissions & Records Assistant	99/00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Sonja Nilsen	Senior Admissions & Records Assistant	99-00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Kimberly Hughes	Senior Interim Lead Admissions	01/02-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Tania Hernandez	Financial Aid Assistant I	02/03-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Dennis Franco	Financial Aid Assistant II	05/06	12 mo	-	-	1800	-
Marian Salmeron	Student Worker	04/05-05/06	Hrly	18,900.00	3,969.00	1800	12.71
Faidra Rodriguez	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Catherine McClung	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Davis	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Michael Keesey	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Alfredo DelCid	Student Worker	05/06	Hrly	-	-	1800	-
Marcia Giovanni	Financial Aid Specialist	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Carla Rosas	Financial Aid Assistant I	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Yusuke Hashiume	Student Worker	05/06	Hrly		-	1800	-
Jennifer Riel	Student Worker	05/06	Hrly		-	1800	-
Jennifer Thorpe	Administrative Assistant	05/06	Hrly		-	1800	-

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFGW 1.6 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Luis Felipe Torres	Director Special Programs & Services	98/99-05/06	12 mo	90,048.00	18,910.08	1800	60.53
Ann Starkie	Lead Account Clerk	04/05	12 mo	45,096.00	9,470.16	1800	30.31

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Frank Hernandez	Dean Student Services (M11 per 2000-2001)	98/99-05/06	12 mo	109,716.00	23,040.36	1800	73.75

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Tania Hernandez	Financial Aid Assistant I	02/03-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Dennis Franco	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Marian Salmeron	Student Worker	04/05-05/06	Hrly	18,900.00	3,969.00	1800	12.71
Faidra Rodriguez	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Catherine McClung	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Davis	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Michael Keesey	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Alfredo DelCid	Student Worker	05/06	Hrly	-	-	1800	-
Marcia Giovanni	Financial Aid Specialist	02/03-05/06	12 mo	43,992.00	9,238.32	1800	29.57
Carla Rosas	Financial Aid Assistant I	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89

DO

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Craig Lee	Director of Information Technology	05/06	12 mo	-	-	1800	-

Derek Smith	Senior Applications Support Analyst	05/06	12 mo	-	-	1800	-
Krista Ducharme	Fiscal Operations Specialist	05/06	12 mo	-	-	1800	-
Judy Vroman	Manager of Audit Services	05/06	12 mo	-	-	1800	-

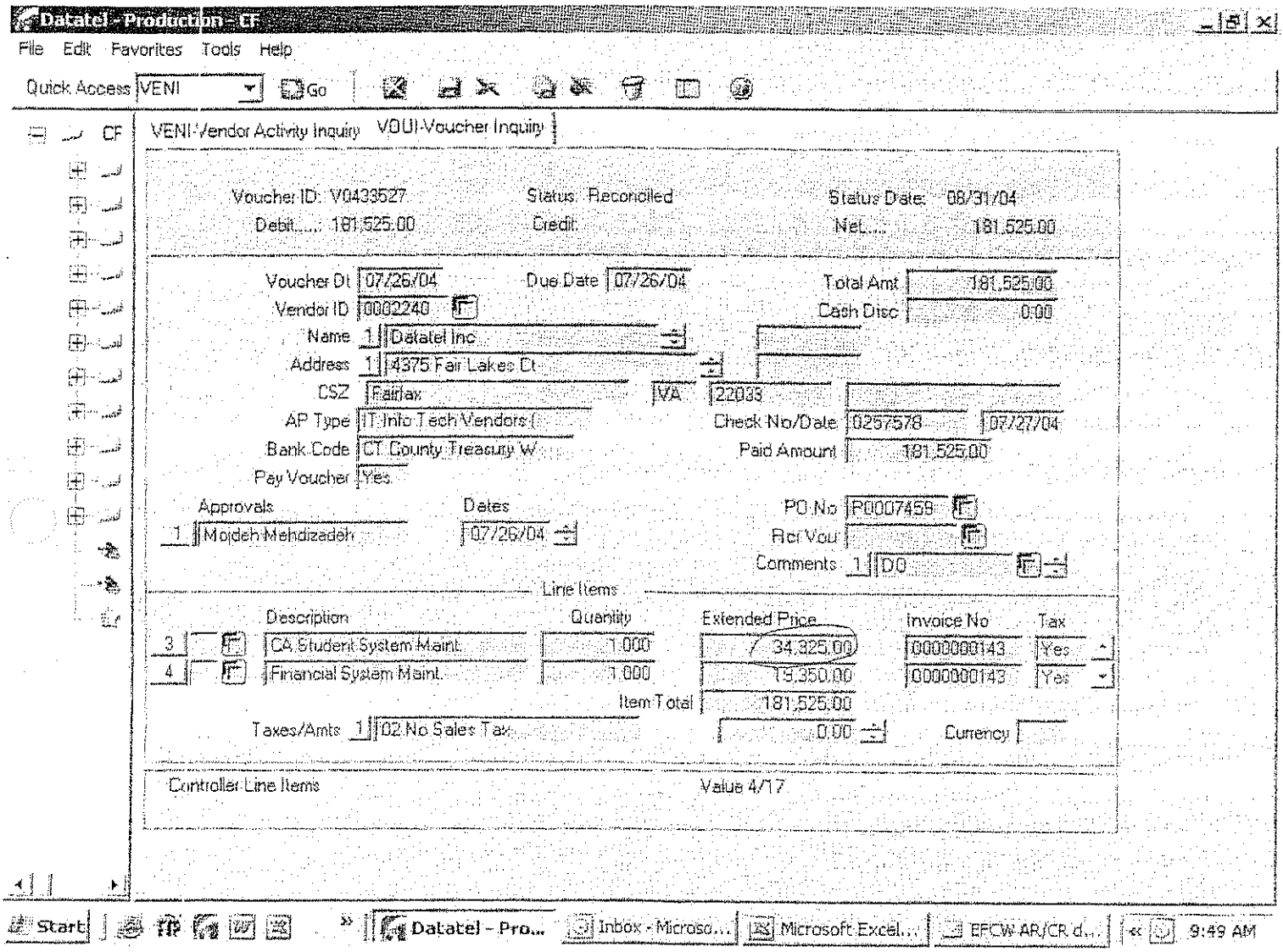
Contra Costa Community College District
2004-2005 SALARY SCHEDULE
MANAGEMENT

	STEP 2		STEP 3		STEP 4		STEP 5	
	MONTHLY	ANNUAL	MONTHLY	ANNUAL	MONTHLY	ANNUAL	MONTHLY	ANNUAL
	$5,310	$63,720	$5,579	$66,948	$5,861	$70,332	$6,158	$73,896
	$5,579	$66,948	$5,861	$70,332	$6,158	$73,896	$6,470	$77,640
	$5,861	$70,332	$6,158	$73,896	$6,470	$77,640	$6,798	$81,576
	$6,158	$73,896	$6,470	$77,640	$6,798	$81,576	$7,142	$85,704
	$6,470	$77,640	$6,798	$81,576	$7,142	$85,704	$7,504	$90,048
	$6,798	$81,576	$7,142	$85,704	$7,504	$90,048	$7,884	$94,608
M8	$7,142	$85,704	$7,504	$90,048	$7,884	$94,608	$8,283	$99,396
M9	$7,504	$90,048	$7,884	$94,608	$8,283	$99,396	$8,702	$104,424
M10	$7,884	$94,608	$8,283	$99,396	$8,702	$104,424	$9,143	$109,716
M11	$8,283	$99,396	$8,702	$104,424	$9,143	$109,716	$9,606	$115,272
M12	$8,702	$104,424	$9,143	$109,716	$9,606	$115,272	$10,092	$121,104
M13	$9,143	$109,716	$9,606	$115,272	$10,092	$121,104	$10,603	$127,236
M14	$9,606	$115,272	$10,092	$121,104	$10,603	$127,236	$11,140	$133,680
M15	$10,092	$121,104	$10,603	$127,236	$11,140	$133,680	$11,704	$140,448
M16	$10,603	$127,236	$11,140	$133,680	$11,704	$140,448	$12,297	$147,564
M17	$11,140	$133,680	$11,704	$140,448	$12,297	$147,564	$12,920	$155,040
M18	$11,704	$140,448	$12,297	$147,564	$12,920	$155,040	$13,574	$162,888
M19	$12,297	$147,564	$12,920	$155,040	$13,574	$162,888	$14,261	$171,132
M20	$12,920	$155,040	$13,574	$162,888	$14,261	$171,132	$14,983	$179,796
M**							$15,742	$188,904
							$18,225	$218,700

* Computed on a basis of 2,080 hours per year, or 173.33 hours per average month.
** Chancellor: No salary schedule - single class, no steps, negotiated contract.
A longevity step is granted at the beginning of the fiscal year of employment after continuous service in the District as follows:
5% - 8th Year; 7.5% - 10th Year; 10% - 14th Year; 12.5% - 16th Year; 15% - 20th Year

Adopted by the Governing Board on 5/26/04.
Total Compensation Decrease of 7% on Salary Schedule.

Effective Date is 7/1/04



$34,325 \div 9 \approx 3,814.00$

Contra Costa Community College District
308/95 Enrollment Fe ection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 5,981,415	$ 6,360,340	$ 5,587,181	$ 7,048,008	$ 10,816,352	$ 15,544,427
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 119,628	$ 127,207	$ 111,744	$ 140,960	$ 216,327	$ 310,889
1.8-4 line 4A	Enrollment Fees Waived	$ 1,357,125	$ 1,249,724	$ 1,413,400	$ 1,224,520	$ 1,488,235	$ 3,880,840
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 94,999	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		113,611	128,490	111,320	94,973	166,274
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 94,999					
1.8-4 5.	Credit Units Waived		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 122,142**	**$ 128,380**	**$ 145,194**	**$ 125,791**	**$ 116,190**	**$ 228,926**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Contra Costa
COUNTY: Contra Costa

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$47,246,562	$43,119,047	$-65,074	$43,053,973
ENROLL FEE ADMIN (2%)	48,713	41,893	6,820	48,713
APPRENTICE ALLOWANCE	323,647	275,670	47,977	323,647
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	5,238,878	4,505,435	733,443	5,238,878
S.F.A.A.	946,631	810,233	136,398	946,631
E.O.P.S.	2,331,903	2,002,680	329,223	2,331,903
C.A.R.E.	380,223	326,991	53,232	380,223
D.S.P.S.	2,220,834	1,900,581	320,253	2,220,834
STATE HOSPITALS	0	0	0	0
CALWORKS	658,752	557,927	100,825	658,752
MATRICULATION (CREDIT)	1,223,602	1,044,382	179,220	1,223,602
MATRIC. (NONCREDIT)	25,261	21,724	3,537	25,261
FAC.& STAFF DIVERSITY	29,489	20,961	8,528	29,489
PART-TIME FACULTY INS.	113,518	0	113,518	113,518
PART-TIME FACULTY OFFIC	295,407	0	295,407	295,407
PART-TIME FACULTY ALLOC	1,458,983	1,254,726	204,257	1,458,983
BLOCK GRANT (ONE-TIME)	671,571	577,551	94,020	671,571
ECON. DEVELOPMENT	1,293,119	658,687	427,533	1,086,220
TELECOMMUNICATIONS	175,715	94,678	81,037	175,715
TANF	145,756	123,588	22,168	145,756
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	34,400	67,080	-38,184	28,896
VTEA TITLE I C	595,948	464,840	35,756	500,596
PLANT & INSTRUCTIONAL	753,273	647,814	105,459	753,273
PRIOR YEAR CORRECTION	-67,214	-91,062	23,848	-67,214
TOTAL	$66,144,971	$58,425,426	$3,219,201	$61,644,627

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Contra Costa College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:25:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	178	32,439
BOGW - Part A-2 based on SSI recipient status	165	26,323
BOGW - Part A-3 based on general assistance recipient status	27	4,342
BOGW - Part B based on income standards	1,460	356,349
BOGW - Part C based on financial need	2,239	748,166

Total Amount = $ 1,167,619

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Diablo Valley College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:46:02

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	96	26,805
BOGW - Part A-2 based on SSI recipient status	270	48,475
BOGW - Part A-3 based on general assistance recipient status	17	3,566
BOGW - Part B based on income standards	3,487	1,036,118
BOGW - Part C based on financial need	1,714	575,794

Total Amount = $ 1,690,758

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Los Medanos College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:46:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	148	42,348
BOGW - Part A-2 based on SSI recipient status	98	21,663
BOGW - Part A-3 based on general assistance recipient status	8	1,079
BOGW - Part B based on income standards	2,289	605,553
BOGW - Part C based on financial need	852	274,944

Total Amount = $ 945,587

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 15, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Contra Costa Community College District CC07030

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Contra Costa Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Keith B. Petersen, President

State Controller's Office

File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 07030

(02) Claimant Name: Contra Costa Community College District

County of Location: Contra Costa

Street Address or P.O. Box: 500 Court Street

City: Martinez | State: CA | Zip Code: 94553

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 1,325,300	(13) $ 1,204,822
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,204,822
Due from State	(08) $ 1,325,300	(17) $ 1,204,822
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,339
(23) EFCW-1, (04)(A)(1)(b)(f)	867
(24) EFCW-1, (04)(A)(2)(a)(f)	861,974
(25) EFCW-1, (04)(B)(1)(a)(f)	1,313
(26) EFCW-1, (04)(B)(1)(b)(f)	2,655
(27) EFCW-1, (04)(B)(2)(a)(f)	9,621
(28) EFCW-1, (04)(B)(2)(b)(f)	227,207
(29) EFCW-1, (04)(B)(2)(c)(f)	2,895
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	362,271
(32) EFCW-1, (09)	46,303
(33) EFCW-1, (10)	220,017
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Doug Roberts
Type or Print Name

Date

11-30-06

Vice Chancellor, Finance and Administration
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 17	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Contra Costa Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2005-2006

(03) Leave Blank

Direct Costs	**Object Accounts**					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,339.35	$ -	$ -	$ -	$ -	$ 2,339.35
b. Staff training (One time per employee)	$ 866.53	$ -	$ -	$ -	$ -	$ 866.53
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 861,974.12	$ -	$ -	$ -	$ -	$ 861,974.12
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 1,313.05	$ -	$ -	$ -	$ -	$ 1,313.05
b. Staff training (One time per employee)	$ 2,655.41	$ -	$ -	$ -	$ -	$ 2,655.41
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 5,235.48	$ -	$ 4,386.00	$ -	$ -	$ 9,621.48
b. Waiving student fees	$ 227,206.59	$ -	$ -	$ -	$ -	$ 227,206.59
c. Reporting BOG fee waiver data to CCC	$ 2,894.50	$ -	$ -	$ -	$ -	$ 2,894.50
(05) Total Direct Costs	$ 1,104,485.03	$ -	$ 4,386.00	$ -	$ -	$ 1,108,871.03

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 362,271.09
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,471,142.12
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 46,303.00
(10) Enrollment Fee Waiver offsets		$ 220,017.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,204,822.12

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant
Contra Costa Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Davis, Margaret	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$31.50	1.0	$ 31.50				
Hernandez, Frank	Dean, Student Services	$85.02	25.0	$ 2,125.50				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Keesey, Michael	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
McClung, Catherine	Financial Aid Assistant II	$27.84	1.0	$ 27.84				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	1.0	$ 29.24				
Rosas, Carla	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 2,339.35	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Davis, Margaret	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$31.50	2.0	$ 63.00				
Hernandez, Frank	Dean, Student Services	$85.02	5.0	$ 425.10				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Keesey, Michael	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
McClung, Catherine	Financial Aid Assistant II	$27.84	2.0	$ 55.68				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	2.0	$ 58.48				
Rosas, Carla	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Salmeron, Marian	Student Worker	$7.37	1.0	$ 7.37				
Del Cid, Alfredo	Student Worker	$12.71	0.5	$ 6.36				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 866.53	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions and Records Sta Various	$27.66	9,259.5	$ 256,117.77				
Calculating total enrollment fee to be collected Admissions and Records Sta Various	$27.66	7,361.0	$ 203,605.26				
Answering student's questions regarding enrollment fee collection Admissions and Records Sta Various	$27.66	6,327.3	$ 175,013.12				
...ting written and computer records for enrollment fee information Admissions and Records Sta Various	$27.66	6,973.6	$ 192,889.78				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions and Records Sta Various	$27.66	785.3	$ 21,721.40				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions and Records Sta Various	$27.66	456.5	$ 12,626.79				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 861,974.12	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Davis, Margaret	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$31.50	1.0	$ 31.50				
Hernandez, Frank	Dean, Student Services	$85.02	12.0	$ 1,020.24				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Keesey, Michael	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
McClung, Catherine	Financial Aid Assistant II	$27.84	1.0	$ 27.84				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	1.0	$ 29.24				
Rosas, Carla	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	1.0	$ 78.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,313.05	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Davis, Margaret	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$31.50	2.0	$ 63.00				
Hernandez, Frank	Dean, Student Services	$85.02	21.0	$ 1,785.42				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Keesey, Michael	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
McClung, Catherine	Financial Aid Assistant II	$27.84	2.0	$ 55.68				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	2.0	$ 58.48				
Rosas, Carla	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Salmeron, Marian	Student Worker	$7.37	1.0	$ 7.37				
Smith, Derek	Sr. Applications Support Analyst	$47.92	4.0	$ 191.68				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	3.0	$ 236.88				
Del Cid, Alfredo	Student Worker	$12.71	0.5	$ 6.36				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,655.41	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Davis, Margaret	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Giovanni, Marcia	Financial Aid Specialist	$31.50	24.0	$ 756.00				
Hernandez, Frank	Dean, Student Services	$85.02	30.0	$ 2,550.60				
Keesey, Michael	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Rosas, Carla	Financial Aid Assistant I	$24.01	24.0	$ 576.24				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	2.0	$ 157.92				
Datatel	Support Services	$100.00	43.9			$ 4,386.00		
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,235.48	$ -	$ 4,386.00	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Staff Various	$26.27	1,787.6	$ 46,960.25				
Receiving waiver applications Financial Aid Staff Various	$26.27	1,381.3	$ 36,286.75				
Evaluating waiver applications and verifying application documents Financial Aid Staff Various	$26.27	2,410.6	$ 63,326.46				
ying students of additional documentation requirements and how to obtain information Financial Aid Staff Various	$26.27	217.6	$ 5,716.35				
Entering approved application information into district records; providing student award letter Financial Aid Staff Various	$26.27	2,636.2	$ 69,252.97				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Staff Various	$26.27	215.6	$ 5,663.81				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 227,206.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Giovanni, Marcia	Financial Aid Specialist	$31.50	40.0	$ 1,260.00				
Hernandez, Frank	Dean, Student Services	$85.02	2.0	$ 170.04				
Roberts, Doug	Comptroller	$85.02	5.0	$ 425.10				
Rosas, Carla	Financial Aid Assistant I	$24.01	40.0	$ 960.40				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	1.0	$ 78.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,894.50	$ -	$ -	$ -	$ -

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	9,259.50	Admissions and Records St	Various	$27.66	$256,117.77	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	7,361.00	Admissions and Records St	Various	$27.66	$203,605.26	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	6,327.30	Admissions and Records St	Various	$27.66	$175,013.12	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	6,973.60	Admissions and Records St	Various	$27.66	$192,889.78	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	785.30	Admissions and Records St	Various	$27.66	$21,721.40	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	456.50	Admissions and Records St	Various	$27.66	$12,626.79	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	31,163.20	**Admissions and Records Staff Total**			$861,974.12		
05-06	43.86	Datatel	Support Services	$100.00	$4,386.00	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	43.86	**Datatel Total**			$4,386.00		
05-06	1.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	30.00	**Davis, Margaret Total**			$746.70		
05-06	0.50	Del Cid, Alfredo	Student Worker	$12.71	$6.36	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	0.50	Del Cid, Alfredo	Student Worker	$12.71	$6.36	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	1.00	**Delcid, Alfredo Total**			$12.72		
05-06	1,787.60	Financial Aid Staff	Various	$26.27	$46,960.25	Answering student's questions regarding enrollment fee waivers/referring to appropriate per	Waiving student fees
05-06	1,381.30	Financial Aid Staff	Various	$26.27	$36,286.75	Receiving waiver applications	Waiving student fees
05-06	2,410.60	Financial Aid Staff	Various	$26.27	$63,326.46	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	217.60	Financial Aid Staff	Various	$26.27	$5,716.35	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	2,636.20	Financial Aid Staff	Various	$26.27	$69,252.97	Entering approved application information into district records; providing student award lette	Waiving student fees
05-06	215.60	Financial Aid Staff	Various	$26.27	$5,663.81	In case of denied applications, reviewing and evaluating information if denial is appealed by	Waiving student fees
	8,648.90	**Financial Aid Staff Total**			$227,206.59		
05-06	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Franco, Dennis Total**			$164.82		
05-06	1.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$31.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$31.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$63.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$63.00	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$756.00	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	40.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$1,260.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Giovanni, Marcia Total**			$2,205.00		
05-06	25.00	Hernandez, Frank	Dean, Student Services	$85.02	$2,125.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	12.00	Hernandez, Frank	Dean, Student Services	$85.02	$1,020.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Hernandez, Frank	Dean, Student Services	$85.02	$425.10	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	21.00	Hernandez, Frank	Dean, Student Services	$85.02	$1,785.42	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	30.00	Hernandez, Frank	Dean, Student Services	$85.02	$2,550.60	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	2.00	Hernandez, Frank	Dean, Student Services	$85.02	$170.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	95.00	**Hernandez, Frank Total**			$8,076.90		

Contra Costa Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2 006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Hernandez-Cruz, Tania Total**			$144.06		
05-06	1.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	24.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	30.00	**Keesey, Michael Total**			$746.70		
05-06	1.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$27.84	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$27.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$55.68	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$55.68	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**McClung, Catherine Total**			$167.04		
05-06	5.00	Roberts, Doug	Comptroller	$85.02	$425.10	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	5.00	**Roberts, Doug Total**			$425.10		
05-06	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$29.24	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$29.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$58.48	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$58.48	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Rodriguez, Faidra Total**			$175.44		
05-06	1.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$576.24	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	40.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$960.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Rosas, Carla Total**			$1,680.70		
05-06	1.00	Salmeron, Marian	Student Worker	$7.37	$7.37	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	1.00	Salmeron, Marian	Student Worker	$7.37	$7.37	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	2.00	**Salmeron, Marian Total**			$14.74		
05-06	4.00	Smith, Derek	Sr. Applications Support Analyst	$47.92	$191.68	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	4.00	**Smith, Derek Total**			$191.68		
05-06	1.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$78.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	3.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$236.88	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	2.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$157.92	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	1.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$78.96	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	7.00	**Torres Jr., L Felipe Total**			$552.72		
	40,193.96	**Grand Total**			$1,108,871.03		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: January 8, 2004

INSTITUTION:
Contra Costa Community College District
500 Court Street

FILING REF.: The preceding Agreement was dated February 21, 2002

Martinez CA 94553

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/06	32.8	On-Campus	All Programs
PROV.	07/01/06	06/30/07	32.8	On-Campus	All Programs

*BASE:
Direct salaries and wages including all fringe benefits.

Schedule 1A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	92,595
Avg. time p/account	6.0
Total Time (in minutes)	555570
Per Hour	60
Hours Worked **(** Activity 11)**	**9,259.5**
***EFC 2**	77,484
Avg. time p/student	5.7
Total Time (in minutes)	441659
Per Hour	60
Hours Worked **(** Activity 12)**	**7,361.0**
***EFC 1**	92,595
Avg. time p/question	4.1
Total Time (in minutes)	379640
Per Hour	60
Hours Worked **(** Activity 13)**	**6,327.3**
***EFC 2**	77,484
Avg. time p/file	5.4
Total Time (in minutes)	418414
Per Hour	60
Hours Worked **(** Activity 14)**	**6,973.6**
***EFC 4**	5,235
Avg. time p/account	9.0
Total Time (in minutes)	47115
Per Hour	60
Hours Worked **(** Activity 15)**	**785.3**
***EFC 5**	3,604
Avg. time p/student	7.6
Total Time (in minutes)	27390
Per Hour	60
Hours Worked **(** Activity 16)**	**456.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*

Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	16,251
Avg. time p/question	6.6
Total Time (in minutes)	107257
Per Hour	60
Hours Worked **(** Activity 21)**	**1,787.6**
***EFW 6**	16,251
Avg. time p/application	5.1
Total Time (in minutes)	82880
Per Hour	60
Hours Worked **(** Activity 22)**	**1,381.3**
***EFW 6**	16,251
Avg. time p/evaluation	8.9
Total Time (in minutes)	144634
Per Hour	60
Hours Worked **(** Activity 23)**	**2,410.6**
***EFW 8**	1,187
Avg. time p/application	11.0
Total Time (in minutes)	13057
Per Hour	60
Hours Worked **(** Activity 24)**	**217.6**
***EFW 7**	15,064
Avg. time p/application	10.5
Total Time (in minutes)	158172
Per Hour	60
Hours Worked **(** Activity 25)**	**2,636.2**
***EFW 8**	1,187
Avg. time p/application	10.9
Total Time (in minutes)	12938
Per Hour	60
Hours Worked **(** Activity 26)**	**215.6**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Alvarado, Beatrice	Admissions & Records Assistant II	4.0	3.0	3.0	4.0		5.0
Alves, Stephanie	Lead A&R Assistant	4.0	3.0	5.0	3.0	10.0	5.0
Armendaz, Kay	Senior Admissions and Records Assistant	4.0	9.0	12.0	3.0	15.0	4.0
Betsekas, Julie	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Burkholder, Deborah	Admissions & Records Assistant I	2.0	3.0	5.0	5.0	4.0	
Cardenas, Alma	Senior Account Clerk	5.0	3.0	3.0		11.0	6.0
Coleman, Farrah	Admissions & Records Assistant II	3.0	1.0	3.0	2.0		5.0
Conley, Jim	Cashier Office Supervisor	9.0	7.0	6.0	4.0	15.0	10.0
Do, Binh	Admissions & Records Assistant II	4.0	5.0	3.0	4.0	2.0	5.0
Do-Florendo, Mai	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
French, Carole	Senior Admissions and Records Assistant	6.0	5.0	4.0	5.0	6.0	5.0
Garza, Regina	Senior Account Clerk	1.4	1.0	1.0		5.0	3.0
Gursky, Mary	Senior Account Clerk	2.0	2.0	1.5		5.0	3.0
Hamilton, Denise	Admissions and Records II	4.0	3.0	3.0	4.0		5.0
Herrera, Lorna	Senior Admissions and Records Assistant	20.0	18.0	4.0	22.0	18.0	30.0
Herstein, Margaret	Senior Admissions and Records Assistant	8.0	8.0	5.0	4.0	4.0	5.0
Hotton, Natalie	Customer Service Clerk	15.0	10.0	10.0	5.0		
Hughes, Kimberly	Interim Lead Admissions	5.0	5.0	3.0	3.0		10.0
Ledesma, Trinidad	Senior Admissions and Records Assistant	5.0	10.0	1.0	5.0		5.0
Martinez, Marianne	Senior Admissions and Records Assistant	5.0	5.0	5.0	5.0		
McEwen, Linda	Lead A&R Assistant	5.0	5.0	8.0	8.0		10.0
Moppin, Gwendolyn	Senior Admissions and Records	15.0	15.0	5.0	20.0	15.0	20.0
Morgado, Stephanie	Admissions & Records Assitant II	3.0	4.0	5.0	3.0		7.0
Nelson-Jones, Eugenia	Admissions and Records II			3.0			
Nilsen., Sonja	Senior Admissions and Records Assistant	7.0	3.0	3.0	2.0		5.0
Paniagua-Budd, Dana	Lead A&R Assistant	1.0	2.0	1.0	1.0		
Purdy, Susie	Senior Admissions and Records Assistant	9.0	6.0	4.0	5.0	5.0	3.0
Randle, Marlene	Senior Account Clerk	2.0	1.5	1.5		6.0	4.0
Robertson, Leetha	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Saeyang, Monang	A & R Assistant I	2.0	3.0	3.0	4.0	2.0	
Shelton, Jeanette	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Simmons, Monica	Senior Admissions and Records Assistant	5.0	10.0	1.0	5.0		15.0
Starkie, Ann	Lead Account Clerk	1.5	1.5	2.0		4.0	1.5
West, Shondra	Senior Admissions and Records Assistant	9.0	13.0	5.0	10.0	8.0	
Zerck, Kay	Lead Account Clerk	1.5	1.5	1.0		4.0	2.5
Average		**6.0**	**5.7**	**4.1**	**5.4**	**9.0**	**7.6**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier {Client Provided (Default used for Code 11-14)}**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05	05-06
Alvarado, B	Admissions & Records Assistant II	$24.89	$26.50
Alves, Stephanie	Lead A&R Assistant	$31.07	$35.64
Armendaz, Kay	Senior Admissions and Records Assistant	$27.47	$33.09
Betsekas, Julie	Senior Account Clerk	$27.47	$31.77
Burkholder, Deborah	Admissions & Records Assistant I	$22.55	$12.80
Cardenas, Alma	Senior Account Clerk	$27.47	$29.24
Coleman, Farrah	Admissions & Records Assistant II	$24.89	$25.22
Conley, Jim	Cashier Office Supervisor	$31.85	$35.06
Do, Binh	Admissions & Records Assistant II	$24.89	$26.50
Do-Florendo, Mai	Senior Account Clerk	$27.47	$29.24
French, Carole	Senior Admissions and Records Assistant	$27.47	$29.24
Garza, Regina	Senior Account Clerk		$27.47
Hamilton, Denise	Admissions and Records II	$24.89	$26.50
Herrera, Lorrna	Senior Admissions and Records Assistant	$27.47	$29.24
Herstein, Margaret	Senior Admissions and Records Assistant	$27.47	$28.84
Hotton, Natalie	Customer Services Clerk		$22.55
Hughes, Kimberly	Interim Lead Admissions	$31.07	$23.39
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47	$27.84
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47	$31.50
McEwen, Linda	Lead A&R Assistant	$31.07	$33.09
Morgado, Stephanie	Admissions & Records Assistant II		$24.89
Nelson-Jones, Eugenia	Admissions and Records II	$24.89	$13.83
Nielsen., Sonja	Senior Admissions and Records Assistant	$27.47	$29.24
Paniagua-Budd, Dana	Lead A&R Assistant	$31.07	$37.44
Purdy, Susie	Senior Admissions and Records Assistant	$27.47	$29.24
Randle, Marlene	Senior Account Clerk	$27.47	$27.47
Robertson, Leetha	Senior Account Clerk	$24.89	$22.55
Saeyang, Monang	A & R Assistant I		$22.55
Schwabe (Starkie), Ann	Lead Account Clerk	$30.31	$33.92
Shelton, Jeanette	Senior Account Clerk	$24.89	$24.89
Simmons, Monica	Senior Admissions and Records Assistant	$27.47	$27.84
West, Shondra	Senior Admissions and Records Assistant	$27.47	$29.24
Zerck, Kay	Lead Account Clerk	$24.89	$24.89
	AVERAGE	$27.33	$27.66

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6				7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Alvarado, B	Admissions and Records II	3.0					
Chang, Hsui-Chi	Financial Aid Assistant I	35.0	10.0	22.0	25.0	18.0	25.0
Coleman, Farrah	Admissions and Records II	1.0					
Connell, Carmen	Finacial Aid Assistant II	5.0	5.0	7.0	10.0	10.0	10.0
Davis, Margaret	Financial Aid I	5.0	5.0	5.0	8.0	10.0	8.0
Del Cid, Alfredo	Student Worker	5.0	5.0	10.0	10.0		
Do, Binh	Admissions and Records II	4.0					
Elejalde, Tatianna	Financial Aid Assistant I	18.0	15.0	35.0	25.0	40.0	35.0
Franco, Dennis	Financial Aid Assistant II	3.0	1.0	0.5	1.5	1.5	3.0
Giovanni, Marcia	Fianacial Aid Specialist	4.0	1.0	1.5	5.0	5.0	5.0
Hamilton, Denise	Admissions and Records II	3.0					
Hashigume,. Yusuke	Student Worker	0.5			5.0	3.0	7.0
Hernandez-Cruz, Tania	Financial Aid Assistant I	4.0	2.0	2.0	5.0	5.0	5.0
Hughes, Kimberly	Interim Lead Admissions	5.0	2.0				
Keesey, Michael	Financial Aid Assistant I	3.0	3.0	7.5		6.0	7.0
LaMothe, Vivian	Student Service & Instructional Coordinator	20.0	15.0	25.0	20.0	30.0	35.0
Ledesma, Trinidad	Senior Admissions and Records Assistant	2.0	1.0	10.0			
Leung, Chunni	Financial Aid Assitant I	5.0	3.0	2.0	15.0	5.0	5.0
Lucero, Pablo	Technical Expert	9.0	10.0	10.0	5.0	20.0	15.0
Mallillin, Dennis	Financial Aid Assistant I	7.0	5.0	7.0	10.0	7.0	7.0
Martinez, Marianne	Senior Admissions and Records Assistant	5.0					
McClung, Catherine	Financial Aid Assistant II	3.0	0.5	1.0	3.0	5.0	3.0
McEwen, Linda	Lead A&R Assistant	4.0					
Monteverde, Eva	Finacial Aid Specialist	3.0	1.0	7.0	5.0	3.0	7.0
Morgado, Stephanie	A & R Assistant II	5.0					
Nelson-Jones, Eugenia	Admissions and Records II	12.0					
Nguyen, Anh	Financial Aid Assistant I	20.0	15.0	10.0	30.0	10.0	20.0
Nilsen, Sonja	Senior Admissions and Records Assistant	5.0					2.0
Rance, Barbara	Finacial Aid Assistant	11.0	15.0	30.0	25.0	35.0	32.0
Riel, Jennifer	Student Worker	7.5	1.0	1.0		1.0	3.5
Rodriguez, Faidra	Financial Aid Assistant II	3.0	1.0	1.0	3.0	4.0	3.0
Rosas, Carla	Financial Aid Assistant I	4.0	1.0	3.0	4.0	2.0	3.0
Salmeron, Marian	Student Worker	5.0	6.0	6.0	6.0	6.0	6.0
Simmons, Monica	Senior Admissions and Records Assistant	1.0					
Thorpe, Jennifer	Administrative Assistant	2.5	2.0	5.0			
Torres Jr. , Felipe	Director, Special Programs & Services	4.0	3.0	4.0	10.0	5.0	5.0
Average		**6.6**	**5.1**	**8.9**	**11.0**	**10.5**	**10.9**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05	05-06
Alvarado, B	Admissions and Records II	$24.89	$26.50
Chang, Hsiu-Chi	Fianancial Aid Assistant I		$24.89
Coleman, Farrah	Admissions and Records II	$24.89	$25.22
Connell, Carmen	Finacial Aid Assistant II	$27.47	$29.24
Davis, Margaret	Financial Aid I		$24.89
Del Cid, Alfredo	Student Worker		$12.71
Do, Binh	Admissions and Records II	$24.89	$26.50
Elejalde, Tatianna	Financial Aid Assistant I		$24.89
Franco, Dennis	Financial Aid Assistant II		$27.47
Giovanni, Marica	Fianacial Aid Specialist	$27.47	$31.50
Hamilton, Denise	Admissions and Records II	$24.89	$26.50
Hashigume, Yusuke	Student Worker		$12.71
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.89	$24.01
Hughes, Kimberly	Interim Lead Admissions	$31.07	$23.39
Keesey, Michael	Financial Aid Assistant I		$24.89
LaMothe, Vivian	Student Service & Instructional Coordinator	$34.30	$39.33
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47	$27.84
Leung, Chunni	Financial Aid Assistant I		$24.89
Lucero, Pablo	Technical Expert	$21.77	$17.99
Mallillin, Dennis	Financial Aid Assistant I		$24.89
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47	$31.50
McClung, Catherine	Financial Aid Assistant II	$27.47	$27.84
McEwen, Linda	Lead A&R Assistant	$31.07	$33.09
Monteverde, Eva	Finacial Aid Specialist	$29.57	$34.77
Morgado, Stephanie	Admissions and Records II		$24.89
Nelson-Jones, Eugenia	Admissions and Records II	$24.89	$13.83
Nguyen, Anh	Financial Aid Assistant I	$24.89	$14.09
Nielsen, Sonja	Senior Admissions and Records Assistant	$27.47	$29.24
Rance, Barbara	Finacial Aid Assistant	$27.47	$26.50
Riel, Jennifer	Student Worker		$12.71
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$29.24
Rosas, Carla	Financial Aid Assistant I	$24.89	$24.01
Salmeron, Marian	Student Worker	$12.71	$7.37
Simmons, Monica	Senior Admissions and Records Assistant	$27.47	$27.84
Thorpe, Jennifer	Administrative Assistant		$29.57
Torres Jr. , Felipe	Director, Special Programs & Services	$60.53	$78.96
Average PHR		**$27.81**	**$26.27**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	100,433	96,437	99,189	106,636	109,761	97,853	94,677	92,595
EFC 2	1.8-1 2.	Paid Enrollment fees	92,352	89,202	91,916	98,593	100,475	86,363	81,437	77,531
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,064
EFC 4	1.8-2 1.	Delinquencies collections					770	838	1,349	5,235
EFC 5	1.8-2 2.	Refunds							1,175	3,604
EFW 6	1.8-3 1.	Waivers Requested*	X	7,413	7,480	8,271	9,891	12,457	14,816	16,251
		*(Waivers Approved used where Waivers Requested not supplied)								
EFW 7	1.8-3 2.	Waivers Approved	X	7,235	7,273	8,043	9,286	11,490	13,240	15,064
EFW 8	1.8-3 (1-2)	Waivers Denied	X	178	207	228	605	967	1,576	1,187

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Contra Costa For 2005-2006
Data Current As Of May 15, 2012 11:40:26

Download The Result In Comma Delimited Format

Headcount
12,709

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California Home Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Diablo Valley For 2005-2006
Data Current As Of May 15, 2012 11:45:02

Download The Result In Comma Delimited Format

Headcount
32,186

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Los Medanos For 2005-2006

Data Current As Of May 15, 2012 11:45:16

Download The Result In Comma Delimited Format

Headcount
13,614

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Margaret Davis — Employee Name

Financial Aid Assistant I — Exact Position Title

DVC - Financial Aid - Pleasant Hill — College/Department/Location

925-685-1230 — Telephone #

12mo/11mo/10mo/hrly (12mo circled) — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								1
B. Enrollment Waiver Process:								1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:								2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								30

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4.26.06.

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Alfredo Del Cid — Employee Name

Student Worker — Exact Position Title

Diablo Valley College (925)685-1230 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								.5
B. Enrollment Waiver Process:								.5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								+
TOTALS:								1

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Dennis Franco — Employee Name

Financial Aid Asst II. — Exact Position Title

Diablo Valley College — College/Department/Location

925-685-1230 x2224 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					DC 6			
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco — Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

Marcia Giovanni — Employee Name

Financial Aid Specialist — Exact Position Title

Diablo Valley College/FAO — College/Department/Location

925/685-1220 x2655 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					24	24	24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					40	40	40	40
TOTALS:					70	70	70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Employee Name: [illegible] Exact Position Title: Financial Services Assistant

College/Department/Location: Contra Costa Financial Aid Telephone #: 235-7800 x4435

Work year length: (12mo/11mo/10mo/hrly)

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:				50	45	40	35	25
B. Enrollment Waiver Process:	50	45	40	40	33	28	18	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:				40	30	20	10	5
B. Enrollment Waiver Process:	70	60	50	47	42	33	26	21
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	80	75	65	56	48	44	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	15	10	6	5	3	2
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Tania M Hernandez-Cruz (925) Financial Aid Assistant I
Employee Name Exact Position Title

Diablo Valley College Financial Aid office 1085-1330 x3100 12mo/11mo/10mo/hrly
College/Department/Location Telephone # Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

Michael Keesey — Employee Name

Financial Aid Assistant I — Exact Position Title

DVC/FinAid/Pleasant Hill — College/Department/Location

691-1238 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								1
B. Enrollment Waiver Process:								1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:								2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								30

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael Keesey Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm College

Catherine McClung — Employee Name

Financial Aid Asst II — Exact Position Title

Diablo Valley College/Financial Aid (925)685-1230 — College/Department/Location — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Doug Roberts — Employee Name
Comptroller — Exact Position Title

District Office — College/Department/Location
(925) 229-1000 x1214 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	1.0	1.0	1.5	1.5				5
TOTALS:	1.0	1.0	1.5	1.5				5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Roberts — Date 5-19-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Faidra Rodriguez — Financial Aid Asst. II

Employee Name — Exact Position Title

Diablo Valley Coll./Financial Aid 925-685-1230

College/Department/Location Telephone #

12mo/11mo/10mo/hrly

Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

CARLA ROSAS — Employee Name

FA ASST I — Exact Position Title

DVC / FAO — College/Department/Location

925 685-1230 x2049 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							2	2
B. Enrollment Waiver Process:							2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							40	40
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas — Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Marian Salmeron — Employee Name

Student worker — Exact Position Title

Diablo Valley College/Financial Aid Office — College/Department/Location

(925) 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							1	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Salmeron Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Derek Smith — Employee Name

Sr. Applications Support Analyst — Exact Position Title

DO IT — College/Department/Location

(925) 229-1000 x1418 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								4.0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								4.0

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Derek Smith — Date 5/17/06

If you have any questions, please contact _____, at _____

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D. S. T

Lee, Craig

From: Smith, Derek
Sent: Thursday, March 30, 2006 3:23 PM
To: Lee, Craig
Subject: XBOG Screen Time Estimate

Craig,

Based on my e-mails and my best recollection, I estimate the total time spent programming and debugging the on-line BOGW import process to be about 4 hours. The actual testing (by the campuses) of the process lasted from November 2004 through about March of 2005, but much of that was time spent actually trying to convince them to test the results.

The total time of four hours includes setting up the XAP project for creating the download file, and creating the Envision front-end screen and import batch process, as well as testing and debugging.

--Derek

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

L. Felipe Torres, Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

Los Medanos Colg/PAC — College/Department/Location

(925) 439-2181 x3290 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	20	15	10	5	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	25	15	8	6	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	20	15	10	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	5	1	1	1	1	1
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

A/R - DUC
Department/Location

B. ALVARADO
Employee Name

A/R II
Exact Position Title

685-1250
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm.
District

A+R / LMC
Department/Location

Stephanie Alves
Employee Name

Lead A+R Asst
Exact Position Title

925 439 2181 x325
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie Alves Date 3/27/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Co College
District

Admissions + Records
Department/Location

Kay Clemendor
Employee Name

Senior Admissions + Records
Exact Position Title

4501
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Clemendor Date 3-28-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA — District

D/C — Department/Location

JULIE BETSERAS — Employee Name

SR ACCT CLERK — Exact Position Title

685-1230 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Beteras — Date 3-29

If you have any questions, please contact J. Beteras, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions & Records / Lrnc
Department/Location

Deborah Burkholder
Employee Name

A & R Asst I
Exact Position Title

439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Burkholder Date 3/29/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Costa Losta College District — District
Cashier's Office - CCC — Department/Location
Alma A. Cardenas — Employee Name
Sr Account Clerk — Exact Position Title
510-235-7800 X4294 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 ~~04-05~~ 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	11				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa — District

A&R / DVC — Department/Location

Farrah Coleman — Employee Name

Asst R II — Exact Position Title

N2635 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) N/A					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Max 5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JIM CONLEY
Employee Name

~~SR. ACCT CLERK~~ Cashier Office Supervisor
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Conley Date 3-29

If you have any questions, please contact J. Conley, at [redacted] 2270

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Rich Do
Employee Name

Admission and Records Assistance II
Exact Position Title

(925) 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02
~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or ~~have provided a good faith~~ estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 7/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA — District

DVC — Department/Location

MAI DO / FLORENDO — Employee Name

SR ACCT CLERK — Exact Position Title

685-1230 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mai Do — Date 3-29

If you have any questions, please contact MAI DO, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions and Records/Fine
Department/Location

Carole French
Employee Name

Sr. Admissions and Records Asst
Exact Position Title

432-2181-7506
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carole French Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Regina Garza
Employee Name

Senior Account Clerk
Exact Position Title

(925) 439-2181 x 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.4	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Regina Garza Date 3/27/06

If you have any questions, please contact Bruce Cotter, at 439.2181 x 320

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Mary Gursky
Employee Name

Senior Account Clerk
Exact Position Title

439-2181 X 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cota, at 439-2181 x 3328

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

RCCCD — District

DVC Admissions & Records — Department/Location

Denise Hamelt — Employee Name

Admissions Records II Assistant — Exact Position Title

925 685-1310 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamelt Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

ADMISSIONS / CCC
Department/Location

LORENA HERRERA
Employee Name

SR. ADMISSIONS / RECORDS
Exact Position Title

235.7800 4694
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	18	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	04	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	92	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	30					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LHerrera Date 3.16.06

If you have any questions, please contact FRANK HERNANDEZ, at X-4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Admissions / LMC
Department/Location

Margaret Hertstein
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

(925) 439-2181 x329
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Hertstein Date 3-29-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County
District

Admissions / LMC
Department/Location

Natalie Hotton
Employee Name

Cust. Serv. Clerk
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	/				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	/					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Natalie Hotton Date 3/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admission + Records
Department/Location

Kimberly Hughes
Employee Name

Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A-0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College — District

A&R / DVC — Department/Location

TRINIDAD CEDESMA — Employee Name

Senior Assistant — Exact Position Title

925 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A&R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions & Records Assistant
Exact Position Title

(925)685-1230, x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone # 2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

Admissions / CCC
Department/Location

Gwendolyn Mappin
Employee Name

SR Admissions / Records
Exact Position Title

235-7800 x4898
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (92)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gwendolyn Mappin Date 3-16-06

If you have any questions, please contact FRANK Hernandez, at X4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Stephanie Morgado
Employee Name

Admissions & Record Assistant II
Exact Position Title

(925)685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie S Morgado Date 3/28

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eugenia nelsonjones
Employee Name

Admissions/Records II - substitute
Exact Position Title

(925) 685 1230
Telephone # x2637

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	n/a	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	n/a	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/a	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eugenia nelsonjones Date 3/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist.
District

DVC
Department/Location

Sonja Nilsen
Employee Name

Senior A+R Asst.
Exact Position Title

925-685-1310
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date 3/28/16

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A+R / DVC
Department/Location

Dana Paniagua-Budd
Employee Name

Lead A+R Assistant
Exact Position Title

685-1330 x2328
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dana Paniagua-Budd Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. — District

Admissions / LMC — Department/Location

Susie Purdy — Employee Name

Senior Admissions & Records Assist — Exact Position Title

925-228 x3119 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Purdy — Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Marlene Randle
Employee Name

Senior Account Clerk
Exact Position Title

925 439 2181 x 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cole, at 939.2181 ext 3200

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

L. ROBERTSON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Robertson Date 3-29

If you have any questions, please contact J. Cathey, at 2449

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions & Records
Department/Location

Moyang Saeyang
Employee Name

A & R Assist. I
Exact Position Title

(50)
235-7800 ext 4212 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	na					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Moyang Saeyang Date 3/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JEANETTE SHELTON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Shelton Date 3-29

If you have any questions, please contact J. Carney, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Monica Simmons
Employee Name

Sr. A & R Assistant
Exact Position Title

X 2632
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/Los Medanos College
Department/Location

Ann Starkie
Employee Name

Senior Account Clerk
Exact Position Title

925-439-2181 X 3207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Starkie Date 3/27/06

If you have any questions, please contact Bruce Gates, at 439 2181 ext 340

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions/Records - CCC
Department/Location

Shandra West
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

X4500
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shandra West Date 6/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
Cashier/Los Medanos College — Department/Location
Kay Zerck — Employee Name
Lead Account Clerk — Exact Position Title
925-439-2181 X 3207 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cotta, at 439-2181 ext 3600

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCC
District

A/R
Department/Location

B. Alvarado
Employee Name

A/R II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/28/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Hsiu-Chi Chang
Employee Name

Financial Aid Assistant I
Exact Position Title

251800
Telephone # 4253

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	35	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	22	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	18		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	25			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hsiu-Chi Chang Date 3.17.2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

A&R / DVC
Department/Location

Farrah Coleman
Employee Name

A&R II
Exact Position Title

x2635
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	0-1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A		✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A		✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A		✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A			✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A				✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID-LMC
Department/Location

CARMEN CONNELL
Employee Name

FINANCIAL AID ASST II
Exact Position Title

925-439-2181 x 3291
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carmen Connell Date 3/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College Dist. — District

DVC/FINANCIAL AID — Department/Location

Margaret L. Davis — Employee Name

Hourly/Financial Aid I — Exact Position Title

925-685-1239 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8 min	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3.27.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa — District

Financial Aid, DVC — Department/Location

Alfredo Del Cid — Employee Name

Student worker — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/21/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Binh Do
Employee Name

Admission and Records Assistant II
Exact Position Title

(925) 685-1230
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District
Financial Aid — Department/Location
Tatianna Elejalde — Employee Name
Financial Aid Assistant I — Exact Position Title
(510) 235-7800 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	18	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	35	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	40		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tatianna Elejalde Date 03.20.06

If you have any questions, please contact (510) 235-7800, at 4427

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College Dist.
District

Financial Aid - Diablo Valley College
Department/Location

Dennis Franco
Employee Name

Financial Aid Asst. II
Exact Position Title

925-685-1230 x2604 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	35 sec.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco Date 3/27/06

If you have any questions, please contact 925-685-1230, at 2604

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

Financial Aid - DVC
Department/Location

Marcia Giovanni
Employee Name

Financial Aid Specialist
Exact Position Title

x 2655
Telephone #

(925) 685-1230

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3-5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1-2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 3/27/06.

If you have any questions, please contact Marcia Giovanni, at 2655

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD — District
DVC Admissions & Records — Department/Location
Denise Hamilton — Employee Name
Admissions & Records II Assistant — Exact Position Title
925-685-1310 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (99-00) 00-01 (01-02) (02-03) 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Financial Aid Office / Diablo Valley College
District / Department/Location

Yusuke Hashizume / Student Worker
Employee Name / Exact Position Title

925-798-2509
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20 sec.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10 sec per sheet	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 mins	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 mins		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7 mins			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yusuke Hashizume Date 22 Mar 06

If you have any questions, please contact 925-207-9715, at Yusuke's cell

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College
District

Financial Aid Office / DVC
Department/Location

Tania Hernandez-Cruz
Employee Name

Financial Aid Assistant I
Exact Position Title

(925)685-1230 X2100
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz Date 03/28/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admissions & Records
Department/Location

Kimberly Hughes
Employee Name

Sr Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A-0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A-0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A-0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A-0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Financial Aid / DVC
Department/Location

Michael Keesey
Employee Name

Financial Aid Assistant I
Exact Position Title

(925) 685-1230 ext. 2363
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 min.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-10 min.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7 min.			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael Keesey Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCS — District

Financial Aid — Department/Location

[redacted] — Employee Name

Financial Aid Services & Instructional Support Coo — Exact Position Title

x4293 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [redacted] Date 3/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

A&R / DVC
Department/Location

Ruviano Ledesma
Employee Name

Senior Assistant
Exact Position Title

925-685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
FINANCIAL AID / LMC — Department/Location
LEUNG, CHUNNI — Employee Name
FINANCIAL AID ASSISTANT I — Exact Position Title
439-2181 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) Basic Aid Low Income 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 minutes	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 minutes	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 minutes	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15 min	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District
Financial Aid — Department/Location
PABLO MACIAS — Employee Name
Technical expert — Exact Position Title
(Ed) — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	9	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03-20-06

If you have any questions, please contact (510) 236-7800, at x1. 4374

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Office of Financial Assistance
Department/Location

Dennis E. Mallillin
Employee Name

Financial Aid Assistant I
Exact Position Title

(925) 439-2181 X3151
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A & R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions / Records Asst.
Exact Position Title

(925)685-1230 x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. College
District

Financial Aid / DVC
Department/Location

Catherine McClung
Employee Name

Financial Aid Asst. II
Exact Position Title

925/685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	30 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min.	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 6851230
Telephone #2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community District
District

FAO / Los Medanos College
Department/Location

Eva Monteverde
Employee Name

Financial Aid Specialist
Exact Position Title

(925) 439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva Monteverde Date Mar. 24, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions & Records DVC
Department/Location

Stephanie Morgado
Employee Name

Admissions & Record Assistant II
Exact Position Title

925.685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SMorgado Date 3/28

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eupenia nelson
Employee Name

Admissions Records II-Substitute
Exact Position Title

(925)685-1230 x2637
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	12	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. waivers	n/a	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eupenia nelson Date 3/28/6

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Financial Aid / CCC
Department/Location

Anh Nguyen
Employee Name

FA Asst 1
Exact Position Title

235-7800 x4295
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/21/06

If you have any questions, please contact 235-7800 x 4295, at 4295

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist. — District

DVC — Department/Location

Sonja Nilsen — Employee Name

Senior A+R Asst. — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Barbara Rance
Employee Name

Financial Aid Asst.
Exact Position Title

510-235-7800 ext 4425
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 *Workload Multiplier* (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	11	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	35		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	32			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Rance Date 3-20-06

If you have any questions, please contact Barbara RANCE, at X 4425

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC FINANCIAL AID
Department/Location

JENNIFER RICE
Employee Name

Student Worker
Exact Position Title

925-998-5173
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3.2	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3.5			✓	

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Employee Signature Jennifer Rice Date 3/23/05

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

FAO / Diablo Valley College
Department/Location

Faidra Rodriguez
Employee Name

Financial Aid Asst. II
Exact Position Title

925-685-1230 x2399
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	50 seconds	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

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Employee Signature Faidra Rodriguez Date 3-24-06

If you have any questions, please contact 925-685-1230, at 2399

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA CCD
District

DVC FINANCIAL AID
Department/Location

CARLA ROSAS
Employee Name

FINANCIAL AID ASST I
Exact Position Title

925 685-1230 x 2049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

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Employee Signature [signature] Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa.
District

Financial Aid office Diablo Valley College
Department/Location

Marian Solmeron
Employee Name

Student worker
Exact Position Title

#2290
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓	.		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

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Employee Signature Marian Solmeron Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions/DVC
Department/Location

Monica Simmons
Employee Name

Sr. AeR Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID / DVC
Department/Location

JENNIFER THORPE
Employee Name

ADMINISTRATIVE ASST.
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2-3 mins	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			✓	

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Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District

FAO/Los Medanos College — Department/Location

L. Felipe Torres Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

(925) 439-2181 x 3240 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

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Employee Signature _____ Date 3/28/2006

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	19,896	20,384	20,119	22,205	25,222	19,110	19,304	19,064
Fall	39,549	38,224	38,521	40,475	43,801	39,324	38,059	36,580
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	40,988	37,829	40,549	43,956	40,738	39,419	37,314	~~36,951~~
Total	100,433	96,437	99,189	106,636	109,761	97,853	94,677	~~55,644~~ 92,595
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	92,352	89,202	91,916	98,593	100,475	86,363	81,437	~~40,533~~ 77,484 ?
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Craig A. Lee Date 3/30/06

CRAIG A. LEE (Employee Name: (print))

Director II IT (Position or Title)

If you have any questions, please contact _____, at _____.

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UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	CCC	DVC	LMC	Total	
SU98	3,956	11,468	4,472	19,896	
FA98	8,521	22,094	8,934	39,549	100,433
SPR99	8,625	22,569	9,794	40,988	
SU99	3,440	11,857	5,087	20,384	
FA99	7,798	21,694	8,732	38,224	96,437
SP00	7,871	20,593	9,365	37,829	
SU00	3,773	11,945	4,401	20,119	
FA00	7,921	21,365	9,235	38,521	99,189
SP01	8,787	21,689	10,073	40,549	
SU01	4,238	12,873	5,094	22,205	
FA01	8,449	21,737	10,289	40,475	106,636
SP02	9,755	23,510	10,691	43,956	
SU02	4,913	13,882	6,427	25,222	
FA02	10,117	23,260	10,424	43,801	109,761
SP03	8,797	22,910	9,031	40,738	
SU03	3,490	12,470	3,150	19,110	
FA03	8,210	22,137	8,977	39,324	97,853
SP04	8,557	21,847	9,015	39,419	
SU04	3,818	11,465	4,021	19,304	
FA04	8,048	21,112	8,899	38,059	94,677
SP05	8,099	20,779	8,436	37,314	
SU05	4,088	11,386	3,590	19,064	~~55,644~~ 92,595
FA05	7,380	20,704	8,496	36,580	
SP06	8,197	20,230	8,524	36,951	

Backup for EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer					135	118	139	781
Fall					322	448	608	1628
Winter/Intersession N/A								
Spring					292	272	602	2826
Total					749	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
~~Summer~~ LMC							650	600
~~Fall~~ DVC								2,404
~~Winter/Intersession~~ CCC							525	600
~~Spring~~								
Total							1,175	3604

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Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925)229-1000 x1229

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C ge: CCC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer					21	26	41	338
Fall					64	127	232	490
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					78	61	197	840
Total	0	0	0	0	163	214	470	1668
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: All 1.8-2 #1

S ical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer	0	0	0	0	156	118	139	781
Fall	0	0	0	0	322	448	608	1628
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring	0	0	0	0	292	272	602	2826
Total	0	0	0	0	770	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

C[illegible]ra Costa Community College District
E[illegible]ollment Fee Workload Statistics Report

College: DVC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer					135	90	96	388
Fall					192	273	307	815
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					161	195	343	1678
Total	0	0	0	0	488	558	746	2881
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: LMC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer						2	2	55
Fall					66	48	69	323
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					53	16	62	308
Total	0	0	0	0	119	66	133	686
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

Ducharme, Krista 1.8-2 #2

From: LaMothe, Viviane
Sent: Friday, May 19, 2006 2:55 PM
To: Ducharme, Krista
Cc: Hernandez, Frank
Subject: BOGW REFUNDS

Hi Krista,

To our best knowledge we believe we have processed the following refunds for the years noted. We have no information for other years in question.

2004-2005	525
2005-2006	600

Thanks, Viviane

Ducharme, Krista

From: Giovanni, Marcia
Sent: Friday, May 19, 2006 3:39 PM
To: Ducharme, Krista
Cc: Jerez, Brenda
Subject: REBILL COUNT 05-06

Krista,

Here is the rebill count that I have. I began gathering the data 8/2005 and the numbers inlcude rebills for the 05-06 academic year to date.

2,404

Marcia

Ducharme, Krista

n: Torres, Felipe
Sent: Tuesday, May 16, 2006 1:25 PM
To: Ducharme, Krista
Subject: RE: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim

For 2004-05 LMC process about 650 students for refund due to BOGG eligibility who had previously paid.

For 20054-06 LMC has processed to date about 600 students for refund due to BOGG eligibility who had previously paid.

From: Ducharme, Krista
Sent: Monday, May 15, 2006 5:21 PM
To: Alves, Stephanie; Fincher, Gary; Hernandez, Frank; Torres, Felipe; Jerez, Brenda; LaMothe, Viviane
Subject: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim
Importance: High

Well, this is the final week to get the claim submitted and I have one more request for you. Have any of your departments collected information regarding the number of student refunds to be processed due to the BOGG waivers? These are students who paid their tuition and subsequently received their waivers. I believe these are the students that A&R would have to run BILL to get the students' accounts to reflect the credit. This is a required statistic for the claim and the information is not accessible on Datatel. The information is needed back to 98-99; however, any available data would be tremendously helpful. If you have any information, I would be very grateful if you could submit it to me by Thursday, May 18. Thanks in advance for your cooperation.

Krista Ducharme
Fisc[illegible] Operations Specialist
(92[illegible]29-1000 x1229

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

EFCW 1.8-3

District: CCCCD (source: Chancellor's Office Data Mart; Datatel Colleague; FA Office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6 *
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer CCC								4987
Fall DVC					4,357	5,649	6,702	6725
Winter/Intersession LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	4539
Spring								
Total								16251
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer CCC	2,886	2,500	2,281	2,588	2,891	3,551	3,434	4982
Fall DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	6264
Winter/Intersession LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	3818
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	~~15,444~~ 15064

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Craig Lee Date 3/30/06

Employee Name: (print) CRAIG A. LEE Position or Title Director of IT

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

* 05-06 Data completed by Krista Ducharme, Fiscal Operations Specialist on 10-30-06 Krista Ducharme

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Ducharme, Krista

From: Smith, Derek
Sent: Wednesday, October 25, 2006 9:52 AM
To: Ducharme, Krista; Torres, Felipe; Jerez, Brenda; Giovanni, Marcia; LaMothe, Viviane
Cc: Lee, Craig
Subject: RE: Enrollment Fee Collection & Waivers Mandated Costs-Additional Info Request

BOGW Numbers:

CCC: Approved: 4,982 Requested: 4,987 (only 5 denied waivers listed in system)
DVC: Approved: 6,264 Requested: 6,725 (237 of the denied waivers had a DST location)
LMC: Approved: 3,818 Requested: 4,539 (53 of the denied waivers had a DST location)

The above "Approved" numbers represent any "BOG"-type award on AIDE, with the designated FA location. The "Requested" values include the "Approved" numbers, plus any "xDBW" awards appropriate to the location (CDBW for CCC, DDBW for DVC, LDBW for LMC).

A total of 365 BOGWs were awarded with a DST location for 2005-06.

--Derek

From: Ducharme, Krista
Sent: Monday, October 23, 2006 2:41 PM
To: Torres, Felipe; Jerez, Brenda; Giovanni, Marcia; LaMothe, Viviane; Smith, Derek
Cc: Lee, Craig
Subject: Enrollment Fee Collection & Waivers Mandated Costs-Additional Info Request
Importance: High

SixTen & Assoc. is requesting that CCCCD provide 2005-06 data by November 2, 2006 on its form EFCW 1.8-3. We had previously provided the information for the prior years. They need to know the # of enrollment fee waivers requested and the # of enrollment fee waivers approved.

Derek, you provided the # of enrollment fee waivers approved for each of the colleges based on the Chancellor's Office's Data Mart. I queried it for '05-'06 and got nothing back. I'm assuming the state doesn't have the info yet. Will you provide the '05-'06 numbers? Also, you provided Felipe with the number of enrollment fee waivers denied as of 3/29/06. Will you provide the '05-'06 denials as of year end?

Viviane, you previously stated that CCC did not track that info, but that it would begin tracking it in '06-'07. We didn't submit prior year data; however, we included your email that CCC estimated that 30% were denied. Do you have any current data that we could use as a basis for '05-'06 or do you want to use the same estimate of 30%?

Marcia/Derek, a report titled BOGB was included as backup to the previous EFCW 1.8-3 provided by IT that lists the students' names and reasons for denial. I'm not sure who prepared that report, but it may need to be run for the '05-'06 numbers.

Please let me know if you have any questions or need additional information. Once again, I need to provide this information to SixTen & Assoc. by **November 2, 2006**. Thanks.

Krista Ducharme
Fiscal Operations Specialist
(925) 229-1000 x 1229

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See Attached Spreadsheet

See Attached Spreadsheet - No term data available.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925) 229-1000 x1229

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer			#11	#11	#11	#11	#18	#26
Fall			#11	#11	#11	#18	#26	#26
Winter/Intersession								
Spring			#11	#11	#11	#18	#26	#26
TOTAL x $0.91 per credit								

Karen: Please provide dollar per unit for these terms. Thx Linda

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

Statistical Data

	FISCAL YEARS							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1. Enrollment Fees Collected	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2. Enrollment Fees Refunded	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
3. Enrollment Fee Revenue (line 1 subtract line 2)	$ 6,926,710.57	$ 5,981,415.15	$ 6,360,339.77	$ 5,587,180.58	$ 7,048,008.28	$ 10,816,351.91	$ 15,544,427.18	$ 16,291,075.15
4A. Total enrollment Fees Waived (BOGG, etc)	$ 1,681,274.00	$ 1,357,125.00	$ 1,249,724.00	$ 1,413,400.00	$ 1,224,520.00	$ 1,488,235.00	$ 3,880,840.00	$ 4,000,307.05
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 33,625.48	$ 27,142.50	$ 24,994.48	$ 28,268.00	$ 24,490.40	$ 29,764.70	$ 77,616.80	$ 80,006.14
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	117,689.18	94,998.75		$ -	$ -	$ -	$ -	$ -
5. Total Number of credit units for which enrollment fees were waived (All Semesters) (Line 4a divided by $ per unit)			113,611.27	128,490.91	111,320.00	94,993.72	166,321.71	153,857.96
Total x .91 per credit			103,386.26	116,926.73	101,301.20	$ 86,444.29	151,352.76	140,010.75

Source: Line #3 from GL reports. Line #4A from state Chancellors website DATA mart.

Fiscal Years 99 - 03 $ per Unit is $11
FY 04-05 $ per Unit is (18 + 26 + 26) / 3 = 23.34
FY 03-04 $ per Unit is (11 + 18 + 18) / 3 = 15.67
FY 05-06 $ per unit is $26

Six[illegible]en and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the salaries for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME CONTRA COSTA COMMUNITY COLLEGE DISTRICT

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE SECRETARY	$ 85.53	$ 37.12
	AVERAGE DEAN		$ 77.43
	AVERAGE DIRECTOR	$ 57.84	$ 75.06
	AVERAGE EXECUTIVE ASSISTANT	$ 89.99	$ 41.90
	AVERAGE HR REP	$ 31.49	$ 36.89
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		$ 96.81
	AVERAGE VICE CHANCELLOR	$ 62.43	
ALATORRE, ART	DIRECTOR OF ENROLLMENT	$ 70.20	$ 73.32
ALVARADO, B.	ADMISSIONS & RECORDS ASSISTANT II		$ 26.50
ALVES, STEPHANIE	LEAD A&R ASSISTANT		$ 35.64
AMES, LINDA	ADMIN ANALYST (Retired 7/1/04)		
ANDERSON, KATHLEEN	SCIENCE LAB TECH II	$ 32.70	$ 33.92
ANDREINI, PHILIP	DEAN (Terminated 9/30/04)	$ 70.20	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
ARMENDAZ, KAY	SENIOR A&R ASSISTANT		$ 33.09
ARMSTRONG, TERRY	DEAN	$ 79.40	$ 80.92
BARATTA, FRANK	DIRECTOR OF DISTRICT RESEARCH	$ 76.00	RETIRED
BARRICK, CAROL	ACADEMIC/STUDENT SVCS PROGRAM MANAGER	$ 55.00	$ 55.88
BECKETT, TOM	VICE CHANCELLOR, FACILITIES & OP (Retired 7/1/04)		
BENJAMIN,HELEN	CHANCELLOR	$ 104.22	$ 121.02
BERNAL, KIMBERLY	SENIOR ACCOUNT CLERK (Retired 6/2/04)		
BETSEKAS, JULIE	SENIOR ACCOUNT CLERK		$ 31.77
BOND, PEARL	ASSISTANT BOOK BUYER	$ 26.85	$ 27.84
BRADFORD, DIANE	SENIOR PAYROLL TECHNICIAN	$ 36.99	$ 39.33
BRADFORD, IRIS	ADMIN ANALYST	$ 44.07	$ 47.16
BUELNA, GYDA	EXECUTIVE ASSISTANT	$ 41.54	$ 42.30
BUGG, ELMER	EXEC. DIRECTOR, REGIONAL TRAINING	$ 81.41	$ 82.96
BURKHOLDER, DEBORAH	A&R ASSISTANT I		$ 12.80
CAFÉ, JENN	H.R. REPRESENATIVE	$ 26.02	$ 35.89
CALLAHAN, LOIS	INTERIM CHANCELLOR	$ 121.00	$ 121.00
CARDENAS, ALMA	SENIOR ACCOUNT CLERK		$ 29.24
CASTRO, KAREN	DISTRICT ACCOUNTING SPECIALIST	$ 33.52	$ 38.37
CATALANO, JULIE	SENIOR ADMIN ASSISTANT	$ 34.36	$ 35.64

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
CERRUTI, LINDA	PRINCIPAL EXECUTIVE COORDINATOR	$ 67.07	$ 70.01
CHANG, HSUI-CHI	FINANCIAL AID ASSISTANT I		$ 24.89
CHERRY, LINDA	SENIOR FOUNDATION DIRECTOR	$ 60.53	$ 64.80
CLOW, TIM	SENIOR DEAN	$ 83.42	$ 85.02
COLEMAN, FARRAH	A&R ASSISTANT II		$ 25.22
CONLEY, JIM	CASHIER OFFICE SUPERVISOR		$ 35.06
CONNELL, CARMEN	FINANCIAL AID ASSISTANT II		$ 29.24
CORNETT, CHRISTINE	EXECUTIVE ASSISTANT	$ 39.53	$ 40.26
COURTNEY, JEAN	EXECUTIVE COORDINATOR (Retired 10/31/04)	$ 62.27	
COUSER, RICHARD	CHIEF OF DISTRICT POLICE (Retired 8/4/03)		
CUTLER, BRUCE	DIRECTOR OF BUSINESS SERVICES	$ 77.49	$ 80.92
DALRYMPLE, BILL	COMPTROLLER/ ASSIST. CHIEF	$ 60.53	$ 68.08
DAVIS, MARGARET	FINANCIAL AID ASSISTANT I		$ 24.89
DELCID, ALFREDO	STUDENT WORKER		$ 12.71
DIMITRI, NICK	ADMIN ANALYST, SENIOR	$ 45.17	$ 48.34
DO, BINH	A&R ASSISTANT II		$ 26.50
DO-FLORENDO, MAI T. DO	SENIOR ACCOUNT CLERK		$ 29.24
DOGAN, OZZIE	CENTRAL SERVICES MANAGER	$ 65.17	$ 66.42
DUCHARME, KRISTA	FISCAL OPERATIONS SPECIALIST	$ 47.36	$ 49.13

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
EDELSTEIN, MARK	COLLEGE PRESIDENT	$ 99.20	$ 103.60
EDWARDS, ALEX	DIRECTOR OF FACILITIES, DO	$ 73.75	$ 75.15
ELEJALDE, TATIANNA	FINANCIAL AID ASSISTANT I		$ 24.89
EYESTONE, JAMES	COMPUTER & NETWORK SERVICES SUPERVISOR	$ 55.04	$ 56.05
FERGUSON, ANNETTE	PRINCIPAL PAYROLL TECHNICIAN	$ 52.40	$ 53.35
FERGUSON, MELISSA (HOOBLER)	HR INFO SYSTEM SPEC	$ 27.94	$ 35.89
FINCHER, GARY	DIRECTOR, ADMISSIONS & RECORDS		$ 61.68
FITZGERALD, ALAN	BUSINESS MANAGER, SATELLITE		53.18
FLAGG, VERONICA (KNOTT)	SENIOR DEAN	$ 79.44	$ 80.92
FLAGGS, JACKIE	ADMIN ANALYST, SR	$ 53.70	$ 56.05
FLOYD, DONNA	DEAN	$ 75.61	$ 78.95
FOX, SUZANNE	ADMIN ASSISTANT	$ 35.80	$ 36.47
FRANCO, DENNIS	FINANCIAL AID ASSISTANT II		$ 27.47
FRANK, DAN	SR HR REP (Resigned 10/31/03)		
FRENCH, CAROLE	SENIOR A&R ASSISTANT		$ 29.24
FUENTES, ERNESTO	DIRECTOR, HR (Terminated 6/30/04)		
GARCIA, PETER	PRESIDENT	$ 106.79	$ 111.57
GARZA, REGINA	SENIOR ACCOUNT CLERK		$ 27.47
GIDEON, GLORIA	DEAN-LIBRARIAN 9/30/04	$ 70.20	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
GILLILAND, PHYLLIS	VC, PLANNING & RESOURCES DEVELOPMENT	$ 85.53	$ 87.16
GIOVANNI, MARCIA	FINANCIAL AID SPECIALIST		$ 31.50
GONZALES-LEWIS, ANDREA	PRINCIPAL/HR REPRESENTATIVE	$ 63.83	$ 65.01
GONZALEZ, GUSTAVO	CAMPUS FACILITIES ASSISTANT	$ 28.20	$ 29.24
GRACE, GUY	BUILDINGS & GROUNDS MANAGER		$ 68.08
GREEN, BERNADETTE	COMPUTER TECH III	$ 37.92	$ 39.33
GROENIER, MARC	BUDGET COORDINATOR		51.61
GURSKY, MARY	SENIOR ACCOUNT CLERK		RETIRED
HAMILTON, DENISE	A&R II		$ 26.50
HANSON, MELODY	SR EXECUTIVE ASSISTANT	$ 47.00	$ 47.86
HASHIUME, YUSUKE	STUDENT WORKER		$ 12.71
HAWKINS, PAMELA	SENIOR DEAN (ended 6/30/04, Faculty 7/1/04)		
HEALY, MARY	SECRETARY to the DEAN	$ 31.90	$ 33.09
HENDRICKSON, JOHN	VICE CHANCELLOR - FINANCE & ADMIN (Retired 3/30/04)		
HENRY, DAN	VICE PRESIDENT	$ 94.44	$ 96.21
HENSON, DONALD	SENIOR EQUIPMENT MAINT WORKER (Retired 11/30/04)	$ 41.86	
HERNANDEZ, FRANK	Dean, Student Services	$ 83.42	$ 85.02
HERNANDEZ-CRUZ, TANIA	FINANCIAL AID ASSISTANT I		$ 24.01
HERRERA, LORNA	SENIOR A&R ASSISTANT		$ 29.24

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
HERSTEIN, MARGARET	SENIOR A&R ASSISTANT		
HOLMAN, DEAN	BOOKSTORE SUPERVISOR	$ 29.68	$ 31.00
HOLMAN, SANDRA	SENIOR DEAN	$ 85.53	$ 87.16
HOPKINS, KEVIN	CUSTODIAN II	$ 25.56	$ 26.50
HOTTON, NATALIE	CUSTOMER SERVICES CLERK		$ 22.55
HUFF, GENE	ACTING VICE CHANCELLOR HR & ORG	$ 70.20	$ 75.15
HUGHES, KIMBERLY	INTERIM LEAD ADMISSIONS		$ 23.39
ITZKO, CHARLIE	ADVANCED TECHNICAL EXPERT/PAYROLL	$ 23.55	$ 24.00
JACKSON, SHAWN	STUDENT SVCS & INSTR SUPPORT (Term. 4/2/04)	$ 31.07	
JEREZ, BRENDA	DIRECTOR, FINANCIAL AID		$ 61.68
JOHNS, KRISTA	DEAN	$ 70.20	$ 71.53
JONES, DARLENE	SENIOR OFFICE ASSISTANT (Retired 9/30/04)	$ 30.31	
JONES, MARK	STOREKEEPER	$ 34.30	$ 33.09
KAYA, PAT	EXECUTIVE ASSISTANT	$ 40.52	$ 41.27
KEESEY, MICHAEL	FINANCIAL AID ASSISTANT I		$ 24.89
KILLINGS, DENISE	EXECUTIVE ASSISTANT	$ 41.54	$ 42.30
KINGSTON, JEFF	V.C. FACILITIES AND OPERATIONS	$ 87.98	$ 87.16
KOHLER, LINDA	ACCOUNTANT I	$ 36.09	$ 38.37
LAMB, SUSAN	DEAN	$ 77.49	$ 80.96

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
LaMOTHE, VIVIAN	STUDENT SERVICE & INSTRUCTIONAL COORDINATOR		$ 39.33
LAWRENCE, DAN	CHIEF OF POLICE	$ 67.02	$ 60.17
LEADON, PRICILLA	DEAN	$ 70.20	$ 75.15
LEDESMA, TRINIDAD	SENIOR A&R ASSISTANT		$ 27.84
LEE, CRAIG	DIRECTOR, INFORMATION TECHNOLOGY		$ 71.53
LEE, PAUL	POLICE SERVICE LIEUTENANT	$ 60.53	RETIRED
LEIVAS, CHRIS	DIRECTOR OF BUSINESS SERVICES	$ 79.40	$ 80.92
LEUNG, CHUNNI	FINANCIAL AID ASSISTANT I		$ 24.89
LEVER, SOPHIA	PRINCIPAL HR REP	$ 63.83	$ 65.01
LITTMAN, LES	DIRECTOR OF PURCHASING	$ 63.60	$ 68.08
LIVINGSTON, RICHARD	SR DEAN	$ 85.53	$ 87.16
LONG, MARY	SENIOR ADMIN SECRETARY	$ 30.37	$ 31.50
LUCERO, PABLO	TECHNICAL EXPERT		$ 17.99
MAGA, CAROL	SENIOR DEAN	$ 83.42	$ 89.33
MAGALONG, MARILES	DIRECTOR OF BUSINESS SERVICES	$ 79.40	$ 80.92
MAGNAGHI, MARY ANNE	EXECUTIVE ASSISTANT	$ 42.58	$ 43.36
MALLILLIN, DENNIS	FINANCIAL AID ASSISTANT I		$ 24.89
MARTINEZ, MARIANNE	SENIOR A&R ASSISTANT		$ 31.50
MARVEL, GREG	VICE CHANCELLOR, HR & ORG DEV. (term. 3/31/04)		

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
MATHEWS, MICHEL	DEAN	$ 81.41	RETIRED
McCLUNG, TINA CATHERINE	FINANCIAL AID ASSISTANT II		$ 27.84
McCRAY, SANDI	PRINCIPAL HUMAN RESOURCES REP	$ 74.03	$ 75.39
McDONALD, BILL	BOOK STORE MANAGER, COLLEGE (Retired 3/31/05)	$ 59.04	
MCDONALD, DIANA	DEAN	$ 77.49	
MCEWEN, LINDA	LEAD ADMISSIONS/RECORDS - A/R ASST	$ 31.90	$ 33.09
McLEAN, SHAREN	ADMIN ASSISTANT	$ 36.09	$ 38.37
MEDOVOY, GEORGE	DIRECTOR OF COMMUNITY RELATIONS	$ 57.61	$ 60.17
MEHDIZADEH, MOJDEH	VC, TECH SYS/SUPPORT	$ 92.13	$ 93.86
MONTEVERDE, EVA	FINANCIAL AID SPECIALIST		$ 34.77
MOORE, JEANETTE	DEAN (Retired 4/10/04)	$ 87.53	
MORGADO, JOE	LEAD GARDENER	$ 43.42	$ 39.33
MORGADO, STEPHANIE	A&R ASSISTANT II		$ 24.89
MORRISON, AKIBA	ADMINISTRATIVE SECRETARY	$ 30.37	RETIRED
MURRILO, CARLOS	DEAN	$ 70.20	$ 71.53
NELSON-JONES, EUGENIA	A&R II		$ 13.83
NEWMAN, GAIL	DIRECTOR OF ADMISSIONS & RECORDS	$ 75.58	$ 77.03
NGUYEN, AHN	FINANCIAL AID ASSISTANT I		$ 14.09
NIELSEN, SONJA	SENIOR A&R ASSISTANT		$ 29.24

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
OSWALD, EDWARD	COMPUTER & NETWORK SPECIALIST	$ 45.08	$ 46.75
OUNJIAN-AUQUE, JENNIFER	ADMIN ANALYST	$ 45.17	$ 50.78
PANIAGUA-BUDD, DANA	LEAD A&R ASSISTANT		$ 37.44
PEROTTA, CAM	BUILDINGS & GROUNDS MANAGER	$ 66.82	$ 68.08
PITT, TINA	DEAN (Terminated 6/30/04)		
POE, DARLENE	CUSTODIAL MANAGER	$ 49.67	$ 53.18
PULOS-FULK, GEORGETTE	SECRETARY to the DEAN (Retired 8/31/04)	$ 36.09	
PURDY, SUSIE	SENIOR A&R ASSISTANT		$ 29.24
QUINN, SAMUEL	GROUNDS WORKER/GARDENER II	$ 30.37	$ 31.49
RANCE, BARBARA	FINANCIAL AID ASSISTANT		$ 26.50
RANDLE, MARLENE	SENIOR ACCOUNT CLERK		$ 27.47
RAWLINSON II, WILLIAM REED	SENIOR HR REP	$ 47.00	$ 47.86
RIEL, JENNIFER	STUDENT WORKER		$ 12.71
ROBERTS, DOUG	VICE CHANCELLOR, FINANCE & ADMIN	$ 79.44	$ 85.02
ROBERTSON, LEETHA	SENIOR ACCOUNT CLERK		$ 22.55
RODRIGUEZ, FAIDRA	FINANCIAL AID ASSISTANT II		$ 29.24
RODRIGUEZ, GILBERT	DEAN	$ 81.41	$ 82.96
ROSALES, LINDA	DIRECTOR OF PAYROLL SERVICES	$ 73.75	$ 75.15
ROSAS, CARLA	FINANCIAL AID ASSISTANT I		$ 24.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
RUBALCAVA, GUADALUPE	LEAD CUSTODIAN	$ 24.93	$ 27.84
SAEYANG, MOUANG	A&R ASSISTANT I		$ 22.55
SALMERON, MARIAN	STUDENT WORKER		$ 7.37
SCHWABE, ANN (STARKIE)	SENIOR ACCOUNT CLERK	$ 29.63	$ 33.92
SCHWIED, LYNDA (LAWRENCE)	SENIOR DEAN	$ 83.42	$ 85.02
SCOTT-SUMMERS, DIANE	VICE PRESIDENT	$ 94.44	$ 96.21
SEABERRY, BEN	EX. DEAN OF INFO TECHNOLOGIES & SERVICES	$ 77.49	$ 78.96
SHAFFER, JACK	SENIOR ADMIN ANALYST	$ 52.39	$ 54.68
SHELL, STACY	HUMAN RESOURSES REPRESENTATIVE	$ 33.03	$ 33.47
SHELTON, JEANETTE	SENIOR ACCOUNT CLERK		RETIRED
SHIMADA, JUANITA	HR REPRESENTATIVE	$ 40.52	$ 42.30
SHOAFF, TERRY	VICE PRESIDENT	$ 94.44	$ 96.21
SIMMONS, MONICA	SENIOR A&R ASSISTANT		$ 27.84
SIMPSON, TERRY	PROGRAM DIRECTOR		$ 69.90
SKEEN, ESTHER	ACTING CHIEF	$ 62.05	$ 66.43
SMITH, DENNIS	DEAN		71.53
SMITH, DEREK	SR. APPLICATIONS SUPPORT ANALYST		$ 47.92
SMITH, THOMAS	VICE CHANCELLOR, FINANCE & ADMIN (Term. 11/30/04)	$ 81.41	
SPENCE, CHUCK	CHANCELLOR	$ 147.01	$ 147.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
STANTON, KENNETH	MEDIA SERVICES SPECIALIST II	$ 32.70	$ 33.92
STARKIE, ANN	SENIOR ADMINISTRATIVE ASSISTANT	$ 35.80	$ 27.47
STARKIE, ANN	LEAD ACCOUNT CLERK		$ 33.92
STEPHENSON, JAMES	MEDIA SERVICES SPECIALIST II	$ 31.13	$ 32.28
STRANGFELD, KEN	CHIEF ACCOUNTANT (Terminated 9/30/04)	$ 61.94	
TAYLOR, JIM	BUILDINGS & GROUNDS MANAGER	$ 65.17	$ 66.42
THORPE, JENNIFER	ADMINISTRATIVE ASSISTANT		$ 29.57
THREET, DON	PARKING SERVICES OFFICER	$ 23.73	$ 24.61
TORRES, LUIS FELIPE	DIRECTOR, SP. PROG SERVICES	$ 77.49	$ 78.96
TRAN-COLVIN, PHUNG	ADMIN ANALYST (Terminated 10/1/03)		
VALENZUELA, EILEEN	PRINCIPAL ADMIN ANALYST	$ 67.06	$ 70.01
VROMAN, JUDITH	MANAGER, AUDIT SERVICES		$ 57.27
WADE, JOHN	SENIOR ACADEMIC/STUDENT SVCS MANAGER	$ 60.53	$ 61.68
WALKER, ADRIANNE	PRINCIPAL ACCT	$ 49.87	$ 50.79
WALSH, JANIS	BOOKSTORE MANAGER	$ 60.53	$ 61.68
WALTON-WOODSON, CATHERINE	COUNSELING OFFICE SUPERVISOR	$ 35.28	$ 35.95
WATKINS, RANDY	SR DEAN (FACULTY 6/30/04)		
WATSON, MARVIN	LEAD MAINTENANCE MECHANIC	$ 44.99	$ 43.41
WEST, MIKE	REPROGRAPHICS PROD COORD	$ 32.70	$ 33.92

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
WEST, SHONDRA	SENIOR A&R ASSISTANT		$ 29.24
WHITE, ROBBIE	ADMIN SECRETARY (Terminated)	$ 27.52	
WIEDEN, TED	SPECIAL ASSISTANT TO CHANCELLOR		71.53
WILLIAMS, MARK	COMPUTER CENTER COORDINATOR	$ 37.92	$ 41.33
WILLIAMS, MCKINLEY	VICE PRESIDENT	$ 89.86	$ 98.61
WILLIAMS, PENNY	ADMIN. SECRETARY	$ 29.63	
WOOD, ROSEMARY	ADMINISTRATIVE ASSISTANT	$ 32.70	$ 36.53
WRIGHT, EDDIE	CUSTODIAN II	$ 23.73	$ 24.61
ZABETIAN, SIMI	SENIOR AR ASSISTANT	$ 28.20	$ 29.24
ZERCK, KAY	LEAD ACCOUNT CLERK	$ 33.52	RETIRED

Software System Costs

Ducharme, Krista

From: Lee, Craig
Sent: Thursday, May 04, 2006 3:31 PM
To: Ducharme, Krista
Cc: Mehdizadeh, Mojdeh
Subject: EFCW AR/CR document
Attachments: Datatel ESSA.pdf

Krista:

Attached is a pdf file with a copy of our Datatel Enhancement and Support Services Agreement (ESSA) for 2005/06. Page #1 lists the various products and corresponding annual fee. The fourth item is "California Student System Maintenance....$39,475". This module contains nine major functions, including the Accounts Receivable/Cash Receipts functionality.

Therefore, our estimate is 1/9th of $39,475 = $4,386. The total invoice has increased from 6% to 17% each year.

I hope this helps. Let me know if you have any questions or need additional information.

--Craig
x1237

Schedule 5
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 5,981,415	$ 6,360,340	$ 5,587,181	$ 7,048,008	$ 10,816,352	$ 15,544,427	$ 16,291,075
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 119,628	$ 127,207	$ 111,744	$ 140,960	$ 216,327	$ 310,889	$ 325,822
1.8-4 line 4A	Enrollment Fees Waived	$ 1,357,125	$ 1,249,724	$ 1,413,400	$ 1,224,520	$ 1,488,235	$ 3,880,840	$ 4,000,307
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617	$ 80,006
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 94,999	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		113,611	128,490	111,320	94,973	166,274	153,858
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309	$ 140,011
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617	$ 80,006
(Line 4A X 7%)	7% of Fees Waived (99-00 on	$ 94,999						
1.8-4 5.	Credit Units Waived		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309	$ 140,011
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 122,142**	**$ 128,380**	**$ 145,194**	**$ 125,791**	**$ 116,190**	**$ 228,926**	**$ 220,017**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 2003-04 fees are $15.67: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 2004-2005 fees are $23.34: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Contra Costa
COUNTY: Contra Costa

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$44,137,094	$40,899,487	$-284,682	$40,614,805
EQUALIZATION	1,166,006	1,072,724	93,282	1,166,006
ENROLL FEE ADMIN (2%)	46,303	42,598	3,705	46,303
APPRENTICE ALLOWANCE	348,608	318,457	30,151	348,608
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	879,101	808,773	70,328	879,101
S.F.A.A.	964,476	884,095	80,381	964,476
E.O.P.S.	2,493,162	2,285,198	207,964	2,493,162
C.A.R.E.	401,336	367,356	33,980	401,336
D.S.P.S.	2,367,040	2,177,676	189,364	2,367,040
STATE HOSPITALS	0	0	0	0
CALWORKS	649,252	578,451	70,801	649,252
MATRICULATION (CREDIT)	1,255,347	1,150,780	104,567	1,255,347
MATRIC. (NONCREDIT)	22,861	21,032	1,829	22,861
FAC.& STAFF DIVERSITY	28,173	23,819	4,354	28,173
PART-TIME FAC. INS.	75,370	0	75,370	75,370
PART-TIME FAC. OFF. HRS	133,497	0	133,497	133,497
PART-TIME FAC. ALLO.	1,458,983	1,342,265	116,718	1,458,983
TELECOMMUNICATIONS	172,631	101,283	71,348	172,631
PLANT & INSTRUCTIONAL	621,754	572,013	49,741	621,754
ECON. DEVELOPMENT	652,500	548,100	0	548,100
TANF	154,807	132,212	22,595	154,807
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	112,875	47,407	47,408	94,815
VTEA TITLE I C	396,243	464,405	-131,561	332,844
NURSING CARE	358,767	0	358,767	358,767
PRIOR YEAR CORRECTION	-893,067	-891,510	-1,557	-893,067
TOTAL	$58,003,119	$52,946,621	$1,348,350	$54,294,971

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Contra Costa College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:25:40

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	111	26,032
BOGW - Part A-2 based on SSI recipient status	149	33,099
BOGW - Part A-3 based on general assistance recipient status	13	2,085
BOGW - Part B based on income standards	1,659	499,969
BOGW - Part C based on financial need	1,952	748,823

Total Amount = $ 1,310,008

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California Home Tuesday, May 15, 2012

Student Financial Aid Awards

Diablo Valley College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:46:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	72	21,776
BOGW - Part A-2 based on SSI recipient status	197	44,977
BOGW - Part A-3 based on general assistance recipient status	24	5,991
BOGW - Part B based on income standards	2,936	961,386
BOGW - Part C based on financial need	1,855	742,833

Total Amount = $ 1,776,963

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Los Medanos College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:46:26

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	114	35,576
BOGW - Part A-2 based on SSI recipient status	82	19,243
BOGW - Part A-3 based on general assistance recipient status	10	2,457
BOGW - Part B based on income standards	2,101	631,902
BOGW - Part C based on financial need	825	311,941

Total Amount = $ 1,001,119

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Contra Costa Community College District CC07030

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Contra Costa Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC07030

(02) Claimant Name: Contra Costa Community College District

County of Location: Contra Costa

Street Address or P.O. Box: 500 Court Street

City: Martinez | State: CA | Zip Code: 94553

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [x]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 1,348,700	(13) $ 1,226,106
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,226,106
Due from State	(08) $ 1,348,700	(17) $ 1,226,106
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,743
(23) EFCW-1, (04)(A)(1)(b)(f)	1,074
(24) EFCW-1, (04)(A)(2)(a)(f)	838,077
(25) EFCW-1, (04)(B)(1)(a)(f)	1,550
(26) EFCW-1, (04)(B)(1)(b)(f)	2,435
(27) EFCW-1, (04)(B)(2)(a)(f)	8,192
(28) EFCW-1, (04)(B)(2)(b)(f)	276,748
(29) EFCW-1, (04)(B)(2)(c)(f)	2,460
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	370,465
(32) EFCW-1, (09)	48,713
(33) EFCW-1, (10)	228,926
(34)	
(35)	
(36)	

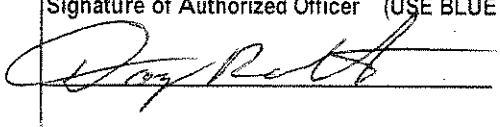
(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)



Date 6-30-06

Doug Roberts
Type or Print Name

V.C., Finance and Administration
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Contra Costa Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,743.01	$ -	$ -	$ -	$ -	$ 2,743.01
b. Staff training (One time per employee)	$ 1,073.73	$ -	$ -	$ -	$ -	$ 1,073.73
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 838,077.19	$ -	$ -	$ -	$ -	$ 838,077.19
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 1,549.79	$ -	$ -	$ -	$ -	$ 1,549.79
b. Staff training (One time per employee)	$ 2,435.32	$ -	$ -	$ -	$ -	$ 2,435.32
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 4,378.10	$ 3,814.00	$ -	$ -	$ -	$ 8,192.10
b. Waiving student fees	$ 276,748.43	$ -	$ -	$ -	$ -	$ 276,748.43
c. Reporting BOG fee waiver data to CCC	$ 2,460.18	$ -	$ -	$ -	$ -	$ 2,460.18
(05) Total Direct Costs	$ 1,129,465.75	$ 3,814.00	$ -	$ -	$ -	$ 1,133,279.75

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 370,464.77
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,503,744.52
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 48,713.00
(10) Less: Enrollment Fee Waiver offsets		$ 228,926.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,226,105.52

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant: a Costa Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Hernandez, Frank	Dean of Student Services	$73.75	35.0	$ 2,581.25				
Hernandez, Tania	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$29.57	1.0	$ 29.57				
Rosas, Carla	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,743.01	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Hernandez, Frank	Dean of Student Services	$73.75	10.0	$ 737.50				
Hernandez, Tania	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$29.57	2.0	$ 59.14				
Rosas, Carla	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Salmeron, Marian	Student Worker	$12.71	1.0	$ 12.71				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,073.73	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Co[illegible]osta Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Admissions & Records Staff Collecting Fees	$27.33	9,309.9	$ 254,439.57				
Calculating total enrollment fee to be collected Various Admissions & Records Staff Collecting Fees	$27.33	7,736.5	$ 211,438.55				
Answering student's questions regarding enrollment fee collection Various Admissions & Records Staff Collecting Fees	$27.33	6,469.6	$ 176,814.17				
Updating written and computer records for enrollment fee information Various Admissions & Records Staff Collecting Fees	$27.33	6,786.4	$ 185,472.31				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Admissions & Records Staff Collecting Fees	$27.33	215.8	$ 5,897.81				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Admissions & Records Staff Collecting Fees	$27.33	146.9	$ 4,014.78				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 838,077.19	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Hernandez, Frank	Dean of Student Services	$73.75	18.0	$ 1,327.50				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	1.0	$ 60.53				
Hernandez, Tania	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$29.57	1.0	$ 29.57				
Rosas, Carla	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,549.79	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Hernandez, Frank	Dean of Student Services	$73.75	26.0	$ 1,917.50				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	3.0	$ 181.59				
Hernandez, Tania	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Mc Clung, Catherine	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$29.57	2.0	$ 59.14				
Rosas, Carla	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Salmeron, Marian	Student Worker	$12.71	1.0	$ 12.71				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,435.32	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Contra Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Hernandez, Frank	Dean of Student Services	$73.75	40.0	$ 2,950.00				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	2.0	$ 121.06				
Giovanni, Marcia	Financial Aid Specialist	$29.57	24.0	$ 709.68				
Rosas, Carla	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Data Tel	AR Support Services	$1.00	3,814.0		$ 3,814.00			
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,378.10	$ 3,814.00	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Contra Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	1,432.2	$ 39,829.48				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	1,284.1	$ 35,710.82				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,074.2	$ 57,683.50				
Notifying students of additional documentation requirements and how to obtain information							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,494.0	$ 69,358.14				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	2,383.2	$ 66,276.79				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staf Waiving Enrollment Fees	$27.81	283.7	$ 7,889.70				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 276,748.43	$ -	$ -	$ -	$ -

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
a Costa Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Hernandez, Frank	Dean of Student Services	$73.75	3.0	$ 221.25				
Torres Jr., Felipe	Director Special Programs & Services	$60.53	1.0	$ 60.53				
Giovanni, Marcia	Financial Aid Specialist	$29.57	40.0	$ 1,182.80				
Rosas, Carla	Financial Aid Assistant I	$24.89	40.0	$ 995.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,460.18	$ -	$ -	$ -	$ -

Contra Costa Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3,814.00	Data Tel	AR Support Services	$1.00	$3,814.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3,814.00	**Data Tel Total**			$3,814.00		
04-05	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Franco, Dennis Total**			$164.82		
04-05	1.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$29.57	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$29.57	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$59.14	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$59.14	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	24.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$709.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Giovanni, Marcia	Financial Aid Specialist	$29.57	$1,182.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Giovanni, Marcia Total**			$2,069.90		
04-05	35.00	Hernandez, Frank	Dean of Student Services	$73.75	$2,581.25	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	18.00	Hernandez, Frank	Dean of Student Services	$73.75	$1,327.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	10.00	Hernandez, Frank	Dean of Student Services	$73.75	$737.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	26.00	Hernandez, Frank	Dean of Student Services	$73.75	$1,917.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	40.00	Hernandez, Frank	Dean of Student Services	$73.75	$2,950.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	3.00	Hernandez, Frank	Dean of Student Services	$73.75	$221.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	132.00	**Hernandez, Frank Total**			$9,735.00		
04-05	1.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Hernandez, Tania	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Hernandez, Tania Total**			$149.34		
04-05	1.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Mc Clung, Catherine	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Mc Clung, Catherine Total**			$164.82		
04-05	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Rodriguez, Faidra Total**			$164.82		
04-05	1.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	24.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Rosas, Carla	Financial Aid Assistant I	$24.89	$995.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Rosas, Carla Total**			$1,742.30		
04-05	1.00	Salmeron, Marian	Student Worker	$12.71	$12.71	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	1.00	Salmeron, Marian	Student Worker	$12.71	$12.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Salmeron, Marian Total**			$25.42		
04-05	1.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$60.53	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$181.59	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	2.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$121.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	1.00	Torres Jr., Felipe	Director Special Programs & Services	$60.53	$60.53	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC

Contra Costa Community College District
308/95 ENROLLMENT F[illegible]LLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	7.00	**Torres Jr., Felipe Total**			$423.71		
04-05	9,309.90	Various Admissions & Records Staff	Collecting Fees	$27.33	$254,439.57	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	7,736.50	Various Admissions & Records Staff	Collecting Fees	$27.33	$211,438.55	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	6,469.60	Various Admissions & Records Staff	Collecting Fees	$27.33	$176,814.17	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	6,786.40	Various Admissions & Records Staff	Collecting Fees	$27.33	$185,472.31	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	215.80	Various Admissions & Records Staff	Collecting Fees	$27.33	$5,897.81	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	146.90	Various Admissions & Records Staff	Collecting Fees	$27.33	$4,014.78	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	30,665.10	**Various Admissions & Records Staff Total**			$838,077.19		
04-05	1,432.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$39,829.48	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	1,284.10	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$35,710.82	Receiving waiver applications	Waiving student fees
04-05	2,074.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$57,683.50	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	2,494.00	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$69,358.14	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	2,383.20	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$66,276.79	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	283.70	Various Financial Office Staff	Waiving Enrollment Fees	$27.81	$7,889.70	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	9,951.40	**Various Financial Office Staff Total**			$276,748.43		
	44,735.50	**Grand Total**			$1,133,279.75		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: January 8, 2004

STITUTION:
Contra Costa Community College District
500 Court Street

FILING REF.: The preceding Agreement was dated February 21, 2002

Martinez CA 94553

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/06	32.8	On-Campus	All Programs
PROV.	07/01/06	06/30/07	32.8	On-Campus	All Programs

*BASE:
Direct salaries and wages including all fringe benefits.

U70191

Schedule 1A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	94,677
Avg. time p/account	5.9
Total Time (in minutes)	558594
Per Hour	60
Hours Worked (** **Activity 11**)	**9,309.9**
***EFC 2**	81,437
Avg. time p/student	5.7
Total Time (in minutes)	464191
Per Hour	60
Hours Worked (** **Activity 12**)	**7,736.5**
***EFC 1**	94,677
Avg. time p/question	4.1
Total Time (in minutes)	388176
Per Hour	60
Hours Worked (** **Activity 13**)	**6,469.6**
***EFC 2**	81,437
Avg. time p/file	5.0
Total Time (in minutes)	407185
Per Hour	60
Hours Worked (** **Activity 14**)	**6,786.4**
***EFC 4**	1,349
Avg. time p/account	9.6
Total Time (in minutes)	12950
Per Hour	60
Hours Worked (** **Activity 15**)	**215.8**
***EFC 5**	1,175
Avg. time p/student	7.5
Total Time (in minutes)	8813
Per Hour	60
Hours Worked (** **Activity 16**)	**146.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student accountor record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	14,816
Avg. time p/question	5.8
Total Time (in minutes)	85933
Per Hour	60
Hours Worked (** **Activity 21)**	**1,432.2**
***EFW 6**	14,816
Avg. time p/application	5.2
Total Time (in minutes)	77043
Per Hour	60
Hours Worked (** **Activity 22)**	**1,284.1**
***EFW 6**	14,816
Avg. time p/evaluation	8.4
Total Time (in minutes)	124454
Per Hour	60
Hours Worked (** **Activity 23)**	**2,074.2**
***EFW 6**	14,816
Avg. time p/application	10.1
Total Time (in minutes)	149642
Per Hour	60
Hours Worked (** **Activity 24)**	**2,494.0**
***EFW 7**	13,240
Avg. time p/application	10.8
Total Time (in minutes)	142992
Per Hour	60
Hours Worked (** **Activity 25)**	**2,383.2**
***EFW 8**	1,576
Avg. time p/application	10.8
Total Time (in minutes)	17021
Per Hour	60
Hours Worked (** **Activity 26)**	**283.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Alvarado, B	Admissions & Records Assistant II	4	3	3	4		5
Alves, Stephanie	Lead A&R Assistant	4	3	5	3	10	5
Armendaz, Kay	Senior Admissions and Records Assistant	4	9	12	3	15	4
Betsekas, Julie	Senior Account Clerk	9	7	6	4	15	10
Burkholder, Deborah	Admissions & Records Assistant I	2	3	5	5	4	
Cardenas, Alma	Senior Account Clerk	5	3	3		11	6
Coleman, Farrah	Admissions & Records Assistant II	3	1	3	2		5
Conley, Jim	Cashier Office Supervisor	9	7	6	4	15	10
Do, Binh	Admissions & Records Assistant II	4	5	3	4	2	5
Do-Florendo, Mai	Senior Account Clerk	9	7	6	4	15	10
French, Carole	Senior Admissions and Records Assistant	6	5	4	5	6	5
Gursky, Mary	Senior Account Clerk	2	2	1.5		5	3
Hamilton, Denise	Admissions and Records II	4	3	3	4		5
Herrera, Lorma	Senior Admissions and Records Assistant	20	18	4	22	18	30
Herstein, Margaret	Senior Admissions and Records Assistant	8	8	5	4	4	5
Hughes, Kimberly	Interim Lead Admissions	5	5	3	3		10
Ledesma, Trinidad	Senior Admissions and Records Assistant	5	10	1	5		5
Martinez, Marianne	Senior Admissions and Records Assistant	5	5	5	5		
McEwen, Linda	Lead A&R Assistant	5	5	8	8		10
Nelson-Jones, Eugenia	Admissions and Records II			3			
Nilsen, Sonja	Senior Admissions and Records Assistant	7	3	3	2		5
Paniagua-Budd, Dana	Lead A&R Assistant	1	2	1	1		
Purdy, Susie	Senior Admissions and Records Assistant	9	6	4	5	5	3
Robertson, L.	Senior Account Clerk	9	7	6	4	15	10
Shelton, Jeanette	Senior Account Clerk	9	7	6	4	15	10
Simmons, Monica	Senior Admissions and Records Assistant	5	10	1	5		15
Starkie, Ann	Lead Account Clerk	1.5	2	1.5		6	2
West, Shondra	Senior Admissions and Records Assistant	9	13	5	10	8	
Zerck, Kay	Lead Account Clerk	1.5	1.5	1		4	2.5
Average		**5.9**	**5.7**	**4.1**	**5.0**	**9.6**	**7.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided (Default used for Code 11-14))**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05
Alvarado, B	Admissions & Records Assistant II	$24.89
Alves, Stephanie	Lead A&R Assistant	$31.07
Armendaz, Kay	Senior Admissions and Records Assistant	$27.47
Betsekas, Julie	Senior Account Clerk	$27.47
Burkholder, Deborah	Admissions & Records Assistant I	$22.55
Cardenas, Alma	Senior Account Clerk	$27.47
Coleman, Farrah	Admissions & Records Assistant II	$24.89
Conley, Jim	Cashier Office Supervisor	$31.85
Do, Binh	Admissions & Records Assistant II	$24.89
Do-Florendo, Mai	Senior Account Clerk	$27.47
French, Carole	Senior Admissions and Records Assistant	$27.47
Gursky, Mary	Senior Account Clerk	$27.47
Hamilton, Denise	Admissions and Records II	$24.89
Herrera, Lorrna	Senior Admissions and Records Assistant	$27.47
Herstein, Margaret	Senior Admissions and Records Assistant	$27.47
Hughes, Kimberly	Interim Lead Admissions	$31.07
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47
McEwen, Linda	Lead A&R Assistant	$31.07
Nelson-Jones, Eugenia	Admissions and Records II	$24.89
Nilsen., Sonja	Senior Admissions and Records Assistant	$27.47
Paniagua-Budd, Dana	Lead A&R Assistant	$31.07
Purdy, Susie	Senior Admissions and Records Assistant	$27.47
Robertson, L.	Senior Account Clerk	$24.89
Shelton, Jeanette	Senior Account Clerk	$24.89
Simmons, Monica	Senior Admissions and Records Assistant	$27.47
Starkie, Ann	Lead Account Clerk	$30.31
West, Shondra	Senior Admissions and Records Assistant	$27.47
Zerck, Kay	Lead Account Clerk	$24.89
AVERAGE		$27.33

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6				7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Alvarado, B	Admissions and Records II	3					
Coleman, Farrah	Admissions and Records II	1					
Connell, Carmen	Finacial Aid Assistant II	5	5	7	10	10	10
Do, Binh	Admissions and Records II	4					
Giovanni, Marcia	Fianacial Aid Specialist	4	1	2	5	5	5
Hamilton, Denise	Admissions and Records II	3					
Hernandez-Cruz, Tania	Financial Aid Assistant I	4	2	2	5	5	5
Hughes, Kimberly	Interim Lead Admissions	5	2				
LaMothe, Vivian	Student Service & Instructional Coordinator	20	15	25	20	30	35
Ledesma, Trinidad	Senior Admissions and Records Assistant	2	1	10			
Lucero, Pablo	Technical Expert	9	10	10	5	20	15
Martinez, Marianne	Senior Admissions and Records Assistant	5					
McClung, Catherine	Financial Aid Assistant II	3	0.5	1	3	5	3
McEwen, Linda	Lead A&R Assistant	4					
Monteverde, Eva	Finacial Aid Specialist	3	1	7	5	3	7
Nelson-Jones, Eugenia	Admissions and Records II	12					
Nguyen, Anh	Financial Aid Assistant I	20	15	10	30	10	20
Nilsen, Sonja	Senior Admissions and Records Assistant	5					2
Rance, Barbara	Finacial Aid Assistant	11	15	30	25	35	32
Rodriguez, Faidra	Financial Aid Assistant II	3	1	1	3	4	3
Rosas, Carla	Financial Aid Assistant I	4	1	3	4	2	3
Salmeron, Marian	Student Worker	5	6	6	6	6	6
Simmons, Monica	Senior Admissions and Records Assistant	1					
Torres Jr. , Felipe	Director, Special Programs & Services	4	3	4	10	5	5
Average		**5.8**	**5.2**	**8.4**	**10.1**	**10.8**	**10.8**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05
Alvarado, B	Admissions and Records II	$24.89
Coleman, Farrah	Admissions and Records II	$24.89
Connell, Carmen	Finacial Aid Assistant II	$27.47
Do, Binh	Admissions and Records II	$24.89
Giovanni, Marica	Fianacial Aid Specialist	$27.47
Hamilton, Denise	Admissions and Records II	$24.89
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.89
Hughes, Kimberly	Interim Lead Admissions	$31.07
LaMothe, Vivian	Student Service & Instructional Coordinator	$34.30
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47
Lucero, Pablo	Technical Expert	$21.77
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47
McClung, Catherine	Financial Aid Assistant II	$27.47
McEwen, Linda	Lead A&R Assistant	$31.07
Monteverde, Eva	Finacial Aid Specialist	$29.57
Nelson-Jones, Eugenia	Admissions and Records II	$24.89
Nguyen, Anh	Financial Aid Assistant I	$24.89
Nilsen, Sonja	Senior Admissions and Records Assistant	$27.47
Rance, Barbara	Finacial Aid Assistant	$27.47
Rodriguez, Faidra	Financial Aid Assistant II	$27.47
Rosas, Carla	Financial Aid Assistant I	$24.89
Salmeron, Marian	Student Worker	$12.71
Simmons, Monica	Senior Admissions and Records Assistant	$27.47
Torres Jr. , Felipe	Director, Special Programs & Services	$60.53
Average PHR		**$27.81**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	100,433	96,437	99,189	106,636	109,761	97,853	94,677
EFC 2	1.8-1	2.	Paid Enrollment fees	92,352	89,202	91,916	98,593	100,475	86,363	81,437
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	8,081	7,235	7,273	8,043	9,286	11,490	13,240
EFC 4	1.8-2	1.	Delinquencies collections					770	838	1,349
EFC 5	1.8-2	2.	Refunds							1,175
EFW 6	1.8-3	1.	Waivers Requested*	X	7,413	7,480	8,271	9,891	12,457	14,816
			*(Waivers Approved used where Waivers Requested not supplied)							
EFW 7	1.8-3	2.	Waivers Approved	X	7,235	7,273	8,043	9,286	11,490	13,240
EFW 8	1.8-3 (1-2)		Waivers Denied	X	178	207	228	605	967	1,576

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Contra Costa For 2004-2005

Data Current As Of May 15, 2012 11:40:10

Download The Result In Comma Delimited Format

Headcount
12,577

Back to Top of Page

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Diablo Valley For 2004-2005

Data Current As Of May 15, 2012 11:44:54

Download The Result In Comma Delimited Format

Headcount
32,784

Back to Top of Page

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California Home Tuesday, May 15, 2012

Student Demographics By Academic Year

Student Headcount
For Los Medanos For 2004-2005
Data Current As Of May 15, 2012 11:45:24

Download The Result In Comma Delimited Format

Headcount
13,861

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Dennis Franco — Employee Name

Financial Aid Asst II. — Exact Position Title

Diablo Valley College — College/Department/Location

925-685-1230 x2224 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	___	1	1	1	1
B. Enrollment Waiver Process:	___	___	___	___	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	___	2	2	2	2
B. Enrollment Waiver Process:	___	___	___	___	2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	6	___	___	___
TOTALS:	___	___	___	___	6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco Date 4/26/06

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: CCCCD

Marcia Giovanni — Financial Aid Specialist
Employee Name — Exact Position Title

Diablo Valley College / FAO — (925) 685-1230 x 20655 — (12mo)/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					24	24	24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					40	40	40	40
TOTALS:					70	70	70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 4/26/06

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Frank Hernandez — Employee Name

Senior Student Services — Exact Position Title

Contra Costa Extension Svc 235-7800 x4438 — College/Department/Location / Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	50	45	40	35	25
B. Enrollment Waiver Process:	50	45	40	40	33	28	18	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	40	30	20	10	5
B. Enrollment Waiver Process:	70	60	50	47	42	33	26	21
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	80	75	65	56	48	44	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	15	10	6	5	3	2
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Tania M Hernandez-Cruz (925) — Financial Aid Assistant I
Employee Name — Exact Position Title

Diablo Valley College Financial Aid office — 1085-030 x2100 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz — Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Catherine McClung — Financial Aid Asst. II
Employee Name — Exact Position Title

Diablo Valley College/Financial Aid (925)685-1230 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 4-26-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Faidra Rodriguez — Employee Name

Financial Aid Asst. II — Exact Position Title

Diablo Valley Coll. Financial Aid 925-685-1230 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	___	1	1	1	1
B. Enrollment Waiver Process:	___	___	___	___	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	___	___	2	2	2	2
B. Enrollment Waiver Process:	___	___	___	___	2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

CARLA ROSAS — Employee Name

FA ASST I — Exact Position Title

DVC / FAO — College/Department/Location

925 685-1230 x2049 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							2	2
B. Enrollment Waiver Process:							2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							40	40
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas — Date 4-26-06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Marian Salmeron — Employee Name

Student worker — Exact Position Title

Diablo Valley College/Financial Aid Office — College/Department/Location

(925) 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							2	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Salmeron Date 4-26-06

If you have any questions, please contact _____, at _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

L-Felipe Torres, Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

Los Medanos Colg/FAO — College/Department/Location

(925) 439-2181 x3290 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	20	15	10	5	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	25	15	8	6	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	20	15	10	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	5	1	1	1	1	1
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A/R - DUC
Department/Location

B. ALVARADO
Employee Name

A/R II
Exact Position Title

686-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/2006

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm.
District

A+R / LMC
Department/Location

Stephanie Alves
725 Employee Name

Lead A+R Asst
Exact Position Title

4392181 x325 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie Alves Date 3/27/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Co College
District

Admissions + Records
Department/Location

Kay Clemendor
Employee Name

Senior Admissions + Records
Exact Position Title

4501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Clemendor Date 3-28-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JULIE BETSERAS
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Beteras Date 3-29

If you have any questions, please contact J. Beteras, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm College
District

Admissions & Records / Link
Department/Location

Deborah Burkholder
Employee Name

A & R Asst I
Exact Position Title

439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Deborah Burkholder Date 3/29/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College District
District

Cashier's Office - CCC
Department/Location

Alma A. Cardenas
Employee Name

Sr. Account Clerk
Exact Position Title

510-235-7800 X424
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	11				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/17/06

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

A&R / DVC
Department/Location

Farrah Coleman
Employee Name

A&R II
Exact Position Title

x2635
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) N/A					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A 5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/28/06

ou have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JOHN CONLEY
Employee Name

~~Senior Clerk~~ Cashier Office Supervisor
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 Min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 Min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-29

If you have any questions, please contact J. Conley, at [redacted] 2270

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Binh Do
Employee Name

Admission and Records Assistance II
Exact Position Title

(925) 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

u have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

MAI DO / FLORENDO
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mai Do Date 3-29

If you have any questions, please contact Mai Do, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions and Records/Time
Department/Location

Carole French
Employee Name

Sr. Admissions and Records Asst.
Exact Position Title

432-2181-7506
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carole French Date

ou have any questions, please contact , at

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Mary Gursky
Employee Name

Senior Account Clerk
Exact Position Title

925 439-2181 X 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cook, at 439-2181 x 3328

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

rccd — District

DVC Admissions & Records — Department/Location

Denise Hamilton — Employee Name

Admissions Records II Assistant — Exact Position Title

925 685-1310 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

Admissions / CCC
Department/Location

Lorena Herrera
Employee Name

Sr. Admissions / Records
Exact Position Title

235.7800 4694
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	18	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	04	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	02	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	30					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lorena Herrera Date 3.16.06

If you have any questions, please contact FRANK HERNANDEZ, at X-4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Admissions / LMC
Department/Location

Margaret Hertstein
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

(925) 439-2181 x3129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Hertstein Date 3-29-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admission & Records
Department/Location

Kimberly Hughes
Employee Name

Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A-0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Kimberly A Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

A&R / DVC
Department/Location

TRINIDAD CEDESMA
Employee Name

Senior Assistant
Exact Position Title

925 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work year length~~(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A&R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions & Records Assistant
Exact Position Title

(925)685-1230, x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone # 2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eugenia nelsonjones
Employee Name

Admissions Records II - substitute
Exact Position Title

(925) 685 1230
Telephone #
X2637

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	n/a	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	n/a	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/a	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature eugenia nelsonjones Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist.
District

DVC
Department/Location

Sonja Nilson
Employee Name

Senior A+R Asst.
Exact Position Title

925-685-1310
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature Sonja Nilson — PLEASE USE BLUE INK

Date 3/28/16

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A+R / DVC
Department/Location

Dana Paniagua-Budd
Employee Name

Lead A+R Assistant
Exact Position Title

685-1230 x2328
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dana Paniagua-Budd Date 3/28/06

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. — District

Admissions / LMC — Department/Location

Susie Purdy — Employee Name

Senior Admissions & Records Assist. — Exact Position Title

439-2181 x3119 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Purdy — Date 3/29/06

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

DVC
Department/Location

L. Robertson
Employee Name

Sr Acct Clerk
Exact Position Title

685-1230
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Robertson Date 3-29

If you have any questions, please contact J. Colley, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JEANETTE SHELTON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Shelton Date 3-29

If you have any questions, please contact J. Cathey, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Monica Simmons
Employee Name

Sr. A&R Assistant
Exact Position Title

X 2632
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and vaiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MSimmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Ann Starkie
Employee Name

Lead Account Clerk
Exact Position Title

925 439 -2181 X 3207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Starkie Date 3/27/06

If you have any questions, please contact Bruce Cole, at 439 2181 x 3206

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions/Records - CCC
Department/Location

Shondra West
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

X4500
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shondra West Date 9/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
Cashier/Los Medanos College — Department/Location
Kay Zerck — Employee Name
Lead Account Clerk — Exact Position Title
925-439-2181 X 3207 — Telephone #
12mo/11mo/10mo/hrly Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cole, at 439-2181 ext 3222

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCC
District

A/R
Department/Location

B. Alvarado
Employee Name

A/R II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

AER / DVC
Department/Location

Farrah Coleman
Employee Name

AER II
Exact Position Title

X2635
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	0-1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A		✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A		✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A		✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A			✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A				✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/20/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID-LMC
Department/Location

CARMEN CONNELL
Employee Name

FINANCIAL AID ASST II
Exact Position Title

925-439-2181 x 3291
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carmen Connell Date 3/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Bill Do
Employee Name

Admission and Records Assistant II
Exact Position Title

(925) 685-1230
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid - DVC
Department/Location

Marcia Giovanni
Employee Name

Financial Aid Specialist
Exact Position Title

x 2655
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

(925) 685-1230

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3-5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1-2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 3/27/06.

If you have any questions, please contact Marcia Giovanni, at 2655

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD — District
DVC Admissions & Records — Department/Location
Denise Hamilton — Employee Name
Admissions & Records II Assistant — Exact Position Title
925-685-1310 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College
District

Financial Aid Office / DVC
Department/Location

Tania Hernandez-Cruz
Employee Name

Financial Aid Assistant I
Exact Position Title

(925)685-1230 X2100
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez Cruz Date 03/28/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admissions & Records
Department/Location

Kimberly Hughes
Employee Name

Sr Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A-0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A-0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A-0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A-0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCS — District

Financial Aid — Department/Location

[illegible] J — Employee Name

Financial Aid Services & Instructional Support Coor — Exact Position Title

x4293 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College — District

A&R / DVC — Department/Location

TRINIDAD LEDESMA — Employee Name

Senior Assistant — Exact Position Title

925-685-1230 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — Financial Aid
District — Department/Location

Pablo Lucero — Technical Expert
Employee Name — Exact Position Title

(50) — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	9	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03-20-06

If you have any questions, please contact (510) 236-7800, at x4374

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A & R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions / Records Asst.
Exact Position Title

(925)685-1230 x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. College
District

Financial Aid / DVC
Department/Location

Catherine McClung
Employee Name

Financial Aid Asst. II
Exact Position Title

925 685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	30 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min.	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min.			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone #2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community District
District

FAO / Los Medanos College
Department/Location

Eva Monteverde
Employee Name

Financial Aid Specialist
Exact Position Title

(925) 439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva Monteverde Date Mar. 24, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____: TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eupnia nelson
Employee Name

Admissions Records II-substitute
Exact Position Title

925)685-1230 x2637
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	12	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. waivers	n/a	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eupnia nelson Date 3/18/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Financial Aid / CCC
Department/Location

Anh Nguyen
Employee Name

FA Asst 1
Exact Position Title

235-7800 x 4295
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			X	

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Employee Signature _____ Date 3/21/06

If you have any questions, please contact 235-7800 x 4295, at 4295

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist. (District) | DVC (Department/Location)

Sonja Nilsen (Employee Name) | Senior A+R Asst. (Exact Position Title)

(Telephone #) | 12mo/11mo/10mo/hrly (Work year length(circle)) | Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date _____

you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Barbara Rance
Employee Name

Financial Aid Assy.
Exact Position Title

510-235-7800 ext 4425
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	11	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	35		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	32			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Rance Date 3-20-06

you have any questions, please contact Barbara RANCE, at X 4425

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

FAO / Diablo Valley College
Department/Location

Faidra Rodriguez
Employee Name

Financial Aid Asst. II
Exact Position Title

925-686-1230
X2399
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	50 seconds	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 3-24-06

If you have any questions, please contact 925-685-1230, at 2399

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA CCD
District

DVC FINANCIAL AID
Department/Location

CARLA ROSAS
Employee Name

FINANCIAL AID ASST I
Exact Position Title

925 685-1230 x 2049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa.
District

Financial Aid office Diablo Valley College
Department/Location

Marian Solmeron
Employee Name

Student worker
Exact Position Title

2290
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Solmeron Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions/DVC
Department/Location

Monica Simmons
Employee Name

Sr. Aer Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

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Employee Signature Monica Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District

FAO/Los Medanos College — Department/Location

L. Felipe Torres Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

(925) 439-2181 x 3280 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

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Employee Signature _____ Date 3/29/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	19,896	20,384	20,119	22,205	25,222	19,110	19,304	19,064
Fall	39,549	38,224	38,521	40,475	43,801	39,324	38,059	36,580
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	40,988	37,829	40,549	43,956	40,738	39,419	37,314	—
Total	100,433	96,437	99,189	106,636	109,761	97,853	94,677	55,644
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	92,352	89,202	91,916	98,593	100,475	86,363	81,437	40,533
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Craig Date 3/30/06

CRAIG A. LEE — Director of IT

Employee Name: (print) — Position or Title

If you have any questions, please contact _____, at _____.

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UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	CCC	DVC	LMC	Total	
SU98	3,956	11,468	4,472	19,896	
FA98	8,521	22,094	8,934	39,549	100,433
SPR99	8,625	22,569	9,794	40,988	
SU99	3,440	11,857	5,087	20,384	
FA99	7,798	21,694	8,732	38,224	96,437
SP00	7,871	20,593	9,365	37,829	
SU00	3,773	11,945	4,401	20,119	
FA00	7,921	21,365	9,235	38,521	99,189
SP01	8,787	21,689	10,073	40,549	
SU01	4,238	12,873	5,094	22,205	
FA01	8,449	21,737	10,289	40,475	106,636
SP02	9,755	23,510	10,691	43,956	
SU02	4,913	13,882	6,427	25,222	
FA02	10,117	23,260	10,424	43,801	109,761
SP03	8,797	22,910	9,031	40,738	
SU03	3,490	12,470	3,150	19,110	
FA03	8,210	22,137	8,977	39,324	97,853
SP04	8,557	21,847	9,015	39,419	
SU04	3,818	11,465	4,021	19,304	
FA04	8,048	21,112	8,899	38,059	94,677
SP05	8,099	20,779	8,436	37,314	
SU[illegible]	4,088	11,386	3,590	19,064	
FA	7,380	20,704	8,496	36,580	55,644

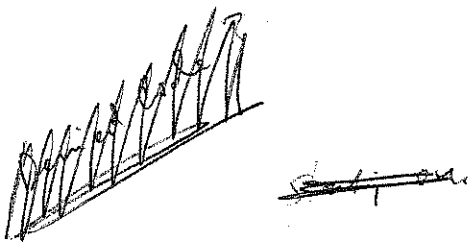
Contra 8197
LCS main 8524
DIABLO 20230

Backup for EFCW 1.8-1 #1

FINANCIAL AID FEE WAIVERS BY FISCAL YEAR
UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06 *
CCC:	2,886	2,500	2,281	2,588	2,891	3,551	3,434	
DVC:	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
LMC:	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
Total:	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

* query done by Derek Smith, IT



BACKUP for EFCW 1.8-1 #3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

EFCW 1.8-2

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer					135	118	139	781
Fall					322	448	608	1628
Winter/Intersession N/A								
Spring					292	272	602	2826
Total					770	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
~~Summer~~ LMC							650	600
~~Fall~~ DVC								2,404
~~Winter/Intersession~~ CCC							525	600
~~Spring~~								
Total							1,175	3604

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

u have any questions, please contact Krista Ducharme, at (925)229-1000 x1229

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College: CCC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer					21	26	41	338
Fall					64	127	232	490
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					78	61	197	840
Total	0	0	0	0	163	214	470	1668
Number of enrollment fee funds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: All 1.6-2 #1

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer	0	0	0	0	156	118	139	781
Fall	0	0	0	0	322	448	608	1628
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring	0	0	0	0	292	272	602	2826
Total	0	0	0	0	770	838	1349	5235
Number of enrollment fee funds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

Contra Costa Community College District
Enrollment Fee Workload Statistics Report

College: DVC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer					135	90	96	388
Fall					192	273	307	815
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					161	195	343	1678
Total	0	0	0	0	488	558	746	2881
Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: LMC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Number of enrollment fee accounts receivable requiring collection								
Summer						2	2	55
Fall					66	48	69	323
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					53	16	62	308
Total	0	0	0	0	119	66	133	686
Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart; District colleague; FA office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
~~Summer~~ CCC		2500	2281	2588	2891	3551	3434	
~~Fall~~ DVC		2920	2873	3125	4,357	5,649	6,702	
~~Winter/Intersession~~ LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	
~~Spring~~								
Total		7413	7480	8271	989[illegible]	1245[illegible]	1481[illegible]	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
~~Summer~~ CCC	2,886	2,500	2,281	2,588	2,891	3,551	3,434	
~~Fall~~ DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
~~Winter/Intersession~~ LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
~~Spring~~								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 3/30/06

Employee Name: (print) CRAIG A. LEE Position or Title Director of IT

If you have any questions, please contact ______ , at ______.

PLEASE SUBMIT THIS INFORMATION BY ______

See CCC email attached to use estimate BOGGS denied = 30% Divide approved BOGGS by .70 to get total requested [illegible]

* Note - Highlighted Data = 's Approved Waivers used where Requested Waivers not supplied

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CADS - original directly below

EFCW 1.8-3

✓ 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: CCCCD (source Calif. State Chancellor's Office Data Mart; District colleague; FA Office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
~~Summer~~ CCC								
~~Fall~~ DVC					4,359	5,649	6,702	
Winter/~~Intersession~~ LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	
~~Spring~~								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
~~Summer~~ CCC	2,886	2,500	2,281	2,588	2,891	3,557	3,434	
~~Fall~~ DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	
Winter/~~Intersession~~ LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	
~~Spring~~								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge -- information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 3/30/06

CRAIG A LEE — Employee Name: (print)

Director of IT — Position or Title

If you have any questions, please contact ____________________, at __________

PLEASE SUBMIT THIS INFORMATION BY __________; TO ____________________

See CCC email attached to use estimate! BOGG denied = 30% Divide approved BOGG by .70 to get total requested [illegible] Kirsten [illegible]

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CCC

Lee, Craig

From: LaMothe, Viviane

Sent: Wednesday, March 29, 2006 12:00 PM

To: Lee, Craig

Cc: Hernandez, Frank; Chang, Sharon; Elejalde, Tatianna; Rance, Barbara; Nguyen, Anh; Lucero, Pablo

Subject: Reimbursement

Craig,

CCC has not tracked the number of BOGW applications requested or the number of applications denied. After speaking with the staff, discussing the issue and including all input, our educated guess is that 3 out of 10 applications are denied or approximately 30%.

For the coming academic year 06-07 we will be documenting that information on Datatel and retaining all applications that are denied.

Viviane

BACKUP for EFCW 1.8-3

Lee, Craig

(LMC)

From: Torres, Felipe
Sent: Thursday, March 30, 2006 11:49 AM
To: Lee, Craig
Cc: Smith, Derek; Ducharme, Krista
Subject: RE: Mandated Costs

Based on data below from academic years 2002-03 to 2004-05 the average rate of student BOGW applicants denied is 8.91304%. I used the aforementioned rate to determine the amount of denied BOGW applicants for academic years 1998-99 to 2001-02. Below is data as requested:

	Academic Year	Student BOGW Approved	Student BOGW Denied	Total Applications
1.	1998-1990	2171	212	2383
2.	1999-2000	1815	178	1993.
3.	2000-2001	2119	207	2326
4.	2001-2002	2330	228	2558
5.	2002-2003	2526	117	2643
6.	2003-2004	3007	250	3257
7.	2004-2005	4104	576	4680
8.	2005-2006	To Be Determined	737 (as of 3/29/2006)	To Be Determined

---

From: Smith, Derek
Sent: Wednesday, March 29, 2006 12:32 PM
To: Torres, Felipe
Subject: RE: Mandated Costs

Felipe,

Here are the numbers (not in Excel format, because I can't pull these as a single spreadsheet; each year is stored in a separate file):

1998-1999: No data
1999-2000: No data
2000-2001: No data
2001-2002: No data
2002-2003: 117
2003-2004: 250
2004-2005: 576
2005-2006: 737

--Derek

BACKUP RE EFCW 1.8-3

Ducharme, Krista

Fr Torres, Felipe
Sent: Tuesday, May 16, 2006 1:25 PM
To: Ducharme, Krista
Subject: RE: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim

or 2004-05 LMC process about 650 students for refund due to BOGG eligibility who had previously paid.

or 20054-06 LMC has processed to date about 600 students for refund due to BOGG eligibility who had previously paid.

---

rom: Ducharme, Krista
ent: Monday, May 15, 2006 5:21 PM
o: Alves, Stephanie; Fincher, Gary; Hernandez, Frank; Torres, Felipe; Jerez, Brenda; LaMothe, Viviane
ubject: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim
nportance: High

ell, this is the final week to get the claim submitted and I have one more request for you. Have any of your departments llected information regarding the number of student refunds to be processed due to the BOGG waivers? These are students no paid their tuition and subsequently received their waivers. I believe these are the students that A&R would have to run BILL get the students' accounts to reflect the credit. This is a required statistic for the claim and the information is not accessible on atatel. The information is needed back to 98-99; however, any available data would be tremendously helpful. If you have any ormation, I would be very grateful if you could submit it to me by Thursday, May 18. Thanks in advance for your cooperation.

ista Ducharme
scal rations Specialist
25) 2[illegible]-1000 x1229

Ducharme, Krista

Fro Giovanni, Marcia
Sent: Friday, May 19, 2006 3:39 PM
To: Ducharme, Krista
Cc: Jerez, Brenda
Subject: REBILL COUNT 05-06

Krista,

Here is the rebill count that I have. I began gathering the data 8/2005 and the numbers inlcude rebills for the 05-06 academic year to date.

2,404

Marcia

Ducharme, Krista

Fro LaMothe, Viviane
Sent: Friday, May 19, 2006 2:55 PM
To: Ducharme, Krista
Cc: Hernandez, Frank
Subject: BOGW REFUNDS

Ii Krista,

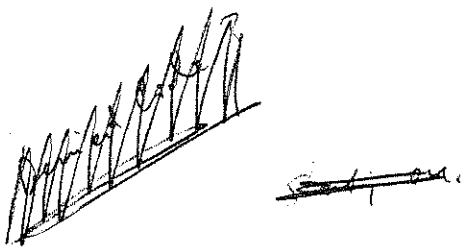
'o our best knowledge we believe we have processed the following refunds for the years noted. We have no ıformation for other years in question.

004-2005 525
005-2006 600

hanks, Viviane

FINANCIAL AID FEE WAIVERS BY FISCAL YEAR
UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
CCC:	2,886	2,500	2,281	2,588	2,891	3,551	3,434
DVC:	3,024	2,920	2,873	3,125	3,869	4,932	5,702
LMC:	2,171	1,815	2,119	2,330	2,526	3,007	4,104
Total:	8,081	7,235	7,273	8,043	9,286	11,490	13,240



BACKUP for EFCW 1.8-3 #2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.8-4

ENROLLMENT FEE REVENUES REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See Attached Spreadsheet

See Attached Spreadsheet - No term data available.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925) 229-1000 x 1229

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

Statistical Data

	FISCAL YEARS								
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1. Enrollment Fees Collected	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2. Enrollment Fees Refunded	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
3. Enrollment Fee Revenue (line 1 subtract line 2)	$ 6,926,710.57	$ 5,981,415.15	$ 6,360,339.77	$ 5,587,180.58	$ 7,048,008.28	$ 10,816,351.91	$ 15,544,427.18	$ 16,291,075.15
4A. Total enrollment Fees Waived (BOGG, etc)	$ 1,681,274.00	$ 1,357,125.00	$ 1,249,724.00	$ 1,413,400.00	$ 1,224,520.00	$ 1,488,235.00	$ 3,880,840.00	$ 4,000,307.05
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 33,625.48	$ 27,142.50	$ 24,994.48	$ 28,268.00	$ 24,490.40	$ 29,764.70	$ 77,616.80	$ 80,006.14
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	117,689.18	94,998.75		$ -	$ -	$ -	$ -	$ -
5. Total Number of credit units for which enrollment fees were waived (All Semesters) (Line 4a divided by $ per unit)			113,611.27	128,490.91	111,320.00	94,993.72	166,321.71	153,857.96
Total x .91 per credit			103,386.26	116,926.73	101,301.20	$ 86,444.29	151,352.76	140,010.75

Source: Line #3 from GL reports. Line #4A from state chancellors website DATA mart.

Fiscal Years 99 - 03 $ per Unit is $11
FY 04-05 $ per Unit is (18 + 26 + 26) / 3 = 23.34
FY 03-04 $ per Unit is (11 + 18 + 18) / 3 = 15.67
FY 05-06 $ per unit is $26

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFCW 1.7.2 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Leetha Robertson	Admissions & Records Assistant I	05/06	12 mo		-	1800	-
Deborah Burkholder	Admissions & Records Assistant I	00/01-05/06	Hrly	33,540.00	7,043.40	1800	22.55
Natalie Hotton	Customer Services Clerk	05/06	Hrly		-	1800	-
Ann Starkie	Lead Account Clerk	04/05	12 mo	37,020.00	7,774.20	1800	24.89
Kay Zerck	Lead Account Clerk	98/99-04/05	12 mo.	37,020.00	7,774.20	1800	24.89
Stephanie Alves	Lead Admissions & Records Assistant	98/99-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Ann Starkie	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Regina Garza	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Marlene Randle	Senior Account Clerk	05/06	12 mo	-	-	1800	-
Mary Gursky	Senior Account Clerk	98/99-04/05	12 mo	40,860.00	8,580.60	1800	27.47
Susie Purdy	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Herstein	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Carole French	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40,860.00	8,580.60	1800	27.47

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Mouang Saeyang	Admissions & Records Assistant I	05/06	12 mo	33540	7,043.40	1800	22.55
Joanne Solano	Admissions & Records Assistant II	99/00-05/06	12 mo	37020	7,774.20	1800	24.89
Alma Cardenas	Senior Account Clerk	00/01-05/06	12 mo	40860	8,580.60	1800	27.47

Lorena Herrera	Senior Admissions & Records Assistant	02/03-05/06	12 mo	40860	8,580.60	1800	27.47
Kay Armendaz	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Gwendolyn Moppin	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Shondra West	Senior Admissions & Records Assistant	99/00-05/06	12 mo	40860	8,580.60	1800	27.47

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Do Binh	Admissions & Records Assistant II	00/01-05/06	12 mo	37020	7,774.20	1800	24.89
Stephanie Morgado	Admissions & Records Assistant II	05/06	12 mo	37020	7,774.20	1800	24.89
Beatrice Alvarado	Admissions & Records Assistant II	00/01-05/06	12 mo	37020	7,774.20	1800	24.89
Farrah Coleman	Admissions & Records Assistant II	04/05-05/06	12 mo	37020	7,774.20	1800	24.89
Denise Hamilton	Admissions & Records Assistant II	98/99-05/06	12 mo	37020	7,774.20	1800	24.89
Euginia Nelson-Jones	Admissions & Records Assistant II-Substitute	98/99-05/06	Hrly	37020	7,774.20	1800	24.89
Dana Paniagua-Rudd	Lead Admissions & Records Assistant	98/99-05/06	12 mo	46224	9,707.04	1800	31.07
Linda McEwen	Lead Admissions & Records Assistant	99-00-05/06	12 mo	46224	9,707.04	1800	31.07
Trinidad Ledesma	Senior Admissions & Records Assistant	03/04-05/06	12 mo	40860	8,580.60	1800	27.47
Monica Simmons	Senior Admissions & Records Assistant	04/05-05/06	12 mo	0	-	1800	-
Marianne Martinez	Senior Admissions & Records Assistant	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Sonja Nilsen	Senior Admissions & Records Assistant	99-00-05/06	12 mo	40860	8,580.60	1800	27.47
Kimberly Hughes	Sr. Interim Lead Admissions	01/02-05/06	12 mo	46224	9,707.04	1800	31.07
Julie Betsekas	Senior Account Clerk	98/99-05/06	12mo	40860	8,580.60	1800	27.47
Jim Conley	Cashier Office Supervisor	00/01-05/06	12 mo	47376	9,948.96	1800	31.85
Mai Do	Senior Account Clerk	98/99-05/06	12 mo	40860	8,580.60	1800	27.47
Jeanette Shelton	Account Clerk	02/03-05/06	12 mo	37020	7,774.20	1800	24.89
Leetha Robertson	Account Clerk	03/04-05/60	12 mo	37020	7,774.20	1800	24.89

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFCW 1.7.3 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Eva Monteverde	Financial Aid Specialist	99/00-05/06	12 mo	43,992.00	9,238.32	1800	29.57
Carmen Connell	Financial Aid Assistant II	99/00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Chunni Leung	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Dennis Mallillin	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Luis Felipe Torres	Director Special Programs & Services	99/00-05/06	12 mo	90,048.00	18,910.08	1800	60.53

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Pablo Lucero	Technical Expert	04/05-05/06	Hrly	32,382.00	6,800.22	1800	21.77
Hsui-Chi Chang	Financial Aid Assistant I	05/06	12mo	-	-	1800	-
Tatianna Elejalde	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Barbara Rance	Financial Aid Assistant II	01/02-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Viviane LaMothe	Student Services & Instructional Coordinator	99/00-05/06	12 mo	51,024.00	10,715.04	1800	34.30
Anh Nguyen	Financial Aid Assistant I	03/04-05/06	Hrly	37,020.00	7,774.20	1800	24.89

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Do Binh	Admissions & Records Assistant II	00/01-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Stephanie Morgado	Admissions & Records Assistant II	05/06	12 mo	-	-	1800	-
Beatrice Alvarado	Admissions & Records Assistant II	00/01-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Farrah Coleman	Admissions & Records Assistant II	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89

Denise Hamilton	Admissions & Records Assistant II	99/00-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Euginia Nelson-Jones	Admissions & Records Assistant II-Substitute	99/00-05/06	Hrly	37,020.00	7,774.20	1800	24.89
Dana Paniagua-Rudd	Lead Admissions & Records Assistant	99/00-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Linda McEwen	Lead Admissions & Records Assistant	99-00-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Trinidad Ledesma	Senior Admissions & Records Assistant	03/04-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Monica Simmons	Senior Admissions & Records Assistant	04/05-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Marianne Martinez	Senior Admissions & Records Assistant	99/00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Sonja Nilsen	Senior Admissions & Records Assistant	99-00-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Kimberly Hughes	Senior Interim Lead Admissions	01/02-05/06	12 mo	46,224.00	9,707.04	1800	31.07
Tania Hernandez	Financial Aid Assistant I	02/03-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Dennis Franco	Financial Aid Assistant II	05/06	12 mo	-	-	1800	-
Marian Salmeron	Student Worker	04/05-05/06	Hrly	18,900.00	3,969.00	1800	12.71
Faidra Rodriguez	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Catherine McClung	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Davis	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Michael Keesey	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Alfredo DelCid	Student Worker	05/06	Hrly	-	-	1800	-
Marcia Giovanni	Financial Aid Specialist	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Carla Rosas	Financial Aid Assistant I	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Yusuke Hashiume	Student Worker	05/06	Hrly		-	1800	-
Jennifer Riel	Student Worker	05/06	Hrly		-	1800	-
Jennifer Thorpe	Administrative Assistant	05/06	Hrly		-	1800	-

Enrollment Fee Collection and Waivers Mandate
Contra Costa Community College District
Employees and Positions for Reimbursable Activities

Fiscal Year: 2004-05

Form EFGW 1.6 & 1.4

LMC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Luis Felipe Torres	Director Special Programs & Services	98/99-05/06	12 mo	90,048.00	18,910.08	1800	60.53
Ann Starkie	Lead Account Clerk	04/05	12 mo	45,096.00	9,470.16	1800	30.31

CCC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Frank Hernandez	Dean Student Services (M11 per 2000-2001)	98/99-05/06	12 mo	109,716.00	23,040.36	1800	73.75

DVC

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Tania Hernandez	Financial Aid Assistant I	02/03-05/06	12 mo	37,020.00	7,774.20	1800	24.89
Dennis Franco	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Marian Salmeron	Student Worker	04/05-05/06	Hrly	18,900.00	3,969.00	1800	12.71
Faidra Rodriguez	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Catherine McClung	Financial Aid Assistant II	02/03-05/06	12 mo	40,860.00	8,580.60	1800	27.47
Margaret Davis	Financial Aid Assistant I	05/06	12 mo	-	-	1800	-
Michael Keesey	Financial Aid Assistant I	05/06	Hrly	-	-	1800	-
Alfredo DelCid	Student Worker	05/06	Hrly	-	-	1800	-
Marcia Giovanni	Financial Aid Specialist	02/03-05/06	12 mo	43,992.00	9,238.32	1800	29.57
Carla Rosas	Financial Aid Assistant I	04/05-05/06	12 mo	37,020.00	7,774.20	1800	24.89

DO

Employee Name	Position	Yrs Claimed	Work Yr	Annual Salary	Benefits @21%	Productive Hours	Productive Hourly Rate
Craig Lee	Director of Information Technology	05/06	12 mo	-	-	1800	-

Derek Smith	Senior Applications Support Analyst	05/06	12 mo	-	-	1800	-
Krista Ducharme	Fiscal Operations Specialist	05/06	12 mo	-	-	1800	-
Judy Vroman	Manager of Audit Services	05/06	12 mo	-	-	1800	-

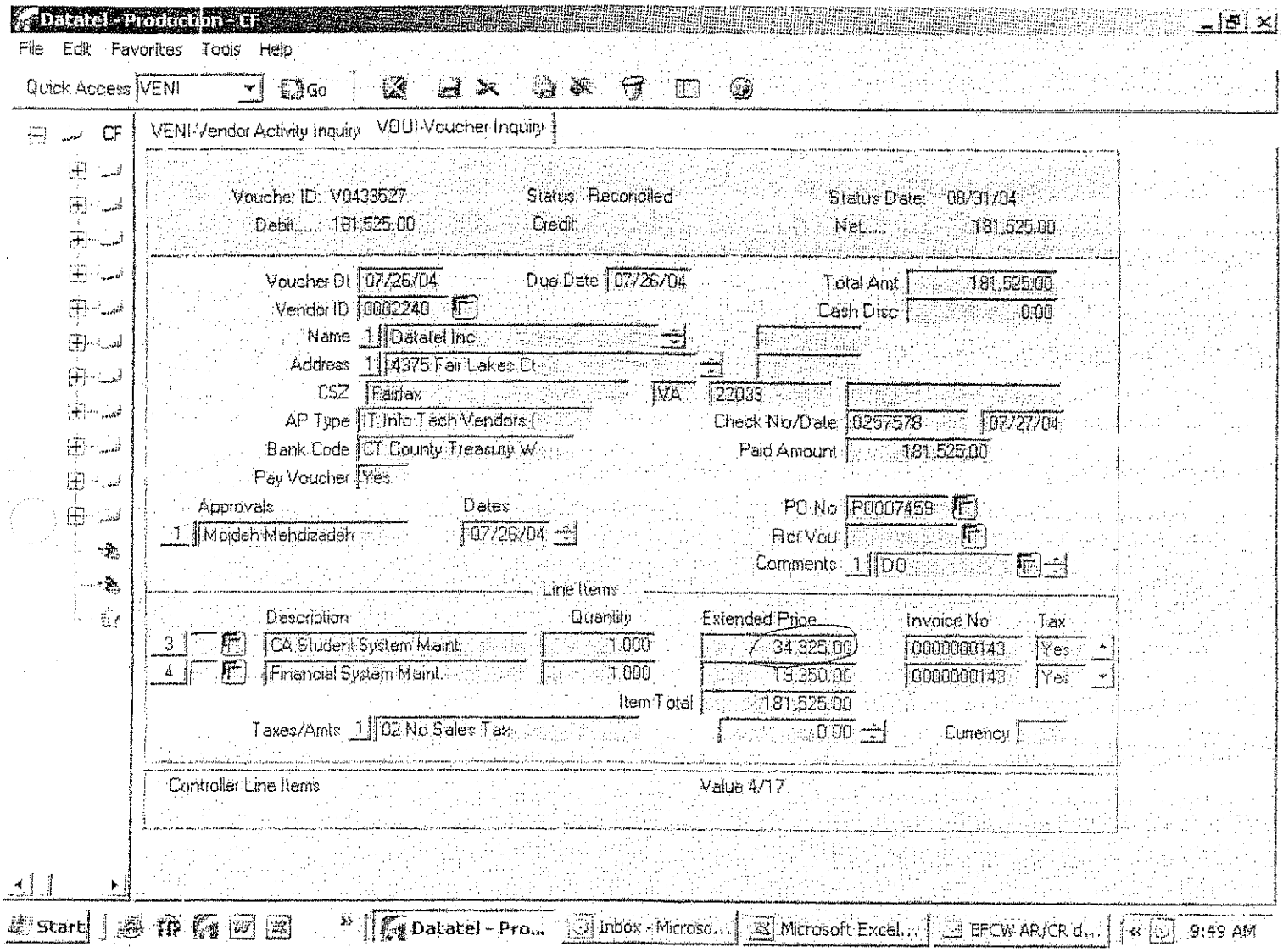
Contra Costa Community College District
2004-2005 SALARY SCHEDULE
MANAGEMENT

	STEP 2		STEP 3		STEP 4		STEP 5	
	MONTHLY	ANNUAL	MONTHLY	ANNUAL	MONTHLY	ANNUAL	MONTHLY	ANNUAL
	$5,310	$63,720	$5,579	$66,948	$5,861	$70,332	$6,158	$73,896
	$5,579	$66,948	$5,861	$70,332	$6,158	$73,896	$6,470	$77,640
	$5,861	$70,332	$6,158	$73,896	$6,470	$77,640	$6,798	$81,576
	$6,158	$73,896	$6,470	$77,640	$6,798	$81,576	$7,142	$85,704
	$6,470	$77,640	$6,798	$81,576	$7,142	$85,704	$7,504	$90,048
	$6,798	$81,576	$7,142	$85,704	$7,504	$90,048	$7,884	$94,608
M8	$7,142	$85,704	$7,504	$90,048	$7,884	$94,608	$8,283	$99,396
M9	$7,504	$90,048	$7,884	$94,608	$8,283	$99,396	$8,702	$104,424
M10	$7,884	$94,608	$8,283	$99,396	$8,702	$104,424	$9,143	$109,716
M11	$8,283	$99,396	$8,702	$104,424	$9,143	$109,716	$9,606	$115,272
M12	$8,702	$104,424	$9,143	$109,716	$9,606	$115,272	$10,092	$121,104
M13	$9,143	$109,716	$9,606	$115,272	$10,092	$121,104	$10,603	$127,236
M14	$9,606	$115,272	$10,092	$121,104	$10,603	$127,236	$11,140	$133,680
M15	$10,092	$121,104	$10,603	$127,236	$11,140	$133,680	$11,704	$140,448
M16	$10,603	$127,236	$11,140	$133,680	$11,704	$140,448	$12,297	$147,564
M17	$11,140	$133,680	$11,704	$140,448	$12,297	$147,564	$12,920	$155,040
M18	$11,704	$140,448	$12,297	$147,564	$12,920	$155,040	$13,574	$162,888
M19	$12,297	$147,564	$12,920	$155,040	$13,574	$162,888	$14,261	$171,132
M20	$12,920	$155,040	$13,574	$162,888	$14,261	$171,132	$14,983	$179,796
M**							$15,742	$188,904
							$18,225	$218,700

* Computed on a basis of 2,080 hours per year, or 173.33 hours per average month.
** Chancellor: No salary schedule - single class, no steps, negotiated contract.
A longevity step is granted at the beginning of the fiscal year of employment after continuous service in the District as follows:
5% - 8th Year; 7.5% - 10th Year; 10% - 14th Year; 12.5% - 16th Year; 15% - 20th Year

Adopted by the Governing Board on 5/26/04.
Total Compensation Decrease of 7% on Salary Schedule.

Effective Date is 7/1/04



$34,325 \div 9 \approx 3,814.00$

Contra Costa Community College District
308/95 Enrollment Fe ection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 5,981,415	$ 6,360,340	$ 5,587,181	$ 7,048,008	$ 10,816,352	$ 15,544,427
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 119,628	$ 127,207	$ 111,744	$ 140,960	$ 216,327	$ 310,889
1.8-4 line 4A	Enrollment Fees Waived	$ 1,357,125	$ 1,249,724	$ 1,413,400	$ 1,224,520	$ 1,488,235	$ 3,880,840
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 94,999	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		113,611	128,490	111,320	94,973	166,274
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 94,999					
1.8-4 5.	Credit Units Waived		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 122,142**	**$ 128,380**	**$ 145,194**	**$ 125,791**	**$ 116,190**	**$ 228,926**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Contra Costa
COUNTY: Contra Costa

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$47,246,562	$43,119,047	$-65,074	$43,053,973
ENROLL FEE ADMIN (2%)	48,713	41,893	6,820	48,713
APPRENTICE ALLOWANCE	323,647	275,670	47,977	323,647
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	5,238,878	4,505,435	733,443	5,238,878
S.F.A.A.	946,631	810,233	136,398	946,631
E.O.P.S.	2,331,903	2,002,680	329,223	2,331,903
C.A.R.E.	380,223	326,991	53,232	380,223
D.S.P.S.	2,220,834	1,900,581	320,253	2,220,834
STATE HOSPITALS	0	0	0	0
CALWORKS	658,752	557,927	100,825	658,752
MATRICULATION (CREDIT)	1,223,602	1,044,382	179,220	1,223,602
MATRIC. (NONCREDIT)	25,261	21,724	3,537	25,261
FAC.& STAFF DIVERSITY	29,489	20,961	8,528	29,489
PART-TIME FACULTY INS.	113,518	0	113,518	113,518
PART-TIME FACULTY OFFIC	295,407	0	295,407	295,407
PART-TIME FACULTY ALLOC	1,458,983	1,254,726	204,257	1,458,983
BLOCK GRANT (ONE-TIME)	671,571	577,551	94,020	671,571
ECON. DEVELOPMENT	1,293,119	658,687	427,533	1,086,220
TELECOMMUNICATIONS	175,715	94,678	81,037	175,715
TANF	145,756	123,588	22,168	145,756
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	34,400	67,080	-38,184	28,896
VTEA TITLE I C	595,948	464,840	35,756	500,596
PLANT & INSTRUCTIONAL	753,273	647,814	105,459	753,273
PRIOR YEAR CORRECTION	-67,214	-91,062	23,848	-67,214
TOTAL	$66,144,971	$58,425,426	$3,219,201	$61,644,627

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Contra Costa College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:25:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	178	32,439
BOGW - Part A-2 based on SSI recipient status	165	26,323
BOGW - Part A-3 based on general assistance recipient status	27	4,342
BOGW - Part B based on income standards	1,460	356,349
BOGW - Part C based on financial need	2,239	748,166

Total Amount = $ 1,167,619

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Diablo Valley College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:46:02

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	96	26,805
BOGW - Part A-2 based on SSI recipient status	270	48,475
BOGW - Part A-3 based on general assistance recipient status	17	3,566
BOGW - Part B based on income standards	3,487	1,036,118
BOGW - Part C based on financial need	1,714	575,794

Total Amount = $ 1,690,758

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Los Medanos College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 15, 2012 11:46:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	148	42,348
BOGW - Part A-2 based on SSI recipient status	98	21,663
BOGW - Part A-3 based on general assistance recipient status	8	1,079
BOGW - Part B based on income standards	2,289	605,553
BOGW - Part C based on financial need	852	274,944

Total Amount = $ 945,587

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 15, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Contra Costa Community College District CC07030

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Contra Costa Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Keith B. Petersen, President

State Controller's Office

File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 07030

(02) Claimant Name: Contra Costa Community College District

County of Location: Contra Costa

Street Address or P.O. Box: 500 Court Street

City: Martinez | State: CA | Zip Code: 94553

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 1,325,300	(13) $ 1,204,822
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,204,822
Due from State	(08) $ 1,325,300	(17) $ 1,204,822
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,339
(23) EFCW-1, (04)(A)(1)(b)(f)	867
(24) EFCW-1, (04)(A)(2)(a)(f)	861,974
(25) EFCW-1, (04)(B)(1)(a)(f)	1,313
(26) EFCW-1, (04)(B)(1)(b)(f)	2,655
(27) EFCW-1, (04)(B)(2)(a)(f)	9,621
(28) EFCW-1, (04)(B)(2)(b)(f)	227,207
(29) EFCW-1, (04)(B)(2)(c)(f)	2,895
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	362,271
(32) EFCW-1, (09)	46,303
(33) EFCW-1, (10)	220,017
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Doug Roberts
Type or Print Name

Date

11-30-06

Vice Chancellor, Finance and Administration
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 17	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Contra Costa Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2005-2006

(03) Leave Blank

Direct Costs	**Object Accounts**					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,339.35	$ -	$ -	$ -	$ -	$ 2,339.35
b. Staff training (One time per employee)	$ 866.53	$ -	$ -	$ -	$ -	$ 866.53
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 861,974.12	$ -	$ -	$ -	$ -	$ 861,974.12
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 1,313.05	$ -	$ -	$ -	$ -	$ 1,313.05
b. Staff training (One time per employee)	$ 2,655.41	$ -	$ -	$ -	$ -	$ 2,655.41
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 5,235.48	$ -	$ 4,386.00	$ -	$ -	$ 9,621.48
b. Waiving student fees	$ 227,206.59	$ -	$ -	$ -	$ -	$ 227,206.59
c. Reporting BOG fee waiver data to CCC	$ 2,894.50	$ -	$ -	$ -	$ -	$ 2,894.50
(05) Total Direct Costs	$ 1,104,485.03	$ -	$ 4,386.00	$ -	$ -	$ 1,108,871.03

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 362,271.09
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,471,142.12
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 46,303.00
(10) Enrollment Fee Waiver offsets		$ 220,017.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,204,822.12

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant
Contra Costa Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Davis, Margaret	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$31.50	1.0	$ 31.50				
Hernandez, Frank	Dean, Student Services	$85.02	25.0	$ 2,125.50				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Keesey, Michael	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
McClung, Catherine	Financial Aid Assistant II	$27.84	1.0	$ 27.84				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	1.0	$ 29.24				
Rosas, Carla	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 2,339.35	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Davis, Margaret	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$31.50	2.0	$ 63.00				
Hernandez, Frank	Dean, Student Services	$85.02	5.0	$ 425.10				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Keesey, Michael	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
McClung, Catherine	Financial Aid Assistant II	$27.84	2.0	$ 55.68				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	2.0	$ 58.48				
Rosas, Carla	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Salmeron, Marian	Student Worker	$7.37	1.0	$ 7.37				
Del Cid, Alfredo	Student Worker	$12.71	0.5	$ 6.36				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 866.53	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions and Records Sta Various	$27.66	9,259.5	$ 256,117.77				
Calculating total enrollment fee to be collected Admissions and Records Sta Various	$27.66	7,361.0	$ 203,605.26				
Answering student's questions regarding enrollment fee collection Admissions and Records Sta Various	$27.66	6,327.3	$ 175,013.12				
...ting written and computer records for enrollment fee information Admissions and Records Sta Various	$27.66	6,973.6	$ 192,889.78				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions and Records Sta Various	$27.66	785.3	$ 21,721.40				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions and Records Sta Various	$27.66	456.5	$ 12,626.79				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 861,974.12	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Davis, Margaret	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
Franco, Dennis	Financial Aid Assistant II	$27.47	1.0	$ 27.47				
Giovanni, Marcia	Financial Aid Specialist	$31.50	1.0	$ 31.50				
Hernandez, Frank	Dean, Student Services	$85.02	12.0	$ 1,020.24				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Keesey, Michael	Financial Aid Assistant I	$24.89	1.0	$ 24.89				
McClung, Catherine	Financial Aid Assistant II	$27.84	1.0	$ 27.84				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	1.0	$ 29.24				
Rosas, Carla	Financial Aid Assistant I	$24.01	1.0	$ 24.01				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	1.0	$ 78.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,313.05	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Davis, Margaret	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
Franco, Dennis	Financial Aid Assistant II	$27.47	2.0	$ 54.94				
Giovanni, Marcia	Financial Aid Specialist	$31.50	2.0	$ 63.00				
Hernandez, Frank	Dean, Student Services	$85.02	21.0	$ 1,785.42				
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Keesey, Michael	Financial Aid Assistant I	$24.89	2.0	$ 49.78				
McClung, Catherine	Financial Aid Assistant II	$27.84	2.0	$ 55.68				
Rodriguez, Faidra	Financial Aid Assistant II	$29.24	2.0	$ 58.48				
Rosas, Carla	Financial Aid Assistant I	$24.01	2.0	$ 48.02				
Salmeron, Marian	Student Worker	$7.37	1.0	$ 7.37				
Smith, Derek	Sr. Applications Support Analyst	$47.92	4.0	$ 191.68				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	3.0	$ 236.88				
Del Cid, Alfredo	Student Worker	$12.71	0.5	$ 6.36				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,655.41	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: ...ra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Davis, Margaret	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Giovanni, Marcia	Financial Aid Specialist	$31.50	24.0	$ 756.00				
Hernandez, Frank	Dean, Student Services	$85.02	30.0	$ 2,550.60				
Keesey, Michael	Financial Aid Assistant I	$24.89	24.0	$ 597.36				
Rosas, Carla	Financial Aid Assistant I	$24.01	24.0	$ 576.24				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	2.0	$ 157.92				
Datatel	Support Services	$100.00	43.9			$ 4,386.00		
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,235.48	$ -	$ 4,386.00	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Staff Various	$26.27	1,787.6	$ 46,960.25				
Receiving waiver applications Financial Aid Staff Various	$26.27	1,381.3	$ 36,286.75				
Evaluating waiver applications and verifying application documents Financial Aid Staff Various	$26.27	2,410.6	$ 63,326.46				
ying students of additional documentation requirements and how to obtain information Financial Aid Staff Various	$26.27	217.6	$ 5,716.35				
Entering approved application information into district records; providing student award letter Financial Aid Staff Various	$26.27	2,636.2	$ 69,252.97				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Staff Various	$26.27	215.6	$ 5,663.81				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 227,206.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Contra Costa Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Giovanni, Marcia	Financial Aid Specialist	$31.50	40.0	$ 1,260.00				
Hernandez, Frank	Dean, Student Services	$85.02	2.0	$ 170.04				
Roberts, Doug	Comptroller	$85.02	5.0	$ 425.10				
Rosas, Carla	Financial Aid Assistant I	$24.01	40.0	$ 960.40				
Torres Jr., L Felipe	Director, Special Program Services	$78.96	1.0	$ 78.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,894.50	$ -	$ -	$ -	$ -

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	9,259.50	Admissions and Records St	Various	$27.66	$256,117.77	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	7,361.00	Admissions and Records St	Various	$27.66	$203,605.26	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	6,327.30	Admissions and Records St	Various	$27.66	$175,013.12	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	6,973.60	Admissions and Records St	Various	$27.66	$192,889.78	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	785.30	Admissions and Records St	Various	$27.66	$21,721.40	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	456.50	Admissions and Records St	Various	$27.66	$12,626.79	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	31,163.20	**Admissions and Records Staff Total**			$861,974.12		
05-06	43.86	Datatel	Support Services	$100.00	$4,386.00	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	43.86	**Datatel Total**			$4,386.00		
05-06	1.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Davis, Margaret	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	30.00	**Davis, Margaret Total**			$746.70		
05-06	0.50	Del Cid, Alfredo	Student Worker	$12.71	$6.36	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	0.50	Del Cid, Alfredo	Student Worker	$12.71	$6.36	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	1.00	**Delcid, Alfredo Total**			$12.72		
05-06	1,787.60	Financial Aid Staff	Various	$26.27	$46,960.25	Answering student's questions regarding enrollment fee waivers/referring to appropriate per	Waiving student fees
05-06	1,381.30	Financial Aid Staff	Various	$26.27	$36,286.75	Receiving waiver applications	Waiving student fees
05-06	2,410.60	Financial Aid Staff	Various	$26.27	$63,326.46	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	217.60	Financial Aid Staff	Various	$26.27	$5,716.35	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	2,636.20	Financial Aid Staff	Various	$26.27	$69,252.97	Entering approved application information into district records; providing student award lette	Waiving student fees
05-06	215.60	Financial Aid Staff	Various	$26.27	$5,663.81	In case of denied applications, reviewing and evaluating information if denial is appealed by	Waiving student fees
	8,648.90	**Financial Aid Staff Total**			$227,206.59		
05-06	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$27.47	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Franco, Dennis	Financial Aid Assistant II	$27.47	$54.94	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Franco, Dennis Total**			$164.82		
05-06	1.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$31.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$31.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$63.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$63.00	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$756.00	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	40.00	Giovanni, Marcia	Financial Aid Specialist	$31.50	$1,260.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Giovanni, Marcia Total**			$2,205.00		
05-06	25.00	Hernandez, Frank	Dean, Student Services	$85.02	$2,125.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	12.00	Hernandez, Frank	Dean, Student Services	$85.02	$1,020.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Hernandez, Frank	Dean, Student Services	$85.02	$425.10	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	21.00	Hernandez, Frank	Dean, Student Services	$85.02	$1,785.42	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	30.00	Hernandez, Frank	Dean, Student Services	$85.02	$2,550.60	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	2.00	Hernandez, Frank	Dean, Student Services	$85.02	$170.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	95.00	**Hernandez, Frank Total**			$8,076.90		

Contra Costa Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2 006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Hernandez-Cruz, Tania Total**			$144.06		
05-06	1.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$24.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$49.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	24.00	Keesey, Michael	Financial Aid Assistant I	$24.89	$597.36	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
	30.00	**Keesey, Michael Total**			$746.70		
05-06	1.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$27.84	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$27.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$55.68	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	McClung, Catherine	Financial Aid Assistant II	$27.84	$55.68	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**McClung, Catherine Total**			$167.04		
05-06	5.00	Roberts, Doug	Comptroller	$85.02	$425.10	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	5.00	**Roberts, Doug Total**			$425.10		
05-06	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$29.24	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$29.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$58.48	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Rodriguez, Faidra	Financial Aid Assistant II	$29.24	$58.48	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	6.00	**Rodriguez, Faidra Total**			$175.44		
05-06	1.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$24.01	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	2.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$48.02	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	24.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$576.24	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	40.00	Rosas, Carla	Financial Aid Assistant I	$24.01	$960.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	70.00	**Rosas, Carla Total**			$1,680.70		
05-06	1.00	Salmeron, Marian	Student Worker	$7.37	$7.37	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	1.00	Salmeron, Marian	Student Worker	$7.37	$7.37	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	2.00	**Salmeron, Marian Total**			$14.74		
05-06	4.00	Smith, Derek	Sr. Applications Support Analyst	$47.92	$191.68	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
	4.00	**Smith, Derek Total**			$191.68		
05-06	1.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$78.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	3.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$236.88	Train district staff or attend training to implement procedures for waiver eligibility determinat	Staff training - enrollment fee waiver
05-06	2.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$157.92	Adopting procedures for documenting financial assistance, recording, and record maintenan	Adopting procedures, recording, and maintaining records
05-06	1.00	Torres Jr., L Felipe	Director, Special Program Services	$78.96	$78.96	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	7.00	**Torres Jr., L Felipe Total**			$552.72		
	40,193.96	**Grand Total**			$1,108,871.03		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: January 8, 2004

INSTITUTION:
Contra Costa Community College District
500 Court Street

FILING REF.: The preceding Agreement was dated February 21, 2002

Martinez CA 94553

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/06	32.8	On-Campus	All Programs
PROV.	07/01/06	06/30/07	32.8	On-Campus	All Programs

*BASE:
Direct salaries and wages including all fringe benefits.

Schedule 1A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	92,595
Avg. time p/account	6.0
Total Time (in minutes)	555570
Per Hour	60
Hours Worked **(** Activity 11)**	**9,259.5**
***EFC 2**	77,484
Avg. time p/student	5.7
Total Time (in minutes)	441659
Per Hour	60
Hours Worked **(** Activity 12)**	**7,361.0**
***EFC 1**	92,595
Avg. time p/question	4.1
Total Time (in minutes)	379640
Per Hour	60
Hours Worked **(** Activity 13)**	**6,327.3**
***EFC 2**	77,484
Avg. time p/file	5.4
Total Time (in minutes)	418414
Per Hour	60
Hours Worked **(** Activity 14)**	**6,973.6**
***EFC 4**	5,235
Avg. time p/account	9.0
Total Time (in minutes)	47115
Per Hour	60
Hours Worked **(** Activity 15)**	**785.3**
***EFC 5**	3,604
Avg. time p/student	7.6
Total Time (in minutes)	27390
Per Hour	60
Hours Worked **(** Activity 16)**	**456.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*

Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	16,251
Avg. time p/question	6.6
Total Time (in minutes)	107257
Per Hour	60
Hours Worked **(** Activity 21)**	**1,787.6**
***EFW 6**	16,251
Avg. time p/application	5.1
Total Time (in minutes)	82880
Per Hour	60
Hours Worked **(** Activity 22)**	**1,381.3**
***EFW 6**	16,251
Avg. time p/evaluation	8.9
Total Time (in minutes)	144634
Per Hour	60
Hours Worked **(** Activity 23)**	**2,410.6**
***EFW 8**	1,187
Avg. time p/application	11.0
Total Time (in minutes)	13057
Per Hour	60
Hours Worked **(** Activity 24)**	**217.6**
***EFW 7**	15,064
Avg. time p/application	10.5
Total Time (in minutes)	158172
Per Hour	60
Hours Worked **(** Activity 25)**	**2,636.2**
***EFW 8**	1,187
Avg. time p/application	10.9
Total Time (in minutes)	12938
Per Hour	60
Hours Worked **(** Activity 26)**	**215.6**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Alvarado, Beatrice	Admissions & Records Assistant II	4.0	3.0	3.0	4.0		5.0
Alves, Stephanie	Lead A&R Assistant	4.0	3.0	5.0	3.0	10.0	5.0
Armendaz, Kay	Senior Admissions and Records Assistant	4.0	9.0	12.0	3.0	15.0	4.0
Betsekas, Julie	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Burkholder, Deborah	Admissions & Records Assistant I	2.0	3.0	5.0	5.0	4.0	
Cardenas, Alma	Senior Account Clerk	5.0	3.0	3.0		11.0	6.0
Coleman, Farrah	Admissions & Records Assistant II	3.0	1.0	3.0	2.0		5.0
Conley, Jim	Cashier Office Supervisor	9.0	7.0	6.0	4.0	15.0	10.0
Do, Binh	Admissions & Records Assistant II	4.0	5.0	3.0	4.0	2.0	5.0
Do-Florendo, Mai	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
French, Carole	Senior Admissions and Records Assistant	6.0	5.0	4.0	5.0	6.0	5.0
Garza, Regina	Senior Account Clerk	1.4	1.0	1.0		5.0	3.0
Gursky, Mary	Senior Account Clerk	2.0	2.0	1.5		5.0	3.0
Hamilton, Denise	Admissions and Records II	4.0	3.0	3.0	4.0		5.0
Herrera, Lorna	Senior Admissions and Records Assistant	20.0	18.0	4.0	22.0	18.0	30.0
Herstein, Margaret	Senior Admissions and Records Assistant	8.0	8.0	5.0	4.0	4.0	5.0
Hotton, Natalie	Customer Service Clerk	15.0	10.0	10.0	5.0		
Hughes, Kimberly	Interim Lead Admissions	5.0	5.0	3.0	3.0		10.0
Ledesma, Trinidad	Senior Admissions and Records Assistant	5.0	10.0	1.0	5.0		5.0
Martinez, Marianne	Senior Admissions and Records Assistant	5.0	5.0	5.0	5.0		
McEwen, Linda	Lead A&R Assistant	5.0	5.0	8.0	8.0		10.0
Moppin, Gwendolyn	Senior Admissions and Records	15.0	15.0	5.0	20.0	15.0	20.0
Morgado, Stephanie	Admissions & Records Assitant II	3.0	4.0	5.0	3.0		7.0
Nelson-Jones, Eugenia	Admissions and Records II			3.0			
Nilsen., Sonja	Senior Admissions and Records Assistant	7.0	3.0	3.0	2.0		5.0
Paniagua-Budd, Dana	Lead A&R Assistant	1.0	2.0	1.0	1.0		
Purdy, Susie	Senior Admissions and Records Assistant	9.0	6.0	4.0	5.0	5.0	3.0
Randle, Marlene	Senior Account Clerk	2.0	1.5	1.5		6.0	4.0
Robertson, Leetha	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Saeyang, Monang	A & R Assistant I	2.0	3.0	3.0	4.0	2.0	
Shelton, Jeanette	Senior Account Clerk	9.0	7.0	6.0	4.0	15.0	10.0
Simmons, Monica	Senior Admissions and Records Assistant	5.0	10.0	1.0	5.0		15.0
Starkie, Ann	Lead Account Clerk	1.5	1.5	2.0		4.0	1.5
West, Shondra	Senior Admissions and Records Assistant	9.0	13.0	5.0	10.0	8.0	
Zerck, Kay	Lead Account Clerk	1.5	1.5	1.0		4.0	2.5
Average		**6.0**	**5.7**	**4.1**	**5.4**	**9.0**	**7.6**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier {Client Provided (Default used for Code 11-14)}**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05	05-06
Alvarado, B	Admissions & Records Assistant II	$24.89	$26.50
Alves, Stephanie	Lead A&R Assistant	$31.07	$35.64
Armendaz, Kay	Senior Admissions and Records Assistant	$27.47	$33.09
Betsekas, Julie	Senior Account Clerk	$27.47	$31.77
Burkholder, Deborah	Admissions & Records Assistant I	$22.55	$12.80
Cardenas, Alma	Senior Account Clerk	$27.47	$29.24
Coleman, Farrah	Admissions & Records Assistant II	$24.89	$25.22
Conley, Jim	Cashier Office Supervisor	$31.85	$35.06
Do, Binh	Admissions & Records Assistant II	$24.89	$26.50
Do-Florendo, Mai	Senior Account Clerk	$27.47	$29.24
French, Carole	Senior Admissions and Records Assistant	$27.47	$29.24
Garza, Regina	Senior Account Clerk		$27.47
Hamilton, Denise	Admissions and Records II	$24.89	$26.50
Herrera, Lorrna	Senior Admissions and Records Assistant	$27.47	$29.24
Herstein, Margaret	Senior Admissions and Records Assistant	$27.47	$28.84
Hotton, Natalie	Customer Services Clerk		$22.55
Hughes, Kimberly	Interim Lead Admissions	$31.07	$23.39
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47	$27.84
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47	$31.50
McEwen, Linda	Lead A&R Assistant	$31.07	$33.09
Morgado, Stephanie	Admissions & Records Assistant II		$24.89
Nelson-Jones, Eugenia	Admissions and Records II	$24.89	$13.83
Nielsen., Sonja	Senior Admissions and Records Assistant	$27.47	$29.24
Paniagua-Budd, Dana	Lead A&R Assistant	$31.07	$37.44
Purdy, Susie	Senior Admissions and Records Assistant	$27.47	$29.24
Randle, Marlene	Senior Account Clerk	$27.47	$27.47
Robertson, Leetha	Senior Account Clerk	$24.89	$22.55
Saeyang, Monang	A & R Assistant I		$22.55
Schwabe (Starkie), Ann	Lead Account Clerk	$30.31	$33.92
Shelton, Jeanette	Senior Account Clerk	$24.89	$24.89
Simmons, Monica	Senior Admissions and Records Assistant	$27.47	$27.84
West, Shondra	Senior Admissions and Records Assistant	$27.47	$29.24
Zerck, Kay	Lead Account Clerk	$24.89	$24.89
	AVERAGE	$27.33	$27.66

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6				7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Alvarado, B	Admissions and Records II	3.0					
Chang, Hsui-Chi	Financial Aid Assistant I	35.0	10.0	22.0	25.0	18.0	25.0
Coleman, Farrah	Admissions and Records II	1.0					
Connell, Carmen	Finacial Aid Assistant II	5.0	5.0	7.0	10.0	10.0	10.0
Davis, Margaret	Financial Aid I	5.0	5.0	5.0	8.0	10.0	8.0
Del Cid, Alfredo	Student Worker	5.0	5.0	10.0	10.0		
Do, Binh	Admissions and Records II	4.0					
Elejalde, Tatianna	Financial Aid Assistant I	18.0	15.0	35.0	25.0	40.0	35.0
Franco, Dennis	Financial Aid Assistant II	3.0	1.0	0.5	1.5	1.5	3.0
Giovanni, Marcia	Fianacial Aid Specialist	4.0	1.0	1.5	5.0	5.0	5.0
Hamilton, Denise	Admissions and Records II	3.0					
Hashigume,. Yusuke	Student Worker	0.5			5.0	3.0	7.0
Hernandez-Cruz, Tania	Financial Aid Assistant I	4.0	2.0	2.0	5.0	5.0	5.0
Hughes, Kimberly	Interim Lead Admissions	5.0	2.0				
Keesey, Michael	Financial Aid Assistant I	3.0	3.0	7.5		6.0	7.0
LaMothe, Vivian	Student Service & Instructional Coordinator	20.0	15.0	25.0	20.0	30.0	35.0
Ledesma, Trinidad	Senior Admissions and Records Assistant	2.0	1.0	10.0			
Leung, Chunni	Financial Aid Assitant I	5.0	3.0	2.0	15.0	5.0	5.0
Lucero, Pablo	Technical Expert	9.0	10.0	10.0	5.0	20.0	15.0
Mallillin, Dennis	Financial Aid Assistant I	7.0	5.0	7.0	10.0	7.0	7.0
Martinez, Marianne	Senior Admissions and Records Assistant	5.0					
McClung, Catherine	Financial Aid Assistant II	3.0	0.5	1.0	3.0	5.0	3.0
McEwen, Linda	Lead A&R Assistant	4.0					
Monteverde, Eva	Finacial Aid Specialist	3.0	1.0	7.0	5.0	3.0	7.0
Morgado, Stephanie	A & R Assistant II	5.0					
Nelson-Jones, Eugenia	Admissions and Records II	12.0					
Nguyen, Anh	Financial Aid Assistant I	20.0	15.0	10.0	30.0	10.0	20.0
Nilsen, Sonja	Senior Admissions and Records Assistant	5.0					2.0
Rance, Barbara	Finacial Aid Assistant	11.0	15.0	30.0	25.0	35.0	32.0
Riel, Jennifer	Student Worker	7.5	1.0	1.0		1.0	3.5
Rodriguez, Faidra	Financial Aid Assistant II	3.0	1.0	1.0	3.0	4.0	3.0
Rosas, Carla	Financial Aid Assistant I	4.0	1.0	3.0	4.0	2.0	3.0
Salmeron, Marian	Student Worker	5.0	6.0	6.0	6.0	6.0	6.0
Simmons, Monica	Senior Admissions and Records Assistant	1.0					
Thorpe, Jennifer	Administrative Assistant	2.5	2.0	5.0			
Torres Jr. , Felipe	Director, Special Programs & Services	4.0	3.0	4.0	10.0	5.0	5.0
Average		**6.6**	**5.1**	**8.9**	**11.0**	**10.5**	**10.9**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05	05-06
Alvarado, B	Admissions and Records II	$24.89	$26.50
Chang, Hsiu-Chi	Fianancial Aid Assistant I		$24.89
Coleman, Farrah	Admissions and Records II	$24.89	$25.22
Connell, Carmen	Finacial Aid Assistant II	$27.47	$29.24
Davis, Margaret	Financial Aid I		$24.89
Del Cid, Alfredo	Student Worker		$12.71
Do, Binh	Admissions and Records II	$24.89	$26.50
Elejalde, Tatianna	Financial Aid Assistant I		$24.89
Franco, Dennis	Financial Aid Assistant II		$27.47
Giovanni, Marica	Fianacial Aid Specialist	$27.47	$31.50
Hamilton, Denise	Admissions and Records II	$24.89	$26.50
Hashigume, Yusuke	Student Worker		$12.71
Hernandez-Cruz, Tania	Financial Aid Assistant I	$24.89	$24.01
Hughes, Kimberly	Interim Lead Admissions	$31.07	$23.39
Keesey, Michael	Financial Aid Assistant I		$24.89
LaMothe, Vivian	Student Service & Instructional Coordinator	$34.30	$39.33
Ledesma, Trinidad	Senior Admissions and Records Assistant	$27.47	$27.84
Leung, Chunni	Financial Aid Assistant I		$24.89
Lucero, Pablo	Technical Expert	$21.77	$17.99
Mallillin, Dennis	Financial Aid Assistant I		$24.89
Martinez, Marianne	Senior Admissions and Records Assistant	$27.47	$31.50
McClung, Catherine	Financial Aid Assistant II	$27.47	$27.84
McEwen, Linda	Lead A&R Assistant	$31.07	$33.09
Monteverde, Eva	Finacial Aid Specialist	$29.57	$34.77
Morgado, Stephanie	Admissions and Records II		$24.89
Nelson-Jones, Eugenia	Admissions and Records II	$24.89	$13.83
Nguyen, Anh	Financial Aid Assistant I	$24.89	$14.09
Nielsen, Sonja	Senior Admissions and Records Assistant	$27.47	$29.24
Rance, Barbara	Finacial Aid Assistant	$27.47	$26.50
Riel, Jennifer	Student Worker		$12.71
Rodriguez, Faidra	Financial Aid Assistant II	$27.47	$29.24
Rosas, Carla	Financial Aid Assistant I	$24.89	$24.01
Salmeron, Marian	Student Worker	$12.71	$7.37
Simmons, Monica	Senior Admissions and Records Assistant	$27.47	$27.84
Thorpe, Jennifer	Administrative Assistant		$29.57
Torres Jr. , Felipe	Director, Special Programs & Services	$60.53	$78.96
Average PHR		**$27.81**	**$26.27**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	100,433	96,437	99,189	106,636	109,761	97,853	94,677	92,595
EFC 2	1.8-1 2.	Paid Enrollment fees	92,352	89,202	91,916	98,593	100,475	86,363	81,437	77,531
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,064
EFC 4	1.8-2 1.	Delinquencies collections					770	838	1,349	5,235
EFC 5	1.8-2 2.	Refunds							1,175	3,604
EFW 6	1.8-3 1.	Waivers Requested*	X	7,413	7,480	8,271	9,891	12,457	14,816	16,251
		*(Waivers Approved used where Waivers Requested not supplied)								
EFW 7	1.8-3 2.	Waivers Approved	X	7,235	7,273	8,043	9,286	11,490	13,240	15,064
EFW 8	1.8-3 (1-2)	Waivers Denied	X	178	207	228	605	967	1,576	1,187

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Contra Costa For 2005-2006
Data Current As Of May 15, 2012 11:40:26

Download The Result In Comma Delimited Format

Headcount
12,709

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California Home Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Diablo Valley For 2005-2006
Data Current As Of May 15, 2012 11:45:02

Download The Result In Comma Delimited Format

Headcount
32,186

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Los Medanos For 2005-2006

Data Current As Of May 15, 2012 11:45:16

Download The Result In Comma Delimited Format

Headcount
13,614

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Margaret Davis — Employee Name

Financial Aid Assistant I — Exact Position Title

DVC - Financial Aid - Pleasant Hill — College/Department/Location

925-685-1230 — Telephone #

12mo/11mo/10mo/hrly (12mo circled) — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								1
B. Enrollment Waiver Process:								1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:								2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								30

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4.26.06.

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Alfredo Del Cid — Employee Name

Student Worker — Exact Position Title

Diablo Valley College (925)685-1230 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								.5
B. Enrollment Waiver Process:								.5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								+
TOTALS:								1

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College Dist.

Dennis Franco — Employee Name

Financial Aid Asst II. — Exact Position Title

Diablo Valley College — College/Department/Location

925-685-1230 x2224 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					DC 6			
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco — Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

Marcia Giovanni — Employee Name

Financial Aid Specialist — Exact Position Title

Diablo Valley College/FAO — College/Department/Location

925/685-1220 x2655 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					24	24	24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					40	40	40	40
TOTALS:					70	70	70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 4/26/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Employee Name: [illegible] Exact Position Title: Financial Services Assistant

College/Department/Location: Contra Costa Financial Aid Telephone #: 235-7800 x4435

Work year length: (12mo/11mo/10mo/hrly)

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:				50	45	40	35	25
B. Enrollment Waiver Process:	50	45	40	40	33	28	18	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:				40	30	20	10	5
B. Enrollment Waiver Process:	70	60	50	47	42	33	26	21
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	80	75	65	56	48	44	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	15	10	6	5	3	2
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Tania M Hernandez-Cruz (925) Financial Aid Assistant I
Employee Name Exact Position Title

Diablo Valley College Financial Aid office 1085-1330 x3100 12mo/11mo/10mo/hrly
College/Department/Location Telephone # Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

Michael Keesey — Employee Name

Financial Aid Assistant I — Exact Position Title

DVC/FinAid/Pleasant Hill — College/Department/Location

691-1238 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								1
B. Enrollment Waiver Process:								1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:								2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								30

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael Keesey Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm College

Catherine McClung — Employee Name

Financial Aid Asst II — Exact Position Title

Diablo Valley College/Financial Aid (925)685-1230 — College/Department/Location — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College District

Doug Roberts — Employee Name
Comptroller — Exact Position Title

District Office — College/Department/Location
(925) 229-1000 x1214 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	1.0	1.0	1.5	1.5				5
TOTALS:	1.0	1.0	1.5	1.5				5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Roberts — Date 5-19-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Comm. College

Faidra Rodriguez — Financial Aid Asst. II

Employee Name — Exact Position Title

Diablo Valley Coll./Financial Aid 925-685-1230

College/Department/Location Telephone #

12mo/11mo/10mo/hrly

Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					1	1	1	1
B. Enrollment Waiver Process:					1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					2	2	2	2
B. Enrollment Waiver Process:					2	2	2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					6	6	6	6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: CCCCD

CARLA ROSAS — Employee Name

FA ASST I — Exact Position Title

DVC / FAO — College/Department/Location

925 685-1230 x2049 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							2	2
B. Enrollment Waiver Process:							2	2
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							24	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							40	40
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carla Rosas — Date 4-26-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa College

Marian Salmeron — Employee Name

Student worker — Exact Position Title

Diablo Valley College/Financial Aid Office — College/Department/Location

(925) 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							1	1
B. Enrollment Waiver Process:							1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							1	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marian Salmeron Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa

Derek Smith — Employee Name

Sr. Applications Support Analyst — Exact Position Title

DO IT — College/Department/Location

(925) 229-1000 x1418 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								4.0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								4.0

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Derek Smith — Date 5/17/06

If you have any questions, please contact _____, at _____

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D. S. T

Lee, Craig

From: Smith, Derek
Sent: Thursday, March 30, 2006 3:23 PM
To: Lee, Craig
Subject: XBOG Screen Time Estimate

Craig,

Based on my e-mails and my best recollection, I estimate the total time spent programming and debugging the on-line BOGW import process to be about 4 hours. The actual testing (by the campuses) of the process lasted from November 2004 through about March of 2005, but much of that was time spent actually trying to convince them to test the results.

The total time of four hours includes setting up the XAP project for creating the download file, and creating the Envision front-end screen and import batch process, as well as testing and debugging.

--Derek

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Contra Costa Community College

L. Felipe Torres, Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

Los Medanos Colg/PAC — College/Department/Location

(925) 439-2181 x3290 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	20	15	10	5	1	1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	25	15	8	6	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	20	15	10	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	5	1	1	1	1	1
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

A/R - DUC
Department/Location

B. ALVARADO
Employee Name

A/R II
Exact Position Title

685-1250
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm.
District

A+R / LMC
Department/Location

Stephanie Alves
Employee Name

Lead A+R Asst
Exact Position Title

925 439 2181 x325
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie Alves Date 3/27/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Co College
District

Admissions + Records
Department/Location

Kay Clemendor
Employee Name

Senior Admissions + Records
Exact Position Title

4501
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Clemendor Date 3-28-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA — District

D/C — Department/Location

JULIE BETSERAS — Employee Name

SR ACCT CLERK — Exact Position Title

685-1230 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 MIN	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Beteras — Date 3-29

If you have any questions, please contact J. Beteras, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions & Records / Lrnc
Department/Location

Deborah Burkholder
Employee Name

A & R Asst I
Exact Position Title

439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Burkholder Date 3/29/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Costa Losta College District — District
Cashier's Office - CCC — Department/Location
Alma A. Cardenas — Employee Name
Sr Account Clerk — Exact Position Title
510-235-7800 X4294 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 ~~04-05~~ 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	11				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa — District

A&R / DVC — Department/Location

Farrah Coleman — Employee Name

Asst R II — Exact Position Title

N2635 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) N/A					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Max 5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JIM CONLEY
Employee Name

~~SR. ACCT CLERK~~ Cashier Office Supervisor
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Conley Date 3-29

If you have any questions, please contact J. Conley, at [redacted] 2270

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Rich Do
Employee Name

Admission and Records Assistance II
Exact Position Title

(925) 685-1230
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02
~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or ~~have provided a good faith~~ estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 7/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA — District

DVC — Department/Location

MAI DO / FLORENDO — Employee Name

SR ACCT CLERK — Exact Position Title

685-1230 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mai Do — Date 3-29

If you have any questions, please contact MAI DO, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions and Records/Fine
Department/Location

Carole French
Employee Name

Sr. Admissions and Records Asst
Exact Position Title

432-2181-7506
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carole French Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Regina Garza
Employee Name

Senior Account Clerk
Exact Position Title

(925) 439-2181 x 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.4	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Regina Garza Date 3/27/06

If you have any questions, please contact Bruce Cotter, at 439.2181 x 320

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Mary Gursky
Employee Name

Senior Account Clerk
Exact Position Title

439-2181 X 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cota, at 439-2181 x 3328

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

RCCCD — District

DVC Admissions & Records — Department/Location

Denise Hamelt — Employee Name

Admissions Records II Assistant — Exact Position Title

925 685-1310 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamelt Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

ADMISSIONS / CCC
Department/Location

LORENA HERRERA
Employee Name

SR. ADMISSIONS / RECORDS
Exact Position Title

235.7800 4694
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	18	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	04	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	92	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	30					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LHerrera Date 3.16.06

If you have any questions, please contact FRANK HERNANDEZ, at X-4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Admissions / LMC
Department/Location

Margaret Hertstein
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

(925) 439-2181 x329
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Hertstein Date 3-29-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County
District

Admissions / LMC
Department/Location

Natalie Hotton
Employee Name

Cust. Serv. Clerk
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	/				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	/					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Natalie Hotton Date 3/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admission + Records
Department/Location

Kimberly Hughes
Employee Name

Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A-0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College — District

A&R / DVC — Department/Location

TRINIDAD CEDESMA — Employee Name

Senior Assistant — Exact Position Title

925 685-1230 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A&R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions & Records Assistant
Exact Position Title

(925)685-1230, x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 685 1230
Telephone # 2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCC
District

Admissions / CCC
Department/Location

Gwendolyn Mappin
Employee Name

SR Admissions / Records
Exact Position Title

235-7800 x4898
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (92)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gwendolyn Mappin Date 3-16-06

If you have any questions, please contact FRANK Hernandez, at X4435

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Stephanie Morgado
Employee Name

Admissions & Record Assistant II
Exact Position Title

(925)685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stephanie S Morgado Date 3/28

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eugenia nelsonjones
Employee Name

Admissions/Records II - substitute
Exact Position Title

(925) 685 1230
Telephone # x2637

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	n/a	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	n/a	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	n/a	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eugenia nelsonjones Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist.
District

DVC
Department/Location

Sonja Nilsen
Employee Name

Senior A+R Asst.
Exact Position Title

925-685-1310
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date 3/28/16

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A+R / DVC
Department/Location

Dana Paniagua-Budd
Employee Name

Lead A+R Assistant
Exact Position Title

685-1330 x2328
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dana Paniagua-Budd Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. — District

Admissions / LMC — Department/Location

Susie Purdy — Employee Name

Senior Admissions & Records Assist — Exact Position Title

925-228 x3119 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Purdy — Date 3/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/ Los Medanos College
Department/Location

Marlene Randle
Employee Name

Senior Account Clerk
Exact Position Title

925 439 2181 x 3111
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cole, at 939.2181 ext 3200

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

L. ROBERTSON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Robertson Date 3-29

If you have any questions, please contact J. Cathey, at 2449

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions & Records
Department/Location

Moyang Saeyang
Employee Name

A & R Assist. I
Exact Position Title

(50)
235-7800 ext 4212 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	na					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Moyang Saeyang Date 3/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC
Department/Location

JEANETTE SHELTON
Employee Name

SR ACCT CLERK
Exact Position Title

685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Shelton Date 3-29

If you have any questions, please contact J. Carney, at 2449

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions / DVC
Department/Location

Monica Simmons
Employee Name

Sr. A & R Assistant
Exact Position Title

X 2632
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Cashier/Los Medanos College
Department/Location

Ann Starkie
Employee Name

Senior Account Clerk
Exact Position Title

925-439-2181 X 3207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Starkie Date 3/27/06

If you have any questions, please contact Bruce Gates, at 439 2181 ext 340

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Admissions/Records - CCC
Department/Location

Shandra West
Employee Name

Sr. Admissions & Records Assistant
Exact Position Title

X4500
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shandra West Date 6/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
Cashier/Los Medanos College — Department/Location
Kay Zerck — Employee Name
Lead Account Clerk — Exact Position Title
925-439-2181 X 3207 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	x				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	x				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	x				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0	x				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				x	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.5					x

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature EMPLOYEE NOT AVAILABLE TO SIGN Date 3/27/06

If you have any questions, please contact Bruce Cotta, at 439-2181 ext 3600

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCC
District

A/R
Department/Location

B. Alvarado
Employee Name

A/R II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Alvarado Date 3/28/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Hsiu-Chi Chang
Employee Name

Financial Aid Assistant I
Exact Position Title

251800
Telephone # 4253

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	35	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	22	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	18		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	25			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hsiu-Chi Chang Date 3.17.2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

A&R / DVC
Department/Location

Farrah Coleman
Employee Name

A&R II
Exact Position Title

x2635
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	0-1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A		✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A		✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A		✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A			✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A				✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID-LMC
Department/Location

CARMEN CONNELL
Employee Name

FINANCIAL AID ASST II
Exact Position Title

925-439-2181 x 3291
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carmen Connell Date 3/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College Dist. — District

DVC/FINANCIAL AID — Department/Location

Margaret L. Davis — Employee Name

Hourly/Financial Aid I — Exact Position Title

925-685-1239 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8 min	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3.27.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa — District

Financial Aid, DVC — Department/Location

Alfredo Del Cid — Employee Name

Student worker — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/21/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

A & R DVC
Department/Location

Binh Do
Employee Name

Admission and Records Assistant II
Exact Position Title

(925) 685-1230
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District
Financial Aid — Department/Location
Tatianna Elejalde — Employee Name
Financial Aid Assistant I — Exact Position Title
(510) 235-7800 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	18	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	35	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	40		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tatianna Elejalde Date 03.20.06

If you have any questions, please contact (510) 235-7800, at 4427

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College Dist.
District

Financial Aid - Diablo Valley College
Department/Location

Dennis Franco
Employee Name

Financial Aid Asst. II
Exact Position Title

925-685-1230 x2604 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	35 sec.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. Franco Date 3/27/06

If you have any questions, please contact 925-685-1230, at 2604

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

Financial Aid - DVC
Department/Location

Marcia Giovanni
Employee Name

Financial Aid Specialist
Exact Position Title

x 2655
Telephone #

(925) 685-1230

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3-5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1-2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Giovanni Date 3/27/06.

If you have any questions, please contact Marcia Giovanni, at 2655

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD — District
DVC Admissions & Records — Department/Location
Denise Hamilton — Employee Name
Admissions & Records II Assistant — Exact Position Title
925-685-1310 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (99-00) 00-01 (01-02) (02-03) 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			18
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Hamilton Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Financial Aid Office / Diablo Valley College
District / Department/Location

Yusuke Hashizume / Student Worker
Employee Name / Exact Position Title

925-798-2509
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20 sec.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10 sec per sheet	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 mins	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 mins		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7 mins			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yusuke Hashizume Date 22 Mar 06

If you have any questions, please contact 925-207-9715, at Yusuke's cell

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College
District

Financial Aid Office / DVC
Department/Location

Tania Hernandez-Cruz
Employee Name

Financial Aid Assistant I
Exact Position Title

(925)685-1230 X2100
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tania M Hernandez-Cruz Date 03/28/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa CCD
District

DVC Admissions & Records
Department/Location

Kimberly Hughes
Employee Name

Sr Interim Lead Admissions
Exact Position Title

685-1230 x2634
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A-0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A-0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A-0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A-0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Hughes Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Financial Aid / DVC
Department/Location

Michael Keesey
Employee Name

Financial Aid Assistant I
Exact Position Title

(925) 685-1230 ext. 2363
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 min.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-10 min.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7 min.			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael Keesey Date 3/29/06

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCS — District

Financial Aid — Department/Location

[redacted] — Employee Name

Financial Aid Services & Instructional Support Coo — Exact Position Title

x4293 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	35			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [redacted] Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

A&R / DVC
Department/Location

Ruviano Ledesma
Employee Name

Senior Assistant
Exact Position Title

925-685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/29/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District — District
FINANCIAL AID / LMC — Department/Location
LEUNG, CHUNNI — Employee Name
FINANCIAL AID ASSISTANT I — Exact Position Title
439-2181 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) Basic Aid Low Income 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 minutes	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3 minutes	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 minutes	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15 min	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/22/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District
Financial Aid — Department/Location
PABLO MACIAS — Employee Name
Technical expert — Exact Position Title
(Ed) — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	9	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03-20-06

If you have any questions, please contact (510) 236-7800, at x1. 4374

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College District
District

Office of Financial Assistance
Department/Location

Dennis E. Mallillin
Employee Name

Financial Aid Assistant I
Exact Position Title

(925) 439-2181 X3151
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

A & R
Department/Location

Marianne Martinez
Employee Name

Senior Admissions / Records Asst.
Exact Position Title

(925)685-1230 x2129
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Marianne Martinez Date March 28, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. College
District

Financial Aid / DVC
Department/Location

Catherine McClung
Employee Name

Financial Aid Asst. II
Exact Position Title

925/685-1230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	30 sec.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min.	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine McClung Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa County Schools
District

Admissions & Records / DVC
Department/Location

McEwen, Linda
Employee Name

Lead Adm & Recds Assist
Exact Position Title

925 6851230
Telephone #2331

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda McEwen Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community District
District

FAO / Los Medanos College
Department/Location

Eva Monteverde
Employee Name

Financial Aid Specialist
Exact Position Title

(925) 439-2181
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva Monteverde Date Mar. 24, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa
District

Admissions & Records DVC
Department/Location

Stephanie Morgado
Employee Name

Admissions & Record Assistant II
Exact Position Title

925.685-1230
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SMorgado Date 3/28

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A2R
Department/Location

eupenia nelson
Employee Name

Admissions Records II-Substitute
Exact Position Title

(925)685-1230 x2637
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	12	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. waivers	n/a	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature eupenia nelson Date 3/28/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Financial Aid / CCC
Department/Location

Anh Nguyen
Employee Name

FA Asst 1
Exact Position Title

235-7800 x4295
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			X	

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Employee Signature _____ Date 3/21/06

If you have any questions, please contact 235-7800 x 4295, at 4295

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Comm. Coll. Dist. — District

DVC — Department/Location

Sonja Nilsen — Employee Name

Senior A+R Asst. — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sonja Nilsen Date _____

If you have any questions, please contact _____, at _____

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CCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCCD
District

Financial Aid
Department/Location

Barbara Rance
Employee Name

Financial Aid Asst.
Exact Position Title

510-235-7800 ext 4425
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 *Workload Multiplier* (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	11	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	25	X			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	35		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	32			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Rance Date 3-20-06

If you have any questions, please contact Barbara RANCE, at X 4425

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

DVC FINANCIAL AID
Department/Location

JENNIFER RICE
Employee Name

Student Worker
Exact Position Title

925-998-5173
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	7.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3.2	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3.5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jennifer Rice Date 3/23/05

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CCCD
District

FAO / Diablo Valley College
Department/Location

Faidra Rodriguez
Employee Name

Financial Aid Asst. II
Exact Position Title

925-685-1230 x2399
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	50 seconds	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Faidra Rodriguez Date 3-24-06

If you have any questions, please contact 925-685-1230, at 2399

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA CCD
District

DVC FINANCIAL AID
Department/Location

CARLA ROSAS
Employee Name

FINANCIAL AID ASST I
Exact Position Title

925 685-1230 x 2049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa.
District

Financial Aid office Diablo Valley College
Department/Location

Marian Solmeron
Employee Name

Student worker
Exact Position Title

#2290
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓	.		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

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Employee Signature Marian Solmeron Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa College
District

Admissions/DVC
Department/Location

Monica Simmons
Employee Name

Sr. AeR Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			✓	

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Employee Signature Monica Simmons Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

CONTRA COSTA
District

FINANCIAL AID / DVC
Department/Location

JENNIFER THORPE
Employee Name

ADMINISTRATIVE ASST.
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2-3 mins	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			✓	

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Employee Signature _____ Date 3/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Contra Costa Community College — District

FAO/Los Medanos College — Department/Location

L. Felipe Torres Jr. — Employee Name

Director Special Programs & Services — Exact Position Title

(925) 439-2181 x 3240 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/28/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: CCCCD (source: Calif. State Chancellor's Office Data Mart)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	19,896	20,384	20,119	22,205	25,222	19,110	19,304	19,064
Fall	39,549	38,224	38,521	40,475	43,801	39,324	38,059	36,580
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	40,988	37,829	40,549	43,956	40,738	39,419	37,314	~~36,951~~
Total	100,433	96,437	99,189	106,636	109,761	97,853	94,677	~~55,644~~ 92,595
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	92,352	89,202	91,916	98,593	100,475	86,363	81,437	~~40,533~~ 77,484 ?
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	15,111

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Craig A. Lee Date 3/30/06

CRAIG A. LEE (Employee Name: (print))

Director II IT (Position or Title)

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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UNDUPLICATED HEADCOUNT BY CAMPUS PER THE CALIF. STATE CHANCELLOR'S OFFICE DATA MART

	CCC	DVC	LMC	Total	
SU98	3,956	11,468	4,472	19,896	
FA98	8,521	22,094	8,934	39,549	100,433
SPR99	8,625	22,569	9,794	40,988	
SU99	3,440	11,857	5,087	20,384	
FA99	7,798	21,694	8,732	38,224	96,437
SP00	7,871	20,593	9,365	37,829	
SU00	3,773	11,945	4,401	20,119	
FA00	7,921	21,365	9,235	38,521	99,189
SP01	8,787	21,689	10,073	40,549	
SU01	4,238	12,873	5,094	22,205	
FA01	8,449	21,737	10,289	40,475	106,636
SP02	9,755	23,510	10,691	43,956	
SU02	4,913	13,882	6,427	25,222	
FA02	10,117	23,260	10,424	43,801	109,761
SP03	8,797	22,910	9,031	40,738	
SU03	3,490	12,470	3,150	19,110	
FA03	8,210	22,137	8,977	39,324	97,853
SP04	8,557	21,847	9,015	39,419	
SU04	3,818	11,465	4,021	19,304	
FA04	8,048	21,112	8,899	38,059	94,677
SP05	8,099	20,779	8,436	37,314	
SU05	4,088	11,386	3,590	19,064	~~55,644~~ 92,595
FA05	7,380	20,704	8,496	36,580	
SP06	8,197	20,230	8,524	36,951	

Backup for EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer					135	118	139	781
Fall					322	448	608	1628
Winter/Intersession N/A								
Spring					292	272	602	2826
Total					749	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
~~Summer~~ LMC							650	600
~~Fall~~ DVC								2,404
~~Winter/Intersession~~ CCC							525	600
~~Spring~~								
Total							1,175	3604

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925)229-1000 x1229

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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C ge: CCC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer					21	26	41	338
Fall					64	127	232	490
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					78	61	197	840
Total	0	0	0	0	163	214	470	1668
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: All 1.8-2 #1

S ical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer	0	0	0	0	156	118	139	781
Fall	0	0	0	0	322	448	608	1628
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring	0	0	0	0	292	272	602	2826
Total	0	0	0	0	770	838	1349	5235
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

C[illegible]ra Costa Community College District
E[illegible]ollment Fee Workload Statistics Report

College: DVC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer					135	90	96	388
Fall					192	273	307	815
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					161	195	343	1678
Total	0	0	0	0	488	558	746	2881
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

College: LMC

Statistical Data	Fiscal Years							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection								
Summer						2	2	55
Fall					66	48	69	323
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring					53	16	62	308
Total	0	0	0	0	119	66	133	686
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Spring								
Total	0	0	0	0	0	0	0	0

Ducharme, Krista 1.8-2 #2

From: LaMothe, Viviane
Sent: Friday, May 19, 2006 2:55 PM
To: Ducharme, Krista
Cc: Hernandez, Frank
Subject: BOGW REFUNDS

Hi Krista,

To our best knowledge we believe we have processed the following refunds for the years noted. We have no information for other years in question.

2004-2005	525
2005-2006	600

Thanks, Viviane

Ducharme, Krista

From: Giovanni, Marcia
Sent: Friday, May 19, 2006 3:39 PM
To: Ducharme, Krista
Cc: Jerez, Brenda
Subject: REBILL COUNT 05-06

Krista,

Here is the rebill count that I have. I began gathering the data 8/2005 and the numbers inlcude rebills for the 05-06 academic year to date.

2,404

Marcia

Ducharme, Krista

n: Torres, Felipe
Sent: Tuesday, May 16, 2006 1:25 PM
To: Ducharme, Krista
Subject: RE: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim

For 2004-05 LMC process about 650 students for refund due to BOGG eligibility who had previously paid.

For 20054-06 LMC has processed to date about 600 students for refund due to BOGG eligibility who had previously paid.

From: Ducharme, Krista
Sent: Monday, May 15, 2006 5:21 PM
To: Alves, Stephanie; Fincher, Gary; Hernandez, Frank; Torres, Felipe; Jerez, Brenda; LaMothe, Viviane
Subject: Enrollment Fee Collection & BOGG Waiver Mandated Cost Claim
Importance: High

Well, this is the final week to get the claim submitted and I have one more request for you. Have any of your departments collected information regarding the number of student refunds to be processed due to the BOGG waivers? These are students who paid their tuition and subsequently received their waivers. I believe these are the students that A&R would have to run BILL to get the students' accounts to reflect the credit. This is a required statistic for the claim and the information is not accessible on Datatel. The information is needed back to 98-99; however, any available data would be tremendously helpful. If you have any information, I would be very grateful if you could submit it to me by Thursday, May 18. Thanks in advance for your cooperation.

Krista Ducharme
Fisc[illegible] Operations Specialist
(92[illegible]29-1000 x1229

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

EFCW 1.8-3

District: CCCCD (source: Chancellor's Office Data Mart; Datatel Colleague; FA Office staff)

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6 *
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer CCC								4987
Fall DVC					4,357	5,649	6,702	6725
Winter/Intersession LMC	2,383	1,993	2,326	2,558	2,643	3,257	4,680	4539
Spring								
Total								16251
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer CCC	2,886	2,500	2,281	2,588	2,891	3,551	3,434	4982
Fall DVC	3,024	2,920	2,873	3,125	3,869	4,932	5,702	6264
Winter/Intersession LMC	2,171	1,815	2,119	2,330	2,526	3,007	4,104	3818
Spring								
Total	8,081	7,235	7,273	8,043	9,286	11,490	13,240	~~15,444~~ 15064

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Employee Signature: Craig Lee Date 3/30/06

Employee Name: (print) CRAIG A. LEE Position or Title Director of IT

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

* 05-06 Data completed by Krista Ducharme, Fiscal Operations Specialist on 10-30-06 Krista Ducharme

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Ducharme, Krista

From: Smith, Derek
Sent: Wednesday, October 25, 2006 9:52 AM
To: Ducharme, Krista; Torres, Felipe; Jerez, Brenda; Giovanni, Marcia; LaMothe, Viviane
Cc: Lee, Craig
Subject: RE: Enrollment Fee Collection & Waivers Mandated Costs-Additional Info Request

BOGW Numbers:

CCC: Approved: 4,982 Requested: 4,987 (only 5 denied waivers listed in system)
DVC: Approved: 6,264 Requested: 6,725 (237 of the denied waivers had a DST location)
LMC: Approved: 3,818 Requested: 4,539 (53 of the denied waivers had a DST location)

The above "Approved" numbers represent any "BOG"-type award on AIDE, with the designated FA location. The "Requested" values include the "Approved" numbers, plus any "xDBW" awards appropriate to the location (CDBW for CCC, DDBW for DVC, LDBW for LMC).

A total of 365 BOGWs were awarded with a DST location for 2005-06.

--Derek

From: Ducharme, Krista
Sent: Monday, October 23, 2006 2:41 PM
To: Torres, Felipe; Jerez, Brenda; Giovanni, Marcia; LaMothe, Viviane; Smith, Derek
Cc: Lee, Craig
Subject: Enrollment Fee Collection & Waivers Mandated Costs-Additional Info Request
Importance: High

SixTen & Assoc. is requesting that CCCCD provide 2005-06 data by November 2, 2006 on its form EFCW 1.8-3. We had previously provided the information for the prior years. They need to know the # of enrollment fee waivers requested and the # of enrollment fee waivers approved.

Derek, you provided the # of enrollment fee waivers approved for each of the colleges based on the Chancellor's Office's Data Mart. I queried it for '05-'06 and got nothing back. I'm assuming the state doesn't have the info yet. Will you provide the '05-'06 numbers? Also, you provided Felipe with the number of enrollment fee waivers denied as of 3/29/06. Will you provide the '05-'06 denials as of year end?

Viviane, you previously stated that CCC did not track that info, but that it would begin tracking it in '06-'07. We didn't submit prior year data; however, we included your email that CCC estimated that 30% were denied. Do you have any current data that we could use as a basis for '05-'06 or do you want to use the same estimate of 30%?

Marcia/Derek, a report titled BOGB was included as backup to the previous EFCW 1.8-3 provided by IT that lists the students' names and reasons for denial. I'm not sure who prepared that report, but it may need to be run for the '05-'06 numbers.

Please let me know if you have any questions or need additional information. Once again, I need to provide this information to SixTen & Assoc. by **November 2, 2006**. Thanks.

Krista Ducharme
Fiscal Operations Specialist
(925) 229-1000 x 1229

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Contra Costa

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See Attached Spreadsheet

See Attached Spreadsheet - No term data available.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Krista Ducharme Date 5-18-06

Krista Ducharme
Employee Name: (print)

Fiscal Operations Specialist
Position or Title

If you have any questions, please contact Krista Ducharme, at (925) 229-1000 x1229

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer			#11	#11	#11	#11	#18	#26
Fall			#11	#11	#11	#18	#26	#26
Winter/Intersession								
Spring			#11	#11	#11	#18	#26	#26
TOTAL x $0.91 per credit								

Karen: Please provide dollar per unit for these terms. Thx Linda

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

Statistical Data

	FISCAL YEARS							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1. Enrollment Fees Collected	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2. Enrollment Fees Refunded	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
3. Enrollment Fee Revenue (line 1 subtract line 2)	$ 6,926,710.57	$ 5,981,415.15	$ 6,360,339.77	$ 5,587,180.58	$ 7,048,008.28	$ 10,816,351.91	$ 15,544,427.18	$ 16,291,075.15
4A. Total enrollment Fees Waived (BOGG, etc)	$ 1,681,274.00	$ 1,357,125.00	$ 1,249,724.00	$ 1,413,400.00	$ 1,224,520.00	$ 1,488,235.00	$ 3,880,840.00	$ 4,000,307.05
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 33,625.48	$ 27,142.50	$ 24,994.48	$ 28,268.00	$ 24,490.40	$ 29,764.70	$ 77,616.80	$ 80,006.14
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	117,689.18	94,998.75		$ -	$ -	$ -	$ -	$ -
5. Total Number of credit units for which enrollment fees were waived (All Semesters) (Line 4a divided by $ per unit)			113,611.27	128,490.91	111,320.00	94,993.72	166,321.71	153,857.96
Total x .91 per credit			103,386.26	116,926.73	101,301.20	$ 86,444.29	151,352.76	140,010.75

Source: Line #3 from GL reports. Line #4A from state Chancellors website DATA mart.

Fiscal Years 99 - 03 $ per Unit is $11
FY 04-05 $ per Unit is (18 + 26 + 26) / 3 = 23.34
FY 03-04 $ per Unit is (11 + 18 + 18) / 3 = 15.67
FY 05-06 $ per unit is $26

Six[illegible]en and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the salaries for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME CONTRA COSTA COMMUNITY COLLEGE DISTRICT

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE SECRETARY	$ 85.53	$ 37.12
	AVERAGE DEAN		$ 77.43
	AVERAGE DIRECTOR	$ 57.84	$ 75.06
	AVERAGE EXECUTIVE ASSISTANT	$ 89.99	$ 41.90
	AVERAGE HR REP	$ 31.49	$ 36.89
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		$ 96.81
	AVERAGE VICE CHANCELLOR	$ 62.43	
ALATORRE, ART	DIRECTOR OF ENROLLMENT	$ 70.20	$ 73.32
ALVARADO, B.	ADMISSIONS & RECORDS ASSISTANT II		$ 26.50
ALVES, STEPHANIE	LEAD A&R ASSISTANT		$ 35.64
AMES, LINDA	ADMIN ANALYST (Retired 7/1/04)		
ANDERSON, KATHLEEN	SCIENCE LAB TECH II	$ 32.70	$ 33.92
ANDREINI, PHILIP	DEAN (Terminated 9/30/04)	$ 70.20	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
ARMENDAZ, KAY	SENIOR A&R ASSISTANT		$ 33.09
ARMSTRONG, TERRY	DEAN	$ 79.40	$ 80.92
BARATTA, FRANK	DIRECTOR OF DISTRICT RESEARCH	$ 76.00	RETIRED
BARRICK, CAROL	ACADEMIC/STUDENT SVCS PROGRAM MANAGER	$ 55.00	$ 55.88
BECKETT, TOM	VICE CHANCELLOR, FACILITIES & OP (Retired 7/1/04)		
BENJAMIN,HELEN	CHANCELLOR	$ 104.22	$ 121.02
BERNAL, KIMBERLY	SENIOR ACCOUNT CLERK (Retired 6/2/04)		
BETSEKAS, JULIE	SENIOR ACCOUNT CLERK		$ 31.77
BOND, PEARL	ASSISTANT BOOK BUYER	$ 26.85	$ 27.84
BRADFORD, DIANE	SENIOR PAYROLL TECHNICIAN	$ 36.99	$ 39.33
BRADFORD, IRIS	ADMIN ANALYST	$ 44.07	$ 47.16
BUELNA, GYDA	EXECUTIVE ASSISTANT	$ 41.54	$ 42.30
BUGG, ELMER	EXEC. DIRECTOR, REGIONAL TRAINING	$ 81.41	$ 82.96
BURKHOLDER, DEBORAH	A&R ASSISTANT I		$ 12.80
CAFÉ, JENN	H.R. REPRESENATIVE	$ 26.02	$ 35.89
CALLAHAN, LOIS	INTERIM CHANCELLOR	$ 121.00	$ 121.00
CARDENAS, ALMA	SENIOR ACCOUNT CLERK		$ 29.24
CASTRO, KAREN	DISTRICT ACCOUNTING SPECIALIST	$ 33.52	$ 38.37
CATALANO, JULIE	SENIOR ADMIN ASSISTANT	$ 34.36	$ 35.64

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
CERRUTI, LINDA	PRINCIPAL EXECUTIVE COORDINATOR	$ 67.07	$ 70.01
CHANG, HSUI-CHI	FINANCIAL AID ASSISTANT I		$ 24.89
CHERRY, LINDA	SENIOR FOUNDATION DIRECTOR	$ 60.53	$ 64.80
CLOW, TIM	SENIOR DEAN	$ 83.42	$ 85.02
COLEMAN, FARRAH	A&R ASSISTANT II		$ 25.22
CONLEY, JIM	CASHIER OFFICE SUPERVISOR		$ 35.06
CONNELL, CARMEN	FINANCIAL AID ASSISTANT II		$ 29.24
CORNETT, CHRISTINE	EXECUTIVE ASSISTANT	$ 39.53	$ 40.26
COURTNEY, JEAN	EXECUTIVE COORDINATOR (Retired 10/31/04)	$ 62.27	
COUSER, RICHARD	CHIEF OF DISTRICT POLICE (Retired 8/4/03)		
CUTLER, BRUCE	DIRECTOR OF BUSINESS SERVICES	$ 77.49	$ 80.92
DALRYMPLE, BILL	COMPTROLLER/ ASSIST. CHIEF	$ 60.53	$ 68.08
DAVIS, MARGARET	FINANCIAL AID ASSISTANT I		$ 24.89
DELCID, ALFREDO	STUDENT WORKER		$ 12.71
DIMITRI, NICK	ADMIN ANALYST, SENIOR	$ 45.17	$ 48.34
DO, BINH	A&R ASSISTANT II		$ 26.50
DO-FLORENDO, MAI T. DO	SENIOR ACCOUNT CLERK		$ 29.24
DOGAN, OZZIE	CENTRAL SERVICES MANAGER	$ 65.17	$ 66.42
DUCHARME, KRISTA	FISCAL OPERATIONS SPECIALIST	$ 47.36	$ 49.13

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
EDELSTEIN, MARK	COLLEGE PRESIDENT	$ 99.20	$ 103.60
EDWARDS, ALEX	DIRECTOR OF FACILITIES, DO	$ 73.75	$ 75.15
ELEJALDE, TATIANNA	FINANCIAL AID ASSISTANT I		$ 24.89
EYESTONE, JAMES	COMPUTER & NETWORK SERVICES SUPERVISOR	$ 55.04	$ 56.05
FERGUSON, ANNETTE	PRINCIPAL PAYROLL TECHNICIAN	$ 52.40	$ 53.35
FERGUSON, MELISSA (HOOBLER)	HR INFO SYSTEM SPEC	$ 27.94	$ 35.89
FINCHER, GARY	DIRECTOR, ADMISSIONS & RECORDS		$ 61.68
FITZGERALD, ALAN	BUSINESS MANAGER, SATELLITE		53.18
FLAGG, VERONICA (KNOTT)	SENIOR DEAN	$ 79.44	$ 80.92
FLAGGS, JACKIE	ADMIN ANALYST, SR	$ 53.70	$ 56.05
FLOYD, DONNA	DEAN	$ 75.61	$ 78.95
FOX, SUZANNE	ADMIN ASSISTANT	$ 35.80	$ 36.47
FRANCO, DENNIS	FINANCIAL AID ASSISTANT II		$ 27.47
FRANK, DAN	SR HR REP (Resigned 10/31/03)		
FRENCH, CAROLE	SENIOR A&R ASSISTANT		$ 29.24
FUENTES, ERNESTO	DIRECTOR, HR (Terminated 6/30/04)		
GARCIA, PETER	PRESIDENT	$ 106.79	$ 111.57
GARZA, REGINA	SENIOR ACCOUNT CLERK		$ 27.47
GIDEON, GLORIA	DEAN-LIBRARIAN 9/30/04	$ 70.20	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
GILLILAND, PHYLLIS	VC, PLANNING & RESOURCES DEVELOPMENT	$ 85.53	$ 87.16
GIOVANNI, MARCIA	FINANCIAL AID SPECIALIST		$ 31.50
GONZALES-LEWIS, ANDREA	PRINCIPAL/HR REPRESENTATIVE	$ 63.83	$ 65.01
GONZALEZ, GUSTAVO	CAMPUS FACILITIES ASSISTANT	$ 28.20	$ 29.24
GRACE, GUY	BUILDINGS & GROUNDS MANAGER		$ 68.08
GREEN, BERNADETTE	COMPUTER TECH III	$ 37.92	$ 39.33
GROENIER, MARC	BUDGET COORDINATOR		51.61
GURSKY, MARY	SENIOR ACCOUNT CLERK		RETIRED
HAMILTON, DENISE	A&R II		$ 26.50
HANSON, MELODY	SR EXECUTIVE ASSISTANT	$ 47.00	$ 47.86
HASHIUME, YUSUKE	STUDENT WORKER		$ 12.71
HAWKINS, PAMELA	SENIOR DEAN (ended 6/30/04, Faculty 7/1/04)		
HEALY, MARY	SECRETARY to the DEAN	$ 31.90	$ 33.09
HENDRICKSON, JOHN	VICE CHANCELLOR - FINANCE & ADMIN (Retired 3/30/04)		
HENRY, DAN	VICE PRESIDENT	$ 94.44	$ 96.21
HENSON, DONALD	SENIOR EQUIPMENT MAINT WORKER (Retired 11/30/04)	$ 41.86	
HERNANDEZ, FRANK	Dean, Student Services	$ 83.42	$ 85.02
HERNANDEZ-CRUZ, TANIA	FINANCIAL AID ASSISTANT I		$ 24.01
HERRERA, LORNA	SENIOR A&R ASSISTANT		$ 29.24

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
HERSTEIN, MARGARET	SENIOR A&R ASSISTANT		
HOLMAN, DEAN	BOOKSTORE SUPERVISOR	$ 29.68	$ 31.00
HOLMAN, SANDRA	SENIOR DEAN	$ 85.53	$ 87.16
HOPKINS, KEVIN	CUSTODIAN II	$ 25.56	$ 26.50
HOTTON, NATALIE	CUSTOMER SERVICES CLERK		$ 22.55
HUFF, GENE	ACTING VICE CHANCELLOR HR & ORG	$ 70.20	$ 75.15
HUGHES, KIMBERLY	INTERIM LEAD ADMISSIONS		$ 23.39
ITZKO, CHARLIE	ADVANCED TECHNICAL EXPERT/PAYROLL	$ 23.55	$ 24.00
JACKSON, SHAWN	STUDENT SVCS & INSTR SUPPORT (Term. 4/2/04)	$ 31.07	
JEREZ, BRENDA	DIRECTOR, FINANCIAL AID		$ 61.68
JOHNS, KRISTA	DEAN	$ 70.20	$ 71.53
JONES, DARLENE	SENIOR OFFICE ASSISTANT (Retired 9/30/04)	$ 30.31	
JONES, MARK	STOREKEEPER	$ 34.30	$ 33.09
KAYA, PAT	EXECUTIVE ASSISTANT	$ 40.52	$ 41.27
KEESEY, MICHAEL	FINANCIAL AID ASSISTANT I		$ 24.89
KILLINGS, DENISE	EXECUTIVE ASSISTANT	$ 41.54	$ 42.30
KINGSTON, JEFF	V.C. FACILITIES AND OPERATIONS	$ 87.98	$ 87.16
KOHLER, LINDA	ACCOUNTANT I	$ 36.09	$ 38.37
LAMB, SUSAN	DEAN	$ 77.49	$ 80.96

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
LaMOTHE, VIVIAN	STUDENT SERVICE & INSTRUCTIONAL COORDINATOR		$ 39.33
LAWRENCE, DAN	CHIEF OF POLICE	$ 67.02	$ 60.17
LEADON, PRICILLA	DEAN	$ 70.20	$ 75.15
LEDESMA, TRINIDAD	SENIOR A&R ASSISTANT		$ 27.84
LEE, CRAIG	DIRECTOR, INFORMATION TECHNOLOGY		$ 71.53
LEE, PAUL	POLICE SERVICE LIEUTENANT	$ 60.53	RETIRED
LEIVAS, CHRIS	DIRECTOR OF BUSINESS SERVICES	$ 79.40	$ 80.92
LEUNG, CHUNNI	FINANCIAL AID ASSISTANT I		$ 24.89
LEVER, SOPHIA	PRINCIPAL HR REP	$ 63.83	$ 65.01
LITTMAN, LES	DIRECTOR OF PURCHASING	$ 63.60	$ 68.08
LIVINGSTON, RICHARD	SR DEAN	$ 85.53	$ 87.16
LONG, MARY	SENIOR ADMIN SECRETARY	$ 30.37	$ 31.50
LUCERO, PABLO	TECHNICAL EXPERT		$ 17.99
MAGA, CAROL	SENIOR DEAN	$ 83.42	$ 89.33
MAGALONG, MARILES	DIRECTOR OF BUSINESS SERVICES	$ 79.40	$ 80.92
MAGNAGHI, MARY ANNE	EXECUTIVE ASSISTANT	$ 42.58	$ 43.36
MALLILLIN, DENNIS	FINANCIAL AID ASSISTANT I		$ 24.89
MARTINEZ, MARIANNE	SENIOR A&R ASSISTANT		$ 31.50
MARVEL, GREG	VICE CHANCELLOR, HR & ORG DEV. (term. 3/31/04)		

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
MATHEWS, MICHEL	DEAN	$ 81.41	RETIRED
McCLUNG, TINA CATHERINE	FINANCIAL AID ASSISTANT II		$ 27.84
McCRAY, SANDI	PRINCIPAL HUMAN RESOURCES REP	$ 74.03	$ 75.39
McDONALD, BILL	BOOK STORE MANAGER, COLLEGE (Retired 3/31/05)	$ 59.04	
MCDONALD, DIANA	DEAN	$ 77.49	
MCEWEN, LINDA	LEAD ADMISSIONS/RECORDS - A/R ASST	$ 31.90	$ 33.09
McLEAN, SHAREN	ADMIN ASSISTANT	$ 36.09	$ 38.37
MEDOVOY, GEORGE	DIRECTOR OF COMMUNITY RELATIONS	$ 57.61	$ 60.17
MEHDIZADEH, MOJDEH	VC, TECH SYS/SUPPORT	$ 92.13	$ 93.86
MONTEVERDE, EVA	FINANCIAL AID SPECIALIST		$ 34.77
MOORE, JEANETTE	DEAN (Retired 4/10/04)	$ 87.53	
MORGADO, JOE	LEAD GARDENER	$ 43.42	$ 39.33
MORGADO, STEPHANIE	A&R ASSISTANT II		$ 24.89
MORRISON, AKIBA	ADMINISTRATIVE SECRETARY	$ 30.37	RETIRED
MURRILO, CARLOS	DEAN	$ 70.20	$ 71.53
NELSON-JONES, EUGENIA	A&R II		$ 13.83
NEWMAN, GAIL	DIRECTOR OF ADMISSIONS & RECORDS	$ 75.58	$ 77.03
NGUYEN, AHN	FINANCIAL AID ASSISTANT I		$ 14.09
NIELSEN, SONJA	SENIOR A&R ASSISTANT		$ 29.24

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
OSWALD, EDWARD	COMPUTER & NETWORK SPECIALIST	$ 45.08	$ 46.75
OUNJIAN-AUQUE, JENNIFER	ADMIN ANALYST	$ 45.17	$ 50.78
PANIAGUA-BUDD, DANA	LEAD A&R ASSISTANT		$ 37.44
PEROTTA, CAM	BUILDINGS & GROUNDS MANAGER	$ 66.82	$ 68.08
PITT, TINA	DEAN (Terminated 6/30/04)		
POE, DARLENE	CUSTODIAL MANAGER	$ 49.67	$ 53.18
PULOS-FULK, GEORGETTE	SECRETARY to the DEAN (Retired 8/31/04)	$ 36.09	
PURDY, SUSIE	SENIOR A&R ASSISTANT		$ 29.24
QUINN, SAMUEL	GROUNDS WORKER/GARDENER II	$ 30.37	$ 31.49
RANCE, BARBARA	FINANCIAL AID ASSISTANT		$ 26.50
RANDLE, MARLENE	SENIOR ACCOUNT CLERK		$ 27.47
RAWLINSON II, WILLIAM REED	SENIOR HR REP	$ 47.00	$ 47.86
RIEL, JENNIFER	STUDENT WORKER		$ 12.71
ROBERTS, DOUG	VICE CHANCELLOR, FINANCE & ADMIN	$ 79.44	$ 85.02
ROBERTSON, LEETHA	SENIOR ACCOUNT CLERK		$ 22.55
RODRIGUEZ, FAIDRA	FINANCIAL AID ASSISTANT II		$ 29.24
RODRIGUEZ, GILBERT	DEAN	$ 81.41	$ 82.96
ROSALES, LINDA	DIRECTOR OF PAYROLL SERVICES	$ 73.75	$ 75.15
ROSAS, CARLA	FINANCIAL AID ASSISTANT I		$ 24.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
RUBALCAVA, GUADALUPE	LEAD CUSTODIAN	$ 24.93	$ 27.84
SAEYANG, MOUANG	A&R ASSISTANT I		$ 22.55
SALMERON, MARIAN	STUDENT WORKER		$ 7.37
SCHWABE, ANN (STARKIE)	SENIOR ACCOUNT CLERK	$ 29.63	$ 33.92
SCHWIED, LYNDA (LAWRENCE)	SENIOR DEAN	$ 83.42	$ 85.02
SCOTT-SUMMERS, DIANE	VICE PRESIDENT	$ 94.44	$ 96.21
SEABERRY, BEN	EX. DEAN OF INFO TECHNOLOGIES & SERVICES	$ 77.49	$ 78.96
SHAFFER, JACK	SENIOR ADMIN ANALYST	$ 52.39	$ 54.68
SHELL, STACY	HUMAN RESOURSES REPRESENTATIVE	$ 33.03	$ 33.47
SHELTON, JEANETTE	SENIOR ACCOUNT CLERK		RETIRED
SHIMADA, JUANITA	HR REPRESENTATIVE	$ 40.52	$ 42.30
SHOAFF, TERRY	VICE PRESIDENT	$ 94.44	$ 96.21
SIMMONS, MONICA	SENIOR A&R ASSISTANT		$ 27.84
SIMPSON, TERRY	PROGRAM DIRECTOR		$ 69.90
SKEEN, ESTHER	ACTING CHIEF	$ 62.05	$ 66.43
SMITH, DENNIS	DEAN		71.53
SMITH, DEREK	SR. APPLICATIONS SUPPORT ANALYST		$ 47.92
SMITH, THOMAS	VICE CHANCELLOR, FINANCE & ADMIN (Term. 11/30/04)	$ 81.41	
SPENCE, CHUCK	CHANCELLOR	$ 147.01	$ 147.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
STANTON, KENNETH	MEDIA SERVICES SPECIALIST II	$ 32.70	$ 33.92
STARKIE, ANN	SENIOR ADMINISTRATIVE ASSISTANT	$ 35.80	$ 27.47
STARKIE, ANN	LEAD ACCOUNT CLERK		$ 33.92
STEPHENSON, JAMES	MEDIA SERVICES SPECIALIST II	$ 31.13	$ 32.28
STRANGFELD, KEN	CHIEF ACCOUNTANT (Terminated 9/30/04)	$ 61.94	
TAYLOR, JIM	BUILDINGS & GROUNDS MANAGER	$ 65.17	$ 66.42
THORPE, JENNIFER	ADMINISTRATIVE ASSISTANT		$ 29.57
THREET, DON	PARKING SERVICES OFFICER	$ 23.73	$ 24.61
TORRES, LUIS FELIPE	DIRECTOR, SP. PROG SERVICES	$ 77.49	$ 78.96
TRAN-COLVIN, PHUNG	ADMIN ANALYST (Terminated 10/1/03)		
VALENZUELA, EILEEN	PRINCIPAL ADMIN ANALYST	$ 67.06	$ 70.01
VROMAN, JUDITH	MANAGER, AUDIT SERVICES		$ 57.27
WADE, JOHN	SENIOR ACADEMIC/STUDENT SVCS MANAGER	$ 60.53	$ 61.68
WALKER, ADRIANNE	PRINCIPAL ACCT	$ 49.87	$ 50.79
WALSH, JANIS	BOOKSTORE MANAGER	$ 60.53	$ 61.68
WALTON-WOODSON, CATHERINE	COUNSELING OFFICE SUPERVISOR	$ 35.28	$ 35.95
WATKINS, RANDY	SR DEAN (FACULTY 6/30/04)		
WATSON, MARVIN	LEAD MAINTENANCE MECHANIC	$ 44.99	$ 43.41
WEST, MIKE	REPROGRAPHICS PROD COORD	$ 32.70	$ 33.92

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
WEST, SHONDRA	SENIOR A&R ASSISTANT		$ 29.24
WHITE, ROBBIE	ADMIN SECRETARY (Terminated)	$ 27.52	
WIEDEN, TED	SPECIAL ASSISTANT TO CHANCELLOR		71.53
WILLIAMS, MARK	COMPUTER CENTER COORDINATOR	$ 37.92	$ 41.33
WILLIAMS, MCKINLEY	VICE PRESIDENT	$ 89.86	$ 98.61
WILLIAMS, PENNY	ADMIN. SECRETARY	$ 29.63	
WOOD, ROSEMARY	ADMINISTRATIVE ASSISTANT	$ 32.70	$ 36.53
WRIGHT, EDDIE	CUSTODIAN II	$ 23.73	$ 24.61
ZABETIAN, SIMI	SENIOR AR ASSISTANT	$ 28.20	$ 29.24
ZERCK, KAY	LEAD ACCOUNT CLERK	$ 33.52	RETIRED

Software System Costs

Ducharme, Krista

From: Lee, Craig
Sent: Thursday, May 04, 2006 3:31 PM
To: Ducharme, Krista
Cc: Mehdizadeh, Mojdeh
Subject: EFCW AR/CR document
Attachments: Datatel ESSA.pdf

Krista:

Attached is a pdf file with a copy of our Datatel Enhancement and Support Services Agreement (ESSA) for 2005/06. Page #1 lists the various products and corresponding annual fee. The fourth item is "California Student System Maintenance....$39,475". This module contains nine major functions, including the Accounts Receivable/Cash Receipts functionality.

Therefore, our estimate is 1/9th of $39,475 = $4,386. The total invoice has increased from 6% to 17% each year.

I hope this helps. Let me know if you have any questions or need additional information.

--Craig
x1237

Schedule 5
Contra Costa Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 5,981,415	$ 6,360,340	$ 5,587,181	$ 7,048,008	$ 10,816,352	$ 15,544,427	$ 16,291,075
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 119,628	$ 127,207	$ 111,744	$ 140,960	$ 216,327	$ 310,889	$ 325,822
1.8-4 line 4A	Enrollment Fees Waived	$ 1,357,125	$ 1,249,724	$ 1,413,400	$ 1,224,520	$ 1,488,235	$ 3,880,840	$ 4,000,307
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617	$ 80,006
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 94,999	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		113,611	128,490	111,320	94,973	166,274	153,858
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309	$ 140,011
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 27,143	$ 24,994	$ 28,268	$ 24,490	$ 29,765	$ 77,617	$ 80,006
(Line 4A X 7%)	7% of Fees Waived (99-00 on	$ 94,999						
1.8-4 5.	Credit Units Waived		$ 103,386	$ 116,926	$ 101,301	$ 86,425	$ 151,309	$ 140,011
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 122,142**	**$ 128,380**	**$ 145,194**	**$ 125,791**	**$ 116,190**	**$ 228,926**	**$ 220,017**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 2003-04 fees are $15.67: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 2004-2005 fees are $23.34: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Contra Costa
COUNTY: Contra Costa

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$44,137,094	$40,899,487	$-284,682	$40,614,805
EQUALIZATION	1,166,006	1,072,724	93,282	1,166,006
ENROLL FEE ADMIN (2%)	46,303	42,598	3,705	46,303
APPRENTICE ALLOWANCE	348,608	318,457	30,151	348,608
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	879,101	808,773	70,328	879,101
S.F.A.A.	964,476	884,095	80,381	964,476
E.O.P.S.	2,493,162	2,285,198	207,964	2,493,162
C.A.R.E.	401,336	367,356	33,980	401,336
D.S.P.S.	2,367,040	2,177,676	189,364	2,367,040
STATE HOSPITALS	0	0	0	0
CALWORKS	649,252	578,451	70,801	649,252
MATRICULATION (CREDIT)	1,255,347	1,150,780	104,567	1,255,347
MATRIC. (NONCREDIT)	22,861	21,032	1,829	22,861
FAC.& STAFF DIVERSITY	28,173	23,819	4,354	28,173
PART-TIME FAC. INS.	75,370	0	75,370	75,370
PART-TIME FAC. OFF. HRS	133,497	0	133,497	133,497
PART-TIME FAC. ALLO.	1,458,983	1,342,265	116,718	1,458,983
TELECOMMUNICATIONS	172,631	101,283	71,348	172,631
PLANT & INSTRUCTIONAL	621,754	572,013	49,741	621,754
ECON. DEVELOPMENT	652,500	548,100	0	548,100
TANF	154,807	132,212	22,595	154,807
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	112,875	47,407	47,408	94,815
VTEA TITLE I C	396,243	464,405	-131,561	332,844
NURSING CARE	358,767	0	358,767	358,767
PRIOR YEAR CORRECTION	-893,067	-891,510	-1,557	-893,067
TOTAL	$58,003,119	$52,946,621	$1,348,350	$54,294,971

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Contra Costa College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:25:40

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	111	26,032
BOGW - Part A-2 based on SSI recipient status	149	33,099
BOGW - Part A-3 based on general assistance recipient status	13	2,085
BOGW - Part B based on income standards	1,659	499,969
BOGW - Part C based on financial need	1,952	748,823

Total Amount = $ 1,310,008

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California Home Tuesday, May 15, 2012

Student Financial Aid Awards

Diablo Valley College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:46:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	72	21,776
BOGW - Part A-2 based on SSI recipient status	197	44,977
BOGW - Part A-3 based on general assistance recipient status	24	5,991
BOGW - Part B based on income standards	2,936	961,386
BOGW - Part C based on financial need	1,855	742,833

Total Amount = $ 1,776,963

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California Home

Tuesday, May 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Los Medanos College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 15, 2012 11:46:26

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	114	35,576
BOGW - Part A-2 based on SSI recipient status	82	19,243
BOGW - Part A-3 based on general assistance recipient status	10	2,457
BOGW - Part B based on income standards	2,101	631,902
BOGW - Part C based on financial need	825	311,941

Total Amount = $ 1,001,119

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for El Camino Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

BEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 818,500	(13) $ 744,120
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 744,120
Due from State	(08) $ 818,500	(17) $ 744,120
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	518
(23) EFCW-1, (04)(A)(1)(b)(f)	5,111
(24) EFCW-1, (04)(A)(2)(a)(f)	539,004
(25) EFCW-1, (04)(B)(1)(a)(f)	320
(26) EFCW-1, (04)(B)(1)(b)(f)	6,166
(27) EFCW-1, (04)(B)(2)(a)(f)	49,143
(28) EFCW-1, (04)(B)(2)(b)(f)	108,432
(29) EFCW-1, (04)(B)(2)(c)(f)	9,857
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	253,073
(32) EFCW-1, (09)	53,586
(33) EFCW-1, (10)	173,918
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 6-26-06

Pamela Fees
Type or Print Name

Business Manager
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant: El Camino Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs (04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
	Object Accounts					
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 517.87	$ -	$ -	$ -	$ -	$ 517.87
b. Staff training (One time per employee)	$ 5,110.50	$ -	$ -	$ -	$ -	$ 5,110.50
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 539,004.43	$ -	$ -	$ -	$ -	$ 539,004.43
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 320.45	$ -	$ -	$ -	$ -	$ 320.45
b. Staff training (One time per employee)	$ 6,165.51	$ -	$ -	$ -	$ -	$ 6,165.51
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 49,142.90	$ -	$ -	$ -	$ -	$ 49,142.90
b. Waiving student fees	$ 108,431.55	$ -	$ -	$ -	$ -	$ 108,431.55
c. Reporting BOG fee waiver data to CCC	$ 9,857.13	$ -	$ -	$ -	$ -	$ 9,857.13
05) Total Direct Costs	$ 718,550.34	$ -	$ -	$ -	$ -	$ 718,550.34

ndirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.22%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 253,073.43
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 971,623.77
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 53,586.00
0) Less: Enrollment Fee Waiver offsets		$ 173,917.54
1) To...laimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 744,120.23

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Ifill, Miriam — Account Technician II	$35.82	3.8	$ 136.12				
Marshall, Nina — Account Assistant III	$32.34	3.8	$ 122.89				
Smith, Luukia — Account Technician	$34.06	3.8	$ 129.43				
Tran, Hong — Account Technician	$34.06	3.8	$ 129.43				
(05) Total [X] Subtotal [ ]	Page 1 of 1		$ 517.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Ifill, Miriam	Account Technician II	$35.82	37.5	$ 1,343.25				
Marshall, Nina	Account Assistant III	$32.34	37.5	$ 1,212.75				
Smith, Luukia	Account Technician	$34.06	37.5	$ 1,277.25				
Tran, Hong	Account Technician	$34.06	37.5	$ 1,277.25				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,110.50	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ramino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Account Technicians Various	$34.07	3,739.8	$ 127,414.99				
Calculating total enrollment fee to be collected Account Technicians Various	$34.07	4,367.2	$ 148,790.50				
Answering student's questions regarding enrollment fee collection Account Technicians Various	$34.07	3,902.6	$ 132,961.58				
Updating written and computer records for enrollment fee information Account Technicians Various	$34.07	1,951.3	$ 66,480.79				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Account Technicians Various	$34.07	1,859.6	$ 63,356.57				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 539,004.43	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Cooper, Hortense — Director, Financial Aid	$67.41	1.0	$ 67.41				
Robbins, Taylor — Assistant Director, Financial Aid	$59.88	3.0	$ 179.64				
Zane, Jean — Financial Aid Advisor	$36.70	2.0	$ 73.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 320.45	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Cooper, Hortense	Director, Financial Aid	$67.41	1.0	$ 67.41				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	100.0	$ 5,988.00				
Zane, Jean	Financial Aid Advisor	$36.70	3.0	$ 110.10				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,165.51	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cooper, Hortense	Director, Financial Aid	$67.41	10.0	$ 674.10				
Nguyen, Hoang-Linh	Para-Professional	$10.00	884.0	$ 8,840.00				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	500.0	$ 29,940.00				
Zane, Jean	Financial Aid Advisor	$36.70	264.0	$ 9,688.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 49,142.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Assistants Various	$27.49	956.2	$ 26,285.94				
Receiving waiver applications Financial Aid Assistants Various	$27.49	1,092.8	$ 30,041.07				
Evaluating waiver applications and verifying application documents Financial Aid Assistants Various	$27.49	853.8	$ 23,470.96				
Entering approved application information into district records; providing student award letter Financial Aid Assistants Various	$27.49	1,041.6	$ 28,633.58				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 108,431.55	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cooper, Hortense	Director, Financial Aid	$67.41	5.0	$ 337.05				
Detwiler, Linda	Support Technician	$36.70	90.0	$ 3,303.00				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	1.0	$ 59.88				
Tran, Hiep	Programmer Analyst	$48.70	36.0	$ 1,753.20				
Zane, Jean	Financial Aid Advisor	$36.70	120.0	$ 4,404.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 9,857.13	$ -	$ -	$ -	$ -

El Camino Community College District
308/95 ENROLLME[illegible]EE COLLECTIONS/WAIVERS
[illegible]04-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3,739.80	Account Technicians	Various	$34.07	$127,414.99	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	4,367.20	Account Technicians	Various	$34.07	$148,790.50	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,902.60	Account Technicians	Various	$34.07	$132,961.58	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	1,951.30	Account Technicians	Various	$34.07	$66,480.79	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	1,859.60	Account Technicians	Various	$34.07	$63,356.57	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,820.50	**Account Technicians Total**			$539,004.43		
04-05	1.00	Cooper, Hortense	Director, Financial Aid	$67.41	$67.41	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	1.00	Cooper, Hortense	Director, Financial Aid	$67.41	$67.41	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	10.00	Cooper, Hortense	Director, Financial Aid	$67.41	$674.10	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
04-05	5.00	Cooper, Hortense	Director, Financial Aid	$67.41	$337.05	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	17.00	**Cooper, Hortense Total**			$1,145.97		
04-05	90.00	Detwiler, Linda	Support Technician	$36.70	$3,303.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	90.00	**Detwiler, Linda Total**			$3,303.00		
04-05	956.20	Financial Aid Assistants	Various	$27.49	$26,285.94	Answering student's questions regarding enrollment fee waivers/referring to appropriate persor	Waiving student fees
04-05	1,092.80	Financial Aid Assistants	Various	$27.49	$30,041.07	Receiving waiver applications	Waiving student fees
04-05	853.80	Financial Aid Assistants	Various	$27.49	$23,470.96	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,041.60	Financial Aid Assistants	Various	$27.49	$28,633.58	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,944.40	**Financial Aid Assistants Total**			$108,431.55		
04-05	3.80	Ifill, Miriam	Account Technician II	$35.82	$136.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Ifill, Miriam	Account Technician II	$35.82	$1,343.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Ifill, Miriam Total**			$1,479.37		
04-05	3.80	Marshall, Nina	Account Assistant III	$32.34	$122.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Marshall, Nina	Account Assistant III	$32.34	$1,212.75	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Marshall, Nina Total**			$1,335.64		
04-05	884.00	Nguyen, Hoang-Linh	Para-Professional	$10.00	$8,840.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	884.00	**Nguyen, Hoang-Linh Total**			$8,840.00		
04-05	3.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$179.64	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	100.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$5,988.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	500.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$29,940.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining [illegible]rds
04-05	1.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$59.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	604.00	**Robbins, Taylor Total**			$36,167.52		
04-05	3.80	Smith, Luukia	Account Technician	$34.06	$129.43	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Smith, Luukia	Account Technician	$34.06	$1,277.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Smith, Luukia Total**			$1,406.68		
04-05	36.00	Tran, Hiep	Programmer Analyst	$48.70	$1,753.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	36.00	**Tran, Hiep Total**			$1,753.20		
04-05	3.80	Tran, Hong	Account Technician	$34.06	$129.43	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Tran, Hong	Account Technician	$34.06	$1,277.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Tran, Hong Total**			$1,406.68		

El Camino Community College District

308/95 ENROLLM FEE COLLECTIONS/WAIVERS

2004-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	2.00	Zane, Jean	Financial Aid Advisor	$36.70	$73.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Zane, Jean	Financial Aid Advisor	$36.70	$110.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	264.00	Zane, Jean	Financial Aid Advisor	$36.70	$9,688.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
04-05	120.00	Zane, Jean	Financial Aid Advisor	$36.70	$4,404.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	389.00	**Zane, Jean Total**			$14,276.30		
	21,950.10	**Grand Total**			$718,550.34		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$43,014,696		$43,014,696	$215,256	$42,799,440
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,615,641		5,615,641	514,679	5,100,962
Course and Curriculum Development	6020	502,124		502,124	5,710	496,414
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	622,698		622,698		622,698
Library	6120	1,588,980		1,588,980	118,375	1,470,605
Media	6130	417,520		417,520	26,762	390,758
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	426,808		426,808		426,808
Other Instructional Support Services	6190					
Admissions and Records	6200	2,649,346		2,649,346	173	2,649,173
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,910,486		2,910,486	5,052	2,905,434
Matriculation and Student Assessment	6320	261		261		261
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390	68,890		68,890	2,439	66,451
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,332,203		1,332,203	12,711	1,319,492
Subtotal		$59,149,653	$0	$59,149,653	$901,157	$58,248,496

Revised 9/04

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,091,615	[illegible]	$1,008,491		$1,008,491
Health Services	6440	416,306		416,306		416,306
Student Personnel Admin.	6450	610,457		610,457		610,457
Financial Aid Administration	6460	2,057,922		2,057,922	62,218	1,995,704
Job Placement Services	6470	370,600		370,600		370,600
Veterans Services	6480	120,908		120,908		120,908
Miscellaneous Student Services	6490	637,949		637,949	3,672	634,277
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,798,253		2,798,253	2,798,253	0
Custodial Services	6530	2,570,936		2,570,936	2,570,936	0
Grounds Maintenance and Repairs	6550	635,412		635,412	635,412	0
Utilities	6570	2,688,124		2,688,124	2,688,124	0
Other	6590	407,618		407,618	407,618	0
Planning, Policy Making, and Coordination	6600	3,341,746		3,341,746	3,341,746	0
General Inst. Support Services	6700					
Community Relations	6710	590,504		590,504	590,504	0
Fiscal Operations	6720	1,765,969		1,765,969	1,765,969	0
Human Resources Management	6730	792,429		792,429	792,429	0
Noninstructional Staff Benefits & Incentives	6740	128,772		128,772	128,772	0
Staff Development	6750	206,384		206,384	206,384	0
Staff Diversity	6760	141,600		141,600	141,600	0
Logistical Services	6770	4,957,828		4,957,828	4,957,828	0
Management Information Systems	6780	1,743,630		1,743,630	1,743,630	0
Subtotal		$87,224,615	$83,124	$87,141,491	$23,736,252	$63,405,239

Revised 9/04

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	304,604		304,604	304,604	0
Community Services and Economic Development	6800					
Community Recreation	6810	871,276		871,276		871,276
Community Service Classes	6820	367,607		367,607	1,556	366,051
Community Use of Facilities	6830	78,791		78,791	2,496	76,295
Economic Development	6840	576,802		576,802	37,531	539,271
Other Community Services & Economic Development	6890	134,818		134,818	809	134,009
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	56,363		56,363	15,238	41,125
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,220,936		1,220,936	59,360	1,161,576
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	667,667		667,667	46,503	621,164
Other Auxiliary Operations	7090	1,666,569		1,666,569	43,061	1,623,508
Physical Property Acquisitions	7100					
(05) Total		$93,170,048	$83,124	$93,086,924	$24,247,410	$68,839,514
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.22%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
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For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS Instructional* (1)	SALARIES and BENEFITS Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Agriculture and Natural Resources	0100	59,071		915			59,986
Architecture and Environmental Design	0200	299,317		3,902			303,219
Biological Sciences	0400	1,518,406	10,774	41,067			1,570,247
Business and Management	0500	1,494,590	15,858	4,418	1,321		1,516,187
Communications	0600	291,805	39,368		36,458		367,631
Computer and Information Science	0700	1,229,566	99,691	63,916	32,034		1,425,207
Education	0800	2,868,337	334,655	58,642	41,194		3,302,828
Engineering and Related Industrial Tech.	0900	2,632,049	230,994	239,100	55,960		3,158,103
Fine and Applied Arts	1000	4,269,800	449,343	406,706	11,600		5,137,449
Foreign Language	1100	1,398,592		2,327			1,400,919
Health	1200	2,430,801	181,352	34,811	85		2,647,049
Consumer Education and Home Economics	1300	587,918	132,259	69,380	14,388		803,945
Law	1400	327,953	18,402	3,005			349,360
Humanities (Letters)	1500	5,680,706	146,170	12,672			5,839,548
Library Science	1600						
Mathematics	1700	4,530,412	110,315	6,485			4,647,212
Military Studies	1800						
Physical Sciences	1900	2,488,212	6,337	54,183	689		2,549,421
Psychology	2000	607,747		395			608,142
Public Affairs and Services	2100	1,088,969	156,214	53,250	14,941		1,313,374
Social Sciences	2200	2,284,571		3,299			2,287,870
Commercial Services	3000	415,867	1,472	16,442			433,781
Interdisciplinary Studies	4900	2,956,254	192,861	28,850	6,586		3,184,551
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	108,667					108,667
Subtotal - Instructional Activities	**599**	39,569,610	2,126,065	1,103,765	215,256		43,014,696

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

El Camino Community College District 720 District Code No.

CCFS-311 *(Rev. 8/2001, er)*
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CALIFORNIA COMMUNITY COLLEGES
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SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,754,588	346,374	514,679		5,615,641
Course and Curriculum Development	6020		418,368	78,046	5,710		502,124
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,172,956	424,420	520,389		6,117,765
Instructional Support Services (6100)							
Learning Center	6110		502,388	120,310			622,698
Library	6120		1,323,546	147,060	118,375		1,588,980
Media	6130		374,995	15,763	26,762		417,520
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		426,808				426,808
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		2,627,736	283,133	145,137		3,056,006
Admissions and Records	**6200**		2,159,395	489,778	173		2,649,346
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,839,169	66,265	5,052		2,910,486
Matriculation and Student Assessment	6320			261			261
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390		55,118	11,333	2,439		68,890
Subtotal - Student Counseling and Guidance	**6300**		2,894,287	77,859	7,491		2,979,637

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CCFS-311 *(Rev. 6/2001, er)*
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El Camino Community College District | 720 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,243,770	75,722	12,711		1,332,203
Extended Opportunity Prgms. & Services (EOPS)	6430		958,518	49,973		[redacted]	1,091,815
Health Services	6440		403,100	13,206			416,306
Student Personnel Administration	6450		569,432	41,025			610,457
Financial Aid Administration	6460		1,956,262	37,442	62,218		2,057,922
Job Placement Services	6470		362,231	8,369			370,600
Veterans Services	6480			120,908			120,908
Miscellaneous Student Services	6490		634,277		3,672		637,949
Subtotal - Other Student Services	**6400**		6,129,590	346,645	78,601	83,124	6,637,960
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,356,521	426,328	15,404		2,798,253
Custodial Services	6530		2,460,231	110,705			2,570,936
Grounds Maintenance and Repairs	6550		558,916	70,119	6,377		635,412
Utilities	6570			2,668,124			2,668,124
Other Operation and Maintenance of Plant	6590		194,342	213,276			407,618
Subtotal - Operation and Maintenance of Plant	**6500**		5,570,010	3,508,552	21,781		9,100,343
Planning, Policymaking, and Coordination	**6600**		2,508,620	825,112	8,014		3,341,746

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		322,775	267,729			590,504
Fiscal Operations	6720		1,541,458	224,333	178		1,765,969
Human Resources Management	6730		692,298	98,648	1,483		792,429
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		128,772				128,772
Staff Development	6750		172,988	33,396			206,384
Staff Diversity	6760		122,550	19,970	(920)		141,600
Logistical Services	6770		3,718,453	1,231,914	7,461		4,957,828
Management Information Systems	6780		1,511,716	231,914			1,743,630
Other General Institutional Support Services	6790		3,360	300,758	486		304,604
Subtotal - General Institutional Support Services	6700		8,214,370	2,408,662	8,688		10,631,720
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		191,835	679,441			871,276
Community Service Classes	6820	6,672	121,005	238,374	1,556		367,607
Community Use Facilities	6830		59,513	16,782	2,496		78,791
Economic Development	6840		393,716	145,555	37,531		576,802
Other Community Svcs. & Economic Development	6890		41,771	92,238	809		134,818
Subtotal - Community Services	6800	6,672	807,840	1,172,390	42,392		2,029,294

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920			41,125	15,238		56,363
Farm Operations	6930						
Food Services	6940						
Parking	6950		998,037	163,539	59,360		1,220,936
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		998,037	204,664	74,598		1,277,299
Auxiliary Operations (7000)							
Contract Education	7010	190,493	148,131	282,540	18,234	28,269	667,667
Other Auxiliary Operations	7090		681,886	941,622	43,061		1,666,569
Subtotal - Auxiliary Operations	**7000**	190,493	830,017	1,224,162	61,295	28,269	2,334,236
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					911,354	911,354
Student Aid	7320					278,654	278,654
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,190,008	1,190,008
TOTAL EXPENDITURES and OTHER OUTGO	**391**	39,766,776	40,038,923	12,089,142	1,183,815	1,301,401	94,360,056

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	65,997
Avg. time p/account	3.4
Total Time (in minutes)	224390
Per Hour	60
Hours Worked **(** Activity 11)**	**3739.8**
***EFC 2**	55,752
Avg. time p/student	4.7
Total Time (in minutes)	262034
Per Hour	60
Hours Worked **(** Activity 12)**	**4367.2**
***EFC 2**	55,752
Avg. time p/question	4.2
Total Time (in minutes)	234158
Per Hour	60
Hours Worked **(** Activity 13)**	**3902.6**
***EFC 2 (default)**	55,752
Avg. time p/file	2.1
Total Time (in minutes)	117079
Per Hour	60
Hours Worked **(** Activity 14)**	**1951.3**
***EFC 4**	14,490
Avg. time p/account	7.7
Total Time (in minutes)	111573
Per Hour	60
Hours Worked **(** Activity 15)**	**1859.6**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/question	5.6
Total Time (in minutes)	57372
Per Hour	60
Hours Worked **(** Activity 21)**	**956.2**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/application	6.4
Total Time (in minutes)	65568
Per Hour	60
Hours Worked **(** Activity 22)**	**1092.8**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/evaluation	5.0
Total Time (in minutes)	51225
Per Hour	60
Hours Worked **(** Activity 23)**	**853.8**
***EFW 8 *(default)* (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	6.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,245
Avg. time p/application	6.1
Total Time (in minutes)	62495
Per Hour	60
Hours Worked **(** Activity 25)**	**1041.6**
***EFW 8 (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 Back-up in FY 04-05 workpapers only - Sea
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
		11	12	13	14	15	16
Abelin, Annette	Registration Cashier II	4	5	6		9	4.5
Abrams, Samuel	Registration Cashier / Clerk II	4	2	1		4	3
Ifill, Miriam	Account Technician II	3	4.5	1.5		5	2
Lovetta, Kelley	Cashier	4	5	5		7	
Marshal, Nanette	Account Assistant III	2	4	4	1.5	9	1.5
Matusak, Elizabeth	Registration Cashier II	5	7	3	5	7	5
McGreevy, Richard	Registration Cashier	5	5	10		10	10
Smith, Luukia	Accounting Technician	2	5	5	1	8	2
Tran, Hong	Accounting Technician	2	5	2	1	10	2
Average		**3.4**	**4.7**	**4.2**	**2.1**	**7.7**	**3.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Back-up in FY 04-05 workpapers only - SEA
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	6	6	6	8	7	8
Corrales, Christina	Sr. Clerical	6	7	7	8	7	7
Duran, Maria	Financial Aid Assistant	6	10	10	6	6	5
Fernandez, Elizabeth	Financial Aid Assistant	2	4	2	4	4	3
Mack, Vicki	Financial Aid Assistant	6	5	5	5	7	5
Ortiz, Julieta	Financial Aid Assistant	5	5	1	10	3	2
Pham, Vanna	Financial Aid Assistant	10	8	5	7	10	5
Zane, Jean	Financial Aid Advisor	4		4		6	5
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997
EFC 2	1.8-1 2.	Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245
EFC 4	1.8-2 1.	Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490
EFC 5	1.8-2 2.	Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.						
EFW 6	1.8-3 1.	Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.					
EFW 7	1.8-3 2.	Waivers Approved	X =	7,710	5,848	6,836	9,138	10,008	10,245
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Wednesday, May 16, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For El Camino For 2004-2005

Data Current As Of May 16, 2012 08:59:56

Download The Result In Comma Delimited Format

Headcount
37,802

Back to Top of Page

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Employee Name

Director, Financial Aid & Schol. — Exact Position Title

College/Department/Location

3492 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			4	4	4	4	1	4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			1	1	1	1	1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			10	10	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			5	5	5	5	5	5
TOTALS:			20	20	20	20	17	20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper — Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Laura DeFriles — Employee Name

User Support + Technician — Exact Position Title

College/Department/Location

3498 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ 120 x 90 x ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laura DeFriles — Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

FAX TRANSMITTAL

1 Page(s) this memo
3 Page(s) attachment

DATE: May 18, 2006

~~TO:~~ ~~FM:~~ Marie Yatman
El Camino CCD
310-660-3798

CC: Caroline Yousef

~~FROM:~~ TO: Sergio M. Perez

see email attached

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005

PLEASE RESPOND BY: **June 1, 2006**

In order to complete the claims for the above mentioned program we need the following:

- Question #2 answered on the attached EFCW 1.8-2.
- Question #1 answered on the attached EFCW 1.8-3.
- Clarification on the attached EFCW 1.6B. Please check the appropriate box below.
  - ☐ Each staff member (Ifill, Tran, Smith and Marshall) is claiming the total time listed.
  - ☒ Each staff member (Ifill, Tran, Smith and Marshall) is only claiming a fourth of the total time listed.

Thank you .

SMP:sea

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Employee Name: MIRIAM TZILL, HONG TRAN, Ludia Smith, Kina Marshall

Exact Position Title: ACCT TECH II, ACCT TECH, ACCT ASST 3

College/Department/Location: Fiscal-Accounting-Cashiers

Telephone #: ____

Work year length: 12mo/11mo/10mo/hrly

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	~~15~~ 3.8	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150	~~150~~ 37.5	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TZILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________

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New computer system in 99/00

☆ Note - see answer to Doc Req dated 5-8-06 (to Cindy Moore) - SSB

January 2006

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hoang-Linh Nguyen — Employee Name

Para-Professional — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ 1080 720 806 884 1008

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 720 720 806 884 1008

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hoang-Linh — Date 05-04-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Taylor Rathburn — Employee Name

Financial Aid Specialist Lead — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	3	5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
Enrollment Waiver Process:	3					3	100	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	3						300	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	3						1	1
TOTALS:	12					6	604	26

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Rathburn Date 5/3/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TEILL, HONG TRAN, Lucikia Smith, Xlina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

Fiscal-Accounting-Cashiers
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	3.8 ~~15~~	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150	37.5 ~~150~~	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TEILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________

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New computer system in 99/00

* Note - see amounts Doc Req dated 5-18-06 [illegible] above. [illegible] (B) - SSA

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: EL CAMINO COLLEGE

HIEP TRAN — Employee Name

PROGRAMMER ANALYST — Exact Position Title

IT — College/Department/Location

310-660-3272 — Telephone #

12mo/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
16	200	40	24	24	24	36	

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZELL, HONG TRAN, Lucrecia Smith
Employee Name Nina Marshall

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - Accounting - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours						
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16 (3.8)	15	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150 (37.5)	150	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Nina A. Marshall Date 4/26/06

If you have any questions, please contact MIRIAM ZELL, at 310 660-6103

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New computer System in 99/00

* Note - see answer to Doc Req Dated 5-18-06 (See directly above)

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZILL, HONG TRAN, Lucikia Smith
Employee Name Klina Marshall

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16 3.5	15	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150 37.5	150	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Miriam Zill Date 4/26/06

If you have any questions, please contact MIRIAM ZILL, at 30660-6103

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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New computer system in 99/00

* Note - see answer to Loc Rep dated 5-8-06 (in Correspondence above) - SSA

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Jean Zane — Financial Aid Advisor
Employee Name — Exact Position Title

Financial Aid — X 3495 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	2	2	2	2
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	588	588	588	588	264	264	264	264
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	180	180	180	180	120	120	120	
TOTALS:	772	772	772	772	389	389	389	264

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane — Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Angeles
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	45					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette J Abelin Date 3/22/06

If you have any questions, please contact Annette, 310 at 660-6103

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: EL CAMINO COLLEGE
Department/Location: ACCOUNTING
Employee Name: SAMUEL ABRAMS
Exact Position Title: REG CASHIER/CLERK II
Telephone #: 310-660-3142
Work year length(circle): 12mo/11mo/10mo/(hrly)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

(12 years two years has been involved in process)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A		(struck)			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Sam Abrams Date: 3-17-06

If you have any questions, please contact: SAM ABRAMS, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services -
Department/Location

Miriam Ingill
Employee Name

Acct Tech II
Exact Position Title

(310) 660-6103
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	See #12 N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact Miriam Ingill, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES - CASHIER
Department/Location

LOVETTA KELLEY
Employee Name

CASHIER
Exact Position Title

310-660-6103
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

← years the person has been involved in process

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lovetta Kelley Date 3-8-06

If you have any questions, please contact MIRIAM IFILL/Lovetta at (310) 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

Nanette Marshal
Employee Name

Account Asst. III
Exact Position Title

660-6104
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/2006

If you have any questions, please contact Nanette Marshal, at (310) 660-6104

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Serv / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg-cashier II
Exact Position Title

310-618-8576
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7 mins				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 3-22-06

If you have any questions, please contact Elizabeth, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES "CASHIERS
Department/Location

RICHARD McGREEVY
Employee Name

REGISTRATION CASHIER
Exact Position Title

(310)660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Richard McGreevy Date 3-22-06

If you have any questions, please contact Richard, at 310660-6103

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6-14-06

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

LUUKIA SMITH
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00 00-01 01-02 02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact LUUKIA SMITH, at (310) 660-3935

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

HONG TRAN
Employee Name

ACCOUNTING TECH.
Exact Position Title

(310) 660-3979 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact HONG TRAN, at (310) 660-3979

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Campbell Date 5/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

[illegible]
Employee Name

Department/Location

Sr. Clerical
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible] Date 9/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Maria Duran
Employee Name

Department/Location

Financial Aid Asst
Exact Position Title

6660 3284
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-11	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Student Services
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Fernandez Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Zeine

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Vicki Mack
Employee Name

Fin. Aid. Asst.
Exact Position Title

3106603489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO
District

FINANCIAL AID
Department/Location

JULIETA ORTIZ
Employee Name

FINANCIAL AID ASSISTANT
Exact Position Title

3106606350
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vanna Pham
Employee Name

Financial Aid Assistant
Exact Position Title

(310) 660 - 3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10	✓	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5	✓		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vanna Pham Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

X 3495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	9922	10100	16884	18999	20683	11214	16949	12869
Fall	25886	27222	27640	31246	31334	27112	27351	24967
Winter/ Intersession								
Spring	26476	26476	26371	27787	29215	28237	27697	24417
Total	62284	63798	70895	78032	81232	66563	65997	62253
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	44226	56088	65047	71196	72044	56555	55752	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	7958	7710	5848	6836	9138	10008	10245	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date MAY 8, 2006

HIEP D TRAN
Employee Name: (print)

PROGRAMMER ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		8860	7,953	1,909	46,375	40,685	14,490	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Mari Yatman Date 5-15-05

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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Total # of students with enrollment fee A/R

EFC 4

	a # of students	b a/r $	c Total Fees Collected	b/c*a # of students a/r
99-00	63,798	439,275	3,162,948	8,860
00-01	70,895	357,903	3,190,419	7,953
01-02	78,032	92,109	3,765,054	1,909
02-03	81,232	1,539,047	2,695,824	46,375
03-04	66,563	2,174,788	3,558,119	40,685
04-05	65,997	1,365,299	6,218,441	14,490

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	7958	7710	5848	6836	9138	10008	10245	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 5/9/2006

HIEP TRAN
Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 152732	$ 1306650	$ 1122981	$ 1205783	$ 1421929	$ 1637126	$ 3587371	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer			11615	13303	14062	15350	15292	
Fall			51494	54192	60864	70475	71669	
~~Winter/Intersession~~					-	2676	6856	
Spring			51577	56995	60374	72675	72364	
TOTAL x $0.91 per credit			104364	113286	123123	146670	151224	

See attached

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/9/2006

HIEP TRAN
Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Enrollment Fee Revenue Report	Fiscal Years 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1 Enrollment Fees Collected	3,810,152	3,162,948	3,190,419	3,765,054	2,695,824	3,558,119	6,218,441	
2 Enrollment Fees Refunded	420,731	421,126	487,465	684,003	537,130	620,025	836,472	
3 Enrollment Fee Revenue-Net (Line 1 subtract line 2)	3,389,421	2,741,822	2,702,954	3,081,051	2,158,694	2,938,094	5,381,969	
4A. Total Enrollment Fees Waived (BOGG)	1,521,732	1,306,650	1,122,981	1,205,783	1,421,929	1,637,126	3,587,371	
4B. 2% enrollment Fees Waived (Line 4A x 2%)								
4C. 7% Enrollment Fees Waived (Line 4A x 7%)								

would not fit on form 1.8-4

1
2
3

PHR's

Enrollment Fee & Collection For Individuals w/ Actual Hrs. -SJA

Full Time

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
7 Smith, Luukia	24.78	25.52	28.42	29.39	30.51	31.30	34.06	37.01
3 Ifill, Miriam	27.46	28.28	29.93	30.94	32.12	32.96	35.82	39.53
9 Tran, Hong	24.78	25.52	27.01	27.93	28.99	31.30	34.06	37.01
4 Marshall, Nina	23.02	23.72	27.01	27.93	28.99	29.74	32.34	35.14
10 Zane, Jean	27.46	28.28	30.47	33.34	34.61	35.52	36.70	39.87
Corrales, Christina	x	x	21.98	25.32	26.29	26.97	27.87	30.28
2 Detwiler, Linda	x	x	x	x	x	33.78	36.70	41.95
Campbell, Lisa	x	x	x	x	x	x	22.87	27.45
Duran, Maria	x	x	x	x	x	x	26.50	30.28
Fernandez, Elizabeth	x	x	x	x	x	x	26.50	30.28
Mack, Vicki	x	x	x	x	x	x	26.50	30.28
Ortiz, Julieta	x	x	x	x	x	x	26.50	30.28
Pham, Vanna	x	x	x	x	x	x	26.50	30.28
Lee, Estella	31.14	33.78	33.78	37.55	38.96	39.96	41.37	44.79
8 Tran, Hiep	39.28	40.45	42.80	44.25	45.94	47.13	48.70	53.52
6 Robbins, Taylor	51.50	x	x	x	x	58.14	59.88	67.23
1 Cooper, Hortense	x	x	54.09	57.58	61.25	65.07	67.41	73.05
Nieto, Esperanza	x	x	x	x	x	x	x	67.23
Snowden, Dave	x	x	x	x	x	x	x	37.93
Bruce, Rita	x	x	x	x	x	x	x	35.14
Ely, Janice	x	x	x	x	x	x	x	61.97
Fees, Pam	x	x	x	x	x	x	x	83.92
Yatman, Marie	x	x	x	x	x	x	x	38.92

Hourly

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Abelin, Annette	8.00	8.00	8.00	9.50	9.50	9.50	10.50	10.50
Matusak, Elizabeth	x	x	x	8.50	8.50	8.50	9.50	9.50
McGreevy, Richard	x	x	x	x	x	x	8.50	8.50
Abrams, Samuel	x	x	x	x	x	x	x	9.50
5 Nguyen, Hoang-Linh	x	x	x	8.50	9.00	10.00	10.00	16.50

3 Ifill, Miriam	Account Technician II	
4 Marshall, Nina	Account Assistant III	
5 Nguyen, Hoang-Lin	Para-Professional	
6 Robbins, Taylor	Assistant Director, Financial Aid	
7 Smith, Luukia	Account Technician	
8 Tran, Hiep	Programmer Analyst	ion
9 Tran, Hong	Account Technician	

Full Time

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Smith, Luukia	24.78	25.52	28.42	29.39	30.51	31.30	34.06
Ifill, Miriam	27.46	28.28	29.93	30.94	32.12	32.96	35.82
Tran, Hong	24.78	25.52	27.01	27.93	28.99	31.30	34.06
Marshall, Nina	23.02	23.72	27.01	27.93	28.99	29.74	32.34
Zane, Jean	27.46	28.28	30.47	33.34	34.61	35.52	36.70
Corrales, Christina	x	x	21.98	25.32	26.29	26.97	27.87
Detwiler, Linda	x	x	x	x	x	33.78	36.70
Campbell, Lisa	x	x	x	x	x	x	22.87
Duran, Maria	x	x	x	x	x	x	26.50
Fernandez, Elizabeth	x	x	x	x	x	x	26.50
Mack, Vicki	x	x	x	x	x	x	26.50
Ortiz, Julieta	x	x	x	x	x	x	26.50
Pham, Vanna	x	x	x	x	x	x	26.50
Lee, Estella	31.14	33.78	33.78	37.55	38.96	39.96	41.37
Tran, Hiep	39.28	40.45	42.80	44.25	45.94	47.13	48.70

Average PHR for Various Account Technicians

Campbell, Lisa	-	Financial Aid Assistant
Corrales, Christinia	-	Sr. Clerical
Duran, Maria	-	Financial Aid Assistant
Fernandez, Elizabeth	-	Financial Aid Assistant
Mack, Vicki	-	Financial Aid Assistant
Ortiz, Julieta	-	Financial Aid Assistant
Pham, Vanna	-	Financial Aid Assistant
Zane, Jean	-	Financial Aid Advisor

x	x	x	54.09	57.58	61.25	58.14	59.88
x	x	x	x	x	x	65.07	67.41
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x

Hourly

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Abelin, Annette	8.00	8.00	8.00	9.50	9.50	9.50	10.50
Matusak, Elizabeth	x	x	x	8.50	8.50	8.50	9.50
McGreevy, Richard	x	x	x	x	x	x	8.50
Abrams, Samuel	x	x	x	x	x	x	x
Nguyen, Hoang-Linh	x	x	x	8.50	9.00	10.00	10.00

Average PHR for Various Financial Aid Assistants

= Staff that turned in (average time) on EFCW 1.7-2s - Enrollment Fee Collection Functions

= Staff that turned in (average time) on EFCW 1.7-3s - Enrollment Fee

El Camino Community College District
308/95 Enrollment [illegible] Collection and Waivers
Fiscal Years: 1[illegible]-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639
1.8-4 line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 91,466	For 00-01 through 04-05 - unit fee				
1.8-4 line 5	Summer		11,615	13,303	14,062	15,350	15,292
	Fall		51,494	54,192	60,864	70,475	71,669
	Winter/Interssion					2,676	6,856
	Spring		51,577	56,995	60,374	72,675	72,364
	Total # of credits		114,686	124,490	135,300	161,176	166,181
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466					
1.8-4 5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$49,803,761	$45,753,549	$-369,299	$45,384,250
ENROLL FEE ADMIN (2%)	53,586	46,084	7,502	53,586
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	31,667	-31,667	0
PARTNERSHIP FOR EXCEL.	3,387,724	2,913,442	474,282	3,387,724
S.F.A.A.	676,750	580,715	96,035	676,750
E.O.P.S.	1,424,005	1,224,644	199,361	1,424,005
C.A.R.E.	242,240	208,326	33,914	242,240
D.S.P.S.	1,056,749	904,362	152,387	1,056,749
STATE HOSPITALS	0	0	0	0
CALWORKS	675,116	580,599	94,517	675,116
MATRICULATION (CREDIT)	793,946	674,877	119,069	793,946
MATRIC. (NONCREDIT)	0	0	0	0
FAC. & STAFF DIVERSITY	21,628	15,375	6,253	21,628
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	848,408	729,631	118,777	848,408
BLOCK GRANT (ONE-TIME)	422,260	363,144	59,116	422,260
ECON. DEVELOPMENT	949,340	761,498	35,948	797,446
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	146,494	125,985	20,509	146,494
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	13,416	29,928	43,344
VTEA TITLE I C	715,802	139,581	461,693	601,274
PLANT & INSTRUCTIONAL	473,631	407,323	66,308	473,631
PRIOR YEAR CORRECTION	16,679	-812	17,491	16,679
TOTAL	$61,812,822	$55,504,966	$1,613,667	$57,118,633

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sche 5A
El Camino Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46
4								
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**

Query Results by College - Microsoft Internet Explorer
File Edit View Favorites Tools Help
Back Search Favorites
Address http://misweb.cccco.edu/mis/onlinestat/SFawards_rpt.cfm?RequestTimeout=1000
Go Links
California Home
Wednesday, May 10, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 10, 2006 12:54:32

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	345	189,078
BOGW - Part B based on income standards	6,701	2,309,783
BOGW - Part C based on financial need	3,519	1,088,512

Total Unduplicated Count = 10,245
Total Amount = $ 3,587,371

1.8-3 #2.
1.8-4 4 A-SAS

Back to Top of Page

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Internet
Start 3 Micros... MyECC-1 - ... California ... Query Result 12:59 PM

Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 15, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for El Camino Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Bramwell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 548,000	(13) $ 498,257
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 498,257
Due from State	(08) $ 548,000	(17) $ 498,257
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	650
(23) EFCW-1, (04)(A)(1)(b)(f)	6,092
(24) EFCW-1, (04)(A)(2)(a)(f)	354,835
(25) EFCW-1, (04)(B)(1)(a)(f)	737
(26) EFCW-1, (04)(B)(1)(b)(f)	895
(27) EFCW-1, (04)(B)(2)(a)(f)	28,606
(28) EFCW-1, (04)(B)(2)(b)(f)	143,002
(29) EFCW-1, (04)(B)(2)(c)(f)	923
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	187,616
(32) EFCW-1, (09)	50,935
(33) EFCW-1, (10)	174,163
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Janice Ely
on behalf of El Camino Colleg

Janice Ely
Type or Print Name

Date: 12/4/2006

Director of Accounting
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 87	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **El Camino Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2005-2006**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 649.80	$ -	$ -	$ -	$ -	$ 649.80
b. *Staff training (One time per employee)*	$ 6,091.89	$ -	$ -	$ -	$ -	$ 6,091.89
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 354,834.72	$ -	$ -	$ -	$ -	$ 354,834.72
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 736.90	$ -	$ -	$ -	$ -	$ 736.90
b. Staff training (One time per employee)	$ 894.65	$ -	$ -	$ -	$ -	$ 894.65
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 28,606.10	$ -	$ -	$ -	$ -	$ 28,606.10
b. Waiving student fees	$ 143,002.02	$ -	$ -	$ -	$ -	$ 143,002.02
c. Reporting BOG fee waiver data to CCC	$ 922.97	$ -	$ -	$ -	$ -	$ 922.97
(05) Total Direct Costs	$ 535,739.05	$ -	$ -	$ -	$ -	$ 535,739.05

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.02%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 187,615.82
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 723,354.87
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 50,935.00
(10) Enrollment Fee Waiver offsets		$ 174,162.64
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 498,257.23

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Lamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Ifill, Miriam	Accountant	$43.55	4.0	$ 174.20				
Marshal, Nanette	Account Assistant III	$37.08	4.0	$ 148.32				
Smith, Luukia	Account Technician	$38.97	4.0	$ 155.88				
Tran, Hong	Account Technician	$42.85	4.0	$ 171.40				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 649.80	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Camino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Ifill, Miriam	Accountant	$43.55	37.5	$ 1,633.13				
Marshal, Nanette	Account Assistant III	$37.08	37.5	$ 1,390.50				
Smith, Luukia	Account Technician	$38.97	37.5	$ 1,461.38				
Tran, Hong	Account Technician	$42.85	37.5	$ 1,606.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,091.89	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office St Collecting Fees	$23.44	3,527.7	$ 82,689.29				
Calculating total enrollment fee to be collected Various Enrollment Office St Collecting Fees	$23.44	4,022.5	$ 94,287.40				
Answering student's questions regarding enrollment fee collection Various Enrollment Office St Collecting Fees	$23.44	3,594.6	$ 84,257.42				
iting written and computer records for enrollment fee information Various Enrollment Office St Collecting Fees	$23.44	1,797.3	$ 42,128.71				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office St Collecting Fees	$23.44	2,195.9	$ 51,471.90				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 354,834.72	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Gamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	5.0	$ 342.90				
Zane, Jean	Financial Aid Advisor	$44.14	2.0	$ 88.28				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	4.0	$ 305.72				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 736.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Lamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	10.0	$ 685.80				
Zane, Jean	Financial Aid Advisor	$44.14	3.0	$ 132.42				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	1.0	$ 76.43				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 894.65	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	(d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Nguyen, Hoang-Linh	Paraprofessional	$15.38	1,008.0	$ 15,503.04				
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	10.0	$ 685.80				
Zane, Jean	Financial Aid Advisor	$44.14	264.0	$ 11,652.96				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	10.0	$ 764.30				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 28,606.10	$ -	$ -	$ -	$ -

New 04/06

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

Claimant: [illegible]amino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,017.5	$ 34,666.23				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,162.9	$ 39,620.00				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	908.5	$ 30,952.60				
[illegible]ing approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,108.4	$ 37,763.19				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 143,002.02	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	1.0	$ 68.58				
Tran, Hiep	Programmer Analyst	$59.03	8.0	$ 472.24				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	5.0	$ 382.15				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 922.97	$ -	$ -	$ -	$ -

New 04/06

[illegible] College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2005-20

Sort by Na.

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
)5-06	4.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$305.72	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
)5-06	1.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$76.43	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
)5-06	10.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$764.30	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
)5-06	5.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$382.15	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Cooper, Hortense Total**			$1,528.60		
05-06	4.00	Ifill, Miriam	Accountant	$43.55	$174.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	37.50	Ifill, Miriam	Accountant	$43.55	$1,633.13	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Ifill, Miriam Total**			$1,807.33		
05-06	4.00	Marshal, Nanette	Account Assistant III	$37.08	$148.32	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Marshal, Nanette	Account Assistant III	$37.08	$1,390.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Marshal, Nanette Total**			$1,538.82		
5-06	1,008.00	Nguyen, Hoang-Linh	Paraprofessional	$15.38	$15,503.04	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining reco
	1,008.00	**Nguyen, Hoang-Linh Total**			$15,503.04		
5-06	5.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$342.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
5-06	10.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$685.80	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
5-06	10.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$685.80	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
5-06	1.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$68.58	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	26.00	**Robbins, Taylor Total**			$1,783.08		
5-06	4.00	Smith, Luukia	Account Technician	$38.97	$155.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Smith, Luukia	Account Technician	$38.97	$1,461.38	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Smith, Luukia Total**			$1,617.26		
5-06	8.00	Tran, Hiep	Programmer Analyst	$59.03	$472.24	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	8.00	**Tran, Hiep Total**			$472.24		
5-06	4.00	Tran, Hong	Account Technician	$42.85	$171.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Tran, Hong	Account Technician	$42.85	$1,606.88	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Tran, Hong Total**			$1,778.28		
-06	3,527.70	Various Enrollment Office Sta	Collecting Fees	$23.44	$82,689.29	Referencing student accounts and records	Calculating and collecting enrollment fees
-06	4,022.50	Various Enrollment Office Sta	Collecting Fees	$23.44	$94,287.40	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
-06	3,594.60	Various Enrollment Office Sta	Collecting Fees	$23.44	$84,257.42	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
-06	1,797.30	Various Enrollment Office Sta	Collecting Fees	$23.44	$42,128.71	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
-06	2,195.90	Various Enrollment Office Sta	Collecting Fees	$23.44	$51,471.90	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,138.00	**Various Enrollment Office Staff Total**			$354,834.72		
06	1,017.50	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$34,666.23	Answering student's questions regarding enrollment fee waivers/referring to appropriate persc	Waiving student fees
06	1,162.90	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$39,620.00	Receiving waiver applications	Waiving student fees
06	908.50	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$30,952.60	Evaluating waiver applications and verifying application documents	Waiving student fees
06	1,108.40	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$37,763.19	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,197.30	**Various Financial Office Staff Total**			$143,002.02		
06	2.00	Zane, Jean	Financial Aid Advisor	$44.14	$88.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06	3.00	Zane, Jean	Financial Aid Advisor	$44.14	$132.42	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
06	264.00	Zane, Jean	Financial Aid Advisor	$44.14	$11,652.96	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
	269.00	**Zane, Jean Total**			$11,873.66		
	20,832.30	**Grand Total**			$535,739.05		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$45,927,153		$45,927,153	$211,898	$45,715,255
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,959,838		5,959,838	502,231	5,457,607
Course and Curriculum Development	6020	403,734		403,734	1,099	402,635
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	674,647		674,647		674,647
Library	6120	1,656,043		1,656,043	136,956	1,519,087
Media	6130	382,703		382,703		382,703
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	521,733		521,733	30,074	491,659
Other Instructional Support Services	6190					
Admissions and Records	6200	3,106,550		3,106,550	4,563	3,101,987
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,382,702		3,382,702	5,657	3,377,045
Matriculation and Student Assessment	6320					
Transfer Programs	6330	305,251		305,251	8,764	296,487
Career Guidance	6340					
Other Student Counseling and Guidance	6390	79,975		79,975	146	79,829
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,402,340		1,402,340	3,341	1,398,999
Subtotal		$63,802,669	$0	$63,802,669	$904,729	$62,897,940

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,126,319	$70,935	$1,055,384	$423	$1,054,961
Health Services	6440	424,920		424,920		424,920
Student Personnel Admin.	6450	729,425		729,425		729,425
Financial Aid Administration	6460	2,561,295		2,561,295	101,547	2,459,748
Job Placement Services	6470	427,506		427,506		427,506
Veterans Services	6480	-963		-963		-963
Miscellaneous Student Services	6490	559,966		559,966	34,271	525,695
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,785,318		2,785,318	2,785,318	0
Custodial Services	6530	2,742,329		2,742,329	2,742,329	0
Grounds Maintenance and Repairs	6550	692,287		692,287	692,287	0
Utilities	6570	2,696,582		2,696,582	2,696,582	0
Other	6590	290,674		290,674	290,674	0
Planning, Policy Making, and Coordination	6600	3,310,432		3,310,432	3,310,432	0
General Inst. Support Services	6700					
Community Relations	6710	753,440		753,440	753,440	0
Fiscal Operations	6720	2,145,674		2,145,674	2,145,674	0
Human Resources Management	6730	986,824		986,824	986,824	0
Noninstructional Staff Benefits & Incentives	6740	148,481		148,481	148,481	0
Staff Development	6750	253,062		253,062	253,062	0
Staff Diversity	6760	139,814		139,814	139,814	0
Logistical Services	6770	5,347,565		5,347,565	5,347,565	0
Management Information Systems	6780	2,118,918		2,118,918	2,118,918	0
Subtotal		$94,042,537	$70,935	$93,971,602	$25,452,370	$68,519,232

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	170,098		170,098	170,098	0
Community Services and Economic Development	6800					
Community Recreation	6810	356,721		356,721	7,141	349,580
Community Service Classes	6820	434,854		434,854		434,854
Community Use of Facilities	6830	82,611		82,611	602	82,009
Economic Development	6840	747,310		747,310	37,894	709,416
Other Community Services & Economic Development	6890	7,142		7,142		7,142
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	51,324		51,324	9,775	41,549
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,415,756		1,415,756	82,333	1,333,423
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	851,361		851,361	3,940	847,421
Other Auxiliary Operations	7090	1,395,411		1,395,411	38,365	1,357,046
Physical Property Acquisitions	7100					
(05) Total		$99,555,125	$70,935	$99,484,190	$25,802,518	$73,681,672
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.02%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	42,536		10,626	1,473		54,635
Architecture and Environmental Design	0200	302,999		4,613	15,902		323,514
Biological Sciences	0400	1,390,345	216,032	38,788			1,645,165
Business and Management	0500	1,623,993	70,954	34,615			1,729,562
Communications	0600	337,761	39,658		1,393		378,812
Computer and Information Science	0700	1,077,811	112,097	42,923	13,184		1,246,015
Education	0800	2,633,106	729,713	45,853	39,324		3,447,996
Engineering and Related Industrial Tech.	0900	2,324,527	684,614	169,864	86,626		3,265,631
Fine and Applied Arts	1000	4,285,132	774,335	446,353	17,729		5,523,549
Foreign Language	1100	1,453,450					1,453,450
Health	1200	2,734,770	190,274	62,675	8,129		2,995,848
Consumer Education and Home Economics	1300	665,079	103,032	123,792	8,138		900,041
Law	1400	366,699	21,555	2,334			390,588
Humanities (Letters)	1500	5,914,275	146,060	16,161			6,076,496
Library Science	1600						
Mathematics	1700	4,788,526	350,114	9,733			5,148,373
Military Studies	1800						
Physical Sciences	1900	2,203,238	287,789	64,536			2,555,563
Psychology	2000	718,399		353			718,752
Public Affairs and Services	2100	1,065,130	175,718	58,113	20,000		1,318,961
Social Sciences	2200	2,685,709		3,121			2,688,830
Commercial Services	3000	421,315	76,331	16,866			514,512
Interdisciplinary Studies	4900	3,167,484	251,361	40,781			3,459,626
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	91,234					91,234
Subtotal - Instructional Activities	**599**	40,293,518	4,229,637	1,192,100	211,898		45,927,153

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]ncial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen[illegible]tures by Activity
S10 Gen[illegible]al Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
[illegible]struct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,913,365	544,242	502,231		5,959,838
Course and Curriculum Development	6020		298,624	104,011	1,099		403,734
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,211,989	648,253	503,330		6,363,572
Instructional Support Services (6100)							
Learning Center	6110		492,386	182,261			674,647
Library	6120		1,374,541	144,546	136,956		1,656,043
Media	6130		363,402	19,301			382,703
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		490,929	730	30,074		521,733
Other Instructional Support Services	6190						
[illegible]ubtotal - Instructional Support Services	**6100**		2,721,258	346,838	167,030		3,235,126
[illegible]missions and Records	**6200**		2,399,895	702,092	4,563		3,106,550
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,283,163	93,882	5,657		3,382,702
Matriculation and Student Assessment	6320						
Transfer Programs	6330		159,812	136,675	8,764		305,251
Career Guidance	6340						
Other Student Counseling and Guidance	6390		59,091	20,738	146		79,975
Subtotal - Student Counseling and Guidance	**6300**		3,502,066	251,295	14,567		3,767,928

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,337,513	61,486	3,341		1,402,340
Extended Opportunity Prgms. & Services (EOPS)	6430		1,001,597	53,364	423	70,935	1,126,319
Health Services	6440		419,035	5,885			424,920
Student Personnel Administration	6450		667,752	61,673			729,425
Financial Aid Administration	6460		2,189,147	270,601	101,547		2,561,295
Job Placement Services	6470		403,355	24,151			427,506
Veterans Services	6480		1,395	(2,358)			(963)
Miscellaneous Student Services	6490		437,992	87,703	34,271		559,966
Subtotal - Other Student Services	**6400**		6,457,786	562,505	139,582	70,935	7,230,808
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,259,185	507,958	18,175		2,785,318
Custodial Services	6530		2,609,041	133,288			2,742,329
Grounds Maintenance and Repairs	6550		608,263	60,929	23,095		692,287
Utilities	6570			2,696,582			2,696,582
Other Operation and Maintenance of Plant	6590		156,297	134,377			290,674
Subtotal - Operation and Maintenance of Plant	**6500**		5,632,786	3,533,134	41,270		9,207,190
Planning, Policymaking, and Coordination	**6600**		2,652,897	608,459	49,076		3,310,432

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		333,408	418,334	1,698		753,440
Fiscal Operations	6720		1,886,750	258,301	623		2,145,674
Human Resources Management	6730		833,089	153,735			986,824
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		148,481				148,481
Staff Development	6750		193,793	59,269			253,062
Staff Diversity	6760		126,355	13,459			139,814
Logistical Services	6770		4,121,866	1,166,054	59,645		5,347,565
Management Information Systems	6780		1,387,730	601,831	129,357		2,118,918
Other General Institutional Support Services	6790		715	168,656	727		170,098
Subtotal - General Institutional Support Services	**6700**		9,032,187	2,839,639	192,050		12,063,876
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		177,443	172,137	7,141		356,721
Community Service Classes	6820	1,239	137,807	295,808			434,854
Community Use Facilities	6830		80,121	1,888	602		82,611
Economic Development	6840		494,111	215,305	37,894		747,310
Other Community Svcs. & Economic Development	6890		1,683	5,459			7,142
Subtotal - Community Services	**6800**	1,239	891,165	690,597	45,637		1,628,638

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]icial and Budget Report

Expen[illegible]tures by Activity

S10 Gen[illegible]al Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		2,414	39,135	9,775		51,324
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,115,260	218,163	82,333		1,415,756
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,117,674	257,298	92,108		1,467,080
Auxiliary Operations (7000)							
Contract Education	7010	218,376	249,393	351,581	3,940	28,071	851,361
Other Auxiliary Operations	7090		568,636	788,410	38,365		1,395,411
Subtotal - Auxiliary Operations	**7000**	218,376	818,029	1,139,991	42,305	28,071	2,246,772
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					2,400,073	2,400,073
Other Outgo	7330					291,199	291,199
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					10,000	10,000
TOTAL EXPENDITURES and OTHER OUTGO	**391**	40,513,133	44,667,369	12,772,201	1,503,416	2,701,272	2,701,272
						2,800,278	102,256,397

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	62,253
Avg. time p/account	3.4
Total Time (in minutes)	211660
Per Hour	60
Hours Worked **(** Activity 11)**	**3527.7**
***EFC 2**	51,351
Avg. time p/student	4.7
Total Time (in minutes)	241350
Per Hour	60
Hours Worked **(** Activity 12)**	**4022.5**
***EFC 2**	51,351
Avg. time p/question	4.2
Total Time (in minutes)	215674
Per Hour	60
Hours Worked **(** Activity 13)**	**3594.6**
***EFC 2 (default)**	51,351
Avg. time p/file	2.1
Total Time (in minutes)	107837
Per Hour	60
Hours Worked **(** Activity 14)**	**1797.3**
***EFC 4**	17,111
Avg. time p/account	7.7
Total Time (in minutes)	131755
Per Hour	60
Hours Worked **(** Activity 15)**	**2195.9**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/question	5.6
Total Time (in minutes)	61051
Per Hour	60
Hours Worked **(** Activity 21)**	**1017.5**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/application	6.4
Total Time (in minutes)	69773
Per Hour	60
Hours Worked **(** Activity 22)**	**1162.9**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/evaluation	5.0
Total Time (in minutes)	54510
Per Hour	60
Hours Worked **(** Activity 23)**	**908.5**
***EFW 8 (default) (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	6.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,902
Avg. time p/application	6.1
Total Time (in minutes)	66502
Per Hour	60
Hours Worked **(** Activity 25)**	**1108.4**
***EFW 8 (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abelin, Annette	Registration Cashier II	4.0	5.0	6.0		9.0	4.5
Abrams, Samuel	Registration Cashier / Clerk II	4.0	2.0	1.0		4.0	3.0
Ifill, Miriam	Account Technician II	3.0	4.5	1.5		5.0	2.0
Lovetta, Kelley	Cashier	4.0	5.0	5.0		7.0	
Marshal, Nanette	Account Assistant III	2.0	4.0	4.0	1.5	9.0	1.5
Matusak, Elizabeth	Registration Cashier II	5.0	7.0	3.0	5.0	7.0	5.0
McGreevy, Richard	Registration Cashier	5.0	5.0	10.0		10.0	10.0
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0
Average		3.4	4.7	4.2	2.1	7.7	3.8

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		1	2			4	5	
		**Activity Codes						PHR
Staff	Title	11	12	13	14	15	16	05-06
Abelin, Annette	Registration Cashier II	4	5	6		9	4.5	10.50
Abrams, Samuel	Registration Cashier / Clerk II	4	2	1		4	3	9.50
Ifill, Miriam	Account Technician II	3	4.5	1.5		5	2	43.55
Lovetta, Kelley	Cashier	4	5	5		7		10.50
Marshal, Nanette	Account Assistant III	2	4	4	1.5	9	1.5	37.08
Matusak, Elizabeth	Registration Cashier II	5	7	3	5	7	5	9.50
McGreevy, Richard	Registration Cashier	5	5	10		10	10	8.50
Smith, Luukia	Accounting Technician	2	5	5	1	8	2	38.97
Tran, Hong	Accounting Technician	2	5	2	1	10	2	42.85
Average		**3.4**	**4.7**	**4.2**	**2.1**	**7.7**	**3.8**	**23.44**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	6.0	6.0	6.0	8.0	7.0	8.0
Corrales, Christina	Sr. Clerical	6.0	7.0	7.0	8.0	7.0	7.0
Duran, Maria	Financial Aid Assistant	6.0	10.0	10.0	6.0	6.0	5.0
Fernandez, Elizabeth	Financial Aid Assistant	2.0	4.0	2.0	4.0	4.0	3.0
Mack, Vicki	Financial Aid Assistant	6.0	5.0	5.0	5.0	7.0	5.0
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	1.0	10.0	3.0	2.0
Pham, Vanna	Financial Aid Assistant	10.0	8.0	5.0	7.0	10.0	5.0
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier						
		6			8	7	8	
		**Activity Codes						PHR
Staff	Title	21	22	23	24	25	26	05-06
Campbell, Lisa	Financial Aid Assistant	6	6	6	8	7	8	32.04
Corrales, Christina	Sr. Clerical	6	7	7	8	7	7	32.03
Duran, Maria	Financial Aid Assistant	6	10	10	6	6	5	36.11
Fernandez, Elizabeth	Financial Aid Assistant	2	4	2	4	4	3	32.03
Mack, Vicki	Financial Aid Assistant	6	5	5	5	7	5	35.61
Ortiz, Julieta	Financial Aid Assistant	5	5	1	10	3	2	27.16
Pham, Vanna	Financial Aid Assistant	10	8	5	7	10	5	33.47
Zane, Jean	Financial Aid Advisor	4		4		5	5	44.14
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**	**34.07**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1. Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997	62,253
EFC 2	1.8-1 2. Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752	51,351
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245	10,902
EFC 4	1.8-2 1. Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490	17,111
EFC 5	1.8-2 2. Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.							
EFW 6	1.8-3 1. Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.						
EFW 7	1.8-3 2. Waivers Approved	X -	7,710	5,848	6,836	9,138	10,008	10,245	10,902
EFW 8	1.8-3 (1-2) Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2005 Summer Term

Data Current As Of November 04, 2006 09:57:36

Total Headcount	11,372

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino For 2005 Fall Term

Data Current As Of November 04, 2006 09:57:57

Total Headcount	24,494

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Winter Intersession

Data Current As Of November 04, 2006 09:58:32

Total Headcount	4,364

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Spring Semester

Data Current As Of November 04, 2006 09:58:50

Total Headcount	23,139

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Director, Financial Aid & Schol.
Employee Name — Exact Position Title

College/Department/Location — 3492 Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			4	4	4	4	1	4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			1	1	1	1	1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			10	10	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			5	5	5	5	5	5
TOTALS:			20	20	20	20	17	20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

FAX TRANSMITTAL

1 Page(s) this memo
3 Page(s) attachment

DATE: May 18, 2006

~~TO:~~ ~~FM:~~ Marie Yatman
El Camino CCD
310-660-3798

see email attached

CC: Caroline Yousef

~~FROM:~~ TO: Sergio M. Perez

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005

PLEASE RESPOND BY: **June 1, 2006**

In order to complete the claims for the above mentioned program we need the following:

- Question #2 answered on the attached EFCW 1.8-2.
- Question #1 answered on the attached EFCW 1.8-3.
- Clarification on the attached EFCW 1.6B. Please check the appropriate box below.
  - ☐ Each staff member (Ifill, Tran, Smith and Marshall) is claiming the total time listed.
  - ☒ Each staff member (Ifill, Tran, Smith and Marshall) is only claiming a fourth of the total time listed.

Thank you .

SMP:sea

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TILL, HONG TRAN, Lurkia Smith, Klina Marshall — Employee Name

ACCT TECH II, ACCT TECH, — Exact Position Title

FISCAL - Accounting - CASHIERS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in

	98-99	99-00	00-01	01-02	02-03	03-04	0
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:							
A. Enrollment Collection Process:		24	15	15	15	16	15	16 4
B. Enrollment Waiver Process:							
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.							
A. Enrollment Collection Process:		900	600	225	225	150	150	150 37.5
B. Enrollment Waiver Process:							
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assi							
Code 4 State Reporting: Time spent by staff preparing and submitting financia management information data and reports to the state agencies at spe each year regarding **the type and number of waivers** approved and waived.							
TOTALS:		924	615	240	240	166		

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel main data for state mandates in order for the district to receive reimbursement. Your signature on this f you have reported actual data or have provided a good faith estimate which you "certify (or declar of perjury under the laws of the State of California to be true and correct based on your personal k information." This information is used for cost accounting purposes only. PLEASE USE BL

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________

* NOTE – See ... Summary

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New computer system in 99/00

Doc Prg ...

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM JEFFILL, HONG TRAN, Lourdes Smith, Nina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	15	16 4
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:		900	600	225	225	150	150	150 37.5
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Miriam Jeffill Date 4/26/06

If you have any questions, please contact Miriam Jeffill, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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New computer system in 99/00

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hoang-Linh Nguyen — Employee Name

Para-Professional — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ 1020 720 806 884 1008

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ 720 720 806 884 1008

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hoang Linh Date 05-04-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Taylor Robinson — Assistant Director, Financial Aid
Employee Name — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	3	5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	100	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	3						300	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	3						1	1
TOTALS:	12					6	604	26

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Robinson Date 5/3/6

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZELL, HANG TRAN, Lucrecia Smith, Nina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	15	~~16~~ 4
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:		900	600	225	225	150	150	~~150~~ 375
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hang Tran Date 4/26/06

If you have any questions, please contact MIRIAM ZELL, at 310 660-6103

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New computer system in 99/00

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hiep Tran — Employee Name

Programmer Analyst — Exact Position Title

ITS — College/Department/Location

310-660-3272 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ 8

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/03/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM JILL, HONG TRAN, Lourdes Smith
Employee Name Nina Marshall

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	15	16 4
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150	150	150 375
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Miriam Jill / Hong Tran / Lourdes Smith / Nina Marshall Date 4/26/06

If you have any questions, please contact MIRIAM JILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

* Please see attachment to clarify fiscal years and IFAD

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New computer system in 99/00 Dated 7/1/99

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Jean Zane — Employee Name

Financial Aid Advisor — Exact Position Title

Financial Aid — College/Department/Location

x 3495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	2	2	2	2

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	3	3	3	3

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

588	588	588	588	264	264	264	264

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

180	180	180	180	120	120	120	

TOTALS:	772	772	772	772	389	389	389	264

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Angeles
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette Abelin Date 3/22/06

If you have any questions, please contact Annette, 310 at 660-6803

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

ACCOUNTING
Department/Location

SAMUEL ABRAMS
Employee Name

REG CASHIER/CLERK II
Exact Position Title

310-660-3142
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sam Abrams Date 3-17-06

If you have any questions, please contact SAM ABRAMS, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services -
Department/Location

Miriam Gill
Employee Name

Acct Tech II
Exact Position Title

(310) 660-6103
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	See #12 N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact Miriam Gill, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES - CASHIER
Department/Location

LOVETTA KELLEY
Employee Name

CASHIER
Exact Position Title

310-660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

5 years the person has been working in this area

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lovetta Kelley Date 3-8-06

If you have any questions, please contact MIRIAM IFILL/Loretta at (310) 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

NaneHe Marshal
Employee Name

Account Asst. III
Exact Position Title

660-6104
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/2006

If you have any questions, please contact NaneHe Marshal, at (310) 660-6104

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Serv / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg-cashier II
Exact Position Title

310-618-8576
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7 mins				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 3-22-06

If you have any questions, please contact Elizabeth, at 310/600-6403

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES CASHIERS
Department/Location

RICHARD McGREEVY
Employee Name

REGISTRATION CASHIER
Exact Position Title

(310) 660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Richard McGreevy Date 3-22-06

If you have any questions, please contact Richard, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

LUKIA SMITH
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact LUKIA SMITH, at (310) 660-3935

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

HONG TRAN
Employee Name

ACCOUNTING TECH.
Exact Position Title

(310) 660-3979
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact HONG TRAN, at (310) 660-3979

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Campbell Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

[illegible]
Employee Name

Sr. Clerical
Department/Location

Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Maria Duran
Employee Name

Department/Location

Financial Aid Asst
Exact Position Title

6160 3284
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-11	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Student Services
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Fernandez Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Ebine

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Vicki Mack
Employee Name

Fin. Aid. Asst.
Exact Position Title

3106603489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 5/14/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO
District

FINANCIAL AID
Department/Location

JULIETA ORTIZ
Employee Name

FINANCIAL AID ASSISTANT
Exact Position Title

3106606350
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/4/06

If I have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College — District

Financial Aid — Department/Location

Vana Pham — Employee Name

Financial Aid Assistant — Exact Position Title

(310) 660-3493 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10	✓	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5	✓		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vana Pham — Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

X 3495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								12869
Fall								24967
Winter/ Intersession								
Spring								24417
Total								62253
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								10902

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 11/03/08

Employee Name: (Print) HIEP TRAN

Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								17,111
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Marie L Yatman Date 11-6-06

Marie L. Yatman — Employee Name: (print)

Acctg. Tech. — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Total # of students with enrollment fee A/R

EFCW 1.8-2

	a # of students	b a/r $	c Total Fees Collected	b/c*a # of students a/r
99-00	63,798	439,275	3,162,948	8,860
00-01	70,895	357,903	3,190,419	7,953
01-02	78,032	92,109	3,765,054	1,909
02-03	81,232	1,539,047	2,695,824	46,375
03-04	66,563	2,174,788	3,558,119	40,685
04-05	65,997	1,365,299	6,218,441	14,490
05-06	62,253	1,649,408	6,000,733	17,111

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								10902

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 10/31/06

Employee Name: (print) HIEP TRAN Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$ 246534
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								15385
Fall								69529
Winter/Intersession								6339
Spring								68931
TOTAL x $0.91 per credit								145767

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 10/31/06

HIEP TRAN
Employee Name: (print)

PROGRAMMER ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 36.44	$ 40.59
	AVERAGE DEAN	$ 73.52	$ 81.50
	AVERAGE DIRECTOR	$ 69.92	$ 76.49
	AVERAGE EXECUTIVE SECRETARY	$ 43.49	$ 47.97
	AVERAGE FACULTY	$ 64.27	$ 69.21
	AVERAGE PRESIDENT	$ 139.20	$ 149.31
	AVERAGE VICE PRESIDENT	$ 86.82	$ 103.39
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 69.80	$ 72.51
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS		$ 103.27
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 28.92	$ 31.20
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 37.39	$ 41.04
BENNETT, NEAL	UTILITY WORKER	$ 33.45	$ 35.91
BEVERLY, CHERYL	COUNSELOR	$ 63.89	$ 73.89
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 72.31	$ 78.19
BROWN, TOM	FACILITIES SUPERVISOR	$ 52.33	$ 56.61
BRUCE, RITA	ACCOUNTING TECHNICIAN		$ 30.38

Name	Title	Fiscal Years: 04-05	05-06
BUERGER, DELORES	ADMIN. ASST. - BUSINESS MANAGER	$ 35.13	$ 37.99
CALDWELL, PATRICIA	VICE PRESIDENT	$ 86.10	RETIRED
CAMPBELL, LISA	FINANCIAL AID ASSISTANT	$ 23.70	$ 32.04
CHEUNG, JOSEPHINE	SENIOR ACCOUNTING TECHNICIAN	$ 46.06	$ 49.83
CLARKE, JANET	DIRECTOR OF PURCHASING (Retired 03-04)		
COLLETT, ANN	CURRICULUM ADVISOR	$ 42.71	$ 46.12
CONOVER, DEBBIE (10 Mo.)	COORD. SHS	$ 56.22	$ 60.70
CONSTANTINO, CYNTHIA	EXECUTIVE SECRETARY	$ 43.49	$ 50.82
COOPER, HORTENSE	DIRECTOR OF FINANCIAL AID/SCHOLARSHIP	$ 74.09	$ 76.43
CORRALES, CHRISTINA	SENIOR CLERK	$ 26.68	$ 32.03
D'AMICO, MIKE	POLICE CHIEF	$ 70.92	$ 77.22
DeMOS, SANDRA	DIRECTOR OF CHILD DEVELOPMENT CENTER	$ 57.36	$ 59.84
DETWILLER, LINDA	SUPPORT TECHNICIAN	$ 40.52	$ 45.95
DEVER, SUSAN	COORDINATOR	$ 70.84	$ 76.24
DREW, IRV	MATH SCIENCES (PART YEAR)	$ 64.27	$ 69.21
DURAN, MARIA	FINANCIAL AID ASSISTANT	$ 33.61	$ 36.11
ELMORE, MAURICE	ASSISTANT DIRECTOR (Retired 03-04)		
ELY, JANICE	DIRECTOR ACCOUNTING	$ 60.60	$ 65.55
ESKRIDGE, MATTIE	ASSISTANT TO VICE PRESIDENT	$ 41.62	$ 45.45
FALLO, THOMAS	SUPERINTENDENT	$ 139.20	$ 149.31
FASTEAU, STEVE	DEAN OF ENROLLMENT SERVICES (Retired 03-04)		
FEES, PAMELA	BUSINESS MANAGER FISCAL SERVICES	$ 75.52	$ 82.23
FERNANDEZ, ELIZABETH	FINANCIAL AID ASSISTANT	$ 29.65	$ 32.03

Name	Title	Fiscal Years: 04-05	05-06
FILIO, SHARON	ACCOUNTING TECHNICIAN		$ 30.13
FRANKLIN, MURRIEL	HR TECH	$ 36.41	$ 39.36
GANN, BOB	DIRECTOR OF FACILITIES	$ 82.14	$ 88.81
GARTEN, ANN MARIE	DIRECTOR OF P.R.	$ 63.48	$ 68.62
GEORGES, JOE	PROJECT DIRECTOR	$ 55.58	RETIRED
GOLDBERG, DON	DEAN OF MATH SCIENCES (PART YEAR)	$ 69.49	$ 77.77
GRIGSBY, ALICE	ACTING DEAN-INSTRUCTIONAL SERVICES	$ 65.83	$ 71.64
GRUPPETTA, ANTHONY	GROUNDS KEEPER/GARD II	$ 36.31	$ 39.29
HANSON, VICTOR	VP ADMINISTRATIVE SERVICES (Retired 02/2005)	$ 87.54	
HATA, NADINE	VP ACADEMIC AFFAIRS (Retired 03-04)		
IFILL, MIRIAM	ACCOUNTANT	$ 39.68	$ 43.55
JACKSON, TOM	DIRECTOR OF INDUSTRY AND TECH	$ 66.63	$ 72.52
JEFFERY, VALERIE	EMPLOYEE RELATIONS SPECIALIST	$ 42.00	$ 45.52
JOHNSTON, KIRK	POLICE SERGEANT	$ 54.55	$ 55.42
KELLEY, ALEX	DIRECTOR INFORMATION SYSTEMS (07/04-02/05)		
KELLEY, ALEX	VP OF ADMIN SERVICES (03/05-06/05)	$ 93.00	
LEE, ESTELLA	ACCOUNTING OFFICER	$ 43.16	$ 46.61
LEW, TOM	DEAN - HUMANITIES	$ 74.60	$ 81.23
LOVETTA, KELLEY	CASHIER	$ 10.00	$ 10.50
MACK, VICKI	FINANCIAL AID ASSISTANT	$ 33.36	$ 35.61
MANNO, DONNA	COORDINATOR	$ 54.71	$ 36.81
MARSEE,JEFF	VP OF ADMINISTRATIVE SERVICES		$ 103.50
MARSHAL, NANETTE	ACCOUNT ASSISTANT III	$ 34.38	$ 37.08

Name	Title	Fiscal Years: 04-05	05-06
MATUSAK, ELIZABETH	REGISTRATION CASHIER II	$ 9.50	$ 9.50
McCOY, ROXANNE	HR TECH	$ 39.90	$ 43.16
McGREEVY, RICHARD	REGISTRATION CASHIER	$ 8.50	$ 8.50
MEANS, JOHN	DEAN, COMMUNITY ADVANCEMENT	$ 74.46	$ 83.29
MIDDLETON, LEO	DIRECTOR	$ 71.02	$ 76.78
MILLER, DAVID	ASSISTANT DIRECTOR OF FACILITIES	$ 58.80	$ 68.91
MIRANDA, GLORIA	DEAN - BEHAVIORAL & SOCIAL SCIENCES	$ 73.64	$ 80.05
MORRIS, BARBARA	SUPERVISOR - NATURAL SCIENCES	$ 48.81	RETIRED
MORTON, BOZENA	DIRECTOR OF RESEARCH/GRANT DEVELOPMENT	$ 70.66	$ 76.42
MULROONEY, BILL	DIRECTOR OF ADMISSIONS AND RECORDS	$ 74.41	$ 80.29
NGUYEN, HOANG-LINH	PARAPROFESSIONAL	$ 10.00	$ 15.38
NIETO, ESPERANZA	ASSISTANT DIRECTOR OF ADMISSIONS & RECORDS	$ 70.20	$ 76.02
ORTIZ, JULIETA	FINANCIAL AID ASSISTANT	$ 23.87	$ 27.16
OSWALD, KATHY	ASSISTANT TO PRESIDENT	$ 54.15	$ 58.48
OTT, JONATHAN	SERGEANT	$ 55.88	$ 60.84
PEREZ, BARBARA	ACTING DEAN-NATURAL SCIENCES	$ 68.64	$ 76.87
PHAM, VANNA	FINANCIAL AID ASSISTANT	$ 29.69	$ 33.47
PICKENS, SUSAN	ADMIN ASSISTANT	$ 34.72	$ 37.44
PULINI, SAMUELA	GROUNDS KEEPER/GARD II	$ 32.13	$ 34.77
QUADHAMMER, ROGER	DEAN - MUSIC (Retired 03-04)		
QUARLES, ALLENE	ASSISTANT DIRECTOR HUMAN RESOURCES	$ 71.02	$ 76.78
QUIROZ, CAROL	ADMIN ASSISTANT	$ 37.41	$ 40.90

Name	Title	Fiscal Years: 04-05	05-06
QUIROZ, JIMMY	MECHANIC	$ 42.52	$ 46.57
RAPP, VIRGINIA	DEAN-BUSINESS	$ 78.52	$ 85.51
ROBBINS, TAYLOR	ASSISTANT DIRECTOR FINANCIAL AID/SCHOLARSHIP	$ 65.00	$ 68.58
ROBERTSON, GARY	POLICE OFFICER	$ 44.77	$ 48.16
SALDANA, JOE	OPERATIONS SUPERVISOR	$ 43.21	$ 46.50
SANCHEZ, RUTH	ASSISTANT TO VICE PRESIDENT	$ 40.11	$ 47.63
SCHWARTZ, JAMES	ACTING VP OF ACADEMIC AFFAIRS	$ 85.07	RETIRED
SHANNON, DAVE	DIRECTOR OF ATHLETICS	$ 64.11	RETIRED
SHOWDEN, DAVE	STUDY SUCCESS SPECIALIST		$ 32.84
SMITH, LUUKIA	ACCOUNT TECHNICIAN	$ 36.05	$ 38.97
SMITH, REGINA	DEAN OF COUNSELING & STUDENT SERVICES	$ 75.51	$ 82.20
SPOR, ARVID	DIRECTOR OF WORKFORCE EDUCATION	$ 66.52	$ 78.88
STOKES, MARIE (SEE YATMAN)	ACCOUNTING TECHNICIAN	$ 36.42	
TOWNSEND, KATHERINE	DIRECTOR OF NURSING	$ 72.01	$ 78.44
TRAN, HIEP	PROGRAMMER ANALYST	$ 54.63	$ 59.03
TRAN, HONG	ACCOUNT TECHNICIAN	$ 39.60	$ 42.85
TUITIBOU, MOSSESE	GROUNDS KEEPER/GARD I	$ 32.26	$ 34.68
TYLER, HAROLD	DIRECTOR - STUDENT DEV.	$ 68.43	$ 70.76
VILLALOBOS, BOBBI	DIRECTOR OF HUMANITIES (Resigned 03/2005)	$ 71.76	
WADE, MARCY	DIRECTOR HUMAN RESOURCES	$ 80.99	$ 87.39
WALLER, MICHELLE	ADMIN ASSISTANT	$ 37.34	$ 40.27
WARRIOR, SHOBHANA	ADMIN ASSISTANT	$ 33.62	$ 36.13
WAY, RON	DEAN - INDUSTRY & TECH	$ 79.39	$ 86.49

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
YATMAN, MARIE (STOKES)	ACCOUNTING TECHNICIAN	$ 36.42	$ 41.31
YUAN, URANIA	HR TECH	$ 28.02	$ 33.88
ZANE, JEAN	FINANCIAL AID ADVISOR	$ 40.99	$ 44.14

El Camino Community College District
308/95 Enrollment Fee Colle[illegible]n and Waivers
Fiscal Years: 1999-00 thr[illegible]gh 2005-06
Offset Savings

ose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
ce: EFCW 1.8-4 and attachments from district office.
ings:

urce	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969	$ 5,398,639
. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639	$ 107,973
line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371	$ 2,965,574
. 76300 (l) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311
4A X 7%)	7% of Fees Waived							
0 only)	(99-00 only)	$ 91,466	For 00-01 through 05-06 - unit fee					
line 5	Summer		11,615	13,303	14,062	15,350	15,292	15,385
	Fall		51,494	54,192	60,864	70,475	71,669	69,529
	Winter/Interssion					2,676	6,856	6,339
	Spring		51,577	56,995	60,374	72,675	72,364	68,931
	Total # of credits		114,686	124,490	135,300	161,176	166,181	160,184
. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767
mary								
line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311
4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466						
5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767
Enrollment Fee er Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**	**$ 205,078**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$54,935,538	$49,157,063	$1,394,433	$50,551,496
EQUALIZATION	666,973	613,616	53,357	666,973
ENROLL FEE ADMIN (2%)	50,935	46,861	4,074	50,935
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	568,471	522,994	45,477	568,471
S.F.A.A.	662,985	608,871	54,114	662,985
E.O.P.S.	1,484,480	1,365,720	118,760	1,484,480
C.A.R.E.	250,951	230,875	20,076	250,951
D.S.P.S.	1,148,356	1,056,486	91,870	1,148,356
STATE HOSPITALS	0	0	0	0
CALWORKS	635,116	575,106	60,010	635,116
MATRICULATION (CREDIT)	782,199	716,403	65,796	782,199
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	22,647	19,148	3,499	22,647
PART-TIME FAC. INS.	1,343	0	1,343	1,343
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	848,408	780,536	67,872	848,408
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	463,309	426,245	37,064	463,309
ECON. DEVELOPMENT	972,791	817,144	0	817,144
TANF	146,494	134,776	11,718	146,494
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	63,210	0	63,210
VTEA TITLE I C	801,273	272,663	400,406	673,069
NURSING CARE	479,468	0	479,468	479,468
PRIOR YEAR CORRECTION	768,945	768,945	0	768,945
TOTAL	$65,818,264	$58,210,424	$2,927,907	$61,138,331

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5
El Camino Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

'pose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
ırce: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
dings:

Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1							
	B.1.a							$736.90
	B.1.b							$894.65
	B.2.a							$28,606.10
	B.2.b							$143,002.02
	B.2.c							$922.97
Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54	$174,162.64
Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00	$ 205,078.00
Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46	-$30,915.36
Total Enrollment Fee Waiver Offset Claimed	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**	**$174,162.64**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 04, 2006 09:57:09

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	371	69,004
BOGW - Part B based on income standards	7,113	1,805,642
BOGW - Part C based on financial need	4,121	1,090,928

Total Unduplicated Count = 10,902
Total Amount = $ 2,965,574

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

November 20, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8796

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for El Camino Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 448,073
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 438,073
Due from State	(08)	(17) $ 438,073
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	345,336
(25) EFCW-1, (04)(B)(1)(a)(f)	511
(26) EFCW-1, (04)(B)(1)(b)(f)	1,388
(27) EFCW-1, (04)(B)(2)(a)(f)	16,553
(28) EFCW-1, (04)(B)(2)(b)(f)	123,391
(29) EFCW-1, (04)(B)(2)(c)(f)	11,870
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	177,911
(32) EFCW-1, (09)	75,174
(33) EFCW-1, (10)	153,712
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the *Parameters and Guidelines* are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 11-12-2008

Janice Ely
Type or Print Name

Director of Accounting
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 47	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: El Camino Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 345,336.23	$ -	$ -	$ -	$ -	$ 345,336.23
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 510.58	$ -	$ -	$ -	$ -	$ 510.58
b. Staff training (One time per employee)	$ 1,387.58	$ -	$ -	$ -	$ -	$ 1,387.58
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 16,553.08	$ -	$ -	$ -	$ -	$ 16,553.08
b. Waiving student fees	$ 123,390.70	$ -	$ -	$ -	$ -	$ 123,390.70
c. Reporting BOG fee waiver data to CCC	$ 11,870.44	$ -	$ -	$ -	$ -	$ 11,870.44
(05) Total Direct Costs	$ 499,048.61	$ -	$ -	$ -	$ -	$ 499,048.61

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.65%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 177,910.83
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 676,959.44
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 75,174.00
(10) Less: Enrollment Fee Waiver offsets		$ 153,712.38
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 448,073.06

New 04/06

Program 257

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
nino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$22.15	4,246.0	$ 94,048.90				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Enrollment Fees	$22.15	4,580.6	$ 101,460.29				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$22.15	2,938.5	$ 65,087.78				
g written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$22.15	2,333.5	$ 51,687.03				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Enrollment Fees	$22.15	1,492.2	$ 33,052.23				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 345,336.23	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: mino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Cooper, Hortense	Director, Financial Aid	$76.39	4.0	$ 305.56				
Zane, Jean	Financial Aid Advisor	$43.87	2.0	$ 87.74				
Tran, Hiep	Programmer Analyst	$58.64	2.0	$ 117.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 510.58	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: mino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Robbins, Taylor	Assistant Director, Financial Aid/Scholar	$68.24	16.0	$ 1,091.84				
Cooper, Hortense	Director, Financial Aid	$76.39	1.0	$ 76.39				
Zane, Jean	Financial Aid Advisor	$43.87	5.0	$ 219.35				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,387.58	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: nino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cooper, Hortense	Director, Financial Aid	$76.39	10.0	$ 763.90				
Nguyen, Hoang-Linh	*Data Entry Operator*	$16.50	255.0	$ 4,207.50				
Zane, Jean	Financial Aid Advisor	$43.87	264.0	$ 11,581.68				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 16,553.08	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F nino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	906.8	$ 31,348.08				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	868.2	$ 30,013.67				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	791.0	$ 27,344.87				
E approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	1,003.3	$ 34,684.08				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 123,390.70	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Fullerton Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cooper, Hortense	Director, Financial Aid	$76.39	5.0	$ 381.95				
Zane, Jean	Financial Aid Advisor	$43.87	120.0	$ 5,264.40				
Tran, Hiep	Programmer Analyst	$58.64	1.0	$ 58.64				
Detwiler, Linda	Support Technician	$45.67	135.0	$ 6,165.45				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,870.44	$ -	$ -	$ -	$ -

New 04/06

El Camino Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	4.00	Cooper, Hortense	Director, Financial Aid	$76.39	$305.56	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Cooper, Hortense	Director, Financial Aid	$76.39	$76.39	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	10.00	Cooper, Hortense	Director, Financial Aid	$76.39	$763.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Cooper, Hortense	Director, Financial Aid	$76.39	$381.95	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Cooper, Hortense Total**			$1,527.80		
06-07	135.00	Detwiler, Linda	Support Technician	$45.67	$6,165.45	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	135.00	**Detwiler, Linda Total**			$6,165.45		
06-07	4,246.00	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$94,048.90	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	4,580.60	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$101,460.29	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,938.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$65,087.78	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	2,333.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$51,687.03	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	1,492.20	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$33,052.23	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,590.80	**Enrollment Office Staff Total**			$345,336.23		
06-07	906.80	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$31,348.08	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	868.20	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$30,013.67	Receiving waiver applications	Waiving student fees
06-07	791.00	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$27,344.87	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,003.30	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$34,684.08	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,569.30	**Financial Aid Office Staff Total**			$123,390.70		
06-07	255.00	Nguyen, Hoang-Linh	Data Entry Operator	$16.50	$4,207.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	255.00	**Nguyen, Hoang-Linh Total**			$4,207.50		
06-07	16.00	Robbins, Taylor	Assistant Director, Financial Aid/Scholarship	$68.24	$1,091.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	16.00	**Robbins, Taylor Total**			$1,091.84		
06-07	2.00	Tran, Hiep	Programmer Analyst	$58.64	$117.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Tran, Hiep	Programmer Analyst	$58.64	$58.64	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	3.00	**Tran, Hiep Total**			$175.92		
06-07	2.00	Zane, Jean	Financial Aid Advisor	$43.87	$87.74	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Zane, Jean	Financial Aid Advisor	$43.87	$219.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	264.00	Zane, Jean	Financial Aid Advisor	$43.87	$11,581.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	120.00	Zane, Jean	Financial Aid Advisor	$43.87	$5,264.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	391.00	**Zane, Jean Total**			$17,153.17		
	19,980.10	**Grand Total**			$499,048.61		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$51,571,394		$51,571,394	$374,037	$51,197,357
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	7,418,944		7,418,944	840,361	6,578,583
Course and Curriculum Development	6020	174,719		174,719	846	173,873
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	38,363		38,363		38,363
Instructional Support Services	6100					
Learning Center	6110	541,811		541,811	1,827	539,984
Library	6120	1,668,185		1,668,185	147,711	1,520,474
Media	6130	386,799		386,799		386,799
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	495,756		495,756		495,756
Other Instructional Support Services	6190					
Admissions and Records	6200	3,184,445		3,184,445		3,184,445
Counseling and Guidance	6300					
Student Counseling and Guidance	6310					
Matriculation and Student Assessment	6320					
Transfer Programs	6330	4,595,437		4,595,437	73,396	4,522,041
Career Guidance	6340					
Other Student Counseling and Guidance	6390	189,448		189,448	21,655	167,793
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,004,592		2,004,592	185,334	1,819,258
Subtotal		$72,269,893	$0	$72,269,893	$1,645,167	$70,624,726

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,303,177		$1,303,177	$3,393	$1,299,784
Health Services	6440	505,135		505,135	7,114	498,021
Student Personnel Admin.	6450	1,241,157		1,241,157		1,241,157
Financial Aid Administration	6460	2,325,680		2,325,680		2,325,680
Job Placement Services	6470	322,186		322,186		322,186
Veterans Services	6480	2,088		2,088	1,780	308
Miscellaneous Student Services	6490	489,920		489,920		489,920
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,910,135		2,910,135	2,910,135	0
Custodial Services	6530	3,090,527		3,090,527	3,090,527	0
Grounds Maintenance and Repairs	6550	734,579		734,579	734,579	0
Utilities	6570	3,186,271		3,186,271	3,186,271	0
Other	6590	302,506		302,506	302,506	0
Planning, Policy Making, and Coordination	6600	2,694,703		2,694,703	2,694,703	0
General Inst. Support Services	6700					
Community Relations	6710	941,278		941,278	941,278	0
Fiscal Operations	6720	1,752,415		1,752,415	1,752,415	0
Human Resources Management	6730	1,232,041		1,232,041	1,232,041	0
Noninstructional Staff Benefits & Incentives	6740	134,135		134,135	134,135	0
Staff Development	6750	298,327		298,327	298,327	0
Staff Diversity	6760	170,240		170,240	170,240	0
Logistical Services	6770	4,172,161		4,172,161	4,172,161	0
Management Information Systems	6780	2,752,955		2,752,955	2,752,955	0
Subtotal		$102,831,509	$0	$102,831,509	$26,029,727	$76,801,782

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	921,189		921,189	921,189	0
Community Services and Economic Development	6800					
Community Recreation	6810	427,066		427,066	21,197	405,869
Community Service Classes	6820	518,155		518,155	3,016	515,139
Community Use of Facilities	6830	91,594		91,594		91,594
Economic Development	6840	849,189		849,189	9,919	839,270
Other Community Services & Economic Development	6890	415,443		415,443		415,443
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	48,651		48,651		48,651
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,371,820		1,371,820	55,712	1,316,108
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	1,005,726		1,005,726	11,918	993,808
Other Auxiliary Operations	7090	1,830,141		1,830,141	20,681	1,809,460
Depreciation or Use Allowance - Building					1,977,834	
Depreciation or Use Allowance - Equipment					622,220	
(05) Total		$110,310,483	$0	$110,310,483	$29,673,413	$83,237,124
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.65%		
(07) Notes						

EL CAMINO COMMUNITY COLLEGE DISTRICT

NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2007 AND 2006

NOTE 5 - CAPITAL ASSETS

Capital asset activity for the District for the fiscal year ended June 30, 2007, was as follows:

	Balance Beginning of Year	Additions	Deductions	Balance End of Year
Capital Assets Not Being Depreciated				
Land	$ 1,050,000	$ -	$ -	$ 1,050,000
Construction in progress	14,734,847	38,393,440	-	53,128,287
Total Capital Assets Not Being Depreciated	15,784,847	38,393,440	-	54,178,287
Capital Assets Being Depreciated				
Site improvements	2,836,715	71,807	-	2,908,522
Buildings and improvements	64,925,685	2,658,932	-	67,584,617
Vehicles and equipment	7,978,714	326,243	68,390	8,236,567
Total Capital Assets Being Depreciated	75,741,114	3,056,982	68,390	78,729,706
Total Capital Assets	91,525,961	41,450,422	68,390	132,907,993
ess Accumulated Depreciation	41,814,491	2,644,354	68,390	44,390,455
Net Capital Assets	$ 49,711,470	$ 38,806,068	$ -	$ 88,517,538

Depreciation expense for the year was $2,644,354.

bldg equip.

44,300 - site improvem
1,977,834 - Building + improve
622,220 - Vehicles + Equip
2,644,354

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	87,272		668			87,940
Architecture and Environmental Design	0200	318,909		4,818			323,727
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,905,504	5,030	39,961			1,950,495
Business and Management	0500	1,749,067	10,805	3,547			1,763,419
Communications	0600	564,102	10,223				574,325
Information Technology	0700	1,199,448	63,461	686			1,263,595
Education	0800	3,681,840	441,197	41,599	19,845		4,184,481
Engineering and Industrial Tech.	0900	2,840,136	420,540	228,981	79,916		3,569,573
Fine and Applied Arts	1000	4,918,786	687,203	138,761	9,963		5,754,713
Foreign Language	1100	1,674,818	138,303				1,813,121
Health	1200	3,489,069	69,770	128,169	216,483		3,903,491
Family and Consumer Sciences	1300	742,076	293,928	157,347	3,719		1,197,070
Law	1400	282,963	17,652	6,441			307,056
Humanities (Letters)	1500	5,775,045	220,924	22,836			6,018,805
Library Science	1600		65,686				65,686
Mathematics	1700	4,710,296	22,409		9,252		4,741,957
Military Studies	1800						
Physical Sciences	1900	2,780,543		49,347			2,829,890
Psychology	2000	876,200		569			876,769
Public and Protective Services	2100	1,333,512	32,223	46,316	2,041		1,414,092
Social Sciences	2200	3,350,092	37,898	11,400			3,399,390
Commercial Services	3000	672,476	2,099	12,702			687,277
Interdisciplinary Studies	4900	4,568,518	136,021	14,240	32,818		4,751,597
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	92,925					92,925
Subtotal - Instructional Activities	**599**	47,613,597	2,675,372	908,388	374,037		51,571,394

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		5,767,884	810,699	840,361		7,418,944
Course and Curriculum Development	6020		124,527	49,346	846		174,719
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		17,877	20,486			38,363
Subtotal - Instructional Administration	**6000**		5,910,288	880,531	841,207		7,632,026
Instructional Support Services (6100)							
Learning Center	6110		534,233	5,751	1,827		541,811
Library	6120		1,359,368	161,106	147,711		1,668,185
Media	6130		364,471	22,328			386,799
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		495,756				495,756
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		2,753,828	189,185	149,538		3,092,551
Admissions and Records	**6200**		2,632,256	552,189			3,184,445
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310						
Matriculation and Student Assessment	6320						
Transfer Programs	6330		3,957,209	564,832	73,396		4,595,437
Career Guidance	6340						
Other Student Counseling and Guidance	6390		135,248	32,545	21,655		189,448
Subtotal - Student Counseling and Guidance	**6300**		4,092,457	597,377	95,051		4,784,885

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,687,125	132,133	185,334		2,004,592
Extended Opportunity Prgms. & Services (EOPS)	6430		1,233,585	66,199	3,393		1,303,177
Health Services	6440		479,243	18,778	7,114		505,135
Student Personnel Administration	6450		1,154,541	86,616			1,241,157
Financial Aid Administration	6460		2,260,054	65,626			2,325,680
Job Placement Services	6470		308,289	13,897			322,186
Veterans Services	6480			308	1,780		2,088
Miscellaneous Student Services	6490		418,021	71,899			489,920
Subtotal - Other Student Services	**6400**		7,540,858	455,456	197,621		8,193,935
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,463,433	439,549	7,153		2,910,135
Custodial Services	6530		2,955,740	132,339	2,448		3,090,527
Grounds Maintenance and Repairs	6550		680,762	45,696	8,121		734,579
Utilities	6570			3,186,271			3,186,271
Other Operation and Maintenance of Plant	6590		176,010	126,496			302,506
Subtotal - Operation and Maintenance of Plant	**6500**		6,275,945	3,930,351	17,722		10,224,018
Planning, Policymaking, and Coordination	**6600**		2,322,520	369,923	2,260		2,694,703

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

El Camino Community College District | 720 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		428,644	512,634			941,278
Fiscal Operations	6720		1,595,730	151,095	5,590		1,752,415
Human Resources Management	6730		1,040,316	191,485	240		1,232,041
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		134,135				134,135
Staff Development	6750		210,376	79,613	8,338		298,327
Staff Diversity	6760		145,133	24,177	930		170,240
Logistical Services	6770		2,906,102	1,265,376	683		4,172,161
Management Information Systems	6780		1,808,159	683,058	261,738		2,752,955
Other General Institutional Support Services	6790		514,539	399,026	7,624		921,189
Subtotal - General Institutional Support Services	**6700**		8,783,134	3,306,464	285,143		12,374,741
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		248,397	157,472	21,197		427,066
Community Service Classes	6820		353,225	161,914	3,016		518,155
Community Use Facilities	6830		80,034	11,560			91,594
Economic Development	6840		508,864	330,406	9,919		849,189
Other Community Svcs. & Economic Development	6890		57,513	357,930			415,443
Subtotal - Community Services	**6800**		1,248,033	1,019,282	34,132		2,301,447

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

El Camino Community College District | 720 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		13,843	34,808			48,651
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,124,648	191,460	55,712		1,371,820
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,138,491	226,268	55,712		1,420,471
Auxiliary Operations (7000)							
Contract Education	7010	178,223	475,154	340,431	11,918		1,005,726
Other Auxiliary Operations	7090		1,047,730	761,730	20,681		1,830,141
Subtotal - Auxiliary Operations	**7000**	178,223	1,522,884	1,102,161	32,599		2,835,867
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					4,041,808	4,041,808
Student Aid	7320					229,046	229,046
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,270,854	4,270,854
TOTAL EXPENDITURES and OTHER OUTGO	**391**	47,791,820	46,896,066	13,537,575	2,085,022	4,270,854	114,581,337

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2A and 4.
Findings:

***EFC 1**	70,767
Avg. time p/account	3.6
Total Time (in minutes)	254761
Per Hour	60
Hours Worked **(** Activity 11)**	**4246.0**
***EFC 2**	51,856
Avg. time p/student	5.3
Total Time (in minutes)	274837
Per Hour	60
Hours Worked **(** Activity 12)**	**4580.6**
***EFC 2**	51,856
Avg. time p/question	3.4
Total Time (in minutes)	176310
Per Hour	60
Hours Worked **(** Activity 13)**	**2938.5**
***EFC 2 (default)**	51,856
Avg. time p/file	2.7
Total Time (in minutes)	140011
Per Hour	60
Hours Worked **(** Activity 14)**	**2333.5**
***EFC 4**	12,790
Avg. time p/account	7.0
Total Time (in minutes)	89530
Per Hour	60
Hours Worked **(** Activity 15)**	**1492.2**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3A and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/question	4.7
Total Time (in minutes)	54407
Per Hour	60
Hours Worked **(** Activity 21)**	**906.8**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/application	4.5
Total Time (in minutes)	52092
Per Hour	60
Hours Worked **(** Activity 22)**	**868.2**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/evaluation	4.1
Total Time (in minutes)	47462
Per Hour	60
Hours Worked **(** Activity 23)**	**791.0**
***EFW 8 (default) El Camino dis not provide.**	
Avg. time p/application	6.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	11,576
Avg. time p/application	5.2
Total Time (in minutes)	60195
Per Hour	60
Hours Worked **(** Activity 25)**	**1003.3**
***EFW 8 El Camino did not provide**	
Avg. time p/application	4.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abelin, Annette	Registration Cashier	6.0	5.0	4.0		8.0	4.0
Abrams, Samuel	Registration Cashier	3.0	4.0	2.0		4.0	4.0
Ifill, Miriam	Accounting Technician	3.0	4.5	1.5		5.0	2.0
Kelley, Lovettea	Cashier	3.0	5.0	2.0		5.0	4.0
Langowski, Dena	Cashier	5.0	7.0	5.0	5.0	7.0	5.0
Marshal, Nanette	Accounting Assistant	2.0	4.0	4.0	1.5	9.0	1.5
Matusak, Elizabeth	Registration Cashier	5.0	8.5	3.0	5.0	8.5	6.0
Romano, Barbara	Registration Cashier	5.0	5.0	5.0		5.0	5.0
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0
Average		**3.6**	**5.3**	**3.4**	**2.7**	**7.0**	**3.6**

Conclusion: Findings go forward to Schedule 1A.

EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier						PHR
		1	2			4	5	
		**Activity Codes						
		11	12	13	14	15	16	06-07
Abelin, Annette	Registration Cashier	6.0	5.0	4.0		8.0	4.0	10.50
Abrams, Samuel	Registration Cashier	3.0	4.0	2.0		4.0	4.0	9.50
Ifill, Miriam	Accounting Technician	3.0	4.5	1.5		5.0	2.0	43.27
Kelley, Lovetta	Cashier	3.0	5.0	2.0		5.0	4.0	10.50
Langowski, Dena	Cashier	5.0	7.0	5.0	5.0	7.0	5.0	9.50
Marshal, Nanette	Accounting Assistant	2.0	4.0	4.0	1.5	9.0	1.5	36.97
Matusak, Elizabeth	Registration Cashier	5.0	8.5	3.0	5.0	8.5	6.0	9.50
Romano, Barbara	Registration Cashier	5.0	5.0	5.0		5.0	5.0	9.70
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0	38.71
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0	43.33
Average		**3.6**	**5.3**	**3.4**	**2.7**	**7.0**	**3.6**	**22.15**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	4.0	5.0	5.0	6.0	5.0	5.0
Corrales, Cristina	Financial Aid Assistant	3.0	4.0	4.0	4.0	4.0	5.0
Duran, Maria	Financial Aid Assistant	6.0	6.0	7.0	7.0	7.0	7.0
Fernandez, Elizabeth	Financial Aid Assistant	3.0	6.0	3.0	6.0	6.0	4.0
Higa, Stacy	Financial Aid Assistant	2.0	1.0	1.0	3.0	3.0	3.0
Mack, Vicki	Financial Aid Assistant	5.0	4.0	4.0	5.0	5.0	4.0
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	2.0	10.0	2.0	2.0
Pham, Vanna	Financial Aid Assistant	10.0	5.0	7.0	8.0	10.0	5.0
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0
Average		**4.7**	**4.5**	**4.1**	**6.1**	**5.2**	**4.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						PHR
		6			8	7	8	
		**Activity Codes						
		21	22	23	24	25	26	06-07
Campbell, Lisa	Financial Aid Assistant	4.0	5.0	5.0	6.0	5.0	5.0	31.80
Corrales, Cristina	Financial Aid Assistant	3.0	4.0	4.0	4.0	4.0	5.0	31.81
Duran, Maria	Financial Aid Assistant	6.0	6.0	7.0	7.0	7.0	7.0	35.89
Fernandez, Elizabeth	Financial Aid Assistant	3.0	6.0	3.0	6.0	6.0	4.0	31.76
Higa, Stacy	Financial Aid Assistant	2.0	1.0	1.0	3.0	3.0	3.0	34.00
Mack, Vicki	Financial Aid Assistant	5.0	4.0	4.0	5.0	5.0	4.0	35.25
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	2.0	10.0	2.0	2.0	33.49
Pham, Vanna	Financial Aid Assistant	10.0	5.0	7.0	8.0	10.0	5.0	33.27
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0	43.87
Average		**4.7**	**4.5**	**4.1**	**6.1**	**5.2**	**4.4**	**34.57**

Conclusion: Findings go forward to Schedule 1B.

EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and CCCCO.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1. Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997	62,253	70,767
EFC 2	1.8-1	2. Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752	51,351	51,856
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245	10,902	18,911
EFC 4	1.8-2	1. Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490	17,111	12,790
EFC 5	1.8-2	2. Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.								
EFW 6	1.8-3	1. Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.							11,576
EFW 7	1.8-3	2. Waivers Approved	X -	7,710	5,848	6,836	9,138	10,008	10,245	10,902	11,576
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.							0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 6
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Headcount

Purpose: To calculate the total headcount for El Camino CCD.
Source: Chancelor's website.
Findings:

Semester	Headcount
Summer	10,764
Fall	23,928
Winter	5,355
Spring	23,191
Total	**63,238**

Conclusion: Findings go forward to Schedule 4.

California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Summer Term

Data Current As Of January 08, 2008 11:01:39

Total Headcount	10,764

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California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino For 2006 Fall Term

Data Current As Of January 08, 2008 11:01:29

Total Headcount	23,928

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California Home

Tuesda

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2007 Winter Intersession

Data Current As Of January 08, 2008 11:01:10

Total Headcount	5,355

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California Home

Tuesda

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2007 Spring Semester

Data Current As Of January 08, 2008 10:58:34

Total Headcount	23,191

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Employee Name

Director, Financial Aid — Exact Position Title

Financial Aid — College/Department/Location

(310)660-3492 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		4	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		10	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		5	
TOTALS:		20	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper Date 12/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Linda Detwiler
Employee Name

User Support Technician
Exact Position Title

Financial Aid
College/Department/Location

3198
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- ~~Report~~ time in hours

	05-06	(06-07)	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		135	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda A Detwiler Date 12-12-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Employee Name: Hoang-Linh Nguyen

Exact Position Title: Data Entry Operator

College/Department/Location: Financial Aid

Telephone #:

Work year length: 12mo/11mo/10mo/hrly

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		255	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		255	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Hoang-Linh Nguyen Date: 12/12/07

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College/Compton Center Fiscal Year: 2006-07

Taylor Robbins
Employee Name

Assist Director / Acting Director
Exact Position Title

Financial Aid Office
Department/Location

310 660-3490
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
1/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
2/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
3/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
4/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Robbins Date _____

If you have any questions, please contact Hortense Cooper at (310) 660-3492 or (310) 660-3493

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hiep Tran
Employee Name

Programmer Analyst
Exact Position Title

ITS
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		1	
TOTALS:		3	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature Hiep Tran Date 2/22/08

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino

Jean Zarel — Employee Name

Financial Aid Advisor — Exact Position Title

Financial Aid — College/Department/Location

(310) 660-3495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		5	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		264	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		120	
TOTALS:		391	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zarel — Date 12/12/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

(310)660-6103 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A Abelin Date 12-21-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

ACCOUNTING
Department/Location

Samuel Abrams
Employee Name

REG CASHIER / CLERK II
Exact Position Title

310-660-3142
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Samuel Abrams Date 12/14/07

If you have any questions, please contact SAM ABRAMS, at 310-660-3103

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services - Cashiers
Department/Location

Miriam Ifill
Employee Name

Accts Tech 2
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12-17-07

If you have any questions, please contact MIRIAM IFILL, at 310 660 6103

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Cashier - accty - Fiscal Services
Department/Location

Loretta Kelley
Employee Name

CASHIER III
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. ~~PLEASE USE BLUE INK~~

Employee Signature Loretta Kelley Date 1-9-08

If you have any questions, please contact MIRIAM G. II at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

DENA LANGOWSKI
Employee Name

CASHIER
Exact Position Title

$9.50
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

310 324-5968

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dena Langowski Date 12-14-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Service
Department/Location

Nanette Marshal
Employee Name

Account Asst. III
Exact Position Title

(310) 660-6104
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 12/17/07

If you have any questions, please contact Nanette Marshal, at (310) 660-6104

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Services / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg - Cashier II
Exact Position Title

310-618-3576 Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7-10 min c/c takes longer		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7-10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5-7					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 12-11-07

If you have any questions, please contact Elizabeth, at 310-660-6103

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College Dist
District

Cashiers - accts office - Fisca/Service
Department/Location

Barbara Romano
Employee Name

REG CASHIER III
Exact Position Title

310660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06/06-07/07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1-08-08

If you have any questions, please contact Miriam Tyll, at 310660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

Lukia Smith
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12/18/07

If you have any questions, please contact LUKIA SMITH, at (310) 660-3935

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

Hong Tran
Employee Name

ACCOUNTING TECH
Exact Position Title

(310) 660-3979
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran Date 12/17/07

If you have any questions, please contact HONG TRAN, at (310) 660-3979

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

(310) 660-3493 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L Campbell Date 12/12/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Cristina Corrales
Employee Name

Fin. Aid Asst.
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cristina Corrales Date 12/12/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Maria Duran
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 12/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL Camino College
District

Student Services/Financial Aid
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Fernandez Date 12-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Zane

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Enrollment Services
Department/Location

Stacy Higa
Employee Name

Financial Aid Assistant
Exact Position Title

310-660-6911
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacy Higa Date 12/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vicki Mack
Employee Name

Financial Aid Asst.
Exact Position Title

(310)660-3489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 12/18/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Julieta Ortiz
Employee Name

Financial Aid Assistant.
Exact Position Title

310 660 6350
Telephone #

~~Work~~ 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12/12/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vanna Pham
Employee Name

Financial Aid Assistant
Exact Position Title

(310) 660 - 6411
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vanna Pham Date 12/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

(310) 660-3295
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 12/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer		13,947	
Fall		25,401	
Winter/ Intersession		5,860	
		25,559	
		70,767	
who paid enrollment fees:			
		10753	
		18580	
		3846	
		18677	
		51856	
xempted from paying enrollment fees (BOGG, etc):			
		3194	
		6821	
		2014	
		6882	
		18911	

13,947 + 25,401 + 5,860 + 25,559 + 70,767

10,753 + 18,580 + 3,846 + 18,677 + 51,856

3,194 + 6,821 + 2,014 + 6,882 + 18,911

ATION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

X Employee Signature: _____ Date 2/22/08

Employee Name: (print) HIEP TRAN

Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		12,790	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature: Marie Yatman Date 2/27/08

Marie Yatman
Employee Name: (print)

Accounting Tech
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: El Camino Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total	11,576		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/31/08

HIEP TRAN
Employee Name: (print)

PROGRAMMER/ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$ 5,914,869	$
2. Enrollment Fees Refunded	$	$ 561,316	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$ 5,353,553	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 3,459,768	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 69,195	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer		13,525	
B. Fall		65,440	
C. Winter/Intersession		7,234	
D. Spring		64,586	
0.91 per credit		137,214	

TION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ded a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

Hiep Tran

Date 2/22/08

PROGRAMMER ANALYST
Position or Title

s, please contact _____, at _____.

INFORMATION BY _____; TO _____.

SixTen and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 40.59	$ 38.18
	AVERAGE DEAN	$ 81.50	$ 81.62
	AVERAGE DIRECTOR	$ 76.49	$ 78.03
	AVERAGE EXECUTIVE SECRETARY	$ 47.97	$ 48.18
	AVERAGE FACULTY	$ 69.21	$ 71.10
	AVERAGE PRESIDENT	$ 149.31	$ 161.27
ROMANO, BARBARA	AVERAGE REGISTRATION CASHIER		$ 9.70
	AVERAGE VICE PRESIDENT	$ 103.39	$ 103.90
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 72.51	Resigned 7/31/06
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS	$ 103.27	$ 108.56
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 31.20	$ 30.81
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 41.04	$ 35.90
BENNETT, NEAL	UTILITY WORKER	$ 35.91	$ 36.72
BEVERLY, CHERYL	COUNSELOR	$ 73.89	$ 58.40
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 78.19	$ 78.41
BROWN, TOM	FACILITIES SUPERVISOR	$ 56.61	$ 56.78

SixTen and Associates
MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 40.59	$ 38.18
	AVERAGE DEAN	$ 81.50	$ 81.62
	AVERAGE DIRECTOR	$ 76.49	$ 78.03
	AVERAGE EXECUTIVE SECRETARY	$ 47.97	$ 48.18
	AVERAGE FACULTY	$ 69.21	$ 71.10
	AVERAGE PRESIDENT	$ 149.31	$ 161.27
	AVERAGE VICE PRESIDENT	$ 103.39	$ 103.90
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 72.51	Resigned 7/31/06
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS	$ 103.27	$ 108.56
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 31.20	$ 30.81
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 41.04	$ 35.90
BENNETT, NEAL	UTILITY WORKER	$ 35.91	$ 36.72
BEVERLY, CHERYL	COUNSELOR	$ 73.89	$ 58.40
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 78.19	$ 78.41
BROWN, TOM	FACILITIES SUPERVISOR	$ 56.61	$ 56.78
BRUCE, RITA	ACCOUNTING TECHNICIAN	$ 30.38	$ 43.15

Name	Title	Fiscal Years: 05-06	06-07
BUERGER, DELORES	ADMIN. ASST. - BUSINESS MANAGER	$ 37.99	$ 38.01
CAMPBELL, LISA	FINANCIAL AID ASSISTANT	$ 27.45	$ 31.80
CHEUNG, JOSEPHINE	SENIOR ACCOUNTING TECHNICIAN	$ 49.83	$ 48.66
COLLETT, ANN	CURRICULUM ADVISOR	$ 46.12	$ 46.36
CONNOLLY, THOMAS	DIRECTOR OF ACCOUNTING	----------	$ 60.35
CONOVER, DEBBIE (10 Mo.)	COORD. SHS	$ 60.70	$ 61.07
CONSTANTINO, CYNTHIA	EXECUTIVE SECRETARY	$ 50.82	$ 51.41
COOPER, HORTENSE	DIRECTOR OF FINANCIAL AID/SCHOLARSHIP	$ 73.05	$ 76.39
CORRALES, CHRISTINA	SENIOR CLERK	$ 30.28	$ 31.81
D'AMICO, MIKE	POLICE CHIEF	$ 77.22	$ 77.18
DALTON, MICHAEL	STOCK CLERK		$ 32.83
DeMOS, SANDRA	DIRECTOR OF CHILD DEVELOPMENT CENTER	$ 59.84	$ 62.08
DETWILLER, LINDA	SUPPORT TECHNICIAN	$ 41.95	$ 45.67
DEVER, SUSAN	COORDINATOR	$ 76.24	$ 75.97
DREW, IRV	Acting DEAN OF NATURAL SCIENCE (4/1/07)	$ 69.21	$ 71.10
DURAN, MARIA	FINANCIAL AID ASSISTANT	$ 30.28	$ 35.89
ELY, JANICE	DIRECTOR ACCOUNTING (DIRECTOR/ BUSINESS MGR)	$ 65.55	$ D 65.10 $ BM 77.91
ESKRIDGE, MATTIE	ASSISTANT TO VICE PRESIDENT	$ 45.45	$ 45.28
FALLO, THOMAS	SUPERINTENDENT	$ 149.31	$ 161.27
FEES, PAMELA	BUSINESS MANAGER FISCAL SERVICES	$ 82.23	$ 81.62
FERNANDEZ, ELIZABETH	FINANCIAL AID ASSISTANT	$ 30.28	$ 31.76
FILIO, SHARON	ACCOUNTING TECHNICIAN	$ 30.13	$ 39.57
FRANKLIN, MURRIEL	HR TECH	$ 39.36	$ 39.65

Name	Title	Fiscal Years: 05-06	06-07
GANN, BOB	DIRECTOR OF FACILITIES	$ 88.81	$ 88.95
GARTEN, ANN MARIE	DIRECTOR OF P.R.	$ 68.62	$ 68.42
GOLDBERG, DON	DEAN OF MATH SCIENCES (PART YEAR)	$ 77.77	$ 79.91
GRIGSBY, ALICE	ACTING DEAN-INSTRUCTIONAL SERVICES	$ 71.64	$ 71.68
GRUPPETTA, ANTHONY	GROUNDS KEEPER/GARD II	$ 39.29	$ 39.80
HIGA, STACY			$ 34.00
HOERNING, BRUCE	ASSISTANT DIRECTOR OF FACILITIES	$ 56.46	$ 56.46
IFILL, MIRIAM	ACCOUNTANT	$ 39.53	$ 43.27
JACKSON, TOM	DIRECTOR OF INDUSTRY AND TECH	$ 72.52	$ 78.09
JEFFERY, VALERIE	EMPLOYEE RELATIONS SPECIALIST	$ 45.52	$ 46.47
JOHNSTON, KIRK	POLICE SERGEANT	$ 55.42	REPLACED
KELLEY, LOVETTA	CASHIER	$ 10.50	$ 10.50
LANGOWSKI, DENA			$ 9.50
LEE, ESTELLA	ACCOUNTING OFFICER	$ 44.79	$ 35.25
LEW, TOM	DEAN - HUMANITIES	$ 81.23	$ 81.16
MACK, VICKI	FINANCIAL AID ASSISTANT	$ 30.28	$ 35.25
MANNO, DONNA	COORDINATOR	$ 36.81	$ 36.81
MARSEE,JEFF	VP OF ADMINISTRATIVE SERVICES	$ 103.50	$ 108.58
MARSHAL, NANETTE	ACCOUNT ASSISTANT III	$ 37.08	$ 36.97
MARSHALL, NINA		$ 35.14	$ 36.82
MATUSAK, ELIZABETH	REGISTRATION CASHIER II	$ 9.50	$ 9.50
McCOY, ROXANNE	HR TECH	$ 43.16	$ 43.64
MCGEE, JANET	PROGRAM ASSISTANT		$ 22.17

Name	Title	Fiscal Years: 05-06	06-07
McGREEVY, RICHARD	REGISTRATION CASHIER	$ 8.50	$ 8.50
MEANS, JOHN	DEAN, COMMUNITY ADVANCEMENT	$ 83.29	$ 88.00
MIDDLETON, LEO	DIRECTOR	$ 76.78	$ 76.83
MILLER, DAVID	ASSISTANT DIRECTOR OF FACILITIES	$ 68.91	RETIRED
MIRANDA, GLORIA	DEAN - BEHAVIORAL & SOCIAL SCIENCES	$ 80.05	$ 79.59
MORTON, BOZENA	DIRECTOR OF RESEARCH/GRANT DEVELOPMENT	$ 76.42	$ 76.44
MULROONEY, BILL	DIRECTOR OF ADMISSIONS AND RECORDS	$ 80.29	$ 79.86
NGUYEN, HOANG-LINH	PARAPROFESSIONAL	$ 16.50	$ 16.50
NIETO, ESPERANZA	ASSISTANT DIRECTOR OF ADMISSIONS & RECORDS	$ 76.02	$ 74.51
NISHIME, JEANIE	VP OF STUDENT SERVICES	----------	$ 94.55
ORTIZ, JULIETA	FINANCIAL AID ASSISTANT	$ 30.28	$ 33.49
OSWALD, KATHY	ASSISTANT TO PRESIDENT	$ 58.48	$ 58.64
OTT, JONATHAN	SERGEANT	$ 60.84	$ 61.11
PEREZ, BARBARA	ACTING DEAN-NATURAL SCIENCES	$ 76.87	$ 78.76
PHAM, VANNA	FINANCIAL AID ASSISTANT	$ 30.28	$ 33.27
PICKENS, SUSAN	ADMIN ASSISTANT	$ 37.44	$ 37.33
PULINI, SAMUELA	GROUNDS KEEPER/GARD II	$ 34.77	$ 35.31
QUARLES, ALLENE	ASSISTANT DIRECTOR HUMAN RESOURCES	$ 76.78	$ 82.71
QUIROZ, CAROL	ADMIN ASSISTANT	$ 40.90	$ 38.93
QUIROZ, JIMMY	MECHANIC	$ 46.57	$ 46.53
RAPP, VIRGINIA	DEAN-BUSINESS	$ 85.51	$ 85.82
ROBBINS, TAYLOR	ASSISTANT DIRECTOR FINANCIAL AID/SCHOLARSHIP	$ 67.23	$ 68.24

Name	Title	Fiscal Years: 05-06	06-07
ROBERTSON, GARY	POLICE OFFICER	$ 48.16	$ 48.33
SALDANA, JOE	OPERATIONS SUPERVISOR	$ 46.50	$ 46.60
SANCHEZ, RUTH	ASSISTANT TO VICE PRESIDENT	$ 47.63	$ 47.86
SCHWARTZ, JAMES	Acting DEAN OF FINE ARTS	RETIRED	$ 75.03
SNOWDEN, DAVE	STUDY SUCCESS PECIALIST	$ 32.84	$ 42.29
SMITH, LUUKIA	ACCOUNT TECHNICIAN	$ 37.01	$ 38.71
SMITH, REGINA	DEAN OF COUNSELING & STUDENT SERVICE	$ 82.20	$ 82.49
SPOR, ARVID	DIRECTOR OF ENROLLMENT SERV ICES	$ 78.88	$ 80.92
TOWNSEND, KATHERINE	DIRECTOR OF NURSING	$ 78.44	$ 78.81
TRAN, HIEP	PROGRAMMER ANALYST	$ 53.52	$ 58.64
TRAN, HONG	ACCOUNT TECHNICIAN	$ 42.85	$ 43.33
TUITIBOU, MOSSESE	GROUNDS KEEPER/GARD I	$ 34.68	$ 34.86
TYLER, HAROLD	DIRECTOR - STUDENT DEV.	$ 70.76	$ 70.82
WADE, MARCY	DIRECTOR HUMAN RESOURCES(RESIGNED 04/07)	$ 87.39	$ 87.31
WAGSTAFF, JOHN	DIRECTOR OF ITS	$ 78.08	$ 78.09
WALLER, MICHELLE	ADMIN ASSISTANT	$ 40.27	$ 40.15
WARRIOR, SHOBHANA	ADMIN ASSISTANT	$ 36.13	$ 36.29
WAY, RON	DEAN - INDUSTRY & TECH	$ 86.49	$ 82.91
YATMAN, MARIE	ACCOUNTING TECHNICIAN	$ 41.31	$ 41.34
YUAN, URANIA	HR TECH	$ 33.88	$ 33.80
ZANE, JEAN	FINANCIAL AID ADVISOR (Retired 01/07)	$ 39.87	$ 43.87

Schedule 5
El Camino Co[illegible]nity College District
308/95 Enrollment [illegible] Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969	$ 5,398,639	$ 5,353,553
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639	$ 107,973	$ 107,071
1.8-4 line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371	$ 2,965,574	$ 3,459,768
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311	$ 69,195
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 91,466							
			For 00-01 through 05-06 - unit fee						
1.8-4 line 5	Summer		11,615	13,303	14,062	15,350	15,292	15,385	13,525
	Fall		51,494	54,192	60,864	70,475	71,669	69,529	65,440
	Winter/Interssion					2,676	6,856	6,339	7,234
	Spring		51,577	56,995	60,374	72,675	72,364	68,931	64,586
	Total # of credits		114,686	124,490	135,300	161,176	166,181	160,184	150,785
[illegible]. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767	$ 137,214
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311	$ 69,195
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466							
1.8-4 5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767	$ 137,214
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**	**$ 205,078**	**$ 206,409**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$60,027,019	$52,321,681	$3,919,098	$56,240,779
ENROLL FEE ADMIN (2%)	75,174	69,160	6,014	75,174
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	334,394	0	334,394	334,394
S.F.A.A.	621,469	571,752	49,717	621,469
E.O.P.S.	1,568,978	1,443,459	125,519	1,568,978
C.A.R.E.	252,517	232,315	20,202	252,517
D.S.P.S.	1,513,099	1,392,051	121,048	1,513,099
STATE HOSPITALS	0	0	0	0
CALWORKS	703,860	647,552	56,308	703,860
MATRICULATION (CREDIT)	1,195,281	1,099,658	95,623	1,195,281
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	20,134	18,524	1,610	20,134
PART-TIME FAC. ALLO.	848,408	780,536	67,872	848,408
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	1,004	0	1,004	1,004
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	207,524	190,922	16,602	207,524
SCHDL. MAINT. & REPAIR	207,543	190,939	16,604	207,543
TANF	139,169	128,036	11,133	139,169
ECON. DEVELOPMENT	1,593,249	1,171,421	166,908	1,338,329
NURSING EDUCATION	318,027	225,316	92,711	318,027
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	1,301,075	1,301,075	0	1,301,075
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	368,415	368,415	0	368,415
BASIC SKILLS -REAPPROP	322,813	322,813	0	322,813
CAR. TECH. TRAILER BIL	656,103	656,103	0	656,103
GEN. PUR. TRAILER BILL	1,283,572	1,283,572	0	1,283,572
INST. MATERIAL TRAILER	774,537	774,537	0	774,537
SCHLD.MAINT. TRAILER B	774,537	774,537	0	774,537
FACULTY STAFF DEV	82,450	82,450	0	82,450
TOTAL	$75,242,309	$66,085,586	$5,115,563	$71,201,149

Schedule 5A
El Camino Comm[illegible]ty College District
Enrollment Fee C[illegible]ction and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1		EFCW-1								
		B.1.a								
		B.1.b							$736.90	$510.58
		B.2.a							$894.65	$1,387.5[illegible]
		B.2.b							$28,606.10	$16,553.0[illegible]
		B.2.c							$143,002.02	$123,390.70
	Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54	$922.97	$11,870.44
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00	$174,162.64	$153,712.38
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46	$ 205,078.00	$ 206,409.00
4									-$30,915.36	-$52,696.62
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**	**$174,162.64**	**$153,712.38**

California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 08, 2008 11:02:32

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	195	109,308
BOGW - Part A-2 based on SSI recipient status	201	117,432
BOGW - Part A-3 based on general assistance recipient status	30	18,032
BOGW - Part A basis unreported	524	112,076
BOGW - Part B based on income standards	6,510	1,909,291
BOGW - Part C based on financial need	4,093	1,179,965
Fee Waiver – Dependent of (children) deceased or disabled Veteran	23	13,664

total 11,576

Total Amount = $ 3,459,768

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for El Camino Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

BEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 818,500	(13) $ 744,120
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 744,120
Due from State	(08) $ 818,500	(17) $ 744,120
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	518
(23) EFCW-1, (04)(A)(1)(b)(f)	5,111
(24) EFCW-1, (04)(A)(2)(a)(f)	539,004
(25) EFCW-1, (04)(B)(1)(a)(f)	320
(26) EFCW-1, (04)(B)(1)(b)(f)	6,166
(27) EFCW-1, (04)(B)(2)(a)(f)	49,143
(28) EFCW-1, (04)(B)(2)(b)(f)	108,432
(29) EFCW-1, (04)(B)(2)(c)(f)	9,857
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	253,073
(32) EFCW-1, (09)	53,586
(33) EFCW-1, (10)	173,918
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 6-26-06

Pamela Fees
Type or Print Name

Business Manager
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant: El Camino Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs (04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
	Object Accounts					
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 517.87	$ -	$ -	$ -	$ -	$ 517.87
b. Staff training (One time per employee)	$ 5,110.50	$ -	$ -	$ -	$ -	$ 5,110.50
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 539,004.43	$ -	$ -	$ -	$ -	$ 539,004.43
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 320.45	$ -	$ -	$ -	$ -	$ 320.45
b. Staff training (One time per employee)	$ 6,165.51	$ -	$ -	$ -	$ -	$ 6,165.51
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 49,142.90	$ -	$ -	$ -	$ -	$ 49,142.90
b. Waiving student fees	$ 108,431.55	$ -	$ -	$ -	$ -	$ 108,431.55
c. Reporting BOG fee waiver data to CCC	$ 9,857.13	$ -	$ -	$ -	$ -	$ 9,857.13
05) Total Direct Costs	$ 718,550.34	$ -	$ -	$ -	$ -	$ 718,550.34

ndirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.22%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 253,073.43
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 971,623.77
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 53,586.00
0) Less: Enrollment Fee Waiver offsets		$ 173,917.54
1) To...laimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 744,120.23

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Ifill, Miriam — Account Technician II	$35.82	3.8	$ 136.12				
Marshall, Nina — Account Assistant III	$32.34	3.8	$ 122.89				
Smith, Luukia — Account Technician	$34.06	3.8	$ 129.43				
Tran, Hong — Account Technician	$34.06	3.8	$ 129.43				
(05) Total [X] Subtotal [ ]	Page 1 of 1		$ 517.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Ifill, Miriam	Account Technician II	$35.82	37.5	$ 1,343.25				
Marshall, Nina	Account Assistant III	$32.34	37.5	$ 1,212.75				
Smith, Luukia	Account Technician	$34.06	37.5	$ 1,277.25				
Tran, Hong	Account Technician	$34.06	37.5	$ 1,277.25				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,110.50	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ramino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Account Technicians Various	$34.07	3,739.8	$ 127,414.99				
Calculating total enrollment fee to be collected Account Technicians Various	$34.07	4,367.2	$ 148,790.50				
Answering student's questions regarding enrollment fee collection Account Technicians Various	$34.07	3,902.6	$ 132,961.58				
Updating written and computer records for enrollment fee information Account Technicians Various	$34.07	1,951.3	$ 66,480.79				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Account Technicians Various	$34.07	1,859.6	$ 63,356.57				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 539,004.43	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Cooper, Hortense — Director, Financial Aid	$67.41	1.0	$ 67.41				
Robbins, Taylor — Assistant Director, Financial Aid	$59.88	3.0	$ 179.64				
Zane, Jean — Financial Aid Advisor	$36.70	2.0	$ 73.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 320.45	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Cooper, Hortense	Director, Financial Aid	$67.41	1.0	$ 67.41				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	100.0	$ 5,988.00				
Zane, Jean	Financial Aid Advisor	$36.70	3.0	$ 110.10				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,165.51	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cooper, Hortense	Director, Financial Aid	$67.41	10.0	$ 674.10				
Nguyen, Hoang-Linh	Para-Professional	$10.00	884.0	$ 8,840.00				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	500.0	$ 29,940.00				
Zane, Jean	Financial Aid Advisor	$36.70	264.0	$ 9,688.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 49,142.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Assistants Various	$27.49	956.2	$ 26,285.94				
Receiving waiver applications Financial Aid Assistants Various	$27.49	1,092.8	$ 30,041.07				
Evaluating waiver applications and verifying application documents Financial Aid Assistants Various	$27.49	853.8	$ 23,470.96				
Entering approved application information into district records; providing student award letter Financial Aid Assistants Various	$27.49	1,041.6	$ 28,633.58				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 108,431.55	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
El Camino Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cooper, Hortense	Director, Financial Aid	$67.41	5.0	$ 337.05				
Detwiler, Linda	Support Technician	$36.70	90.0	$ 3,303.00				
Robbins, Taylor	Assistant Director, Financial Aid	$59.88	1.0	$ 59.88				
Tran, Hiep	Programmer Analyst	$48.70	36.0	$ 1,753.20				
Zane, Jean	Financial Aid Advisor	$36.70	120.0	$ 4,404.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 9,857.13	$ -	$ -	$ -	$ -

El Camino Community College District
308/95 ENROLLME[illegible]EE COLLECTIONS/WAIVERS
[illegible]04-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3,739.80	Account Technicians	Various	$34.07	$127,414.99	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	4,367.20	Account Technicians	Various	$34.07	$148,790.50	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,902.60	Account Technicians	Various	$34.07	$132,961.58	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	1,951.30	Account Technicians	Various	$34.07	$66,480.79	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	1,859.60	Account Technicians	Various	$34.07	$63,356.57	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,820.50	**Account Technicians Total**			$539,004.43		
04-05	1.00	Cooper, Hortense	Director, Financial Aid	$67.41	$67.41	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	1.00	Cooper, Hortense	Director, Financial Aid	$67.41	$67.41	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	10.00	Cooper, Hortense	Director, Financial Aid	$67.41	$674.10	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
04-05	5.00	Cooper, Hortense	Director, Financial Aid	$67.41	$337.05	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	17.00	**Cooper, Hortense Total**			$1,145.97		
04-05	90.00	Detwiler, Linda	Support Technician	$36.70	$3,303.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	90.00	**Detwiler, Linda Total**			$3,303.00		
04-05	956.20	Financial Aid Assistants	Various	$27.49	$26,285.94	Answering student's questions regarding enrollment fee waivers/referring to appropriate persor	Waiving student fees
04-05	1,092.80	Financial Aid Assistants	Various	$27.49	$30,041.07	Receiving waiver applications	Waiving student fees
04-05	853.80	Financial Aid Assistants	Various	$27.49	$23,470.96	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,041.60	Financial Aid Assistants	Various	$27.49	$28,633.58	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,944.40	**Financial Aid Assistants Total**			$108,431.55		
04-05	3.80	Ifill, Miriam	Account Technician II	$35.82	$136.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Ifill, Miriam	Account Technician II	$35.82	$1,343.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Ifill, Miriam Total**			$1,479.37		
04-05	3.80	Marshall, Nina	Account Assistant III	$32.34	$122.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Marshall, Nina	Account Assistant III	$32.34	$1,212.75	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Marshall, Nina Total**			$1,335.64		
04-05	884.00	Nguyen, Hoang-Linh	Para-Professional	$10.00	$8,840.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	884.00	**Nguyen, Hoang-Linh Total**			$8,840.00		
04-05	3.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$179.64	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	100.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$5,988.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	500.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$29,940.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining [illegible]rds
04-05	1.00	Robbins, Taylor	Assistant Director, Financial Aid	$59.88	$59.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	604.00	**Robbins, Taylor Total**			$36,167.52		
04-05	3.80	Smith, Luukia	Account Technician	$34.06	$129.43	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Smith, Luukia	Account Technician	$34.06	$1,277.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Smith, Luukia Total**			$1,406.68		
04-05	36.00	Tran, Hiep	Programmer Analyst	$48.70	$1,753.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	36.00	**Tran, Hiep Total**			$1,753.20		
04-05	3.80	Tran, Hong	Account Technician	$34.06	$129.43	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	37.50	Tran, Hong	Account Technician	$34.06	$1,277.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.30	**Tran, Hong Total**			$1,406.68		

El Camino Community College District

308/95 ENROLLM FEE COLLECTIONS/WAIVERS

2004-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	2.00	Zane, Jean	Financial Aid Advisor	$36.70	$73.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Zane, Jean	Financial Aid Advisor	$36.70	$110.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	264.00	Zane, Jean	Financial Aid Advisor	$36.70	$9,688.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
04-05	120.00	Zane, Jean	Financial Aid Advisor	$36.70	$4,404.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	389.00	**Zane, Jean Total**			$14,276.30		
	21,950.10	**Grand Total**			$718,550.34		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$43,014,696		$43,014,696	$215,256	$42,799,440
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,615,641		5,615,641	514,679	5,100,962
Course and Curriculum Development	6020	502,124		502,124	5,710	496,414
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	622,698		622,698		622,698
Library	6120	1,588,980		1,588,980	118,375	1,470,605
Media	6130	417,520		417,520	26,762	390,758
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	426,808		426,808		426,808
Other Instructional Support Services	6190					
Admissions and Records	6200	2,649,346		2,649,346	173	2,649,173
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,910,486		2,910,486	5,052	2,905,434
Matriculation and Student Assessment	6320	261		261		261
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390	68,890		68,890	2,439	66,451
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,332,203		1,332,203	12,711	1,319,492
Subtotal		$59,149,653	$0	$59,149,653	$901,157	$58,248,496

Revised 9/04

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,091,615	[illegible]	$1,008,491		$1,008,491
Health Services	6440	416,306		416,306		416,306
Student Personnel Admin.	6450	610,457		610,457		610,457
Financial Aid Administration	6460	2,057,922		2,057,922	62,218	1,995,704
Job Placement Services	6470	370,600		370,600		370,600
Veterans Services	6480	120,908		120,908		120,908
Miscellaneous Student Services	6490	637,949		637,949	3,672	634,277
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,798,253		2,798,253	2,798,253	0
Custodial Services	6530	2,570,936		2,570,936	2,570,936	0
Grounds Maintenance and Repairs	6550	635,412		635,412	635,412	0
Utilities	6570	2,688,124		2,688,124	2,688,124	0
Other	6590	407,618		407,618	407,618	0
Planning, Policy Making, and Coordination	6600	3,341,746		3,341,746	3,341,746	0
General Inst. Support Services	6700					
Community Relations	6710	590,504		590,504	590,504	0
Fiscal Operations	6720	1,765,969		1,765,969	1,765,969	0
Human Resources Management	6730	792,429		792,429	792,429	0
Noninstructional Staff Benefits & Incentives	6740	128,772		128,772	128,772	0
Staff Development	6750	206,384		206,384	206,384	0
Staff Diversity	6760	141,600		141,600	141,600	0
Logistical Services	6770	4,957,828		4,957,828	4,957,828	0
Management Information Systems	6780	1,743,630		1,743,630	1,743,630	0
Subtotal		$87,224,615	$83,124	$87,141,491	$23,736,252	$63,405,239

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Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	304,604		304,604	304,604	0
Community Services and Economic Development	6800					
Community Recreation	6810	871,276		871,276		871,276
Community Service Classes	6820	367,607		367,607	1,556	366,051
Community Use of Facilities	6830	78,791		78,791	2,496	76,295
Economic Development	6840	576,802		576,802	37,531	539,271
Other Community Services & Economic Development	6890	134,818		134,818	809	134,009
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	56,363		56,363	15,238	41,125
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,220,936		1,220,936	59,360	1,161,576
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	667,667		667,667	46,503	621,164
Other Auxiliary Operations	7090	1,666,569		1,666,569	43,061	1,623,508
Physical Property Acquisitions	7100					
(05) Total		$93,170,048	$83,124	$93,086,924	$24,247,410	$68,839,514
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.22%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS Instructional* (1)	SALARIES and BENEFITS Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Agriculture and Natural Resources	0100	59,071		915			59,986
Architecture and Environmental Design	0200	299,317		3,902			303,219
Biological Sciences	0400	1,518,406	10,774	41,067			1,570,247
Business and Management	0500	1,494,590	15,858	4,418	1,321		1,516,187
Communications	0600	291,805	39,368		36,458		367,631
Computer and Information Science	0700	1,229,566	99,691	63,916	32,034		1,425,207
Education	0800	2,868,337	334,655	58,642	41,194		3,302,828
Engineering and Related Industrial Tech.	0900	2,632,049	230,994	239,100	55,960		3,158,103
Fine and Applied Arts	1000	4,269,800	449,343	406,706	11,600		5,137,449
Foreign Language	1100	1,398,592		2,327			1,400,919
Health	1200	2,430,801	181,352	34,811	85		2,647,049
Consumer Education and Home Economics	1300	587,918	132,259	69,380	14,388		803,945
Law	1400	327,953	18,402	3,005			349,360
Humanities (Letters)	1500	5,680,706	146,170	12,672			5,839,548
Library Science	1600						
Mathematics	1700	4,530,412	110,315	6,485			4,647,212
Military Studies	1800						
Physical Sciences	1900	2,488,212	6,337	54,183	689		2,549,421
Psychology	2000	607,747		395			608,142
Public Affairs and Services	2100	1,088,969	156,214	53,250	14,941		1,313,374
Social Sciences	2200	2,284,571		3,299			2,287,870
Commercial Services	3000	415,867	1,472	16,442			433,781
Interdisciplinary Studies	4900	2,956,254	192,861	28,850	6,586		3,184,551
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	108,667					108,667
Subtotal - Instructional Activities	**599**	39,569,610	2,126,065	1,103,765	215,256		43,014,696

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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El Camino Community College District 720 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS Instructional* (1)	SALARIES and BENEFITS Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,754,588	346,374	514,679		5,615,641
Course and Curriculum Development	6020		418,368	78,046	5,710		502,124
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,172,956	424,420	520,389		6,117,765
Instructional Support Services (6100)							
Learning Center	6110		502,388	120,310			622,698
Library	6120		1,323,545	147,060	118,375		1,588,980
Media	6130		374,995	15,763	26,762		417,520
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		426,808				426,808
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		2,627,736	283,133	145,137		3,056,006
Admissions and Records	**6200**		2,159,395	489,778	173		2,649,346
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,839,169	66,265	5,052		2,910,486
Matriculation and Student Assessment	6320			261			261
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390		55,118	11,333	2,439		68,890
Subtotal - Student Counseling and Guidance	**6300**		2,894,287	77,859	7,491		2,979,637

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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El Camino Community College District 720 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,243,770	75,722	12,711		1,332,203
Extended Opportunity Prgms. & Services (EOPS)	6430		958,518	49,973		[redacted]	1,091,815
Health Services	6440		403,100	13,206			416,306
Student Personnel Administration	6450		569,432	41,025			610,457
Financial Aid Administration	6460		1,956,262	37,442	62,218		2,057,922
Job Placement Services	6470		362,231	8,369			370,600
Veterans Services	6480			120,908			120,908
Miscellaneous Student Services	6490		634,277		3,672		637,949
Subtotal - Other Student Services	**6400**		6,129,590	346,645	78,601	83,124	6,637,960
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,356,521	426,328	15,404		2,798,253
Custodial Services	6530		2,460,231	110,705			2,570,936
Grounds Maintenance and Repairs	6550		558,916	70,119	6,377		635,412
Utilities	6570			2,668,124			2,668,124
Other Operation and Maintenance of Plant	6590		194,342	213,276			407,618
Subtotal - Operation and Maintenance of Plant	**6500**		5,570,010	3,508,552	21,781		9,100,343
Planning, Policymaking, and Coordination	**6600**		2,508,620	825,112	8,014		3,341,746

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		322,775	267,729			590,504
Fiscal Operations	6720		1,541,458	224,333	178		1,765,969
Human Resources Management	6730		692,298	98,648	1,483		792,429
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		128,772				128,772
Staff Development	6750		172,988	33,396			206,384
Staff Diversity	6760		122,550	19,970	(920)		141,600
Logistical Services	6770		3,718,453	1,231,914	7,461		4,957,828
Management Information Systems	6780		1,511,716	231,914			1,743,630
Other General Institutional Support Services	6790		3,360	300,758	486		304,604
Subtotal - General Institutional Support Services	6700		8,214,370	2,408,662	8,688		10,631,720
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		191,835	679,441			871,276
Community Service Classes	6820	6,672	121,005	238,374	1,556		367,607
Community Use Facilities	6830		59,513	16,782	2,496		78,791
Economic Development	6840		393,716	145,555	37,531		576,802
Other Community Svcs. & Economic Development	6890		41,771	92,238	809		134,818
Subtotal - Community Services	6800	6,672	807,840	1,172,390	42,392		2,029,294

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920			41,125	15,238		56,363
Farm Operations	6930						
Food Services	6940						
Parking	6950		998,037	163,539	59,360		1,220,936
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		998,037	204,664	74,598		1,277,299
Auxiliary Operations (7000)							
Contract Education	7010	190,493	148,131	282,540	18,234	28,269	667,667
Other Auxiliary Operations	7090		681,886	941,622	43,061		1,666,569
Subtotal - Auxiliary Operations	**7000**	190,493	830,017	1,224,162	61,295	28,269	2,334,236
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					911,354	911,354
Student Aid	7320					278,654	278,654
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,190,008	1,190,008
TOTAL EXPENDITURES and OTHER OUTGO	**391**	39,766,776	40,038,923	12,089,142	1,183,815	1,301,401	94,360,056

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	65,997
Avg. time p/account	3.4
Total Time (in minutes)	224390
Per Hour	60
Hours Worked **(** Activity 11)**	**3739.8**
***EFC 2**	55,752
Avg. time p/student	4.7
Total Time (in minutes)	262034
Per Hour	60
Hours Worked **(** Activity 12)**	**4367.2**
***EFC 2**	55,752
Avg. time p/question	4.2
Total Time (in minutes)	234158
Per Hour	60
Hours Worked **(** Activity 13)**	**3902.6**
***EFC 2 (default)**	55,752
Avg. time p/file	2.1
Total Time (in minutes)	117079
Per Hour	60
Hours Worked **(** Activity 14)**	**1951.3**
***EFC 4**	14,490
Avg. time p/account	7.7
Total Time (in minutes)	111573
Per Hour	60
Hours Worked **(** Activity 15)**	**1859.6**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/question	5.6
Total Time (in minutes)	57372
Per Hour	60
Hours Worked **(** Activity 21)**	**956.2**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/application	6.4
Total Time (in minutes)	65568
Per Hour	60
Hours Worked **(** Activity 22)**	**1092.8**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,245
Avg. time p/evaluation	5.0
Total Time (in minutes)	51225
Per Hour	60
Hours Worked **(** Activity 23)**	**853.8**
***EFW 8 *(default)* (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	6.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,245
Avg. time p/application	6.1
Total Time (in minutes)	62495
Per Hour	60
Hours Worked **(** Activity 25)**	**1041.6**
***EFW 8 (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 Back-up in FY 04-05 workpapers only - Sea
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
		11	12	13	14	15	16
Abelin, Annette	Registration Cashier II	4	5	6		9	4.5
Abrams, Samuel	Registration Cashier / Clerk II	4	2	1		4	3
Ifill, Miriam	Account Technician II	3	4.5	1.5		5	2
Lovetta, Kelley	Cashier	4	5	5		7	
Marshal, Nanette	Account Assistant III	2	4	4	1.5	9	1.5
Matusak, Elizabeth	Registration Cashier II	5	7	3	5	7	5
McGreevy, Richard	Registration Cashier	5	5	10		10	10
Smith, Luukia	Accounting Technician	2	5	5	1	8	2
Tran, Hong	Accounting Technician	2	5	2	1	10	2
Average		**3.4**	**4.7**	**4.2**	**2.1**	**7.7**	**3.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Back-up in FY 04-05 workpapers only - SEA
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	6	6	6	8	7	8
Corrales, Christina	Sr. Clerical	6	7	7	8	7	7
Duran, Maria	Financial Aid Assistant	6	10	10	6	6	5
Fernandez, Elizabeth	Financial Aid Assistant	2	4	2	4	4	3
Mack, Vicki	Financial Aid Assistant	6	5	5	5	7	5
Ortiz, Julieta	Financial Aid Assistant	5	5	1	10	3	2
Pham, Vanna	Financial Aid Assistant	10	8	5	7	10	5
Zane, Jean	Financial Aid Advisor	4		4		6	5
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997
EFC 2	1.8-1 2.	Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245
EFC 4	1.8-2 1.	Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490
EFC 5	1.8-2 2.	Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.						
EFW 6	1.8-3 1.	Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.					
EFW 7	1.8-3 2.	Waivers Approved	X =	7,710	5,848	6,836	9,138	10,008	10,245
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Wednesday, May 16, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For El Camino For 2004-2005

Data Current As Of May 16, 2012 08:59:56

Download The Result In Comma Delimited Format

Headcount
37,802

Back to Top of Page

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Employee Name

Director, Financial Aid & Schol. — Exact Position Title

College/Department/Location

3492 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			4	4	4	4	1	4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			1	1	1	1	1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			10	10	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			5	5	5	5	5	5
TOTALS:			20	20	20	20	17	20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper — Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Laura DeFriles — Employee Name

User Support + Technician — Exact Position Title

College/Department/Location

3498 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ 120 x 90 x ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laura DeFriles — Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

FAX TRANSMITTAL

1 Page(s) this memo
3 Page(s) attachment

DATE: May 18, 2006

~~TO:~~ ~~FM:~~ Marie Yatman
El Camino CCD
310-660-3798

CC: Caroline Yousef

~~FROM:~~ TO: Sergio M. Perez

see email attached

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005

PLEASE RESPOND BY: **June 1, 2006**

In order to complete the claims for the above mentioned program we need the following:

- Question #2 answered on the attached EFCW 1.8-2.
- Question #1 answered on the attached EFCW 1.8-3.
- Clarification on the attached EFCW 1.6B. Please check the appropriate box below.
  - ☐ Each staff member (Ifill, Tran, Smith and Marshall) is claiming the total time listed.
  - ☒ Each staff member (Ifill, Tran, Smith and Marshall) is only claiming a fourth of the total time listed.

Thank you .

SMP:sea

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TILL, HONG TRAN, Lucia Smith, Kina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

Fiscal-Accounting-Cashiers
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	~~15~~ 38	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150	~~150~~ 37.5	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM Till, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ______; TO ______

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New computer system in 99/00

* Note - see answer to Doc Req dated 5-8-06 (to Cinderella Moore) - SS&B

January 2006

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hoang-Linh Nguyen — Employee Name

Para-Professional — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ 1080 720 806 884 1008

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 720 720 806 884 1008

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hoang-Linh — Date 05-04-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Taylor Rathburn — Employee Name

Financial Aid Specialist Lead — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	3	5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
Enrollment Waiver Process:	3					3	100	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	3						300	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	3						1	1
TOTALS:	12					6	604	26

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Rathburn Date 5/3/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TJILL, HONG TRAN, LUCRETIA SMITH, Xlina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

Fiscal - Accounting - Cashiers
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	3.8 ~~15~~	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150	37.5 ~~150~~	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TJILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ______; TO ______

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New computer system in 99/00

* Note - see amounts Doc Req Dated 5-18-06 [illegible] directly above. [illegible] (B) - SSB

January 2006

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: EL CAMINO COLLEGE

HIEP TRAN — Employee Name

PROGRAMMER ANALYST — Exact Position Title

IT — College/Department/Location

310-660-3272 — Telephone #

12mo/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
16	200	40	24	24	24	36	

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZELL, HONG TRAN, Lucrecia Smith
Employee Name Nina Marshall

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - Accounting - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours						
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16 (3.8)	15	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150 (37.5)	150	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Nina A. Marshall Date 4/26/06

If you have any questions, please contact MIRIAM ZELL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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New computer System in 99/00

* Note - see answer to Doc Req Dated 5-18-06 (See directly above)

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZILL, HONG TRAN, Lucikia Smith
Employee Name Klina Marshall

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16 3.5	15	16
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		900	600	225	225	150 37.5	150	150
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Miriam Zill Date 4/26/06

If you have any questions, please contact MIRIAM ZILL, at 30660-6103

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New computer system in 99/00

* Note - see answer to Loc Rep dated 5-8-06 (in Correspondence above) - SSA

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Jean Zane — Financial Aid Advisor
Employee Name — Exact Position Title

Financial Aid — X 3495 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	2	2	2	2
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	3	3	3	3
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	588	588	588	588	264	264	264	264
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	180	180	180	180	120	120	120	
TOTALS:	772	772	772	772	389	389	389	264

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane — Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Angeles
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	45					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette J Abelin Date 3/22/06

If you have any questions, please contact Annette, 310 at 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: EL CAMINO COLLEGE
Department/Location: ACCOUNTING
Employee Name: SAMUEL ABRAMS
Exact Position Title: REG CASHIER/CLERK II
Telephone #: 310-660-3142
Work year length(circle): 12mo/11mo/10mo/hrly (hrly circled)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (05-06 circled)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A		✓ (scribbled out)			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Sam Abrams Date: 3-17-06

If you have any questions, please contact SAM ABRAMS, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services -
Department/Location

Miriam Ingill
Employee Name

Acct Tech II
Exact Position Title

(310) 660-6103
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	See #12 N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact Miriam Ingill, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES - CASHIER
Department/Location

LOVETTA KELLEY
Employee Name

CASHIER
Exact Position Title

310-660-6103
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

← years the person has been involved in process

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lovetta Kelley Date 3-8-06

If you have any questions, please contact MIRIAM IFILL/Lovetta at (310) 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

Nanette Marshal
Employee Name

Account Asst. III
Exact Position Title

660-6104
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/2006

If you have any questions, please contact Nanette Marshal, at (310) 660-6104

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Serv / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg-cashier II
Exact Position Title

310-618-8576
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7 mins				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 3-22-06

If you have any questions, please contact Elizabeth, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES "CASHIERS
Department/Location

RICHARD McGREEVY
Employee Name

REGISTRATION CASHIER
Exact Position Title

(310)660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Richard McGreevy Date 3-22-06

If you have any questions, please contact Richard, at 310660-6103

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6-14-06

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

LUUKIA SMITH
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00 00-01 01-02 02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact LUUKIA SMITH, at (310) 660-3935

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

HONG TRAN
Employee Name

ACCOUNTING TECH.
Exact Position Title

(310) 660-3979 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact HONG TRAN, at (310) 660-3979

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Campbell Date 5/9/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

[illegible]
Employee Name

Department/Location

Sr. Clerical
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible] Date 9/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Maria Duran
Employee Name

Department/Location

Financial Aid Asst
Exact Position Title

6660 3284
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-11	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Student Services
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Fernandez Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Zeine

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Vicki Mack
Employee Name

Fin. Aid. Asst.
Exact Position Title

3106603489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO
District

FINANCIAL AID
Department/Location

JULIETA ORTIZ
Employee Name

FINANCIAL AID ASSISTANT
Exact Position Title

3106606350
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vanna Pham
Employee Name

Financial Aid Assistant
Exact Position Title

(310) 660 - 3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10	✓	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5	✓		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vanna Pham Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

X 3495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

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Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	9922	10100	16884	18999	20683	11214	16949	12869
Fall	25886	27222	27640	31246	31334	27112	27351	24967
Winter/ Intersession								
Spring	26476	26476	26371	27787	29215	28237	27697	24417
Total	62284	63798	70895	78032	81232	66563	65997	62253
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	44226	56088	65047	71196	72044	56555	55752	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	7958	7710	5848	6836	9138	10008	10245	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date MAY 8, 2006

HIEP D TRAN
Employee Name: (print)

PROGRAMMER ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		8860	7,953	1,909	46,375	40,685	14,490	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Mari Yatman Date 5-15-05

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Total # of students with enrollment fee A/R

EFC 4

	a # of students	b a/r $	c Total Fees Collected	b/c*a # of students a/r
99-00	63,798	439,275	3,162,948	8,860
00-01	70,895	357,903	3,190,419	7,953
01-02	78,032	92,109	3,765,054	1,909
02-03	81,232	1,539,047	2,695,824	46,375
03-04	66,563	2,174,788	3,558,119	40,685
04-05	65,997	1,365,299	6,218,441	14,490

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	7958	7710	5848	6836	9138	10008	10245	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 5/9/2006

HIEP TRAN
Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: EL CAMINO COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 152732	$ 1306650	$ 1122981	$ 1205783	$ 1421929	$ 1637126	$ 3587371	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer			11615	13303	14062	15350	15292	
Fall			51494	54192	60864	70475	71669	
~~Winter/Intersession~~					-	2676	6856	
Spring			51577	56995	60374	72675	72364	
TOTAL x $0.91 per credit			104364	113286	123123	146670	151224	

See attached

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/9/2006

HIEP TRAN
Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Enrollment Fee Revenue Report	Fiscal Years 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1 Enrollment Fees Collected	3,810,152	3,162,948	3,190,419	3,765,054	2,695,824	3,558,119	6,218,441	
2 Enrollment Fees Refunded	420,731	421,126	487,465	684,003	537,130	620,025	836,472	
3 Enrollment Fee Revenue-Net (Line 1 subtract line 2)	3,389,421	2,741,822	2,702,954	3,081,051	2,158,694	2,938,094	5,381,969	
4A. Total Enrollment Fees Waived (BOGG)	1,521,732	1,306,650	1,122,981	1,205,783	1,421,929	1,637,126	3,587,371	
4B. 2% enrollment Fees Waived (Line 4A x 2%)								
4C. 7% Enrollment Fees Waived (Line 4A x 7%)								

would not fit on form 1.8-4

1
2
3

PHR's

Enrollment Fee & Collection For Individuals w/ Actual Hrs. -SJA

Full Time

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
7 Smith, Luukia	24.78	25.52	28.42	29.39	30.51	31.30	34.06	37.01
3 Ifill, Miriam	27.46	28.28	29.93	30.94	32.12	32.96	35.82	39.53
9 Tran, Hong	24.78	25.52	27.01	27.93	28.99	31.30	34.06	37.01
4 Marshall, Nina	23.02	23.72	27.01	27.93	28.99	29.74	32.34	35.14
10 Zane, Jean	27.46	28.28	30.47	33.34	34.61	35.52	36.70	39.87
Corrales, Christina	x	x	21.98	25.32	26.29	26.97	27.87	30.28
2 Detwiler, Linda	x	x	x	x	x	33.78	36.70	41.95
Campbell, Lisa	x	x	x	x	x	x	22.87	27.45
Duran, Maria	x	x	x	x	x	x	26.50	30.28
Fernandez, Elizabeth	x	x	x	x	x	x	26.50	30.28
Mack, Vicki	x	x	x	x	x	x	26.50	30.28
Ortiz, Julieta	x	x	x	x	x	x	26.50	30.28
Pham, Vanna	x	x	x	x	x	x	26.50	30.28
Lee, Estella	31.14	33.78	33.78	37.55	38.96	39.96	41.37	44.79
8 Tran, Hiep	39.28	40.45	42.80	44.25	45.94	47.13	48.70	53.52
6 Robbins, Taylor	51.50	x	x	x	x	58.14	59.88	67.23
1 Cooper, Hortense	x	x	54.09	57.58	61.25	65.07	67.41	73.05
Nieto, Esperanza	x	x	x	x	x	x	x	67.23
Snowden, Dave	x	x	x	x	x	x	x	37.93
Bruce, Rita	x	x	x	x	x	x	x	35.14
Ely, Janice	x	x	x	x	x	x	x	61.97
Fees, Pam	x	x	x	x	x	x	x	83.92
Yatman, Marie	x	x	x	x	x	x	x	38.92

Hourly

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Abelin, Annette	8.00	8.00	8.00	9.50	9.50	9.50	10.50	10.50
Matusak, Elizabeth	x	x	x	8.50	8.50	8.50	9.50	9.50
McGreevy, Richard	x	x	x	x	x	x	8.50	8.50
Abrams, Samuel	x	x	x	x	x	x	x	9.50
5 Nguyen, Hoang-Linh	x	x	x	8.50	9.00	10.00	10.00	16.50

3 Ifill, Miriam	Account Technician II	
4 Marshall, Nina	Account Assistant III	
5 Nguyen, Hoang-Lin	Para-Professional	
6 Robbins, Taylor	Assistant Director, Financial Aid	
7 Smith, Luukia	Account Technician	
8 Tran, Hiep	Programmer Analyst	ion
9 Tran, Hong	Account Technician	

Full Time

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Smith, Luukia	24.78	25.52	28.42	29.39	30.51	31.30	34.06
Ifill, Miriam	27.46	28.28	29.93	30.94	32.12	32.96	35.82
Tran, Hong	24.78	25.52	27.01	27.93	28.99	31.30	34.06
Marshall, Nina	23.02	23.72	27.01	27.93	28.99	29.74	32.34
Zane, Jean	27.46	28.28	30.47	33.34	34.61	35.52	36.70
Corrales, Christina	x	x	21.98	25.32	26.29	26.97	27.87
Detwiler, Linda	x	x	x	x	x	33.78	36.70
Campbell, Lisa	x	x	x	x	x	x	22.87
Duran, Maria	x	x	x	x	x	x	26.50
Fernandez, Elizabeth	x	x	x	x	x	x	26.50
Mack, Vicki	x	x	x	x	x	x	26.50
Ortiz, Julieta	x	x	x	x	x	x	26.50
Pham, Vanna	x	x	x	x	x	x	26.50
Lee, Estella	31.14	33.78	33.78	37.55	38.96	39.96	41.37
Tran, Hiep	39.28	40.45	42.80	44.25	45.94	47.13	48.70

Average PHR for Various Account Technicians

Campbell, Lisa	-	Financial Aid Assistant
Corrales, Christinia	-	Sr. Clerical
Duran, Maria	-	Financial Aid Assistant
Fernandez, Elizabeth	-	Financial Aid Assistant
Mack, Vicki	-	Financial Aid Assistant
Ortiz, Julieta	-	Financial Aid Assistant
Pham, Vanna	-	Financial Aid Assistant
Zane, Jean	-	Financial Aid Advisor

x	x	x	54.09	57.58	61.25	58.14	59.88
x	x	x	x	x	x	65.07	67.41
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x

Hourly

	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Abelin, Annette	8.00	8.00	8.00	9.50	9.50	9.50	10.50
Matusak, Elizabeth	x	x	x	8.50	8.50	8.50	9.50
McGreevy, Richard	x	x	x	x	x	x	8.50
Abrams, Samuel	x	x	x	x	x	x	x
Nguyen, Hoang-Linh	x	x	x	8.50	9.00	10.00	10.00

Average PHR for Various Financial Aid Assistants

= Staff that turned in (average time) on EFCW 1.7-2s - Enrollment Fee Collection Functions

= Staff that turned in (average time) on EFCW 1.7-3s - Enrollment Fee

El Camino Community College District
308/95 Enrollment [illegible] Collection and Waivers
Fiscal Years: 1[illegible]-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639
1.8-4 line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 91,466	For 00-01 through 04-05 - unit fee				
1.8-4 line 5	Summer		11,615	13,303	14,062	15,350	15,292
	Fall		51,494	54,192	60,864	70,475	71,669
	Winter/Interssion					2,676	6,856
	Spring		51,577	56,995	60,374	72,675	72,364
	Total # of credits		114,686	124,490	135,300	161,176	166,181
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466					
1.8-4 5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$49,803,761	$45,753,549	$-369,299	$45,384,250
ENROLL FEE ADMIN (2%)	53,586	46,084	7,502	53,586
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	31,667	-31,667	0
PARTNERSHIP FOR EXCEL.	3,387,724	2,913,442	474,282	3,387,724
S.F.A.A.	676,750	580,715	96,035	676,750
E.O.P.S.	1,424,005	1,224,644	199,361	1,424,005
C.A.R.E.	242,240	208,326	33,914	242,240
D.S.P.S.	1,056,749	904,362	152,387	1,056,749
STATE HOSPITALS	0	0	0	0
CALWORKS	675,116	580,599	94,517	675,116
MATRICULATION (CREDIT)	793,946	674,877	119,069	793,946
MATRIC. (NONCREDIT)	0	0	0	0
FAC. & STAFF DIVERSITY	21,628	15,375	6,253	21,628
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	848,408	729,631	118,777	848,408
BLOCK GRANT (ONE-TIME)	422,260	363,144	59,116	422,260
ECON. DEVELOPMENT	949,340	761,498	35,948	797,446
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	146,494	125,985	20,509	146,494
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	13,416	29,928	43,344
VTEA TITLE I C	715,802	139,581	461,693	601,274
PLANT & INSTRUCTIONAL	473,631	407,323	66,308	473,631
PRIOR YEAR CORRECTION	16,679	-812	17,491	16,679
TOTAL	$61,812,822	$55,504,966	$1,613,667	$57,118,633

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Sche 5A
El Camino Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46
4								
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**

Query Results by College - Microsoft Internet Explorer
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California Home
Wednesday, May 10, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 10, 2006 12:54:32

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	345	189,078
BOGW - Part B based on income standards	6,701	2,309,783
BOGW - Part C based on financial need	3,519	1,088,512

Total Unduplicated Count = 10,245
Total Amount = $ 3,587,371

1.8-3 #2.
1.8-4 4 A-SAS

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 15, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for El Camino Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Bramwell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 548,000	(13) $ 498,257
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 498,257
Due from State	(08) $ 548,000	(17) $ 498,257
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	650
(23) EFCW-1, (04)(A)(1)(b)(f)	6,092
(24) EFCW-1, (04)(A)(2)(a)(f)	354,835
(25) EFCW-1, (04)(B)(1)(a)(f)	737
(26) EFCW-1, (04)(B)(1)(b)(f)	895
(27) EFCW-1, (04)(B)(2)(a)(f)	28,606
(28) EFCW-1, (04)(B)(2)(b)(f)	143,002
(29) EFCW-1, (04)(B)(2)(c)(f)	923
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	187,616
(32) EFCW-1, (09)	50,935
(33) EFCW-1, (10)	174,163
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Janice Ely
on behalf of El Camino Colleg

Janice Ely
Type or Print Name

Date: 12/4/2006

Director of Accounting
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 87	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **El Camino Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2005-2006**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 649.80	$ -	$ -	$ -	$ -	$ 649.80
b. *Staff training (One time per employee)*	$ 6,091.89	$ -	$ -	$ -	$ -	$ 6,091.89
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 354,834.72	$ -	$ -	$ -	$ -	$ 354,834.72
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 736.90	$ -	$ -	$ -	$ -	$ 736.90
b. Staff training (One time per employee)	$ 894.65	$ -	$ -	$ -	$ -	$ 894.65
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 28,606.10	$ -	$ -	$ -	$ -	$ 28,606.10
b. Waiving student fees	$ 143,002.02	$ -	$ -	$ -	$ -	$ 143,002.02
c. Reporting BOG fee waiver data to CCC	$ 922.97	$ -	$ -	$ -	$ -	$ 922.97
(05) Total Direct Costs	$ 535,739.05	$ -	$ -	$ -	$ -	$ 535,739.05

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.02%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 187,615.82
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 723,354.87
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 50,935.00
(10) Enrollment Fee Waiver offsets		$ 174,162.64
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 498,257.23

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Lamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Ifill, Miriam	Accountant	$43.55	4.0	$ 174.20				
Marshal, Nanette	Account Assistant III	$37.08	4.0	$ 148.32				
Smith, Luukia	Account Technician	$38.97	4.0	$ 155.88				
Tran, Hong	Account Technician	$42.85	4.0	$ 171.40				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 649.80	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Camino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Ifill, Miriam	Accountant	$43.55	37.5	$ 1,633.13				
Marshal, Nanette	Account Assistant III	$37.08	37.5	$ 1,390.50				
Smith, Luukia	Account Technician	$38.97	37.5	$ 1,461.38				
Tran, Hong	Account Technician	$42.85	37.5	$ 1,606.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,091.89	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office St Collecting Fees	$23.44	3,527.7	$ 82,689.29				
Calculating total enrollment fee to be collected Various Enrollment Office St Collecting Fees	$23.44	4,022.5	$ 94,287.40				
Answering student's questions regarding enrollment fee collection Various Enrollment Office St Collecting Fees	$23.44	3,594.6	$ 84,257.42				
iting written and computer records for enrollment fee information Various Enrollment Office St Collecting Fees	$23.44	1,797.3	$ 42,128.71				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office St Collecting Fees	$23.44	2,195.9	$ 51,471.90				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 354,834.72	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Gamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	5.0	$ 342.90				
Zane, Jean	Financial Aid Advisor	$44.14	2.0	$ 88.28				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	4.0	$ 305.72				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 736.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: Lamino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	10.0	$ 685.80				
Zane, Jean	Financial Aid Advisor	$44.14	3.0	$ 132.42				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	1.0	$ 76.43				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 894.65	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	(d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Nguyen, Hoang-Linh	Paraprofessional	$15.38	1,008.0	$ 15,503.04				
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	10.0	$ 685.80				
Zane, Jean	Financial Aid Advisor	$44.14	264.0	$ 11,652.96				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	10.0	$ 764.30				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 28,606.10	$ -	$ -	$ -	$ -

New 04/06

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

Claimant: [illegible]amino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,017.5	$ 34,666.23				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,162.9	$ 39,620.00				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	908.5	$ 30,952.60				
[illegible]ing approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$34.07	1,108.4	$ 37,763.19				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 143,002.02	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Camino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Robbins, Taylor	Asst. Director, Financial Aid/Scholatship	$68.58	1.0	$ 68.58				
Tran, Hiep	Programmer Analyst	$59.03	8.0	$ 472.24				
Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	5.0	$ 382.15				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 922.97	$ -	$ -	$ -	$ -

New 04/06

[illegible] College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2005-20

Sort by Na.

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
)5-06	4.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$305.72	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
)5-06	1.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$76.43	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
)5-06	10.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$764.30	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
)5-06	5.00	Cooper, Hortense	Director, Financial Aid/Scholarship	$76.43	$382.15	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Cooper, Hortense Total**			$1,528.60		
05-06	4.00	Ifill, Miriam	Accountant	$43.55	$174.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	37.50	Ifill, Miriam	Accountant	$43.55	$1,633.13	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Ifill, Miriam Total**			$1,807.33		
05-06	4.00	Marshal, Nanette	Account Assistant III	$37.08	$148.32	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Marshal, Nanette	Account Assistant III	$37.08	$1,390.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Marshal, Nanette Total**			$1,538.82		
5-06	1,008.00	Nguyen, Hoang-Linh	Paraprofessional	$15.38	$15,503.04	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining reco
	1,008.00	**Nguyen, Hoang-Linh Total**			$15,503.04		
5-06	5.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$342.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
5-06	10.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$685.80	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
5-06	10.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$685.80	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
5-06	1.00	Robbins, Taylor	Asst. Director, Financial Aid/Scholatshi	$68.58	$68.58	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	26.00	**Robbins, Taylor Total**			$1,783.08		
5-06	4.00	Smith, Luukia	Account Technician	$38.97	$155.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Smith, Luukia	Account Technician	$38.97	$1,461.38	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Smith, Luukia Total**			$1,617.26		
5-06	8.00	Tran, Hiep	Programmer Analyst	$59.03	$472.24	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	8.00	**Tran, Hiep Total**			$472.24		
5-06	4.00	Tran, Hong	Account Technician	$42.85	$171.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
5-06	37.50	Tran, Hong	Account Technician	$42.85	$1,606.88	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	41.50	**Tran, Hong Total**			$1,778.28		
-06	3,527.70	Various Enrollment Office Sta	Collecting Fees	$23.44	$82,689.29	Referencing student accounts and records	Calculating and collecting enrollment fees
-06	4,022.50	Various Enrollment Office Sta	Collecting Fees	$23.44	$94,287.40	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
-06	3,594.60	Various Enrollment Office Sta	Collecting Fees	$23.44	$84,257.42	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
-06	1,797.30	Various Enrollment Office Sta	Collecting Fees	$23.44	$42,128.71	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
-06	2,195.90	Various Enrollment Office Sta	Collecting Fees	$23.44	$51,471.90	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,138.00	**Various Enrollment Office Staff Total**			$354,834.72		
06	1,017.50	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$34,666.23	Answering student's questions regarding enrollment fee waivers/referring to appropriate persc	Waiving student fees
06	1,162.90	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$39,620.00	Receiving waiver applications	Waiving student fees
06	908.50	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$30,952.60	Evaluating waiver applications and verifying application documents	Waiving student fees
06	1,108.40	Various Financial Office Staff	Waiving Enrollment Fees	$34.07	$37,763.19	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,197.30	**Various Financial Office Staff Total**			$143,002.02		
06	2.00	Zane, Jean	Financial Aid Advisor	$44.14	$88.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06	3.00	Zane, Jean	Financial Aid Advisor	$44.14	$132.42	Train district staff or attend training to implement procedures for waiver eligibility determinatior	Staff training - enrollment fee waiver
06	264.00	Zane, Jean	Financial Aid Advisor	$44.14	$11,652.96	Adopting procedures for documenting financial assistance, recording, and record maintenanc	Adopting procedures, recording, and maintaining records
	269.00	**Zane, Jean Total**			$11,873.66		
	20,832.30	**Grand Total**			$535,739.05		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$45,927,153		$45,927,153	$211,898	$45,715,255
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,959,838		5,959,838	502,231	5,457,607
Course and Curriculum Development	6020	403,734		403,734	1,099	402,635
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	674,647		674,647		674,647
Library	6120	1,656,043		1,656,043	136,956	1,519,087
Media	6130	382,703		382,703		382,703
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	521,733		521,733	30,074	491,659
Other Instructional Support Services	6190					
Admissions and Records	6200	3,106,550		3,106,550	4,563	3,101,987
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,382,702		3,382,702	5,657	3,377,045
Matriculation and Student Assessment	6320					
Transfer Programs	6330	305,251		305,251	8,764	296,487
Career Guidance	6340					
Other Student Counseling and Guidance	6390	79,975		79,975	146	79,829
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,402,340		1,402,340	3,341	1,398,999
Subtotal		$63,802,669	$0	$63,802,669	$904,729	$62,897,940

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,126,319	$70,935	$1,055,384	$423	$1,054,961
Health Services	6440	424,920		424,920		424,920
Student Personnel Admin.	6450	729,425		729,425		729,425
Financial Aid Administration	6460	2,561,295		2,561,295	101,547	2,459,748
Job Placement Services	6470	427,506		427,506		427,506
Veterans Services	6480	-963		-963		-963
Miscellaneous Student Services	6490	559,966		559,966	34,271	525,695
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,785,318		2,785,318	2,785,318	0
Custodial Services	6530	2,742,329		2,742,329	2,742,329	0
Grounds Maintenance and Repairs	6550	692,287		692,287	692,287	0
Utilities	6570	2,696,582		2,696,582	2,696,582	0
Other	6590	290,674		290,674	290,674	0
Planning, Policy Making, and Coordination	6600	3,310,432		3,310,432	3,310,432	0
General Inst. Support Services	6700					
Community Relations	6710	753,440		753,440	753,440	0
Fiscal Operations	6720	2,145,674		2,145,674	2,145,674	0
Human Resources Management	6730	986,824		986,824	986,824	0
Noninstructional Staff Benefits & Incentives	6740	148,481		148,481	148,481	0
Staff Development	6750	253,062		253,062	253,062	0
Staff Diversity	6760	139,814		139,814	139,814	0
Logistical Services	6770	5,347,565		5,347,565	5,347,565	0
Management Information Systems	6780	2,118,918		2,118,918	2,118,918	0
Subtotal		$94,042,537	$70,935	$93,971,602	$25,452,370	$68,519,232

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	170,098		170,098	170,098	0
Community Services and Economic Development	6800					
Community Recreation	6810	356,721		356,721	7,141	349,580
Community Service Classes	6820	434,854		434,854		434,854
Community Use of Facilities	6830	82,611		82,611	602	82,009
Economic Development	6840	747,310		747,310	37,894	709,416
Other Community Services & Economic Development	6890	7,142		7,142		7,142
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	51,324		51,324	9,775	41,549
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,415,756		1,415,756	82,333	1,333,423
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	851,361		851,361	3,940	847,421
Other Auxiliary Operations	7090	1,395,411		1,395,411	38,365	1,357,046
Physical Property Acquisitions	7100					
(05) Total		$99,555,125	$70,935	$99,484,190	$25,802,518	$73,681,672
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.02%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	42,536		10,626	1,473		54,635
Architecture and Environmental Design	0200	302,999		4,613	15,902		323,514
Biological Sciences	0400	1,390,345	216,032	38,788			1,645,165
Business and Management	0500	1,623,993	70,954	34,615			1,729,562
Communications	0600	337,761	39,658		1,393		378,812
Computer and Information Science	0700	1,077,811	112,097	42,923	13,184		1,246,015
Education	0800	2,633,106	729,713	45,853	39,324		3,447,996
Engineering and Related Industrial Tech.	0900	2,324,527	684,614	169,864	86,626		3,265,631
Fine and Applied Arts	1000	4,285,132	774,335	446,353	17,729		5,523,549
Foreign Language	1100	1,453,450					1,453,450
Health	1200	2,734,770	190,274	62,675	8,129		2,995,848
Consumer Education and Home Economics	1300	665,079	103,032	123,792	8,138		900,041
Law	1400	366,699	21,555	2,334			390,588
Humanities (Letters)	1500	5,914,275	146,060	16,161			6,076,496
Library Science	1600						
Mathematics	1700	4,788,526	350,114	9,733			5,148,373
Military Studies	1800						
Physical Sciences	1900	2,203,238	287,789	64,536			2,555,563
Psychology	2000	718,399		353			718,752
Public Affairs and Services	2100	1,065,130	175,718	58,113	20,000		1,318,961
Social Sciences	2200	2,685,709		3,121			2,688,830
Commercial Services	3000	421,315	76,331	16,866			514,512
Interdisciplinary Studies	4900	3,167,484	251,361	40,781			3,459,626
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	91,234					91,234
Subtotal - Instructional Activities	**599**	40,293,518	4,229,637	1,192,100	211,898		45,927,153

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]ncial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen[illegible]tures by Activity
S10 Gen[illegible]al Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
[illegible]struct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,913,365	544,242	502,231		5,959,838
Course and Curriculum Development	6020		298,624	104,011	1,099		403,734
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,211,989	648,253	503,330		6,363,572
Instructional Support Services (6100)							
Learning Center	6110		492,386	182,261			674,647
Library	6120		1,374,541	144,546	136,956		1,656,043
Media	6130		363,402	19,301			382,703
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		490,929	730	30,074		521,733
Other Instructional Support Services	6190						
[illegible]ubtotal - Instructional Support Services	**6100**		2,721,258	346,838	167,030		3,235,126
[illegible]missions and Records	**6200**		2,399,895	702,092	4,563		3,106,550
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,283,163	93,882	5,657		3,382,702
Matriculation and Student Assessment	6320						
Transfer Programs	6330		159,812	136,675	8,764		305,251
Career Guidance	6340						
Other Student Counseling and Guidance	6390		59,091	20,738	146		79,975
Subtotal - Student Counseling and Guidance	**6300**		3,502,066	251,295	14,567		3,767,928

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,337,513	61,486	3,341		1,402,340
Extended Opportunity Prgms. & Services (EOPS)	6430		1,001,597	53,364	423	70,935	1,126,319
Health Services	6440		419,035	5,885			424,920
Student Personnel Administration	6450		667,752	61,673			729,425
Financial Aid Administration	6460		2,189,147	270,601	101,547		2,561,295
Job Placement Services	6470		403,355	24,151			427,506
Veterans Services	6480		1,395	(2,358)			(963)
Miscellaneous Student Services	6490		437,992	87,703	34,271		559,966
Subtotal - Other Student Services	**6400**		6,457,786	562,505	139,582	70,935	7,230,808
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,259,185	507,958	18,175		2,785,318
Custodial Services	6530		2,609,041	133,288			2,742,329
Grounds Maintenance and Repairs	6550		608,263	60,929	23,095		692,287
Utilities	6570			2,696,582			2,696,582
Other Operation and Maintenance of Plant	6590		156,297	134,377			290,674
Subtotal - Operation and Maintenance of Plant	**6500**		5,632,786	3,533,134	41,270		9,207,190
Planning, Policymaking, and Coordination	**6600**		2,652,897	608,459	49,076		3,310,432

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		333,408	418,334	1,698		753,440
Fiscal Operations	6720		1,886,750	258,301	623		2,145,674
Human Resources Management	6730		833,089	153,735			986,824
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		148,481				148,481
Staff Development	6750		193,793	59,269			253,062
Staff Diversity	6760		126,355	13,459			139,814
Logistical Services	6770		4,121,866	1,166,054	59,645		5,347,565
Management Information Systems	6780		1,387,730	601,831	129,357		2,118,918
Other General Institutional Support Services	6790		715	168,656	727		170,098
Subtotal - General Institutional Support Services	**6700**		9,032,187	2,839,639	192,050		12,063,876
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		177,443	172,137	7,141		356,721
Community Service Classes	6820	1,239	137,807	295,808			434,854
Community Use Facilities	6830		80,121	1,888	602		82,611
Economic Development	6840		494,111	215,305	37,894		747,310
Other Community Svcs. & Economic Development	6890		1,683	5,459			7,142
Subtotal - Community Services	**6800**	1,239	891,165	690,597	45,637		1,628,638

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]icial and Budget Report

Expen[illegible]tures by Activity

S10 Gen[illegible]al Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		2,414	39,135	9,775		51,324
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,115,260	218,163	82,333		1,415,756
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,117,674	257,298	92,108		1,467,080
Auxiliary Operations (7000)							
Contract Education	7010	218,376	249,393	351,581	3,940	28,071	851,361
Other Auxiliary Operations	7090		568,636	788,410	38,365		1,395,411
Subtotal - Auxiliary Operations	**7000**	218,376	818,029	1,139,991	42,305	28,071	2,246,772
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					2,400,073	2,400,073
Other Outgo	7330					291,199	291,199
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					10,000	10,000
TOTAL EXPENDITURES and OTHER OUTGO	**391**	40,513,133	44,667,369	12,772,201	1,503,416	2,701,272	2,701,272
						2,800,278	102,256,397

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	62,253
Avg. time p/account	3.4
Total Time (in minutes)	211660
Per Hour	60
Hours Worked **(** Activity 11)**	**3527.7**
***EFC 2**	51,351
Avg. time p/student	4.7
Total Time (in minutes)	241350
Per Hour	60
Hours Worked **(** Activity 12)**	**4022.5**
***EFC 2**	51,351
Avg. time p/question	4.2
Total Time (in minutes)	215674
Per Hour	60
Hours Worked **(** Activity 13)**	**3594.6**
***EFC 2 (default)**	51,351
Avg. time p/file	2.1
Total Time (in minutes)	107837
Per Hour	60
Hours Worked **(** Activity 14)**	**1797.3**
***EFC 4**	17,111
Avg. time p/account	7.7
Total Time (in minutes)	131755
Per Hour	60
Hours Worked **(** Activity 15)**	**2195.9**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/question	5.6
Total Time (in minutes)	61051
Per Hour	60
Hours Worked **(** Activity 21)**	**1017.5**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/application	6.4
Total Time (in minutes)	69773
Per Hour	60
Hours Worked **(** Activity 22)**	**1162.9**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	10,902
Avg. time p/evaluation	5.0
Total Time (in minutes)	54510
Per Hour	60
Hours Worked **(** Activity 23)**	**908.5**
***EFW 8 (default) (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	6.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,902
Avg. time p/application	6.1
Total Time (in minutes)	66502
Per Hour	60
Hours Worked **(** Activity 25)**	**1108.4**
***EFW 8 (Records not kept for *EFW 6, so *EFW 8 can't be calculated)**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abelin, Annette	Registration Cashier II	4.0	5.0	6.0		9.0	4.5
Abrams, Samuel	Registration Cashier / Clerk II	4.0	2.0	1.0		4.0	3.0
Ifill, Miriam	Account Technician II	3.0	4.5	1.5		5.0	2.0
Lovetta, Kelley	Cashier	4.0	5.0	5.0		7.0	
Marshal, Nanette	Account Assistant III	2.0	4.0	4.0	1.5	9.0	1.5
Matusak, Elizabeth	Registration Cashier II	5.0	7.0	3.0	5.0	7.0	5.0
McGreevy, Richard	Registration Cashier	5.0	5.0	10.0		10.0	10.0
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0
Average		3.4	4.7	4.2	2.1	7.7	3.8

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		1	2			4	5	
		**Activity Codes						PHR
Staff	Title	11	12	13	14	15	16	05-06
Abelin, Annette	Registration Cashier II	4	5	6		9	4.5	10.50
Abrams, Samuel	Registration Cashier / Clerk II	4	2	1		4	3	9.50
Ifill, Miriam	Account Technician II	3	4.5	1.5		5	2	43.55
Lovetta, Kelley	Cashier	4	5	5		7		10.50
Marshal, Nanette	Account Assistant III	2	4	4	1.5	9	1.5	37.08
Matusak, Elizabeth	Registration Cashier II	5	7	3	5	7	5	9.50
McGreevy, Richard	Registration Cashier	5	5	10		10	10	8.50
Smith, Luukia	Accounting Technician	2	5	5	1	8	2	38.97
Tran, Hong	Accounting Technician	2	5	2	1	10	2	42.85
Average		**3.4**	**4.7**	**4.2**	**2.1**	**7.7**	**3.8**	**23.44**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	6.0	6.0	6.0	8.0	7.0	8.0
Corrales, Christina	Sr. Clerical	6.0	7.0	7.0	8.0	7.0	7.0
Duran, Maria	Financial Aid Assistant	6.0	10.0	10.0	6.0	6.0	5.0
Fernandez, Elizabeth	Financial Aid Assistant	2.0	4.0	2.0	4.0	4.0	3.0
Mack, Vicki	Financial Aid Assistant	6.0	5.0	5.0	5.0	7.0	5.0
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	1.0	10.0	3.0	2.0
Pham, Vanna	Financial Aid Assistant	10.0	8.0	5.0	7.0	10.0	5.0
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier						
		6			8	7	8	
		**Activity Codes						PHR
Staff	Title	21	22	23	24	25	26	05-06
Campbell, Lisa	Financial Aid Assistant	6	6	6	8	7	8	32.04
Corrales, Christina	Sr. Clerical	6	7	7	8	7	7	32.03
Duran, Maria	Financial Aid Assistant	6	10	10	6	6	5	36.11
Fernandez, Elizabeth	Financial Aid Assistant	2	4	2	4	4	3	32.03
Mack, Vicki	Financial Aid Assistant	6	5	5	5	7	5	35.61
Ortiz, Julieta	Financial Aid Assistant	5	5	1	10	3	2	27.16
Pham, Vanna	Financial Aid Assistant	10	8	5	7	10	5	33.47
Zane, Jean	Financial Aid Advisor	4		4		5	5	44.14
Average		**5.6**	**6.4**	**5.0**	**6.9**	**6.1**	**5.0**	**34.07**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1. Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997	62,253
EFC 2	1.8-1 2. Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752	51,351
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245	10,902
EFC 4	1.8-2 1. Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490	17,111
EFC 5	1.8-2 2. Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.							
EFW 6	1.8-3 1. Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.						
EFW 7	1.8-3 2. Waivers Approved	X -	7,710	5,848	6,836	9,138	10,008	10,245	10,902
EFW 8	1.8-3 (1-2) Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2005 Summer Term

Data Current As Of November 04, 2006 09:57:36

Total Headcount	11,372

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11,372• +
24,494• +
4,364• +
23,139• +
63,369• *

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino For 2005 Fall Term

Data Current As Of November 04, 2006 09:57:57

Total Headcount	24,494

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Winter Intersession

Data Current As Of November 04, 2006 09:58:32

Total Headcount	4,364

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Spring Semester

Data Current As Of November 04, 2006 09:58:50

Total Headcount	23,139

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Director, Financial Aid & Schol.
Employee Name — Exact Position Title

College/Department/Location — 3492 Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			4	4	4	4	1	4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			1	1	1	1	1	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			10	10	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			5	5	5	5	5	5
TOTALS:			20	20	20	20	17	20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

FAX TRANSMITTAL

1 Page(s) this memo
3 Page(s) attachment

DATE: May 18, 2006

~~TO:~~ ~~FM:~~ Marie Yatman
El Camino CCD
310-660-3798

see email attached

CC: Caroline Yousef

~~FROM:~~ TO: Sergio M. Perez

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005

PLEASE RESPOND BY: **June 1, 2006**

In order to complete the claims for the above mentioned program we need the following:

- Question #2 answered on the attached EFCW 1.8-2.
- Question #1 answered on the attached EFCW 1.8-3.
- Clarification on the attached EFCW 1.6B. Please check the appropriate box below.
  - ☐ Each staff member (Ifill, Tran, Smith and Marshall) is claiming the total time listed.
  - ☒ Each staff member (Ifill, Tran, Smith and Marshall) is only claiming a fourth of the total time listed.

Thank you .

SMP:sea

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TJILL, HONG TRAN, Lukkia Smith, Klina Marshall
Employee Name

ACCT TECH II, ACCT TECH,
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in

	98-99	99-00	00-01	01-02	02-03	03-04	0
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:							
A. Enrollment Collection Process:		24	15	15	15	16	15	16
B. Enrollment Waiver Process:							
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.							
A. Enrollment Collection Process:		900	600	225	225	150	150	150
B. Enrollment Waiver Process:							
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assi							
Code 4 State Reporting: Time spent by staff preparing and submitting financia management information data and reports to the state agencies at spe each year regarding **the type and number of waivers** approved and waived.							
TOTALS:		924	615	240	240	166		

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel main data for state mandates in order for the district to receive reimbursement. Your signature on this f you have reported actual data or have provided a good faith estimate which you "certify (or declar of perjury under the laws of the State of California to be true and correct based on your personal k information." This information is used for cost accounting purposes only. PLEASE USE BL

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TJILL, at 310 660-6103

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________

* NOTE - See ...

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New computer system in 99/00

Doc Prg ...

January 2006

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM JEFFILL, HONG TRAN, Lourdes Smith, Nina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	15	16 4
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:		900	600	225	225	150	150	150 37.5
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran / Miriam Jeffill Date 4/26/06

If you have any questions, please contact Miriam Jeffill, at 310 660-6103

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hoang-Linh Nguyen — Employee Name

Para-Professional — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ 1020 720 806 884 1008

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ 720 720 806 884 1008

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hoang Linh Date 05-04-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Taylor Robinson — Assistant Director, Financial Aid
Employee Name — Exact Position Title

College/Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	3	5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3					3	100	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	3						300	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	3						1	1
TOTALS:	12					6	604	26

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Robinson Date 5/3/6

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM ZELL, HANG TRAN, Lucrecia Smith, Nina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - ACCOUNTING - CASHIERS
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		24	15	15	15	16	15	~~16~~ 4
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:		900	600	225	225	150	150	~~150~~ 375
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		924	615	240	240	166	165	166

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hang Tran Date 4/26/06

If you have any questions, please contact MIRIAM ZELL, at 310 660-6103

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New computer system in 99/00

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hiep Tran — Employee Name

Programmer Analyst — Exact Position Title

ITS — College/Department/Location

310-660-3272 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ 8

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/03/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

MIRIAM TEILL, HONG TRAN, Luukia Smith, Nina Marshall
Employee Name

ACCT TECH II, ACCT TECH, ACCT ASST 3
Exact Position Title

FISCAL - Accounting - Cashiers
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:		24	15	15	15	16	15	16	4
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:		900	600	225	225	150	150	150	375
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:		924	615	240	240	166	165	166	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signatures] Date 4/26/06

If you have any questions, please contact MIRIAM TEILL, at 310 660-6103

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January 2006

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Jean Zane — Employee Name

Financial Aid Advisor — Exact Position Title

Financial Aid — College/Department/Location

x 3495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	2	2	2	2

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	2	2	2	3	3	3	3

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

588	588	588	588	264	264	264	264

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

180	180	180	180	120	120	120	

TOTALS:	772	772	772	772	389	389	389	264

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Angeles
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette Abelin Date 3/22/06

If you have any questions, please contact Annette, 310 at 660-6803

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

ACCOUNTING
Department/Location

SAMUEL ABRAMS
Employee Name

REG CASHIER/CLERK II
Exact Position Title

310-660-3142
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sam Abrams Date 3-17-06

If you have any questions, please contact SAM ABRAMS, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services -
Department/Location

Miriam Gill
Employee Name

Acct Tech II
Exact Position Title

(310) 660-6103
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	See #12 N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact Miriam Gill, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES - CASHIER
Department/Location

LOVETTA KELLEY
Employee Name

CASHIER
Exact Position Title

310-660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

5 years the person has been working in this area

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lovetta Kelley Date 3-8-06

If you have any questions, please contact MIRIAM IFILL/Loretta at (310) 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

NaneHe Marshal
Employee Name

Account Asst. III
Exact Position Title

660-6104
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/2006

If you have any questions, please contact NaneHe Marshal, at (310) 660-6104

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Serv / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg-cashier II
Exact Position Title

310-618-8576
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7 mins				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 3-22-06

If you have any questions, please contact Elizabeth, at 310/600-6403

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES CASHIERS
Department/Location

RICHARD McGREEVY
Employee Name

REGISTRATION CASHIER
Exact Position Title

(310) 660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Richard McGreevy Date 3-22-06

If you have any questions, please contact Richard, at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

LUKIA SMITH
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact LUKIA SMITH, at (310) 660-3935

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

HONG TRAN
Employee Name

ACCOUNTING TECH.
Exact Position Title

(310) 660-3979
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/26/06

If you have any questions, please contact HONG TRAN, at (310) 660-3979

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Campbell Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

[illegible]
Employee Name

Sr. Clerical
Department/Location

Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Maria Duran
Employee Name

Department/Location

Financial Aid Asst
Exact Position Title

6160 3284
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-11	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Student Services
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Fernandez Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Ebine

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Vicki Mack
Employee Name

Fin. Aid. Asst.
Exact Position Title

3106603489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 5/14/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO
District

FINANCIAL AID
Department/Location

JULIETA ORTIZ
Employee Name

FINANCIAL AID ASSISTANT
Exact Position Title

3106606350
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/4/06

If I have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College — District

Financial Aid — Department/Location

Vana Pham — Employee Name

Financial Aid Assistant — Exact Position Title

(310) 660-3493 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10	✓	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5	✓		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vana Pham — Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

X 3495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								12869
Fall								24967
Winter/ Intersession								
Spring								24417
Total								62253
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								10902

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 11/03/08

Employee Name: (Print) HIEP TRAN

Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								17,111
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Marie L Yatman Date 11-6-06

Marie L. Yatman — Employee Name: (print)

Acctg. Tech. — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Total # of students with enrollment fee A/R

EFCW 1.8-2

	a # of students	b a/r $	c Total Fees Collected	b/c*a # of students a/r
99-00	63,798	439,275	3,162,948	8,860
00-01	70,895	357,903	3,190,419	7,953
01-02	78,032	92,109	3,765,054	1,909
02-03	81,232	1,539,047	2,695,824	46,375
03-04	66,563	2,174,788	3,558,119	40,685
04-05	65,997	1,365,299	6,218,441	14,490
05-06	62,253	1,649,408	6,000,733	17,111

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								10902

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 10/31/06

Employee Name: (print) HIEP TRAN Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$ 246534
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								15385
Fall								69529
Winter/Intersession								6339
Spring								68931
TOTAL x $0.91 per credit								145767

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 10/31/06

HIEP TRAN
Employee Name: (print)

PROGRAMMER ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 36.44	$ 40.59
	AVERAGE DEAN	$ 73.52	$ 81.50
	AVERAGE DIRECTOR	$ 69.92	$ 76.49
	AVERAGE EXECUTIVE SECRETARY	$ 43.49	$ 47.97
	AVERAGE FACULTY	$ 64.27	$ 69.21
	AVERAGE PRESIDENT	$ 139.20	$ 149.31
	AVERAGE VICE PRESIDENT	$ 86.82	$ 103.39
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 69.80	$ 72.51
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS		$ 103.27
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 28.92	$ 31.20
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 37.39	$ 41.04
BENNETT, NEAL	UTILITY WORKER	$ 33.45	$ 35.91
BEVERLY, CHERYL	COUNSELOR	$ 63.89	$ 73.89
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 72.31	$ 78.19
BROWN, TOM	FACILITIES SUPERVISOR	$ 52.33	$ 56.61
BRUCE, RITA	ACCOUNTING TECHNICIAN		$ 30.38

Name	Title	Fiscal Years: 04-05	05-06
BUERGER, DELORES	ADMIN. ASST. - BUSINESS MANAGER	$ 35.13	$ 37.99
CALDWELL, PATRICIA	VICE PRESIDENT	$ 86.10	RETIRED
CAMPBELL, LISA	FINANCIAL AID ASSISTANT	$ 23.70	$ 32.04
CHEUNG, JOSEPHINE	SENIOR ACCOUNTING TECHNICIAN	$ 46.06	$ 49.83
CLARKE, JANET	DIRECTOR OF PURCHASING (Retired 03-04)		
COLLETT, ANN	CURRICULUM ADVISOR	$ 42.71	$ 46.12
CONOVER, DEBBIE (10 Mo.)	COORD. SHS	$ 56.22	$ 60.70
CONSTANTINO, CYNTHIA	EXECUTIVE SECRETARY	$ 43.49	$ 50.82
COOPER, HORTENSE	DIRECTOR OF FINANCIAL AID/SCHOLARSHIP	$ 74.09	$ 76.43
CORRALES, CHRISTINA	SENIOR CLERK	$ 26.68	$ 32.03
D'AMICO, MIKE	POLICE CHIEF	$ 70.92	$ 77.22
DeMOS, SANDRA	DIRECTOR OF CHILD DEVELOPMENT CENTER	$ 57.36	$ 59.84
DETWILLER, LINDA	SUPPORT TECHNICIAN	$ 40.52	$ 45.95
DEVER, SUSAN	COORDINATOR	$ 70.84	$ 76.24
DREW, IRV	MATH SCIENCES (PART YEAR)	$ 64.27	$ 69.21
DURAN, MARIA	FINANCIAL AID ASSISTANT	$ 33.61	$ 36.11
ELMORE, MAURICE	ASSISTANT DIRECTOR (Retired 03-04)		
ELY, JANICE	DIRECTOR ACCOUNTING	$ 60.60	$ 65.55
ESKRIDGE, MATTIE	ASSISTANT TO VICE PRESIDENT	$ 41.62	$ 45.45
FALLO, THOMAS	SUPERINTENDENT	$ 139.20	$ 149.31
FASTEAU, STEVE	DEAN OF ENROLLMENT SERVICES (Retired 03-04)		
FEES, PAMELA	BUSINESS MANAGER FISCAL SERVICES	$ 75.52	$ 82.23
FERNANDEZ, ELIZABETH	FINANCIAL AID ASSISTANT	$ 29.65	$ 32.03

Name	Title	Fiscal Years: 04-05	05-06
FILIO, SHARON	ACCOUNTING TECHNICIAN		$ 30.13
FRANKLIN, MURRIEL	HR TECH	$ 36.41	$ 39.36
GANN, BOB	DIRECTOR OF FACILITIES	$ 82.14	$ 88.81
GARTEN, ANN MARIE	DIRECTOR OF P.R.	$ 63.48	$ 68.62
GEORGES, JOE	PROJECT DIRECTOR	$ 55.58	RETIRED
GOLDBERG, DON	DEAN OF MATH SCIENCES (PART YEAR)	$ 69.49	$ 77.77
GRIGSBY, ALICE	ACTING DEAN-INSTRUCTIONAL SERVICES	$ 65.83	$ 71.64
GRUPPETTA, ANTHONY	GROUNDS KEEPER/GARD II	$ 36.31	$ 39.29
HANSON, VICTOR	VP ADMINISTRATIVE SERVICES (Retired 02/2005)	$ 87.54	
HATA, NADINE	VP ACADEMIC AFFAIRS (Retired 03-04)		
IFILL, MIRIAM	ACCOUNTANT	$ 39.68	$ 43.55
JACKSON, TOM	DIRECTOR OF INDUSTRY AND TECH	$ 66.63	$ 72.52
JEFFERY, VALERIE	EMPLOYEE RELATIONS SPECIALIST	$ 42.00	$ 45.52
JOHNSTON, KIRK	POLICE SERGEANT	$ 54.55	$ 55.42
KELLEY, ALEX	DIRECTOR INFORMATION SYSTEMS (07/04-02/05)		
KELLEY, ALEX	VP OF ADMIN SERVICES (03/05-06/05)	$ 93.00	
LEE, ESTELLA	ACCOUNTING OFFICER	$ 43.16	$ 46.61
LEW, TOM	DEAN - HUMANITIES	$ 74.60	$ 81.23
LOVETTA, KELLEY	CASHIER	$ 10.00	$ 10.50
MACK, VICKI	FINANCIAL AID ASSISTANT	$ 33.36	$ 35.61
MANNO, DONNA	COORDINATOR	$ 54.71	$ 36.81
MARSEE,JEFF	VP OF ADMINISTRATIVE SERVICES		$ 103.50
MARSHAL, NANETTE	ACCOUNT ASSISTANT III	$ 34.38	$ 37.08

Name	Title	Fiscal Years: 04-05	05-06
MATUSAK, ELIZABETH	REGISTRATION CASHIER II	$ 9.50	$ 9.50
McCOY, ROXANNE	HR TECH	$ 39.90	$ 43.16
McGREEVY, RICHARD	REGISTRATION CASHIER	$ 8.50	$ 8.50
MEANS, JOHN	DEAN, COMMUNITY ADVANCEMENT	$ 74.46	$ 83.29
MIDDLETON, LEO	DIRECTOR	$ 71.02	$ 76.78
MILLER, DAVID	ASSISTANT DIRECTOR OF FACILITIES	$ 58.80	$ 68.91
MIRANDA, GLORIA	DEAN - BEHAVIORAL & SOCIAL SCIENCES	$ 73.64	$ 80.05
MORRIS, BARBARA	SUPERVISOR - NATURAL SCIENCES	$ 48.81	RETIRED
MORTON, BOZENA	DIRECTOR OF RESEARCH/GRANT DEVELOPMENT	$ 70.66	$ 76.42
MULROONEY, BILL	DIRECTOR OF ADMISSIONS AND RECORDS	$ 74.41	$ 80.29
NGUYEN, HOANG-LINH	PARAPROFESSIONAL	$ 10.00	$ 15.38
NIETO, ESPERANZA	ASSISTANT DIRECTOR OF ADMISSIONS & RECORDS	$ 70.20	$ 76.02
ORTIZ, JULIETA	FINANCIAL AID ASSISTANT	$ 23.87	$ 27.16
OSWALD, KATHY	ASSISTANT TO PRESIDENT	$ 54.15	$ 58.48
OTT, JONATHAN	SERGEANT	$ 55.88	$ 60.84
PEREZ, BARBARA	ACTING DEAN-NATURAL SCIENCES	$ 68.64	$ 76.87
PHAM, VANNA	FINANCIAL AID ASSISTANT	$ 29.69	$ 33.47
PICKENS, SUSAN	ADMIN ASSISTANT	$ 34.72	$ 37.44
PULINI, SAMUELA	GROUNDS KEEPER/GARD II	$ 32.13	$ 34.77
QUADHAMMER, ROGER	DEAN - MUSIC (Retired 03-04)		
QUARLES, ALLENE	ASSISTANT DIRECTOR HUMAN RESOURCES	$ 71.02	$ 76.78
QUIROZ, CAROL	ADMIN ASSISTANT	$ 37.41	$ 40.90

Name	Title	Fiscal Years: 04-05	05-06
QUIROZ, JIMMY	MECHANIC	$ 42.52	$ 46.57
RAPP, VIRGINIA	DEAN-BUSINESS	$ 78.52	$ 85.51
ROBBINS, TAYLOR	ASSISTANT DIRECTOR FINANCIAL AID/SCHOLARSHIP	$ 65.00	$ 68.58
ROBERTSON, GARY	POLICE OFFICER	$ 44.77	$ 48.16
SALDANA, JOE	OPERATIONS SUPERVISOR	$ 43.21	$ 46.50
SANCHEZ, RUTH	ASSISTANT TO VICE PRESIDENT	$ 40.11	$ 47.63
SCHWARTZ, JAMES	ACTING VP OF ACADEMIC AFFAIRS	$ 85.07	RETIRED
SHANNON, DAVE	DIRECTOR OF ATHLETICS	$ 64.11	RETIRED
SHOWDEN, DAVE	STUDY SUCCESS SPECIALIST		$ 32.84
SMITH, LUUKIA	ACCOUNT TECHNICIAN	$ 36.05	$ 38.97
SMITH, REGINA	DEAN OF COUNSELING & STUDENT SERVICES	$ 75.51	$ 82.20
SPOR, ARVID	DIRECTOR OF WORKFORCE EDUCATION	$ 66.52	$ 78.88
STOKES, MARIE (SEE YATMAN)	ACCOUNTING TECHNICIAN	$ 36.42	
TOWNSEND, KATHERINE	DIRECTOR OF NURSING	$ 72.01	$ 78.44
TRAN, HIEP	PROGRAMMER ANALYST	$ 54.63	$ 59.03
TRAN, HONG	ACCOUNT TECHNICIAN	$ 39.60	$ 42.85
TUITIBOU, MOSSESE	GROUNDS KEEPER/GARD I	$ 32.26	$ 34.68
TYLER, HAROLD	DIRECTOR - STUDENT DEV.	$ 68.43	$ 70.76
VILLALOBOS, BOBBI	DIRECTOR OF HUMANITIES (Resigned 03/2005)	$ 71.76	
WADE, MARCY	DIRECTOR HUMAN RESOURCES	$ 80.99	$ 87.39
WALLER, MICHELLE	ADMIN ASSISTANT	$ 37.34	$ 40.27
WARRIOR, SHOBHANA	ADMIN ASSISTANT	$ 33.62	$ 36.13
WAY, RON	DEAN - INDUSTRY & TECH	$ 79.39	$ 86.49

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
YATMAN, MARIE (STOKES)	ACCOUNTING TECHNICIAN	$ 36.42	$ 41.31
YUAN, URANIA	HR TECH	$ 28.02	$ 33.88
ZANE, JEAN	FINANCIAL AID ADVISOR	$ 40.99	$ 44.14

El Camino Community College District
308/95 Enrollment Fee Colle[illegible]n and Waivers
Fiscal Years: 1999-00 thr[illegible]gh 2005-06
Offset Savings

ose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
ce: EFCW 1.8-4 and attachments from district office.
ings:

urce	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969	$ 5,398,639
. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639	$ 107,973
line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371	$ 2,965,574
. 76300 (l) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311
4A X 7%)	7% of Fees Waived							
0 only)	(99-00 only)	$ 91,466	For 00-01 through 05-06 - unit fee					
line 5	Summer		11,615	13,303	14,062	15,350	15,292	15,385
	Fall		51,494	54,192	60,864	70,475	71,669	69,529
	Winter/Interssion					2,676	6,856	6,339
	Spring		51,577	56,995	60,374	72,675	72,364	68,931
	Total # of credits		114,686	124,490	135,300	161,176	166,181	160,184
. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767
mary								
line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311
4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466						
5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767
Enrollment Fee er Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**	**$ 205,078**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$54,935,538	$49,157,063	$1,394,433	$50,551,496
EQUALIZATION	666,973	613,616	53,357	666,973
ENROLL FEE ADMIN (2%)	50,935	46,861	4,074	50,935
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	568,471	522,994	45,477	568,471
S.F.A.A.	662,985	608,871	54,114	662,985
E.O.P.S.	1,484,480	1,365,720	118,760	1,484,480
C.A.R.E.	250,951	230,875	20,076	250,951
D.S.P.S.	1,148,356	1,056,486	91,870	1,148,356
STATE HOSPITALS	0	0	0	0
CALWORKS	635,116	575,106	60,010	635,116
MATRICULATION (CREDIT)	782,199	716,403	65,796	782,199
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	22,647	19,148	3,499	22,647
PART-TIME FAC. INS.	1,343	0	1,343	1,343
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	848,408	780,536	67,872	848,408
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	463,309	426,245	37,064	463,309
ECON. DEVELOPMENT	972,791	817,144	0	817,144
TANF	146,494	134,776	11,718	146,494
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	63,210	0	63,210
VTEA TITLE I C	801,273	272,663	400,406	673,069
NURSING CARE	479,468	0	479,468	479,468
PRIOR YEAR CORRECTION	768,945	768,945	0	768,945
TOTAL	$65,818,264	$58,210,424	$2,927,907	$61,138,331

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5
El Camino Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

'pose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
ırce: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
dings:

Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1							
	B.1.a							$736.90
	B.1.b							$894.65
	B.2.a							$28,606.10
	B.2.b							$143,002.02
	B.2.c							$922.97
Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54	$174,162.64
Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00	$ 205,078.00
Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46	-$30,915.36
Total Enrollment Fee Waiver Offset Claimed	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**	**$174,162.64**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 04, 2006 09:57:09

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	371	69,004
BOGW - Part B based on income standards	7,113	1,805,642
BOGW - Part C based on financial need	4,121	1,090,928

Total Unduplicated Count = 10,902
Total Amount = $ 2,965,574

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

November 20, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8796

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850

RE: Annual Reimbursement Claim
El Camino Community College District CC19140

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for El Camino Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC19140

(02) Claimant Name: El Camino Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 16007 Crenshaw Boulevard

City: Torrance | State: CA | Zip Code: 90506-0002

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 448,073
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 438,073
Due from State	(08)	(17) $ 438,073
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	345,336
(25) EFCW-1, (04)(B)(1)(a)(f)	511
(26) EFCW-1, (04)(B)(1)(b)(f)	1,388
(27) EFCW-1, (04)(B)(2)(a)(f)	16,553
(28) EFCW-1, (04)(B)(2)(b)(f)	123,391
(29) EFCW-1, (04)(B)(2)(c)(f)	11,870
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	177,911
(32) EFCW-1, (09)	75,174
(33) EFCW-1, (10)	153,712
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the *Parameters and Guidelines* are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 11-12-2008

Janice Ely
Type or Print Name

Director of Accounting
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 47	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: El Camino Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 345,336.23	$ -	$ -	$ -	$ -	$ 345,336.23
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 510.58	$ -	$ -	$ -	$ -	$ 510.58
b. Staff training (One time per employee)	$ 1,387.58	$ -	$ -	$ -	$ -	$ 1,387.58
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 16,553.08	$ -	$ -	$ -	$ -	$ 16,553.08
b. Waiving student fees	$ 123,390.70	$ -	$ -	$ -	$ -	$ 123,390.70
c. Reporting BOG fee waiver data to CCC	$ 11,870.44	$ -	$ -	$ -	$ -	$ 11,870.44
(05) Total Direct Costs	$ 499,048.61	$ -	$ -	$ -	$ -	$ 499,048.61

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.65%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 177,910.83
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 676,959.44
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 75,174.00
(10) Less: Enrollment Fee Waiver offsets		$ 153,712.38
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 448,073.06

New 04/06

Program 257

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
nino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$22.15	4,246.0	$ 94,048.90				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Enrollment Fees	$22.15	4,580.6	$ 101,460.29				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$22.15	2,938.5	$ 65,087.78				
g written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$22.15	2,333.5	$ 51,687.03				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Enrollment Fees	$22.15	1,492.2	$ 33,052.23				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 345,336.23	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: mino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Cooper, Hortense	Director, Financial Aid	$76.39	4.0	$ 305.56				
Zane, Jean	Financial Aid Advisor	$43.87	2.0	$ 87.74				
Tran, Hiep	Programmer Analyst	$58.64	2.0	$ 117.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 510.58	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: mino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Robbins, Taylor	Assistant Director, Financial Aid/Scholar	$68.24	16.0	$ 1,091.84				
Cooper, Hortense	Director, Financial Aid	$76.39	1.0	$ 76.39				
Zane, Jean	Financial Aid Advisor	$43.87	5.0	$ 219.35				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,387.58	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: nino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cooper, Hortense	Director, Financial Aid	$76.39	10.0	$ 763.90				
Nguyen, Hoang-Linh	*Data Entry Operator*	$16.50	255.0	$ 4,207.50				
Zane, Jean	Financial Aid Advisor	$43.87	264.0	$ 11,581.68				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 16,553.08	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F nino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	906.8	$ 31,348.08				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	868.2	$ 30,013.67				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	791.0	$ 27,344.87				
E approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$34.57	1,003.3	$ 34,684.08				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 123,390.70	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Fullerton Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cooper, Hortense	Director, Financial Aid	$76.39	5.0	$ 381.95				
Zane, Jean	Financial Aid Advisor	$43.87	120.0	$ 5,264.40				
Tran, Hiep	Programmer Analyst	$58.64	1.0	$ 58.64				
Detwiler, Linda	Support Technician	$45.67	135.0	$ 6,165.45				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,870.44	$ -	$ -	$ -	$ -

New 04/06

El Camino Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	4.00	Cooper, Hortense	Director, Financial Aid	$76.39	$305.56	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Cooper, Hortense	Director, Financial Aid	$76.39	$76.39	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	10.00	Cooper, Hortense	Director, Financial Aid	$76.39	$763.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Cooper, Hortense	Director, Financial Aid	$76.39	$381.95	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Cooper, Hortense Total**			$1,527.80		
06-07	135.00	Detwiler, Linda	Support Technician	$45.67	$6,165.45	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	135.00	**Detwiler, Linda Total**			$6,165.45		
06-07	4,246.00	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$94,048.90	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	4,580.60	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$101,460.29	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,938.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$65,087.78	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	2,333.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$51,687.03	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	1,492.20	Enrollment Office Staff	Collecting Enrollment Fees	$22.15	$33,052.23	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	15,590.80	**Enrollment Office Staff Total**			$345,336.23		
06-07	906.80	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$31,348.08	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	868.20	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$30,013.67	Receiving waiver applications	Waiving student fees
06-07	791.00	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$27,344.87	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,003.30	Financial Aid Office Staff	Waiving Enrollment Fees	$34.57	$34,684.08	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,569.30	**Financial Aid Office Staff Total**			$123,390.70		
06-07	255.00	Nguyen, Hoang-Linh	Data Entry Operator	$16.50	$4,207.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	255.00	**Nguyen, Hoang-Linh Total**			$4,207.50		
06-07	16.00	Robbins, Taylor	Assistant Director, Financial Aid/Scholarship	$68.24	$1,091.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	16.00	**Robbins, Taylor Total**			$1,091.84		
06-07	2.00	Tran, Hiep	Programmer Analyst	$58.64	$117.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Tran, Hiep	Programmer Analyst	$58.64	$58.64	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	3.00	**Tran, Hiep Total**			$175.92		
06-07	2.00	Zane, Jean	Financial Aid Advisor	$43.87	$87.74	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Zane, Jean	Financial Aid Advisor	$43.87	$219.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	264.00	Zane, Jean	Financial Aid Advisor	$43.87	$11,581.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	120.00	Zane, Jean	Financial Aid Advisor	$43.87	$5,264.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	391.00	**Zane, Jean Total**			$17,153.17		
	19,980.10	**Grand Total**			$499,048.61		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$51,571,394		$51,571,394	$374,037	$51,197,357
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	7,418,944		7,418,944	840,361	6,578,583
Course and Curriculum Development	6020	174,719		174,719	846	173,873
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	38,363		38,363		38,363
Instructional Support Services	6100					
Learning Center	6110	541,811		541,811	1,827	539,984
Library	6120	1,668,185		1,668,185	147,711	1,520,474
Media	6130	386,799		386,799		386,799
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	495,756		495,756		495,756
Other Instructional Support Services	6190					
Admissions and Records	6200	3,184,445		3,184,445		3,184,445
Counseling and Guidance	6300					
Student Counseling and Guidance	6310					
Matriculation and Student Assessment	6320					
Transfer Programs	6330	4,595,437		4,595,437	73,396	4,522,041
Career Guidance	6340					
Other Student Counseling and Guidance	6390	189,448		189,448	21,655	167,793
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,004,592		2,004,592	185,334	1,819,258
Subtotal		$72,269,893	$0	$72,269,893	$1,645,167	$70,624,726

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,303,177		$1,303,177	$3,393	$1,299,784
Health Services	6440	505,135		505,135	7,114	498,021
Student Personnel Admin.	6450	1,241,157		1,241,157		1,241,157
Financial Aid Administration	6460	2,325,680		2,325,680		2,325,680
Job Placement Services	6470	322,186		322,186		322,186
Veterans Services	6480	2,088		2,088	1,780	308
Miscellaneous Student Services	6490	489,920		489,920		489,920
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,910,135		2,910,135	2,910,135	0
Custodial Services	6530	3,090,527		3,090,527	3,090,527	0
Grounds Maintenance and Repairs	6550	734,579		734,579	734,579	0
Utilities	6570	3,186,271		3,186,271	3,186,271	0
Other	6590	302,506		302,506	302,506	0
Planning, Policy Making, and Coordination	6600	2,694,703		2,694,703	2,694,703	0
General Inst. Support Services	6700					
Community Relations	6710	941,278		941,278	941,278	0
Fiscal Operations	6720	1,752,415		1,752,415	1,752,415	0
Human Resources Management	6730	1,232,041		1,232,041	1,232,041	0
Noninstructional Staff Benefits & Incentives	6740	134,135		134,135	134,135	0
Staff Development	6750	298,327		298,327	298,327	0
Staff Diversity	6760	170,240		170,240	170,240	0
Logistical Services	6770	4,172,161		4,172,161	4,172,161	0
Management Information Systems	6780	2,752,955		2,752,955	2,752,955	0
Subtotal		$102,831,509	$0	$102,831,509	$26,029,727	$76,801,782

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant El Camino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	921,189		921,189	921,189	0
Community Services and Economic Development	6800					
Community Recreation	6810	427,066		427,066	21,197	405,869
Community Service Classes	6820	518,155		518,155	3,016	515,139
Community Use of Facilities	6830	91,594		91,594		91,594
Economic Development	6840	849,189		849,189	9,919	839,270
Other Community Services & Economic Development	6890	415,443		415,443		415,443
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	48,651		48,651		48,651
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,371,820		1,371,820	55,712	1,316,108
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	1,005,726		1,005,726	11,918	993,808
Other Auxiliary Operations	7090	1,830,141		1,830,141	20,681	1,809,460
Depreciation or Use Allowance - Building					1,977,834	
Depreciation or Use Allowance - Equipment					622,220	
(05) Total		$110,310,483	$0	$110,310,483	$29,673,413	$83,237,124
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.65%		
(07) Notes						

EL CAMINO COMMUNITY COLLEGE DISTRICT

NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2007 AND 2006

NOTE 5 - CAPITAL ASSETS

Capital asset activity for the District for the fiscal year ended June 30, 2007, was as follows:

	Balance Beginning of Year	Additions	Deductions	Balance End of Year
Capital Assets Not Being Depreciated				
Land	$ 1,050,000	$ -	$ -	$ 1,050,000
Construction in progress	14,734,847	38,393,440	-	53,128,287
Total Capital Assets Not Being Depreciated	15,784,847	38,393,440	-	54,178,287
Capital Assets Being Depreciated				
Site improvements	2,836,715	71,807	-	2,908,522
Buildings and improvements	64,925,685	2,658,932	-	67,584,617
Vehicles and equipment	7,978,714	326,243	68,390	8,236,567
Total Capital Assets Being Depreciated	75,741,114	3,056,982	68,390	78,729,706
Total Capital Assets	91,525,961	41,450,422	68,390	132,907,993
ess Accumulated Depreciation	41,814,491	2,644,354	68,390	44,390,455
Net Capital Assets	$ 49,711,470	$ 38,806,068	$ -	$ 88,517,538

Depreciation expense for the year was $2,644,354.

bldg equip.

44,300 - site improvem
1,977,834 - Building + improve
622,220 - Vehicles + Equip
2,644,354

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	87,272		668			87,940
Architecture and Environmental Design	0200	318,909		4,818			323,727
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,905,504	5,030	39,961			1,950,495
Business and Management	0500	1,749,067	10,805	3,547			1,763,419
Communications	0600	564,102	10,223				574,325
Information Technology	0700	1,199,448	63,461	686			1,263,595
Education	0800	3,681,840	441,197	41,599	19,845		4,184,481
Engineering and Industrial Tech.	0900	2,840,136	420,540	228,981	79,916		3,569,573
Fine and Applied Arts	1000	4,918,786	687,203	138,761	9,963		5,754,713
Foreign Language	1100	1,674,818	138,303				1,813,121
Health	1200	3,489,069	69,770	128,169	216,483		3,903,491
Family and Consumer Sciences	1300	742,076	293,928	157,347	3,719		1,197,070
Law	1400	282,963	17,652	6,441			307,056
Humanities (Letters)	1500	5,775,045	220,924	22,836			6,018,805
Library Science	1600		65,686				65,686
Mathematics	1700	4,710,296	22,409		9,252		4,741,957
Military Studies	1800						
Physical Sciences	1900	2,780,543		49,347			2,829,890
Psychology	2000	876,200		569			876,769
Public and Protective Services	2100	1,333,512	32,223	46,316	2,041		1,414,092
Social Sciences	2200	3,350,092	37,898	11,400			3,399,390
Commercial Services	3000	672,476	2,099	12,702			687,277
Interdisciplinary Studies	4900	4,568,518	136,021	14,240	32,818		4,751,597
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	92,925					92,925
Subtotal - Instructional Activities	**599**	47,613,597	2,675,372	908,388	374,037		51,571,394

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		5,767,884	810,699	840,361		7,418,944
Course and Curriculum Development	6020		124,527	49,346	846		174,719
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		17,877	20,486			38,363
Subtotal - Instructional Administration	**6000**		5,910,288	880,531	841,207		7,632,026
Instructional Support Services (6100)							
Learning Center	6110		534,233	5,751	1,827		541,811
Library	6120		1,359,368	161,106	147,711		1,668,185
Media	6130		364,471	22,328			386,799
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		495,756				495,756
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		2,753,828	189,185	149,538		3,092,551
Admissions and Records	**6200**		2,632,256	552,189			3,184,445
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310						
Matriculation and Student Assessment	6320						
Transfer Programs	6330		3,957,209	564,832	73,396		4,595,437
Career Guidance	6340						
Other Student Counseling and Guidance	6390		135,248	32,545	21,655		189,448
Subtotal - Student Counseling and Guidance	**6300**		4,092,457	597,377	95,051		4,784,885

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,687,125	132,133	185,334		2,004,592
Extended Opportunity Prgms. & Services (EOPS)	6430		1,233,585	66,199	3,393		1,303,177
Health Services	6440		479,243	18,778	7,114		505,135
Student Personnel Administration	6450		1,154,541	86,616			1,241,157
Financial Aid Administration	6460		2,260,054	65,626			2,325,680
Job Placement Services	6470		308,289	13,897			322,186
Veterans Services	6480			308	1,780		2,088
Miscellaneous Student Services	6490		418,021	71,899			489,920
Subtotal - Other Student Services	**6400**		7,540,858	455,456	197,621		8,193,935
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,463,433	439,549	7,153		2,910,135
Custodial Services	6530		2,955,740	132,339	2,448		3,090,527
Grounds Maintenance and Repairs	6550		680,762	45,696	8,121		734,579
Utilities	6570			3,186,271			3,186,271
Other Operation and Maintenance of Plant	6590		176,010	126,496			302,506
Subtotal - Operation and Maintenance of Plant	**6500**		6,275,945	3,930,351	17,722		10,224,018
Planning, Policymaking, and Coordination	**6600**		2,322,520	369,923	2,260		2,694,703

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

El Camino Community College District | 720 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		428,644	512,634			941,278
Fiscal Operations	6720		1,595,730	151,095	5,590		1,752,415
Human Resources Management	6730		1,040,316	191,485	240		1,232,041
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		134,135				134,135
Staff Development	6750		210,376	79,613	8,338		298,327
Staff Diversity	6760		145,133	24,177	930		170,240
Logistical Services	6770		2,906,102	1,265,376	683		4,172,161
Management Information Systems	6780		1,808,159	683,058	261,738		2,752,955
Other General Institutional Support Services	6790		514,539	399,026	7,624		921,189
Subtotal - General Institutional Support Services	**6700**		8,783,134	3,306,464	285,143		12,374,741
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		248,397	157,472	21,197		427,066
Community Service Classes	6820		353,225	161,914	3,016		518,155
Community Use Facilities	6830		80,034	11,560			91,594
Economic Development	6840		508,864	330,406	9,919		849,189
Other Community Svcs. & Economic Development	6890		57,513	357,930			415,443
Subtotal - Community Services	**6800**		1,248,033	1,019,282	34,132		2,301,447

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

El Camino Community College District | 720 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		13,843	34,808			48,651
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,124,648	191,460	55,712		1,371,820
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,138,491	226,268	55,712		1,420,471
Auxiliary Operations (7000)							
Contract Education	7010	178,223	475,154	340,431	11,918		1,005,726
Other Auxiliary Operations	7090		1,047,730	761,730	20,681		1,830,141
Subtotal - Auxiliary Operations	**7000**	178,223	1,522,884	1,102,161	32,599		2,835,867
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					4,041,808	4,041,808
Student Aid	7320					229,046	229,046
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,270,854	4,270,854
TOTAL EXPENDITURES and OTHER OUTGO	**391**	47,791,820	46,896,066	13,537,575	2,085,022	4,270,854	114,581,337

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2A and 4.
Findings:

***EFC 1**	70,767
Avg. time p/account	3.6
Total Time (in minutes)	254761
Per Hour	60
Hours Worked **(** Activity 11)**	**4246.0**
***EFC 2**	51,856
Avg. time p/student	5.3
Total Time (in minutes)	274837
Per Hour	60
Hours Worked **(** Activity 12)**	**4580.6**
***EFC 2**	51,856
Avg. time p/question	3.4
Total Time (in minutes)	176310
Per Hour	60
Hours Worked **(** Activity 13)**	**2938.5**
***EFC 2 (default)**	51,856
Avg. time p/file	2.7
Total Time (in minutes)	140011
Per Hour	60
Hours Worked **(** Activity 14)**	**2333.5**
***EFC 4**	12,790
Avg. time p/account	7.0
Total Time (in minutes)	89530
Per Hour	60
Hours Worked **(** Activity 15)**	**1492.2**
***EFC 5 (Client not able to provide)**	
Avg. time p/student	3.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3A and 4.
Findings:

***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/question	4.7
Total Time (in minutes)	54407
Per Hour	60
Hours Worked **(** Activity 21)**	**906.8**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/application	4.5
Total Time (in minutes)	52092
Per Hour	60
Hours Worked **(** Activity 22)**	**868.2**
***EFW 6 (Records not kept for *EFW 6, used *EFW 7)**	11,576
Avg. time p/evaluation	4.1
Total Time (in minutes)	47462
Per Hour	60
Hours Worked **(** Activity 23)**	**791.0**
***EFW 8 (default) El Camino dis not provide.**	
Avg. time p/application	6.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	11,576
Avg. time p/application	5.2
Total Time (in minutes)	60195
Per Hour	60
Hours Worked **(** Activity 25)**	**1003.3**
***EFW 8 El Camino did not provide**	
Avg. time p/application	4.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2			4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abelin, Annette	Registration Cashier	6.0	5.0	4.0		8.0	4.0
Abrams, Samuel	Registration Cashier	3.0	4.0	2.0		4.0	4.0
Ifill, Miriam	Accounting Technician	3.0	4.5	1.5		5.0	2.0
Kelley, Lovettea	Cashier	3.0	5.0	2.0		5.0	4.0
Langowski, Dena	Cashier	5.0	7.0	5.0	5.0	7.0	5.0
Marshal, Nanette	Accounting Assistant	2.0	4.0	4.0	1.5	9.0	1.5
Matusak, Elizabeth	Registration Cashier	5.0	8.5	3.0	5.0	8.5	6.0
Romano, Barbara	Registration Cashier	5.0	5.0	5.0		5.0	5.0
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0
Average		**3.6**	**5.3**	**3.4**	**2.7**	**7.0**	**3.6**

Conclusion: Findings go forward to Schedule 1A.

EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier						PHR
		1	2			4	5	
		**Activity Codes						
		11	12	13	14	15	16	06-07
Abelin, Annette	Registration Cashier	6.0	5.0	4.0		8.0	4.0	10.50
Abrams, Samuel	Registration Cashier	3.0	4.0	2.0		4.0	4.0	9.50
Ifill, Miriam	Accounting Technician	3.0	4.5	1.5		5.0	2.0	43.27
Kelley, Lovetta	Cashier	3.0	5.0	2.0		5.0	4.0	10.50
Langowski, Dena	Cashier	5.0	7.0	5.0	5.0	7.0	5.0	9.50
Marshal, Nanette	Accounting Assistant	2.0	4.0	4.0	1.5	9.0	1.5	36.97
Matusak, Elizabeth	Registration Cashier	5.0	8.5	3.0	5.0	8.5	6.0	9.50
Romano, Barbara	Registration Cashier	5.0	5.0	5.0		5.0	5.0	9.70
Smith, Luukia	Accounting Technician	2.0	5.0	5.0	1.0	8.0	2.0	38.71
Tran, Hong	Accounting Technician	2.0	5.0	2.0	1.0	10.0	2.0	43.33
Average		**3.6**	**5.3**	**3.4**	**2.7**	**7.0**	**3.6**	**22.15**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 - used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Campbell, Lisa	Financial Aid Assistant	4.0	5.0	5.0	6.0	5.0	5.0
Corrales, Cristina	Financial Aid Assistant	3.0	4.0	4.0	4.0	4.0	5.0
Duran, Maria	Financial Aid Assistant	6.0	6.0	7.0	7.0	7.0	7.0
Fernandez, Elizabeth	Financial Aid Assistant	3.0	6.0	3.0	6.0	6.0	4.0
Higa, Stacy	Financial Aid Assistant	2.0	1.0	1.0	3.0	3.0	3.0
Mack, Vicki	Financial Aid Assistant	5.0	4.0	4.0	5.0	5.0	4.0
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	2.0	10.0	2.0	2.0
Pham, Vanna	Financial Aid Assistant	10.0	5.0	7.0	8.0	10.0	5.0
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0
Average		**4.7**	**4.5**	**4.1**	**6.1**	**5.2**	**4.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						PHR
		6			8	7	8	
		**Activity Codes						
		21	22	23	24	25	26	06-07
Campbell, Lisa	Financial Aid Assistant	4.0	5.0	5.0	6.0	5.0	5.0	31.80
Corrales, Cristina	Financial Aid Assistant	3.0	4.0	4.0	4.0	4.0	5.0	31.81
Duran, Maria	Financial Aid Assistant	6.0	6.0	7.0	7.0	7.0	7.0	35.89
Fernandez, Elizabeth	Financial Aid Assistant	3.0	6.0	3.0	6.0	6.0	4.0	31.76
Higa, Stacy	Financial Aid Assistant	2.0	1.0	1.0	3.0	3.0	3.0	34.00
Mack, Vicki	Financial Aid Assistant	5.0	4.0	4.0	5.0	5.0	4.0	35.25
Ortiz, Julieta	Financial Aid Assistant	5.0	5.0	2.0	10.0	2.0	2.0	33.49
Pham, Vanna	Financial Aid Assistant	10.0	5.0	7.0	8.0	10.0	5.0	33.27
Zane, Jean	Financial Aid Advisor	4.0		4.0		5.0	5.0	43.87
Average		**4.7**	**4.5**	**4.1**	**6.1**	**5.2**	**4.4**	**34.57**

Conclusion: Findings go forward to Schedule 1B.

EFW Workload Multiplier (Client Provided) except for activity code 24 - used default EFW 8.
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
El Camino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and CCCCO.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1. Enrolled Students	62,284	63,798	70,895	78,032	81,232	66,563	65,997	62,253	70,767
EFC 2	1.8-1	2. Paid Enrollment fees	44,326	56,088	65,047	71,196	72,094	56,555	55,752	51,351	51,856
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	7,958	7,710	5,848	6,836	9,138	10,008	10,245	10,902	18,911
EFC 4	1.8-2	1. Delinquencies collections		8,860	7,953	1,909	46,375	40,685	14,490	17,111	12,790
EFC 5	1.8-2	2. Refunds	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.								
EFW 6	1.8-3	1. Waivers Requested	X	Document Request 5/18/06 -- Client responded by email 5/19/06 and by fax 5/25/06 with question on how to obtain this data. Sergio s/w Marie Yatman 5/31/06 and it was determined that ELCAM is not able to provide this data.							11,576
EFW 7	1.8-3	2. Waivers Approved	X -	7,710	5,848	6,836	9,138	10,008	10,245	10,902	11,576
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not able to calculate due to client not able to provide 1.8-3 1.							0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 6
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Headcount

Purpose: To calculate the total headcount for El Camino CCD.
Source: Chancelor's website.
Findings:

Semester	Headcount
Summer	10,764
Fall	23,928
Winter	5,355
Spring	23,191
Total	**63,238**

Conclusion: Findings go forward to Schedule 4.

California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2006 Summer Term

Data Current As Of January 08, 2008 11:01:39

Total Headcount	10,764

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California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino For 2006 Fall Term

Data Current As Of January 08, 2008 11:01:29

Total Headcount	23,928

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California Home

Tuesda

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2007 Winter Intersession

Data Current As Of January 08, 2008 11:01:10

Total Headcount	5,355

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California Home

Tuesda

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For El Camino
For 2007 Spring Semester

Data Current As Of January 08, 2008 10:58:34

Total Headcount	23,191

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hortense Cooper — Employee Name

Director, Financial Aid — Exact Position Title

Financial Aid — College/Department/Location

(310)660-3492 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		4	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		10	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		5	
TOTALS:		20	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hortense Cooper Date 12/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College

Linda Detwiler
Employee Name

User Support Technician
Exact Position Title

Financial Aid
College/Department/Location

3198
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- ~~Report~~ time in hours

	05-06	(06-07)	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		135	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda A Detwiler Date 12-12-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Employee Name: Hoang-Linh Nguyen

Exact Position Title: Data Entry Operator

College/Department/Location: Financial Aid

Telephone #:

Work year length: 12mo/11mo/10mo/hrly

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		255	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		255	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Hoang-Linh Nguyen Date: 12/12/07

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino College/Compton Center Fiscal Year: 2006-07

Taylor Robbins
Employee Name

Assist Director / Acting Director
Exact Position Title

Financial Aid Office
Department/Location

310 660-3490
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
1/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
2/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
3/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
4/ 1 06	1A 1B 2A (2B) 3 4	Test BOGW	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Taylor Robbins Date _____

If you have any questions, please contact Hortense Cooper at (310) 660-3492 or (310) 660-3493

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: El Camino College

Hiep Tran
Employee Name

Programmer Analyst
Exact Position Title

ITS
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		1	
TOTALS:		3	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature Hiep Tran Date 2/22/08

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: El Camino

Jean Zarel — Employee Name

Financial Aid Advisor — Exact Position Title

Financial Aid — College/Department/Location

(310) 660-3495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		5	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		264	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		120	
TOTALS:		391	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zarel — Date 12/12/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services
Department/Location

Annette Abelin
Employee Name

Registration Cashier II
Exact Position Title

(310)660-6103 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A Abelin Date 12-21-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

ACCOUNTING
Department/Location

Samuel Abrams
Employee Name

REG CASHIER / CLERK II
Exact Position Title

310-660-3142
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Samuel Abrams Date 12/14/07

If you have any questions, please contact SAM ABRAMS, at 310-660-3103

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Services - Cashiers
Department/Location

Miriam Ifill
Employee Name

Accts Tech 2
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12-17-07

If you have any questions, please contact MIRIAM IFILL, at 310 660 6103

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Cashier - accty - Fiscal Services
Department/Location

Loretta Kelley
Employee Name

CASHIER III
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. ~~PLEASE USE BLUE INK~~

Employee Signature Loretta Kelley Date 1-9-08

If you have any questions, please contact MIRIAM G. II at 310 660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

DENA LANGOWSKI
Employee Name

CASHIER
Exact Position Title

$9.50
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

310 324-5968

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				✓	✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dena Langowski Date 12-14-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fiscal Service
Department/Location

Nanette Marshal
Employee Name

Account Asst. III
Exact Position Title

(310) 660-6104
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 12/17/07

If you have any questions, please contact Nanette Marshal, at (310) 660-6104

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Fiscal Services / Cashier
Department/Location

Elizabeth Matusak
Employee Name

Reg - Cashier II
Exact Position Title

310-618-3576 Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7-10 min c/c takes longer		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7-10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5-7					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth C. Matusak Date 12-11-07

If you have any questions, please contact Elizabeth, at 310-660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College Dist
District

Cashiers - accts office - Fisca/Service
Department/Location

Barbara Romano
Employee Name

REG CASHIER III
Exact Position Title

310660-6103
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06/06-07/07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1-08-08

If you have any questions, please contact Miriam Tyll, at 310660-6103

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

CASHIERS
Department/Location

Lukia Smith
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

(310) 660-3935
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12/18/07

If you have any questions, please contact LUKIA SMITH, at (310) 660-3935

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL CAMINO COLLEGE
District

FISCAL SERVICES
Department/Location

Hong Tran
Employee Name

ACCOUNTING TECH
Exact Position Title

(310) 660-3979
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hong Tran Date 12/17/07

If you have any questions, please contact HONG TRAN, at (310) 660-3979

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid Office
Department/Location

Lisa Campbell
Employee Name

Financial Aid Asst.
Exact Position Title

(310) 660-3493 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L Campbell Date 12/12/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Fin. Aid
Department/Location

Cristina Corrales
Employee Name

Fin. Aid Asst.
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cristina Corrales Date 12/12/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Maria Duran
Employee Name

Financial Aid Asst.
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Duran Date 12/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EL Camino College
District

Student Services/Financial Aid
Department/Location

Elizabeth Fernandez
Employee Name

Financial Aid Assistant
Exact Position Title

660-3493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Fernandez Date 12-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Jean Zane

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid / Enrollment Services
Department/Location

Stacy Higa
Employee Name

Financial Aid Assistant
Exact Position Title

310-660-6911
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacy Higa Date 12/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vicki Mack
Employee Name

Financial Aid Asst.
Exact Position Title

(310)660-3489
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vicki Mack Date 12/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Julieta Ortiz
Employee Name

Financial Aid Assistant.
Exact Position Title

310 660 6350
Telephone #

~~Work~~ 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino College
District

Financial Aid
Department/Location

Vanna Pham
Employee Name

Financial Aid Assistant
Exact Position Title

(310) 660 - 6411
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vanna Pham Date 12/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

El Camino
District

Financial Aid
Department/Location

Jean Zane
Employee Name

Financial Aid Advisor
Exact Position Title

(310) 660-3295
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Zane Date 12/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer		13,947	
Fall		25,401	
Winter/ Intersession		5,860	
		25,559	
		70,767	
who paid enrollment fees:			
		10753	
		18580	
		3846	
		18677	
		51856	
xempted from paying enrollment fees (BOGG, etc):			
		3194	
		6821	
		2014	
		6882	
		18911	

13,947 + 25,401 + 5,860 + 25,559 + 70,767

10,753 + 18,580 + 3,846 + 18,677 + 51,856

3,194 + 6,821 + 2,014 + 6,882 + 18,911

ATION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

X Employee Signature: _____ Date 2/22/08

Employee Name: (print) HIEP TRAN

Position or Title PROGRAMMER ANALYST

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		12,790	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature: Marie Yatman Date 2/27/08

Marie Yatman
Employee Name: (print)

Accounting Tech
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: El Camino Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total	11,576		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/31/08

HIEP TRAN
Employee Name: (print)

PROGRAMMER/ANALYST
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: El Camino College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$ 5,914,869	$
2. Enrollment Fees Refunded	$	$ 561,316	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$ 5,353,553	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 3,459,768	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 69,195	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer		13,525	
B. Fall		65,440	
C. Winter/Intersession		7,234	
D. Spring		64,586	
0.91 per credit		137,214	

TION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ded a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

Hiep Tran

Date 2/22/08

PROGRAMMER ANALYST
Position or Title

s, please contact _____, at _____.

INFORMATION BY _____; TO _____.

SixTen and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 40.59	$ 38.18
	AVERAGE DEAN	$ 81.50	$ 81.62
	AVERAGE DIRECTOR	$ 76.49	$ 78.03
	AVERAGE EXECUTIVE SECRETARY	$ 47.97	$ 48.18
	AVERAGE FACULTY	$ 69.21	$ 71.10
	AVERAGE PRESIDENT	$ 149.31	$ 161.27
ROMANO, BARBARA	AVERAGE REGISTRATION CASHIER		$ 9.70
	AVERAGE VICE PRESIDENT	$ 103.39	$ 103.90
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 72.51	Resigned 7/31/06
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS	$ 103.27	$ 108.56
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 31.20	$ 30.81
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 41.04	$ 35.90
BENNETT, NEAL	UTILITY WORKER	$ 35.91	$ 36.72
BEVERLY, CHERYL	COUNSELOR	$ 73.89	$ 58.40
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 78.19	$ 78.41
BROWN, TOM	FACILITIES SUPERVISOR	$ 56.61	$ 56.78

SixTen and Associates
MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME El Camino Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 40.59	$ 38.18
	AVERAGE DEAN	$ 81.50	$ 81.62
	AVERAGE DIRECTOR	$ 76.49	$ 78.03
	AVERAGE EXECUTIVE SECRETARY	$ 47.97	$ 48.18
	AVERAGE FACULTY	$ 69.21	$ 71.10
	AVERAGE PRESIDENT	$ 149.31	$ 161.27
	AVERAGE VICE PRESIDENT	$ 103.39	$ 103.90
ABELIN, ANNETTE	REGISTRATION CASHIER II	$ 10.50	$ 10.50
ABORN, LUCINDA	DIRECTOR, SPECIAL RESOURCES CENTER	$ 72.51	Resigned 7/31/06
ABRAMS, SAMUEL	REGISTRATION CASHIER II	$ 9.50	$ 9.50
ARCE,FRANCISCO	VP OF ACADEMIC AFFAIRS	$ 103.27	$ 108.56
BALDWIN, PRISCILLA	CLERICAL ASSISTANT	$ 31.20	$ 30.81
BAUTISTA, ARLENE	ADMIN ASSISTANT-CAMPUS POLICE	$ 41.04	$ 35.90
BENNETT, NEAL	UTILITY WORKER	$ 35.91	$ 36.72
BEVERLY, CHERYL	COUNSELOR	$ 73.89	$ 58.40
BONURA, ROCKY	DIRECTOR - PURCHASING/CONTRACTS	$ 78.19	$ 78.41
BROWN, TOM	FACILITIES SUPERVISOR	$ 56.61	$ 56.78
BRUCE, RITA	ACCOUNTING TECHNICIAN	$ 30.38	$ 43.15

Name	Title	Fiscal Years: 05-06	06-07
BUERGER, DELORES	ADMIN. ASST. - BUSINESS MANAGER	$ 37.99	$ 38.01
CAMPBELL, LISA	FINANCIAL AID ASSISTANT	$ 27.45	$ 31.80
CHEUNG, JOSEPHINE	SENIOR ACCOUNTING TECHNICIAN	$ 49.83	$ 48.66
COLLETT, ANN	CURRICULUM ADVISOR	$ 46.12	$ 46.36
CONNOLLY, THOMAS	DIRECTOR OF ACCOUNTING	----------	$ 60.35
CONOVER, DEBBIE (10 Mo.)	COORD. SHS	$ 60.70	$ 61.07
CONSTANTINO, CYNTHIA	EXECUTIVE SECRETARY	$ 50.82	$ 51.41
COOPER, HORTENSE	DIRECTOR OF FINANCIAL AID/SCHOLARSHIP	$ 73.05	$ 76.39
CORRALES, CHRISTINA	SENIOR CLERK	$ 30.28	$ 31.81
D'AMICO, MIKE	POLICE CHIEF	$ 77.22	$ 77.18
DALTON, MICHAEL	STOCK CLERK		$ 32.83
DeMOS, SANDRA	DIRECTOR OF CHILD DEVELOPMENT CENTER	$ 59.84	$ 62.08
DETWILLER, LINDA	SUPPORT TECHNICIAN	$ 41.95	$ 45.67
DEVER, SUSAN	COORDINATOR	$ 76.24	$ 75.97
DREW, IRV	Acting DEAN OF NATURAL SCIENCE (4/1/07)	$ 69.21	$ 71.10
DURAN, MARIA	FINANCIAL AID ASSISTANT	$ 30.28	$ 35.89
ELY, JANICE	DIRECTOR ACCOUNTING (DIRECTOR/ BUSINESS MGR)	$ 65.55	$ D 65.10 $ BM 77.91
ESKRIDGE, MATTIE	ASSISTANT TO VICE PRESIDENT	$ 45.45	$ 45.28
FALLO, THOMAS	SUPERINTENDENT	$ 149.31	$ 161.27
FEES, PAMELA	BUSINESS MANAGER FISCAL SERVICES	$ 82.23	$ 81.62
FERNANDEZ, ELIZABETH	FINANCIAL AID ASSISTANT	$ 30.28	$ 31.76
FILIO, SHARON	ACCOUNTING TECHNICIAN	$ 30.13	$ 39.57
FRANKLIN, MURRIEL	HR TECH	$ 39.36	$ 39.65

Name	Title	Fiscal Years: 05-06	06-07
GANN, BOB	DIRECTOR OF FACILITIES	$ 88.81	$ 88.95
GARTEN, ANN MARIE	DIRECTOR OF P.R.	$ 68.62	$ 68.42
GOLDBERG, DON	DEAN OF MATH SCIENCES (PART YEAR)	$ 77.77	$ 79.91
GRIGSBY, ALICE	ACTING DEAN-INSTRUCTIONAL SERVICES	$ 71.64	$ 71.68
GRUPPETTA, ANTHONY	GROUNDS KEEPER/GARD II	$ 39.29	$ 39.80
HIGA, STACY			$ 34.00
HOERNING, BRUCE	ASSISTANT DIRECTOR OF FACILITIES	$ 56.46	$ 56.46
IFILL, MIRIAM	ACCOUNTANT	$ 39.53	$ 43.27
JACKSON, TOM	DIRECTOR OF INDUSTRY AND TECH	$ 72.52	$ 78.09
JEFFERY, VALERIE	EMPLOYEE RELATIONS SPECIALIST	$ 45.52	$ 46.47
JOHNSTON, KIRK	POLICE SERGEANT	$ 55.42	REPLACED
KELLEY, LOVETTA	CASHIER	$ 10.50	$ 10.50
LANGOWSKI, DENA			$ 9.50
LEE, ESTELLA	ACCOUNTING OFFICER	$ 44.79	$ 35.25
LEW, TOM	DEAN - HUMANITIES	$ 81.23	$ 81.16
MACK, VICKI	FINANCIAL AID ASSISTANT	$ 30.28	$ 35.25
MANNO, DONNA	COORDINATOR	$ 36.81	$ 36.81
MARSEE,JEFF	VP OF ADMINISTRATIVE SERVICES	$ 103.50	$ 108.58
MARSHAL, NANETTE	ACCOUNT ASSISTANT III	$ 37.08	$ 36.97
MARSHALL, NINA		$ 35.14	$ 36.82
MATUSAK, ELIZABETH	REGISTRATION CASHIER II	$ 9.50	$ 9.50
McCOY, ROXANNE	HR TECH	$ 43.16	$ 43.64
MCGEE, JANET	PROGRAM ASSISTANT		$ 22.17

Name	Title	Fiscal Years: 05-06	06-07
McGREEVY, RICHARD	REGISTRATION CASHIER	$ 8.50	$ 8.50
MEANS, JOHN	DEAN, COMMUNITY ADVANCEMENT	$ 83.29	$ 88.00
MIDDLETON, LEO	DIRECTOR	$ 76.78	$ 76.83
MILLER, DAVID	ASSISTANT DIRECTOR OF FACILITIES	$ 68.91	RETIRED
MIRANDA, GLORIA	DEAN - BEHAVIORAL & SOCIAL SCIENCES	$ 80.05	$ 79.59
MORTON, BOZENA	DIRECTOR OF RESEARCH/GRANT DEVELOPMENT	$ 76.42	$ 76.44
MULROONEY, BILL	DIRECTOR OF ADMISSIONS AND RECORDS	$ 80.29	$ 79.86
NGUYEN, HOANG-LINH	PARAPROFESSIONAL	$ 16.50	$ 16.50
NIETO, ESPERANZA	ASSISTANT DIRECTOR OF ADMISSIONS & RECORDS	$ 76.02	$ 74.51
NISHIME, JEANIE	VP OF STUDENT SERVICES	----------	$ 94.55
ORTIZ, JULIETA	FINANCIAL AID ASSISTANT	$ 30.28	$ 33.49
OSWALD, KATHY	ASSISTANT TO PRESIDENT	$ 58.48	$ 58.64
OTT, JONATHAN	SERGEANT	$ 60.84	$ 61.11
PEREZ, BARBARA	ACTING DEAN-NATURAL SCIENCES	$ 76.87	$ 78.76
PHAM, VANNA	FINANCIAL AID ASSISTANT	$ 30.28	$ 33.27
PICKENS, SUSAN	ADMIN ASSISTANT	$ 37.44	$ 37.33
PULINI, SAMUELA	GROUNDS KEEPER/GARD II	$ 34.77	$ 35.31
QUARLES, ALLENE	ASSISTANT DIRECTOR HUMAN RESOURCES	$ 76.78	$ 82.71
QUIROZ, CAROL	ADMIN ASSISTANT	$ 40.90	$ 38.93
QUIROZ, JIMMY	MECHANIC	$ 46.57	$ 46.53
RAPP, VIRGINIA	DEAN-BUSINESS	$ 85.51	$ 85.82
ROBBINS, TAYLOR	ASSISTANT DIRECTOR FINANCIAL AID/SCHOLARSHIP	$ 67.23	$ 68.24

Name	Title	Fiscal Years: 05-06	06-07
ROBERTSON, GARY	POLICE OFFICER	$ 48.16	$ 48.33
SALDANA, JOE	OPERATIONS SUPERVISOR	$ 46.50	$ 46.60
SANCHEZ, RUTH	ASSISTANT TO VICE PRESIDENT	$ 47.63	$ 47.86
SCHWARTZ, JAMES	Acting DEAN OF FINE ARTS	RETIRED	$ 75.03
SNOWDEN, DAVE	STUDY SUCCESS PECIALIST	$ 32.84	$ 42.29
SMITH, LUUKIA	ACCOUNT TECHNICIAN	$ 37.01	$ 38.71
SMITH, REGINA	DEAN OF COUNSELING & STUDENT SERVICE	$ 82.20	$ 82.49
SPOR, ARVID	DIRECTOR OF ENROLLMENT SERV ICES	$ 78.88	$ 80.92
TOWNSEND, KATHERINE	DIRECTOR OF NURSING	$ 78.44	$ 78.81
TRAN, HIEP	PROGRAMMER ANALYST	$ 53.52	$ 58.64
TRAN, HONG	ACCOUNT TECHNICIAN	$ 42.85	$ 43.33
TUITIBOU, MOSSESE	GROUNDS KEEPER/GARD I	$ 34.68	$ 34.86
TYLER, HAROLD	DIRECTOR - STUDENT DEV.	$ 70.76	$ 70.82
WADE, MARCY	DIRECTOR HUMAN RESOURCES(RESIGNED 04/07)	$ 87.39	$ 87.31
WAGSTAFF, JOHN	DIRECTOR OF ITS	$ 78.08	$ 78.09
WALLER, MICHELLE	ADMIN ASSISTANT	$ 40.27	$ 40.15
WARRIOR, SHOBHANA	ADMIN ASSISTANT	$ 36.13	$ 36.29
WAY, RON	DEAN - INDUSTRY & TECH	$ 86.49	$ 82.91
YATMAN, MARIE	ACCOUNTING TECHNICIAN	$ 41.31	$ 41.34
YUAN, URANIA	HR TECH	$ 33.88	$ 33.80
ZANE, JEAN	FINANCIAL AID ADVISOR (Retired 01/07)	$ 39.87	$ 43.87

Schedule 5
El Camino Co[illegible]nity College District
308/95 Enrollment [illegible] Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,741,822	$ 2,702,954	$ 3,081,051	$ 2,158,694	$ 2,938,094	$ 5,381,969	$ 5,398,639	$ 5,353,553
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 54,836	$ 54,059	$ 61,621	$ 43,174	$ 58,762	$ 107,639	$ 107,973	$ 107,071
1.8-4 line 4A	Enrollment Fees Waived	$ 1,306,650	$ 1,122,981	$ 1,205,783	$ 1,421,929	$ 1,637,126	$ 3,587,371	$ 2,965,574	$ 3,459,768
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311	$ 69,195
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 91,466							
			For 00-01 through 05-06 - unit fee						
1.8-4 line 5	Summer		11,615	13,303	14,062	15,350	15,292	15,385	13,525
	Fall		51,494	54,192	60,864	70,475	71,669	69,529	65,440
	Winter/Interssion					2,676	6,856	6,339	7,234
	Spring		51,577	56,995	60,374	72,675	72,364	68,931	64,586
	Total # of credits		114,686	124,490	135,300	161,176	166,181	160,184	150,785
[illegible]. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767	$ 137,214
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 26,133	$ 22,460	$ 24,116	$ 28,439	$ 32,743	$ 71,747	$ 59,311	$ 69,195
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 91,466							
1.8-4 5	Credit Units Waived		$ 104,364	$ 113,286	$ 123,123	$ 146,670	$ 151,225	$ 145,767	$ 137,214
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 117,599**	**$ 126,824**	**$ 137,402**	**$ 151,562**	**$ 179,413**	**$ 222,972**	**$ 205,078**	**$ 206,409**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: El Camino
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$60,027,019	$52,321,681	$3,919,098	$56,240,779
ENROLL FEE ADMIN (2%)	75,174	69,160	6,014	75,174
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	334,394	0	334,394	334,394
S.F.A.A.	621,469	571,752	49,717	621,469
E.O.P.S.	1,568,978	1,443,459	125,519	1,568,978
C.A.R.E.	252,517	232,315	20,202	252,517
D.S.P.S.	1,513,099	1,392,051	121,048	1,513,099
STATE HOSPITALS	0	0	0	0
CALWORKS	703,860	647,552	56,308	703,860
MATRICULATION (CREDIT)	1,195,281	1,099,658	95,623	1,195,281
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	20,134	18,524	1,610	20,134
PART-TIME FAC. ALLO.	848,408	780,536	67,872	848,408
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	1,004	0	1,004	1,004
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	207,524	190,922	16,602	207,524
SCHDL. MAINT. & REPAIR	207,543	190,939	16,604	207,543
TANF	139,169	128,036	11,133	139,169
ECON. DEVELOPMENT	1,593,249	1,171,421	166,908	1,338,329
NURSING EDUCATION	318,027	225,316	92,711	318,027
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	1,301,075	1,301,075	0	1,301,075
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	368,415	368,415	0	368,415
BASIC SKILLS -REAPPROP	322,813	322,813	0	322,813
CAR. TECH. TRAILER BIL	656,103	656,103	0	656,103
GEN. PUR. TRAILER BILL	1,283,572	1,283,572	0	1,283,572
INST. MATERIAL TRAILER	774,537	774,537	0	774,537
SCHLD.MAINT. TRAILER B	774,537	774,537	0	774,537
FACULTY STAFF DEV	82,450	82,450	0	82,450
TOTAL	$75,242,309	$66,085,586	$5,115,563	$71,201,149

Schedule 5A
El Camino Comm[illegible]ty College District
Enrollment Fee C[illegible]ction and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1		EFCW-1								
		B.1.a								
		B.1.b							$736.90	$510.58
		B.2.a							$894.65	$1,387.5[illegible]
		B.2.b							$28,606.10	$16,553.0[illegible]
		B.2.c							$143,002.02	$123,390.70
	Total EFCW - Fee Waiver Costs	EFCW-1	$113,868.51	$85,370.86	$111,265.71	$129,397.01	$149,121.63	$173,917.54	$922.97	$11,870.44
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$117,599.00	$126,824.00	$137,402.00	$151,562.00	$179,413.00	$222,972.00	$174,162.64	$153,712.38
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$3,730.49	-$41,453.14	-$26,136.29	-$22,164.99	-$30,291.37	-$49,054.46	$ 205,078.00	$ 206,409.00
4									-$30,915.36	-$52,696.62
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$113,868.51**	**$85,370.86**	**$111,265.71**	**$129,397.01**	**$149,121.63**	**$173,917.54**	**$174,162.64**	**$153,712.38**

California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

El Camino College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 08, 2008 11:02:32

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	195	109,308
BOGW - Part A-2 based on SSI recipient status	201	117,432
BOGW - Part A-3 based on general assistance recipient status	30	18,032
BOGW - Part A basis unreported	524	112,076
BOGW - Part B based on income standards	6,510	1,909,291
BOGW - Part C based on financial need	4,093	1,179,965
Fee Waiver – Dependent of (children) deceased or disabled Veteran	23	13,664

total 11,576

Total Amount = $ 3,459,768

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

July 25, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8567

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. J. Branwell

Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 43045

(02) Claimant Name: Foothill-De Anza Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 12345 El Monte Road

City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 1,608,218
Less: 10% Late Penalty		(14) $ 160,822
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,447,396
Due from State	(08)	(17) $ 1,447,396
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,703
(23) EFCW-1, (04)(A)(1)(b)(f)	5,798
(24) EFCW-1, (04)(A)(2)(a)(f)	1,264,310
(25) EFCW-1, (04)(B)(1)(a)(f)	4,026
(26) EFCW-1, (04)(B)(1)(b)(f)	2,431
(27) EFCW-1, (04)(B)(2)(a)(f)	34,719
(28) EFCW-1, (04)(B)(2)(b)(f)	90,476
(29) EFCW-1, (04)(B)(2)(c)(f)	11,256
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	419,902
(32) EFCW-1, (09)	84,495
(33) EFCW-1, (10)	142,907
(34)	
(35)	
(36)	

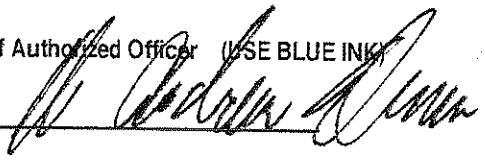
(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)



Date 7-16-07

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 67	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Foothill-De Anza Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,702.64	$ -	$ -	$ -	$ -	$ 2,702.64
b. Staff training (One time per employee)	$ 5,798.46	$ -	$ -	$ -	$ -	$ 5,798.46
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 1,264,309.97	$ -	$ -	$ -	$ -	$ 1,264,309.97
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 4,025.80	$ -	$ -	$ -	$ -	$ 4,025.80
b. Staff training (One time per employee)	$ 2,430.88	$ -	$ -	$ -	$ -	$ 2,430.88
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 34,719.36	$ -	$ -	$ -	$ -	$ 34,719.36
b. Waiving student fees	$ 90,475.52	$ -	$ -	$ -	$ -	$ 90,475.52
c. Reporting BOG fee waiver data to CCC	$ 11,255.54	$ -	$ -	$ -	$ -	$ 11,255.54
(05) Total Direct Costs	$ 1,415,718.17	$ -	$ -	$ -	$ -	$ 1,415,718.17

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.66%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 419,902.01
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,835,620.18
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 84,495.00
(10) Less: Enrollment Fee Waiver offsets		$ 142,907.10
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,608,218.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chao, Nancy	Cashiering Supervisor	$49.53	40.0	$ 1,981.20				
Thai, May	Senior Cashier	$41.82	8.0	$ 334.56				
Thanh, Henry	Senior Cashier	$48.36	8.0	$ 386.88				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,702.64	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Castillo, Cindy	Manager, Financial Aid	$70.02	3.0	$ 210.06				
Chao, Nancy	Cashiering Supervisor	$49.53	40.0	$ 1,981.20				
Thai, May	Senior Cashier	$41.82	40.0	$ 1,672.80				
Thanh, Henry	Senior Cashier	$48.36	40.0	$ 1,934.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,798.46	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$42.71	7,615.9	$ 325,275.09				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$42.71	6,056.0	$ 258,651.76				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$42.71	10,009.5	$ 427,505.75				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$42.71	4,996.2	$ 213,387.70				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$42.71	924.6	$ 39,489.67				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,264,309.97	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Manager, Financial Aid	$70.02	10.0	$ 700.20				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	10.0	$ 384.60				
Collings, Earl - Foothill	Web Coordinator	$68.25	40.0	$ 2,730.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,025.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	5.0	$ 226.65				
Feldman, Joyce K	Financial Aid Assistant	$42.20	10.0	$ 422.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	40.0	$ 1,538.40				
Witkop, Inna	Financial Aid Outreach Assistant	$32.51	7.5	$ 243.83				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,430.88	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	5.0	$ 226.65				
Chen, I	Financial Aid Outreach Coordinator	$37.42	16.0	$ 598.72				
Christensen, Josephine	Financial Aid Outreach Assistant	$31.38	500.0	$ 15,690.00				
Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	60.0	$ 4,104.60				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	40.0	$ 1,538.40				
Chao, Nancy	Cashiering Supervisor	$49.53	8.0	$ 396.24				
Collings, Earl - Foothill	Web Coordinator	$68.25	40.0	$ 2,730.00				
Collings, Earl - DeAnza	Web Coordinator	$68.25	60.0	$ 4,095.00				
Pabros, Angelita	Division Assistant	$41.03	125.0	$ 5,128.75				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 34,719.36	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Chabot-Las Positas Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	578.5	$ 24,933.35				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	380.2	$ 16,386.62				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	446.3	$ 19,235.53				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	694.2	$ 29,920.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 90,475.52	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	40.0	$ 1,813.20				
Castillo, Cindy	Manager, Financial Aid	$70.02	20.0	$ 1,400.40				
Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	40.0	$ 2,736.40				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Gusman, Frances	Dean, Student Outreach	$76.67	3.0	$ 230.01				
Witkop, Inna	Financial Aid Outreach Assistant	$32.51	3.0	$ 97.53				
Renteria, Matilda	Financial Aid Coordinator	$56.75	84.0	$ 4,767.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,255.54	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$226.65	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$226.65	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$1,813.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.00	**Bloom, Susan Lynn Total**			$2,266.50		
04-05	10.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$700.20	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$210.06	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	20.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$1,400.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	33.00	**Castillo, Cindy Total**			$2,310.66		
04-05	40.00	Chao, Nancy	Cashiering Supervisor	$49.53	$1,981.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Chao, Nancy	Cashiering Supervisor	$49.53	$1,981.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	8.00	Chao, Nancy	Cashiering Supervisor	$49.53	$396.24	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	88.00	**Chao, Nancy Total**			$4,358.64		
04-05	16.00	Chen, I	Financial Aid Outreach Coordinator	$37.42	$598.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	16.00	**Chen, I Total**			$598.72		
04-05	500.00	Christensen, Josephine	Financial Aid Outreach Assistant	$31.38	$15,690.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	500.00	**Christensen, Josephine Total**			$15,690.00		
04-05	60.00	Collings, Earl - DeAnza	Web Coordinator	$68.25	$4,095.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	60.00	**Collings, Earl - DeAnza Total**			$4,095.00		
04-05	40.00	Collings, Earl - Foothill	Web Coordinator	$68.25	$2,730.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Collings, Earl - Foothill	Web Coordinator	$68.25	$2,730.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	80.00	**Collings, Earl - Foothill Total**			$5,460.00		
04-05	60.00	Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	$4,104.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	$2,736.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Coyne, Sheila Nora Total**			$6,841.00		
04-05	7,615.90	Enrollment Office Staff	Collecting Fees	$42.71	$325,275.09	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	6,056.00	Enrollment Office Staff	Collecting Fees	$42.71	$258,651.76	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	10,009.50	Enrollment Office Staff	Collecting Fees	$42.71	$427,505.75	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	4,996.20	Enrollment Office Staff	Collecting Fees	$42.71	$213,387.70	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	924.60	Enrollment Office Staff	Collecting Fees	$42.71	$39,489.67	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	29,602.20	**Enrollment Office Staff Total**			$1,264,309.97		
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	10.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$422.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	25.00	**Feldman, Joyce K Total**			$1,055.00		
04-05	578.50	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$24,933.35	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	380.20	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$16,386.62	Receiving waiver applications	Waiving student fees
04-05	446.30	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$19,235.53	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	694.20	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$29,920.02	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,099.20	**Financial Aid Office Staff Total**			$90,475.52		
04-05	3.00	Gusman, Frances	Dean, Student Outreach	$76.67	$230.01	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	3.00	**Gusman, Frances Total**			$230.01		
04-05	10.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$384.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$1,538.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$1,538.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	90.00	**Harral, Kevin Total**			$3,461.40		
04-05	125.00	Pabros, Angelita	Division Assistant	$41.03	$5,128.75	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$5,128.75		
04-05	84.00	Renteria, Matilda	Financial Aid Coordinator	$56.75	$4,767.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	84.00	**Renteria, Matilda Total**			$4,767.00		

Foothill-De Anza Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	8.00	Thai, May	Senior Cashier	$41.82	$334.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Thai, May	Senior Cashier	$41.82	$1,672.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thai, May Total**			$2,007.36		
04-05	8.00	Thanh, Henry	Senior Cashier	$48.36	$386.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Thanh, Henry	Senior Cashier	$48.36	$1,934.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thanh, Henry Total**			$2,321.28		
04-05	3.00	Witkop, Inna	Financial Aid Outreach Assistant	$32.51	$97.53	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
04-05	7.50	Witkop, Inna	Financial Aid Outreach Assistant	$32.51	$243.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	10.50	**Witkop, Inna Total**			$341.36		
	33,061.90	**Grand Total**			$1,415,718.17		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$90,382,943		$90,382,943	$192,798	$90,190,145
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,651,128		9,651,128	56,337	9,594,791
Course and Curriculum Development	6020	207,911		207,911		207,911
Academic/Faculty Senate	6030	153,132		153,132		153,132
Other Instructional Administration & Instructional Governance	6090	238,779		238,779		238,779
Instructional Support Services	6100					
Learning Center	6110	187,926		187,926	5,504	182,422
Library	6120	3,403,307		3,403,307	5,719	3,397,588
Media	6130	568,852		568,852	8,264	560,588
Museums and Galleries	6140	83,466		83,466		83,466
Academic Information Systems and Technology	6150	520,293		520,293	7,413	512,880
Other Instructional Support Services	6190	503,257		503,257	63,546	439,711
Admissions and Records	6200	3,351,361		3,351,361	71,952	3,279,409
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,388,753		2,388,753	3,844	2,384,909
Matriculation and Student Assessment	6320	1,252,453		1,252,453	3,550	1,248,903
Transfer Programs	6330	372,233		372,233	5,457	366,776
Career Guidance	6340	426,637		426,637	7,513	419,124
Other Student Counseling and Guidance	6390	260,759		260,759	5,341	255,418
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,025,106		1,025,106	49,443	975,663
Subtotal		$114,978,296	$0	$114,978,296	$486,681	$114,491,615

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,821,162		$1,821,162	$7,684	$1,813,478
Health Services	6440	1,134,091		1,134,091		1,134,091
Student Personnel Admin.	6450	231,224		231,224		231,224
Financial Aid Administration	6460	1,587,379		1,587,379	57,095	1,530,284
Job Placement Services	6470	11,293		11,293	5,457	5,836
Veterans Services	6480					
Miscellaneous Student Services	6490	863,960		863,960		863,960
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,726,114		3,726,114	3,726,114	0
Custodial Services	6530	3,509,415		3,509,415	3,509,415	0
Grounds Maintenance and Repairs	6550	1,475,263		1,475,263	1,475,263	0
Utilities	6570	1,771,199		1,771,199	1,771,199	0
Other	6590	1,178,669		1,178,669	1,178,669	0
Planning, Policy Making, and Coordination	6600	5,009,583		5,009,583	5,009,583	0
General Inst. Support Services	6700					
Community Relations	6710	455,703		455,703	455,703	0
Fiscal Operations	6720	1,914,599		1,914,599	1,914,599	0
Human Resources Management	6730	2,218,589		2,218,589	2,218,589	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	350,569		350,569	350,569	0
Staff Diversity	6760	183,357		183,357	183,357	0
Logistical Services	6770	7,075,896		7,075,896	7,075,896	0
Management Information Systems	6780	6,706,284		6,706,284	6,706,284	0
Subtotal		$156,202,645	$0	$156,202,645	$36,132,157	$120,070,488

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,804,870		2,804,870	2,804,870	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,185,602		1,185,602		1,185,602
Community Service Classes	6820	1,871,689		1,871,689	45,619	1,826,070
Community Use of Facilities	6830	590,973		590,973	18,493	572,480
Economic Development	6840	381,597		381,597		381,597
Other Community Services & Economic Development	6890	30,987		30,987		30,987
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,114,872		1,114,872	1,320	1,113,552
Student and Co-curricular Activities	6960	627,437		627,437	16,412	611,025
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	1,069,587		1,069,587	3,873	1,065,714
Other Auxiliary Operations	7090	4,887,042		4,887,042	35,896	4,851,146
Physical Property Acquisitions	7100					
(05) Total		$170,767,301	$0	$170,767,301	$39,058,640	$131,708,661
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				29.66%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	520,530	73,365	8,593			602,488
Architecture and Environmental Design	0200						
Biological Sciences	0400	3,013,181	118,740	115,010	5,127		3,252,058
Business and Management	0500	4,161,515	138,868	16,941			4,317,324
Communications	0600	1,208,235	58,616	45,374	3,424		1,315,649
Computer and Information Science	0700	4,618,463	532,678	98,980	7,001		5,257,122
Education	0800	6,093,390	809,664	249,209	2,317		7,154,580
Engineering and Related Industrial Tech.	0900	4,293,864	335,203	121,010	35,491		4,785,568
Fine and Applied Arts	1000	6,446,626	379,766	637,084	6,775		7,470,251
Foreign Language	1100	2,509,441	61,620	10,242			2,581,303
Health	1200	3,580,280	455,208	329,331	14,037		4,378,856
Consumer Education and Home Economics	1300	823,643	207,844	20,339			1,051,826
Law	1400	246,047	9,009	2,598			257,654
Humanities (Letters)	1500	9,735,807	465,957	81,764	99		10,283,627
Library Science	1600	66,730					66,730
Mathematics	1700	7,058,655	254,302	2,822	10,689		7,326,468
Military Studies	1800						
Physical Sciences	1900	3,197,104	190,056	38,984	14,154		3,440,298
Psychology	2000	1,684,538	39,191	8,398	523		1,732,650
Public Affairs and Services	2100	413,442	79,600	9,214			502,256
Social Sciences	2200	7,046,996	263,552	49,832	10,449		7,370,829
Commercial Services	3000	272,719	26,769	22,954			322,442
Interdisciplinary Studies	4900	10,857,316	5,657,295	315,641	82,712		16,912,964
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	77,848,522	10,157,303	2,184,320	192,798		90,382,943

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,263,260	1,331,531	56,337		9,651,128
Course and Curriculum Development	6020		189,380	18,531			207,911
Academic/Faculty Senate	6030		147,556	5,576			153,132
Other Instruct. Admin. & Instruct. Governance	6090		163,121	75,658			238,779
Subtotal - Instructional Administration	6000		8,763,317	1,431,296	56,337		10,250,950
Instructional Support Services (6100)							
Learning Center	6110	115,839	66,491	92	5,504		187,926
Library	6120		3,087,003	310,585	5,719		3,403,307
Media	6130		459,397	101,191	8,264		568,852
Museums and Galleries	6140		81,261	2,205			83,466
Academic Information Systems and Tech.	6150		331,242	181,638	7,413		520,293
Other Instructional Support Services	6190		330,157	109,554	63,546		503,257
Subtotal - Instructional Support Services	6100	115,839	4,355,551	705,265	90,446		5,267,101
Admissions and Records	6200		2,923,677	355,732	71,952		3,351,361
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,321,681	63,228	3,844		2,388,753
Matriculation and Student Assessment	6320		1,187,566	61,337	3,550		1,252,453
Transfer Programs	6330		334,227	32,549	5,457		372,233
Career Guidance	6340		388,553	30,571	7,513		426,637
Other Student Counseling and Guidance	6390		229,640	25,778	5,341		260,759
Subtotal - Student Counseling and Guidance	6300		4,461,667	213,463	25,705		4,700,835

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		660,376	315,287	49,443		1,025,106
Extended Opportunity Prgms. & Services (EOPS)	6430		1,497,123	316,355	7,684		1,821,162
Health Services	6440		970,453	163,638			1,134,091
Student Personnel Administration	6450		214,987	16,237			231,224
Financial Aid Administration	6460		1,337,425	192,859	57,095		1,587,379
Job Placement Services	6470			5,836	5,457		11,293
Veterans Services	6480						
Miscellaneous Student Services	6490		770,718	93,242			863,960
Subtotal - Other Student Services	**6400**		5,451,082	1,103,454	119,679		6,674,215
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,180,278	403,413	142,423		3,726,114
Custodial Services	6530		2,176,623	1,332,792			3,509,415
Grounds Maintenance and Repairs	6550		1,336,382	132,733	6,148		1,475,263
Utilities	6570			1,771,199			1,771,199
Other Operation and Maintenance of Plant	6590		602,777	470,916	104,976		1,178,669
Subtotal - Operation and Maintenance of Plant	**6500**		7,296,060	4,111,053	253,547		11,660,660
Planning, Policymaking, and Coordination	**6600**		2,117,652	2,792,502	99,429		5,009,583

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 G ral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		411,388	32,174	12,141		455,703
Fiscal Operations	6720		1,878,403	(39,566)	75,762		1,914,599
Human Resources Management	6730		2,024,087	192,668	1,834		2,218,589
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		153,983	193,387	3,199		350,569
Staff Diversity	6760		164,183	19,174			183,357
Logistical Services	6770		3,903,553	3,099,929	72,414		7,075,896
Management Information Systems	6780		5,520,450	829,083	356,751		6,706,284
Other General Institutional Support Services	6790		431,659	2,373,211			2,804,870
Subtotal - General Institutional Support Services	**6700**		14,487,706	6,700,060	522,101		21,709,867
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		85,001	1,100,601			1,185,602
Community Service Classes	6820		1,071,531	754,539	45,619		1,871,689
Community Use Facilities	6830		445,893	126,587	18,493		590,973
Economic Development	6840		327,215	54,382			381,597
Other Community Svcs. & Economic Development	6890		5,114	25,873			30,987
Subtotal - Community Services	**6800**		1,934,754	2,061,982	64,112		4,060,848

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 G ral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,087,221	26,331	1,320		1,114,872
Student and Co-curricular Activities	6960		563,843	47,182	16,412		627,437
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,651,064	73,513	17,732		1,742,309
Auxiliary Operations (7000)							
Contract Education	7010	3,126	496,727	565,861	3,873		1,069,587
Other Auxiliary Operations	7090		3,894,191	956,955	35,896		4,887,042
Subtotal - Auxiliary Operations	**7000**	3,126	4,390,918	1,522,816	39,769		5,956,629
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					9,309,189	9,309,189
Student Aid	7320						
Other Outgo	7330					474,066	474,066
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					9,783,255	9,783,255
TOTAL EXPENDITURES and OTHER OUTGO	**391**	77,967,487	67,990,751	23,255,456	1,553,607	9,783,255	180,550,556

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	130,559
Avg. time p/account	3.5
Total Time (in minutes)	456957
Per Hour	60
Hours Worked **(** 11)**	**7615.9**
***EFC 2**	90,840
Avg. time p/student	4.0
Total Time (in minutes)	363360
Per Hour	60
Hours Worked **(** 12)**	**6056.0**
***EFC 1**	130,559
Avg. time p/question	4.6
Total Time (in minutes)	600571
Per Hour	60
Hours Worked **(** 13)**	**10009.5**
***EFC 2**	90,840
Avg. time p/file	3.3
Total Time (in minutes)	299772
Per Hour	60
Hours Worked **(** 14)**	**4996.2**
***EFC 4**	9,565
Avg. time p/account	5.8
Total Time (in minutes)	55477
Per Hour	60
Hours Worked **(** 15)**	**924.6**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/question	3.5
Total Time (in minutes)	34710
Per Hour	60
Hours Worked **(** 21)**	**578.5**
***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/application	2.3
Total Time (in minutes)	22809
Per Hour	60
Hours Worked **(** 22)**	**380.2**
***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/evaluation	2.7
Total Time (in minutes)	26776
Per Hour	60
Hours Worked **(** 23)**	**446.3**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	9,917
Avg. time p/application	4.2
Total Time (in minutes)	41651
Per Hour	60
Hours Worked **(** 25)**	**694.2**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See documentation in the 05-06 claim only.)
Findings:

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Aced, Shawna	Associate Registrar	A&R - Foothill - A	3	2	3	2	3	4
Alexander, Irma	A&R Assistant	A&R - Foothill - F	2	3	1	3	3	3
Almendarez, Susan	A&R Assistant	A&R - Foothill - A	5	3	3	2	2	3
Avancena, Jeoffrey	A&R PT Student Worker	A&R - Foothill - S	1	2	1	3	5	1
Bergstedt, Stacy	A&R Senior Cashier	A&R - Foothill - F	5	1	1	5	7	8
Bhan, Vanessa	A&R Cashier	A&R - Foothill - F	1	9	3	5	10	
Bookvich, Patricia	A&R Assistant	A&R - De Anza	5	5	8	5		
Borelli, Dennis	Cashiering Supervisor	Cashiering - De Anza	1	1	1	1	1	1
Boyvers, Shelly	A&R Clerk	A&R - Foothill - A	10	10	10	10		
Brewer, Pam	A&R Assistant	A&R - Foothill - A	5	2	5			3
Burfine, Mary Alice	A&R Assistant	A&R - De Anza	3	3	5	3		
Carpenter, Susan	A&R Assistant	A&R - Foothill - F	2	3	1	3	2	2
Chang, Ching (Tiffany)	A&R PT Student Worker	A&R - Foothill - S	3	3	4	4	5	5
Chao, Nancy Tu-Ning	Cashiering Supervisor	Cashiering - De Anza	5	1	15	1	20	3
Cheney, Melodie	A&R Assistant	A&R - De Anza	7	7	4	6		
Cheng, Mei	A&R PT Student Worker	A&R - Foothill - S	1	5	3	5	10	7
Cole, Sheri	A&R Assistant	A&R - De Anza	3	3	4	3		
Comanda, Deborah	A&R Cashier	A&R - Foothill - F	5	15	5	3	15	10
Comanda, Deborah	Senior Cashier	Cashiering - De Anza	5	1		1		
Crumpton, Dena	A&R Assistant	A&R - De Anza	3	3	5	3		
Deshpande,Mvinmaie	A&R Assistant	A&R - Foothill - A	7	9	5	4	10	10
Elwell, Jean	A&R Coordinator	A&R - De Anza	3	1	1	3		
Fifield, Patricia	Assoc. Registrar	A&R - De Anza	3	3	5	3		
Fowler, Cindy	A&R Supervisor	A&R - Foothill - F	2	3	1	3	2	3
Frische, Allen	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
Furuhata, Erl	A&R PT Student Worker	A&R - Foothill - S	4	4	5	4	4	2
Furukawa, Nami	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Henderson, April	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	4
Hochstraser, Alex	A&R Assistant	A&R - De Anza	4	5	4	4		
Ichimura, Sachie	A&R PT Student Worker	A&R - Foothill - S	5	4	5	3	5	4
Ingalls, Melissa	Division A&R Assistant	A&R - De Anza	5	5	8	5		
Jeffries, Portia	A&R Assistant	A&R - Foothill - F	2	3	1	2	2	3
Johnson, Barry	A&R Supervisor	A&R - De Anza	4	5	3	3		
Jung, Henry	A&R Day Supervisor	A&R - Foothill - A	2	3	3	5	2	3
Kaliangara, Araceli	A&R Assistant	A&R - De Anza	8	7	6	4		
Kawr, Jasmeet	A&R PT Student Worker	A&R - Foothill - S	5	5	2	5	5	5
Khaolaor, Orawan	A&R Senior Cashier	A&R - Foothill - A	3	3	2	1	7	5
Lai, Su Kei	A&R PT Student Worker	A&R - Foothill - S	1	2	1	1	2	1
Lindke, William	A&R Supervisor	A&R - Foothill - F	2	3	1	2	2	3
McLaughlin, Annette	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nakayama, Cindy	A&R Assistant	A&R - De Anza	4	3	2	3		
Nguyen, Henry Cony	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nguyen, Hien	A&R Cashier	A&R - Foothill - F	1	10	3	1		
Nguyen, Khanh	A&R Assistant	A&R - De Anza	3	3	5	3		
Okyneel, Yelena	A&R PT Student Worker	A&R - Foothill - S	2	2	4	5	3	1
Olsen, Lynn	A&R Supervisor	A&R - Foothill - F	3	4	2	1	3	4
Pabros, Angelita	Division A&R Assistant	A&R - De Anza	4	3	2	3		
Yena-Ferrick, Joan	A&R Assistant	A&R - De Anza	3	6	4	3		

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Staff	Title	***Department	*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
			11	12	13	14	15	16
Perez, Denise	A&R Technician	A&R - Foothill - A	2	3	5	3	7	2
Phan, Vy	A&R Assistant	A&R - De Anza	5	5	8	5		
Ranii, Lindsay	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Roberts, Brian	A&R Assistant	A&R - De Anza	3	3	5	3		
Sanchez, Amelia	A&R Assistant	A&R - De Anza	3	3	5	3		
Schooler, Shirley	Cashier	Cashiering - De Anza	5	1	15	1	5	1
Slayton, Virginia	A&R Specialist	A&R - Foothill - A	5	7	3	7	7	3
Snowden, Betty	A&R Coordinator	A&R - De Anza	3	3	5	3		
Starratt, Elaine	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Sung, See Wan	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Terranova, Cheryl	A&R Clerk	A&R - Foothill - A	2	2	3	1		
Thai, Binh	A&R Assistant	A&R - De Anza	3	5	5	3		
Thai, May	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Ting, Judy	A&R Assistant	A&R - De Anza	5	10	10	3		
Tomaunas, Robert	A&R Evaluation Specialist	A&R - De Anza	4	4	4	4		
Wang, Rhoda	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
White, Essie	A&R Assistant	A&R - De Anza	4	4	7	3		
Wood, Patricia	Cashiering Services Coord.	A&R - Foothill - A	5	3	5	2	12	3
Ye, Yunzei	A&R Cashier	A&R - Foothill - F	2	3	7		10	
Zimmerman, Brian	A&R Assistant	A&R - Foothill - A	1	3	2	2	3	2
Average			**3.5**	**4.0**	**4.6**	**3.3**	**5.8**	**3.3**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

*****Department**
A&R - Foothill - A = Active Employees
A&R - Foothill - F = Former Cashiers and Employees
A&R - Foothill - S = Partime Student Workers

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Aced, Shawna	Associate Registrar		10.07	22.75	30.73	34.98	39.69	41.51	49.76
Alexander, Irma	A&R Assistant		29.18	31.20					
Almendarez, Susan	A&R Assistant			11.11	11.11		26.62	31.70	36.15
Avancena, Jeoffrey	A&R PT Student Worker								
Bergstedt, Stacy	A&R Senior Cashier	20.86	26.68	29.78					
Bhan, Vanessa	A&R Cashier				23.09	24.78	29.75		
Bookvich, Patricia	A&R Assistant	23.59	32.00						
Borelli, Dennis	Cashiering Supervisor	38.22	41.29	44.98	47.86	51.27	56.23	53.91	
Bowers, Shelly	A&R Clerk	27.96	29.05	30.78	33.81	36.41	38.56	39.65	44.00
Brewer, Pam	A&R Assistant			25.05	28.07	31.10	35.13	40.79	43.25
Burfine, Mary Alice	A&R Assistant	26.34	28.20	30.75	33.08	35.15	37.74	38.98	39.38
Carpenter, Susan	A&R Assistant	19.32	18.92						
Chang, Ching (Tiffany)	A&R PT Student Worker								
Chao, Nancy Tu-Ning	Cashiering Supervisor	30.07	32.41	35.91	39.89	42.41	47.76	49.53	52.55
Cheney, Melodie	A&R Assistant		26.44	25.57	28.62	31.59	34.38	36.40	40.39
Cheng, Mei	A&R PT Student Worker								
Cole, Sheri	A&R Assistant	13.48	12.66	13.60	16.56	23.94	30.85	32.51	41.65
nanda, Deborah	Senior Cashier	28.50	56.93	35.17		39.39	37.78	38.97	39.50
Crumpton, Dena	A&R Assistant	10.26	14.25	23.21	26.39	29.13	32.62	34.65	36.51
Deshpande,Mrinmaie	A&R Assistant				11.18	28.50	34.43	32.07	38.19
Elwell, Jean	A&R Coordinator	34.34	35.20	39.10	40.98	43.08	46.21	47.95	50.18
Fifield, Patricia	Assoc. Registrar	31.21	34.94	38.58	42.42	46.70	51.55	53.80	56.39
Fowler, Cindy	A&R Supervisor								
Frische, Allen	Director of Budget & Personnel	43.21	45.25	51.36	56.50	61.58	64.37	66.23	
Furuhata, Erl	A&R PT Student Worker								
Furukawa, Nami	A&R PT Student Worker								
Henderson, April	A&R Assistant	18.91	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hochstraser, Alex	A&R Assistant	35.60	36.46	37.43	41.41	39.77	42.25	46.68	
Ichimura, Sachie	A&R PT Student Worker								
Ingalis, Melissa	Division A&R Assistant							48.46	
Jeffries, Portia	A&R Assistant	8.37	14.29	20.56					
Johnson, Barry	A&R Supervisor	29.56	33.00	36.34	39.71	42.03	46.55	46.70	47.93
Jung, Henry	A&R Day Supervisor		8.72	11.91	26.03	28.51	31.91	34.44	40.73
Kaliangara, Araceli	A&R Assistant	27.71	30.26	36.59	39.84	40.94	40.82	43.15	44.63
Kawr, Jasmeet	A&R PT Student Worker								
Khaolaor, Orawan	A&R Senior Cashier								
Lai, Su Kei	A&R PT Student Worker								
Lindke, William	A&R Supervisor	34.49	39.33	43.37	48.09	51.39	56.73	57.66	
McLaughlin, Annette	Senior Cashier								
Nakayama, Cindy	A&R Assistant	27.69	27.50	32.04	35.37	39.32	43.83	46.02	48.52
Nguyen, Henry Cong	Senior Cashier	13.65	15.59	24.35	29.14	33.24	37.51	40.94	42.99
Nguyen, Hien	A&R Cashier			9.03	8.18	12.52	25.63	32.52	
Nguyen, Khanh	A&R Assistant	26.99	32.21						
Okyneel, Yelena	A&R PT Student Worker								
Olsen, Lynn	A&R Supervisor	37.63	38.65	41.89	43.54	47.07	37.59	31.31	
Pabros, Angelita	Division A&R Assistant			21.26	28.63	32.39	38.07	41.03	42.64
Pena-Ferrick, Joan	A&R Assistant	27.33	30.19	32.84	34.40	36.26	38.89	41.17	44.64
z, Denise	A&R Technician	29.57	34.04	35.59	43.20	45.48	44.76	52.92	55.67

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Phan, Vy	A&R Assistant	11.61	10.39	18.10	23.67	29.60	33.89	36.12	39.12
Ranii, Lindsay	A&R Assistant			22.08	24.93	33.51	21.76		
Roberts, Brian	A&R Assistant								31.66
Sanchez, Amelia	A&R Assistant	22.75	25.72	29.81	30.80	34.07	39.08	39.96	41.23
Schooler, Shirley	Cashier	24.56	25.87	30.91	34.25	37.71	41.75	43.11	46.98
Slayton, Virginia	A&R Specialist	27.61	29.43	32.12	35.10	36.88	40.00	41.43	43.46
Snowden, Betty	A&R Coordinator							52.51	
Starratt, Elaine	A&R Assistant	24.03	27.39	30.36					
Sung, See Wan	A&R PT Student Worker								
Terranova, Cheryl	A&R Clerk	22.79	30.21	27.43	29.92	30.72	36.64	37.70	41.31
Thai, Binh	A&R Assistant	31.03	33.06	35.49	37.80	40.94	44.50	45.76	49.75
Thai, May	Senior Cashier	12.87	15.44	23.24	28.44	32.88	37.15	41.82	43.07
Ting, Judy	A&R Assistant	28.13	30.28	32.78	34.77	37.52	41.03	42.26	45.71
Tomalinas, Robert	A&R Evaluation Specialist			16.84	16.87	22.06	17.24	17.11	27.58
Wang, Rhoda	Director of Budget & Personnel	46.77	50.01	56.28	60.18	65.29	71.39	75.79	75.96
White, Essie	A&R Assistant	27.88	29.53	31.22					
Wood, Patricia	Cashiering Services Coord.	16.68	20.49	25.13	28.22	30.52	34.18	36.12	40.40
Ye, Yunzei	A&R Cashier			21.76	23.24				
Zimmerman, Brian	A&R Assistant								30.18
Average		**25.99**	**28.43**	**29.65**	**32.38**	**36.88**	**39.61**	**42.71**	**43.80**

clusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (See documentation in the 05-06 claim only.)
Findings:

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Billan, Ryan	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Blinon, Susan	Assistant Director of Financial Aid	Financial Aid - De Anza	2	1	2	4	6	2
Bostic, John		EOPS - Foothill	5	5	2	1	1	1
Castillo, Cindy	Director of Financial Aid	Financial Aid - De Anza	1	1				
Castro, Richard James	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Chacon, Beatriz		EOPS - Foothill	2	1	2			1
Chavez, Antoinette	Financial Aid Outreach Assistant	EOPS - Foothill	4	2	1	3	3	2
Chen, I	Financial Aid Outreach Coordinator	EOPS - Foothill	2	1	2	2	5	3
Christensen, Josephine	Financial Aid Outreach Assistant	EOPS - Foothill	2	1	2	2.5	4	3
Ciaros, Randy	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	2	2	5	5	3
Cross, Lindsey		EOPS - Foothill	3	2	1	2	1	1
Duong, Tung	Financial Aid Assistant	EOPS - Foothill	2	1	2	2	3	2
Feldman, Joyce	Financial Aid Assistant	Financial Aid - De Anza	3	5	3	10	7	4
Garcia, Alma	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Godinez, Christy	Financial Aid Assistant	EOPS - Foothill	2	1	2	3	3	1
Gonzalez, Ismael	EOPS Counselor	EOPS - Foothill	10					
Guevara, Erika	Administrative Assistant I	EOPS - De Anza	5	5	2	5	2	5
Hamilton-Kilili, Asher		EOPS - Foothill	3	3	1	1	1	1
Harral, Kevin	Financial Aid Outreach Coordinator	Financial Aid - De Anza	5	1	2	4	3	2
Henderson, April	EOPS Specialist	EOPS - Foothill	3		1			
Hunter, Karen	Financial Aid Assistant	Financial Aid - De Anza	1					
Kaliangara, Araceli		EOPS - Foothill	1	1	1	1	1	1
Lambrecht, Donna	Sr. Admin. Asst. II	EOPS - Foothill	3	1				
Le, Chuong Huy	EOPS Services Coordinator	EOPS - De Anza	5	5	5	2		
Nava, Tobias	EOPS Counselor	EOPS - Foothill	2	1	3	4	1	
Ngo, Fei	Financial Aid Assistant	Financial Aid - De Anza	5	2	5	10	5	5
Nguyen, Leslie	Office Assistant	EOPS - De Anza	2	2	3			
Nguyen, Thao	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
O'Malley, Dawna	Financial Aid Assistant	Financial Aid - De Anza	10	1	10	20	20	10
Pardo, Ines	EOPS Program Serv. Coordinator	EOPS - Foothill	5	2	3	3		
Ramirez-Moya, Francisca	Office Assistant	EOPS - De Anza	2	2	3			
Renteria, Matilda	Financial Aid Coordinator	EOPS - Foothill	3	1	3	1	3	2

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Robles, George	EOPS Supervisor	EOPS - De Anza	2	2	5	5	10	10
Rodreguez, Jorge	Sr. EOPS Specialist	EOPS - Foothill	4		1			
Schmidt, Janet	Financial Aid Assistant	Financial Aid - De Anza	1	1	1	1	2	1
Sigala-Aquilan, Griselda	CARE Coordinator	EOPS - De Anza	5	5	5	2	10	10
Trejo, Adrian	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Trinh, Lan	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
Van, Nina	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	5	1	2	1	2
Witrop, Irna	Financial Aid Outreach Assistant	EOPS - Foothill	3	1	7	5	8	5
Wu, Tilly	EOPS Counselor	EOPS - Foothill	1	1	2	3	1	
Zamora, Lilian	Office Clerk	EOPS - De Anza	2	2	3			
Average			**3.5**	**2.3**	**2.7**	**3.7**	**4.2**	**3.5**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Billan, Ryan	Financial Aid Outreach Assistant							
Brown, Susan	Assistant Director of Financial Aid							
Bostic, John		48.64	51.35	55.97	71.84			
Castillo, Cindy	Director of Financial Aid	51.19	52.92	55.66	63.57	68.01	70.02	71.07
Castro, Richard James	EOPS Specialist	25.28	29.68			21.96		
Chacon, Beatriz							58.17	62.49
Chavez, Antoinette	Financial Aid Outreach Assistant	12.03	25.17	26.87				31.99
Chen, I	Financial Aid Outreach Coordinator						37.42	39.58
Christensen, Josephine	Financial Aid Outreach Assistant					29.56	31.38	35.32
Claros, Randy	Financial Aid Outreach Assistant							
Cross, Lindsey		10.39	17.18	26.89	31.64			
Duong, Tung	Financial Aid Assistant	24.15	26.22	28.94	33.95	38.30	40.27	42.73
Feldman, Joyce	Financial Aid Assistant	29.01	32.04	33.64	38.16	40.91	42.20	44.46
Garcia, Alma	Financial Aid Outreach Assistant					31.03	32.60	35.18
Godinez, Christy	Financial Aid Assistant	29.91	32.39	33.94	37.94	40.68	43.18	44.32
Gonzalez, Ismael	EOPS Counselor	69.07	73.60	77.95	82.00	88.73	64.70	75.70
Guevara, Erika	Administrative Assistant I	33.08	36.38	37.28	40.89	44.98	46.29	47.66
Hamilton-Kilili, Asher						35.89	36.66	
Harral, Kevin	Financial Aid Outreach Coordinator			25.05	29.44	34.90	38.46	41.73
Henderson, April	EOPS Specialist	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hunter, Karen	Financial Aid Assistant					11.62	11.84	29.10
Kaliangara, Araceli		30.26	36.59	39.84	40.94	40.82	43.15	44.63
Lambrecht, Donna	Sr. Admin. Asst. II	43.50	47.63	50.50	55.36	60.14		57.22
Le, Chuong Huy	EOPS Services Coordinator			16.87	33.78	38.79	41.85	41.81
Nava, Tobias	EOPS Counselor							69.39
Ngo, Fei	Financial Aid Assistant							
Nguyen, Leslie	Office Assistant	22.34	26.46	29.83	33.38	36.86	38.38	41.68
Nguyen, Thao	Financial Aid Outreach Assistant				7.99	11.88	11.84	
O'Malley, Dawna	Financial Aid Assistant	10.88	16.42	23.87	30.42	34.25		39.95
Pardo, Ines	EOPS Program Serv. Coordinator	37.16	42.77	45.00	47.46	51.14	52.97	54.52
Ramirez-Moya, Francisca	Office Assistant	8.69		23.58	26.55	29.98	31.51	33.51
Renteria, Matilda	Financial Aid Coordinator	38.03	40.91	43.32	47.17	55.03	56.75	54.17

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Robles, George	EOPS Supervisor	45.73	50.85	52.98	58.69	64.55	66.54	68.29
Rodriguez, Jorge	Sr. EOPS Specialist	26.64	30.56	33.73	37.25	42.10	44.55	46.95
Schmidt, Janet	Financial Aid Assistant	23.38	25.79	28.14	33.30	37.67	40.84	41.13
Sigala-Aguilar, Griselda	CARE Coordinator	47.52	51.96	56.50	57.25	61.78	63.11	62.50
Trejo, Adrian	EOPS Specialist		28.19	31.83				
Trinh, Lan	Financial Aid Outreach Assistant	8.52	11.71	16.91	30.34	30.87	33.58	36.17
Van, Nina	Financial Aid Outreach Assistant					29.68	32.86	35.09
Witkop, Inna	Financial Aid Outreach Assistant						32.51	37.59
Wu, Tilly	EOPS Counselor	46.16	50.62	55.55	61.17	67.55	76.47	80.64
Zamora, Lillian	Office Clerk	21.98	23.60	25.96	28.86	30.94	33.23	33.76
Average		**30.70**	**35.59**	**37.34**	**42.07**	**41.60**	**43.10**	**47.54**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
EFC 2	1.8-1	2. Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012
EFC 4	1.8-2	1. Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763
EFC 5	1.8-2	2. Refunds								
EFW 6	1.8-3	1. Waivers Requested	X							
EFW 7	1.8-3	2. Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442
EFW 8	1.8-3 (1-2)	Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2004 Summer Term

Data Current As Of June 24, 2006 03:09:36

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	29,014

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04-05

29,014.00 +
41,462.00 +
36,861.00 +
36,720.00 +
144,057.00 *

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2004 Fall Term

Data Current As Of June 24, 2006 03:12:11

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	41,462

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2005 Winter Intersession

Data Current As Of June 24, 2006 03:12:31

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Total Headcount	36,861

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2005 Spring Semester

Data Current As Of June 24, 2006 03:12:54

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	36,720

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FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee Collection and Waiver Claim
(EFCW 1.6A)
Adminstrative Activiities
2004/2005

Actual time

Employee and Title	Code 1A	Code 1B	Code 2A	Code 2B	Code 3	Code 4	TOTAL
Bloom, Susan Lynn Financial Aid Coordinator				5.0	5.0	40.0	50.0
Castillo, Cindy Manager, Financial Aid		10.0	3.0			20.0	33.0
Chen, I Financial Aid Outreach Coord					16.0		16.0
Christensen, Josephine Financial Aid Outreach Asst					500.0		500.0
Coyne, Sheila Nora Senior Programmer Analyst					60.0	40.0	100.0
Feldman, Joyce K Financial Aid Assistant		5.0		10.0	5.0	5.0	25.0
Gusman, Frances Dean, Student Outreach						2.0	3 ~~2.0~~
Harral, Kevin Financial Aid Outreach Coord		10.0		40.0	40.0		90.0
Renteria, Matilda Financial Aid Coordinator						83.0	~~83.0~~
W..kop, Inna Financial Aid Outreach Asst			7.5			3.0	10.5
TOTAL	0.0	25.0	3.0	62.5	626.0	193.0	91.5 ~~909.5~~

Also Actual Time Read From
Chao, Nancy
Collingo, Earl
Pabros, Angelita
[illegible], May
Thanh, Henry

[illegible handwritten margin notes]

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

408-864-8227
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A (2B) 3 4		
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan L. Bloom Date 5/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Cindy Carrillo
Employee Name

Dir Fin Aid
Exact Position Title

Fin Aid
Department/Location

408-864-8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		
/ /	1A 1B (2A) 2B 3 4		10
/ /	1A 1B 2A 2B 3 (4)		3
/ /	1A 1B 2A 2B 3 4		20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Carrillo Date 5/31/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Nancy Chao — Employee Name

Cashiering Supervisor — Exact Position Title

De Anza - gma

DA / Cashiering Svcs — College/Department/Location

408-864-5308 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	8	8	8	8	8	8	8	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	88	88	88	88	88	88	88	88

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill -De Anza Fiscal Year: 2004 - 2005

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

Financial Aid / Foothill
Department/Location

650-949-7376
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10 10/4/04	1A 1B 2A 2B 3 4		
10/1/04	1A 1B 2A 2B (3) 4	BOGW online application debug and adds-on of New links and warning pages	8
12 10/1/04	1A 1B 2A 2B 3 4		
1 10/1/05	1A 1B 2A 2B 3 4		
2 10/1/05	1A 1B 2A 2B 3 4		
3 10/1/05	1A 1B 2A 2B 3 4		
4 10/1/05	1A 1B 2A 2B 3 4		
5 10/1/05	1A 1B 2A 2B (3) 4	Revised and launched 05-06 BOGW on line application	8
6 10/1/05	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	16

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 5/10/06

If you have any questions, please contact Bee Chean, at 5/17/06

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 2004-2005

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

Financial Aid / Middlefield Campus
Department/Location

650-949-6987
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/04	1A 1B 2A 2B(3) 4	Data Entry in SIS	50
11/04	1A 1B 2A 2B(3) 4		50
9/1/04	1A 1B 2A 2B(3) 4		50
10/1/04	1A 1B 2A 2B(3) 4		50
11/1/04	1A 1B 2A 2B(3) 4		50
12/1/04	1A 1B 2A 2B(3) 4		50
1/1/05	1A 1B 2A 2B(3) 4		50
2/1/05	1A 1B 2A 2B(3) 4		30
3/1/05	1A 1B 2A 2B(3) 4		30
4/1/05	1A 1B 2A 2B(3) 4		30
5/1/05	1A 1B 2A 2B(3) 4		30
6/1/05	1A 1B 2A 2B(3) 4		30

50 + 50 + 50 + 50 + 50 + 50 + 50 + 50 + 30 + 30 + 30 + 30 + 30 + 30 = 500 *

EMPLOYEE CERTIFICATION: The State of Californ
data for state mandates in order for the district to rec
you have reported actual data or have provided a go
of perjury under the laws of the State of California tc
information." This information is used for cost acco

I maintain a record of
this form certifies that
declare) under penalty
sonal knowledge or
SE BLUE INK

Employee Signature Josephine Christensen

1/9/06

If you have any questions, please contact Bee at 650-949-7223

PLEASE SUBMIT THIS INFORMATION BY _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6S

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza

EARL COLLINGS — Employee Name

WEB MASTER — Exact Position Title

MARKETING — College/Department/Location

6509497647 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						5	40	30
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						5	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Collings Date 04-18-07

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 2006

EARL COLLINGS
Employee Name

Web Coordinator
Exact Position Title

Marketing
Department/Location

650 947-7647
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03/03	1A 1B 2A 2B (3) 4	Web updates for BOG Waiver	20
03/04	1A 1B 2A 2B (3) 4	Design Online Web forms for BOG	80
03/05	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	60
04/06	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

02-03-Sent
03-04-Sent
04-05-Sent
05-06-Sent

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-3-2006

If you have any questions, please contact Bee Chan, at 9497223

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FOOTHILL - DE ANZA Fiscal Year: 2004-2005

Sheila Coyne
Employee Name

PROGRAMMY ANALYST, SENIOR
Exact Position Title

ETS - District 408-864-8740
Department/Location Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/1/04	1A 1B 2A 2B (3) 4	Fin. Aid File Conversions	60
11/1/04	1A 1B 2A 2B 3 (4)	Generate STATE MES REPORT (S)	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila Coyne Date 5-23-06

If you have any questions, please contact JOE LAMPO, at 408-864-8626

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Joyce Feldman
Employee Name

Fin aid asst
Exact Position Title

Fin aid
Department/Location

408-864-8377
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		5
/ /	1A 1B 2A (2B) 3 4		10
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce K Feldman Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 03-04

FRANCES GUSMAN
Employee Name

Dean Student Outreach & Retention
Exact Position Title

Foothill/Dean 650-949-7524 12mo/11mo/10mo/hrly
Department/Location Telephone # ~~Work~~ year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/ 104	1A 1B 2A 2B 3 (4)	Final BFAP Report	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Frances A. Gusman. Date 5/17/06.

If you have any questions, please contact Bee Chacon, at 949-7223

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Kevin Harral
Employee Name

Fin Aid Outreach Coordinator
Exact Position Title

Fin Aid
Department/Location

408 864-8334
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		10
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Harral Date 5-4-06

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 00 – 06

Angelita Pabros
Employee Name

Division Assistant
Exact Position Title

Admissions / De Anza
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	(3 minutes @ 18% of students)	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6 yrs @ 125 = 750 ttl	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-12-07

If you have any questions, please contact 408-864-8292, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill - De Anza Fiscal Year: 03-04

Matilda Cuentas
Employee Name

Financial Aid Coordinator
Exact Position Title

Foothill/Fin Aid 650-949-7247 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/04	1A 1B 2A 2B 3 (4)	Fund BFAP Report	4
9/04	1A 1B 2A 2B 3 4	MIS	80
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	84

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Cuentas Date 5/17/06

If you have any questions, please contact Dee Macar, at 949-7223

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Fhda CCD

May Thai — Employee Name

Sr. Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-8290 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature May Thai Date 9/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Henry Thanh — Employee Name

Senior Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-5699 — Telephone #

~~12mo~~/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 2004-05

Irina Whitkop
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

Financial Aid
Department/Location

650/949-7710
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
07/01/04	1A 1B 2A 2B 3 4		
08/01/04	1A 1B 2A 2B 3 (4)	preparation for MAR report	3.0
09/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	1.0
10/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	4.0
11/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	2.0
12/01/04	1A 1B 2A 2B 3 4		
01/01/05	1A 1B 2A 2B 3 4		
02/01/05	1A 1B 2A 2B 3 4		
03/01/05	1A 1B 2A 2B 3 4		
04/01/05	1A 1B 2A 2B 3 4		
05/01/05	1A 1B 2A 2B 3 4		
06/01/05	1A 1B 2A 2B 3 4	BOG new forms preparation	0.5
		Total	10.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Irina Whitkop Date 5/10/06

If you have any questions, please contact Bee Chan, at 949-7223

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records Foothill
Department/Location

Shawna Aced
Employee Name

Associate Registrar
Exact Position Title

7771
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Irma ALCALA ALEXANDER
Employee Name

Admission & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Susan Almandarez
Employee Name

Admission & Records Assistant
Exact Position Title

650 949-7518
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almandarez Date 4-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

ADMISSIONS + RECORDS.
Department/Location

JEFFREY AVANCENA
Employee Name

PART-TIME STUDENT WORKER.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

STACY L. Bergstedt
Employee Name

Sr. Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature _____ Date 4-20-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Reanza
District

A & R
Department/Location

Ahn, Vanessa A.
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions / De Anza
Department/Location

Patricia Bookwich
Employee Name

A & R Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Bookwich Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Borrelli, Dennis
Employee Name

Cashiering Supervisor
Exact Position Title

864-5308
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Margaret A Michaels Date 5-1-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

ADMISSIONS / FOOTHILL
Department/Location

SHELLY BOWERS
Employee Name

ADMISSIONS CLERK
Exact Position Title

949-7643
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ~~and printing out a list of enrolled courses.~~	~~5~~ 10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, ~~and providing a copy to the student.~~	~~5~~ 10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SBowers Date 4/20/07

If you have any questions, please contact SHELLY, at #7643

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions - F.H.
Department/Location

Pam Brewer
Employee Name

Admissions Asst.
Exact Position Title

x 7003
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record w[illegible] lists student courses, status of payments, and w[illegible] eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mplo[illegible] Signature Pamela J. Brewer Date 4-18-07

/ou have any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Mary Alice Burfine
Employee Name

Admissions Assistants
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mahoney Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Susan A Carpenter
Employee Name

A+R Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan A Carpenter Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza
District

Admissions & Records
Department/Location

Ching (Tiffany) Chang
Employee Name

Part time student worker
Exact Position Title

650-2158786
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3			✓		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Services
Department/Location

Nancy Tu-Ning Chao
Employee Name

Cashiering Supervisor
Exact Position Title

408 864-5308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R / De Anza
Department/Location

Melodie Cheney
Employee Name

Admissions Assistant
Exact Position Title

342
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney Date 4-17-07

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De-Anza
District

Admissions & Record
Department/Location

MEI CHENG
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and y[illegible]er eligibility, and printing out a list of enrolled courses.	1 Min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mei Cheng Date 4/13/2007

If y[illegible]ave any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Acct'g / De Anza
Department/Location

Sheri Cole
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheri Cole Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Deborah Comarden
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Comanda, Deborah
Employee Name

Senior Cashier
Exact Position Title 5/00 – 6/01 @ 50%

NA
Telephone #

~~50%~~ 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Comanda Date 4/28/07

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R | De Anza
Department/Location

Dena Crumpton
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza District
District

A&R - Foothill Campus
Department/Location

Mrinmaie Deshpande
Employee Name

A&R Assistant
Exact Position Title

650-949-7644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mrinmaie Deshpande Date 04/13/07

If you have any questions, please contact Mrinmaie Deshpande, at 949-7644

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Jean Elwell
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R De Anza
Department/Location

Patricia Fifield
Employee Name

Associate Registrar
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A Fifield Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Cindy Maria Fowler
Employee Name

Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Finance / De Anza College
Department/Location

Allen Frische
Employee Name

Director of Budget & Personnel
Exact Position Title

(408) 864-8857 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Joanne Hawk Date 4/30/07

u have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

A & R
Department/Location

ERI FURUHATA
Employee Name

part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible]er eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eri Furuhata Date 4/13/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admission and record
Department/Location

Nami Furukawa
Employee Name

Part-time student worker
Exact Position Title

~~650~~
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature 古川奈美 Date 4/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

April Colonna Henderson
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Alex Hochstraser
Employee Name

Admissions Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DEANZA
District

Admissions & Records
Department/Location

SACHIE ICHIMURA
Employee Name

Part-time Student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...r eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sachie Ichimura Date 4/13/2007

If y...ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Melissa Ingalls
Employee Name

Dursion Admin Asst
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Portia Denice Jeffries
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Barry Johnson
Employee Name

Admissions Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza
District

A&R
Department/Location

Henry Leung
Employee Name

Day Supervisor
Exact Position Title

(650)949-7024
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Araceli Kaluangara
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Araceli Kaluangara Date 4/17/06

If you have any questions, please contact EXT. 8230 at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location

Jasmeet Kaur
Employee Name

Part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible] eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jasmeet Kaur Date 4/20/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A&R — Department/Location

ORAWAN KHAOLAOR — Employee Name

Senior Cashier — Exact Position Title

7189 — Telephone

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

Su Kai Lai
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Su Kai Lai Date 4-18-2007

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

William John Lindke
Employee Name

Admissions & Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact Shawna Aced, at 7771

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Cashiering Svcs
Department/Location

McLaughlin, Annette
Employee Name

Senior Cashier
Exact Position Title

408-864-8590
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-98~~ (99-00) 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

1/1/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette McLaughlin Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Cindy Nakayama
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Cindy Nakayama Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Svcs
Department/Location

Nguyen, Henry Cong
Employee Name

Senior Cashier
Exact Position Title

408-864-5689 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (8/00)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...iver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

...u have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill – De Anza
District

A & R
Department/Location

Hien M. Nguyen
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Khanh Nguyen
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Khanh Nguyen Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

AR
Department/Location

Yelena Okuneva
Employee Name

part time student worker
Exact Position Title

408 701 0037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Okuneva Date 04 20 2007

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Lynn C Olsen
Employee Name

Admissions & Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza
District

AR/DEANZA
Department/Location

Angelita Pabros
Employee Name

Dvrsion Admin Asst
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Joan Pena-Fernicke
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Pena-Fernicke Date 04/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

De Anza Comm. Coll Dist — District

A&R — Department/Location

Debbie Perez — Employee Name

A&R Technician — Exact Position Title

7856 — Telephone #

12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza
District

A&R/DeAnza
Department/Location

Vy Pham
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vy Pham Date 4-16-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lindsay Knodel Ranii
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

f yo ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Brian Robents
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Amelia Sanchez
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Foothill-Mgmt Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Srcs
Department/Location

Schooler, Shirley
Employee Name

Cashier
Exact Position Title

NA
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (5/00)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shirley A Schooler Date 4/20/07

u have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Fort Bell

Department/Location: Admissions & Records

Employee Name: Virginia Slayton

Exact Position Title: Admissions Specialist

Telephone #: 7772

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature: Virginia Slayton Date: 4/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Betty Snowden
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen M May Date 4-15-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Elaine Hilda Starrath
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

See Wan Sung
Employee Name

Part Time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature See Wan Sung Date 6/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FootHill College — District

Admissions + Records — Department/Location

Cheryl Terrazas — Employee Name

Clerk — Exact Position Title

949-7773 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ir eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl A. Terrazas Date 4/18/07

If yo ve any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Binh Thai
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering SVCS
Department/Logation

Thai, May
Employee Name

Senior Cashier
Exact Position Title

408-864-8290 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Judy Ting
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R De Anza
Department/Location

Robert Tomalunas
Employee Name

Admissions Evaluation Special.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Finance
Department/Location

RHODA WANG
Employee Name

Director of Budget & Personnel
Exact Position Title

884-8857
Telephone #

12mo/11mo/10mo/hrly (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhoda Wang Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Eesee White
Employee Name

Admissions Assistant
Exact Position Title

(12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (98-99)(99-00)(00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eesee White Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL- DE ANZA COMMUNITY COLLEGE DISTRICT
District

CASHIERS DEPT / ADMISSION & RECORDS
Department/Location

PATRICIA WOOD
Employee Name

CASHIERING SERVICES COORDINATOR
Exact Position Title

(650) 949-7331
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Wood Date 4-19-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Yuntei Ye
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Brian Zimmerman
Employee Name

Admissions + Records Assistant
Exact Position Title

(650)949-7674
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible]er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Ryan Bullow
Employee Name

FA Outreach ASST
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Susan Bloom
Employee Name

ASST FA DIR
Exact Position Title

8207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Bloom Date 4/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

John Bostic
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ...m to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Cindy Cos 82110
Employee Name

Dir of Fin Aid
Exact Position Title

8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. 06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or mation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

e Signature Cindy Cosentino Cindy Cosentino Date 4/12/07

any questions, please contact _____, at _____

MIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

RICHARD JAMES CASTRO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Beatriz Chacon — Employee Name

Exact Position Title

Telephone # — (12mo)/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid / Foothill
Department/Location

Antoinette Chavez
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Antoinette Chavez Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 4/10/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza C.C. District
District

Foothill College - Middlefield Campus
Department/Location

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-6987
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ~~m~~ to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/10/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Mares
Employee Name

FA Outreach Assist
Exact Position Title

[illegible]
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Lindsey Cross
Employee Name

Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lindsey Cross Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill Campus
Department/Location

Tung Duong
Employee Name

Financial Aid Assistant
Exact Position Title

949-7051
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tung Duong Date 2/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA ASST
Exact Position Title

4377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at desk of Reyda Bolton back to 03/04

EFCW 1.7-3

ee AVERAGE Time Record for Mandated Costs
ENROLLMENT FEE COLLECTION AND WAIVERS
LLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA — District

FA — Department/Location

Alma Garcia — Employee Name

FA Outreach Asst — Exact Position Title

5270 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alma Garcia by Reyda Bolton Date 4/16/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid/Foothill Campus
Department/Location

Christy Godinez
Employee Name

Financial Aid Assistant
Exact Position Title

(650) 949-7246
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Godinez Date 4/13/07

I ( ) have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS - Campus/Foothill
Department/Location

Ismael Gonzalez
Employee Name

EOPS Counselor
Exact Position Title

650/949-7224 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	∅				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	∅				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	∅				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	∅				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	∅				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/12/7

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

EOPS - DE ANZA
Department/Location

ERIKA GUEVARA
Employee Name

ADMINISTRATIVE ASSISTANT I
Exact Position Title

408 864-5619
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erika Robles Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Asher Hamilton-Kilili
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. Hamilton-Kilili Date 4-20-07

If I have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KHDA — District

FA — Department/Location

Kevin Harral — Employee Name

FA Outreach Coor. — Exact Position Title

6334 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring t to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Kevin C Harral Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

EOPS / Foothill Campus
Department/Location

April Henderson
Employee Name

EOPS Specialist
Exact Position Title

650-949-7207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

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Employee Signature _____ Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Karen Hunter
Employee Name

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Hunter Karen Hunter Date 4/13/07 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Araceli Kaliangara — Employee Name

Exact Position Title

Telephone # — Part-time 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A Araceli Kaliangara — Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza Comm. College District — District

EOPS/Foothill College — Department/Location

Donna Cambrecht — Employee Name

Sr. Admin Asst. II — Exact Position Title

6089497037 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring m to the appropriate person for an answer.	3 ~~min~~				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Donna Cambrecht Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

CHUONG Huy LE
Employee Name

EOPS SERVICES COORDINATOR
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If yo[illegible]ve any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS - Foothill Campus
Department/Location

Tobias Nava
Employee Name

EOPS Counselor
Exact Position Title

949-7036
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Tobias Nava Date 4-12-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Fred Ngo
Employee Name

FA ASST
Exact Position Title

8228
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS - DE ANZA
Department/Location

LESLIE NGUYEN
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring the to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

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Employee Signature Kenya Robles, EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature [signature] Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

KA
Department/Location

Dawna O'Malley
Employee Name

FA ASST
Exact Position Title

8218
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible]o the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/16/07

f yo[illegible]ave any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De ANZA
District

EOPS - Foothill Campus
Department/Location

Ines PARDO
Employee Name

EOPS Program Serv. Coordinator
Exact Position Title

(D) 949-7204
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ...m to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Ines Pardo Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS-DE ANZA
Department/Location

FRANCISCA RAMIREZ-MOYA
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring the) the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nployee Signature George Robles, EOPS SUPERVISOR Date 4-23-07

you . e any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill College
Department/Location

Matilda Renteria
Employee Name

Financial Aid Coordinator
Exact Position Title

650-949-7247 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Renteria Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

EOPS - DE ANZA
Department/Location

GEORGE ROBLES
Employee Name

EOPS SUPERVISOR
Exact Position Title

X8952
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature George Robles Date 4-20-07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 4-20-07 ; TO RRET X6272

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS (FH)
Department/Location

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/13/07

If you have any questions, please contact Same, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Janet Schmidt
Employee Name

FA Asst
Exact Position Title

8719
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janet Schmidt Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS DeAnza College
Department/Location

Griselda Sigala-Aguilar
Employee Name

CARE Coordinator
Exact Position Title

864-8830
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible]o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Griselda Sigala Aguilar Date 4-18-07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

ADRIAN TREJO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature George Robles, EOPS Supervisor Date 4-23-07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at De Ark of Thao Nguyen Back to 03-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

~~Thao Nguyen~~ Lan Trinh
Employee Name

FA
Department/Location

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Lan Trinh by Cindy Cayanan Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nina Van Date 4/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Fin. Aid - Foothill Campus
Department/Location

Inna Witkop-
Employee Name

Fin Aid Outreach Assist
Exact Position Title

650.949.7710 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inna Witkop- Date 4/10/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS / Foothill
Department/Location

Tilly L. Wu
Employee Name

EOPS Counselor
Exact Position Title

(650) 949-7180
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

LILIAN ZAMORA
Employee Name

OFFICE CLERK
Exact Position Title

(408)864-8950
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] - EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

nrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
otal Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958
1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834
EFC 1	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
DCCCD #'s =		139,986	136,628	136,344	148,145	154,578	153,963	144,057	
roll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232
	Fall	34,278	35,368	33,587	34,399	36,315	35,508	32,775	34,357
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785
roll Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500
aivers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500
form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038
EFC 3	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**
	Total	**13,372**	13,806	12,937	13,478	12,098	19,773	21,734	**22,012**
								9917	
Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732
arged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857
form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658
EFC 2	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**

rce: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06

)A IR&P - RBB - 5/19/06

29 014
4/1462
31861
36720

5/22/06

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
De Anza								
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961
Fall	2,144	1,435	601	632	681	912	1,231	3,017
Wtr	1,483	799	634	508	524	550	2,251	2,431
Spr	1,215	987	546	476	662	615	2,101	2,374
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783
Foothill								
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608
Fall	1,139	970	382	738	435	507	812	1,655
Wtr	742	566	346	326	418	340	1,430	1,342
Spr	768	688	546	307	344	409	1,332	1,375
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980

The following for #1 on form EFCW 1.8-2

District Totals								
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672
Wtr	2,225	1,365	980	834	942	890	3,681	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06

5/22/06

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee Collection and Waiver Claim
(EFCW 1.8-4)
Enrollment Fee Revenues Report
For FY 1999-2005

Employee and Title	FY 1999/2000	FY 2000/2001	FY 2001/2002	FY 2002/2003	FY 2003/2004	FY 2004/2005	TOTAL
1. Enrollment Fees Collected	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2. Enrollment Fee Refunded	0.0	0.0	0.0	0.0	0.0	0.0	0.0
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	7,010,023	6,889,391	7,428,945	7,486,552	12,177,874	16,564,290	57,557,075
4A. Total Enrollment Fees Waived (BOGG)	1,089,971	1,038,000	1,090,896	1,294,220	2,589,000	4,021,121	11,123,208
4B. 2% Enrollment Fees Waived (Line 4A X 2%)	21,799	20,760	21,818	25,884	51,780	80,422	222,464
5. Number of credit units for which enrollment fees were waived	148,632	148,286	155,842	184,889	250,548	262,247	1,150,444

Notes: Information for number 1 and 2 not available.
The figures for number 3 and 4 obtain from MAUI reports.
The Figures for number 5 obtain by dividing the total amount waived by the per credit unit cost or the average for the FY year (which was used in this calculation).

Prepared by: Martha De La Cerda

Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

1.8-4

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

1.8-4
Backup

Maui Report for FY 2004/2005

June 12, 2006

6/12/06 9:16 AMFinancial Status Report For Fund: 14
At: District Level
Summarized by: Object_Code For:All_Revenues

Object_Code	Orig.Budget	Rev.Budget	Curr-Month	Yr-to-Date	Encumb
0398VETERANS REPORT FEE	-2,236	-2,052	-802	-2,052	0
0499OTHER STATE REVENUE	-343,299	-372,924	-372,306	-372,924	0
0611APPORTN GENERAL	-20,231,833	-38,561,346	-2,612,691	-38,561,346	0
0612PR YR GEN APPORTN	0	27,538	0	27,538	0
0613APPORTIONMENT-B.O.G.	-33,000	-84,495	-11,829	-84,495	0
0617BASIC SKILLS	0	-170,542	0	-170,542	0
0619PFE	-5,822,729	-5,795,010	-811,301	-5,795,010	0
0620PT FACULTY EQUITY	-1,475,772	-1,475,772	-206,608	-1,475,772	0
0622EQUALIZATION	0	-3,360,794	0	-3,360,794	0
0678HOMNRS' PROP TX RELF	-445,814	-424,777	-63,717	-424,777	0
0680OTHER TAX RELIEF SUB	-1,446	0	0	0	0
0688TIMBER TAX	0	-17	-15	-17	0
0691STATE LOTTERY	-3,956,000	-4,280,647	-1,782,359	-4,280,647	0
0694STATE MANDATED COSTS	0	-154	0	-154	0
0811SECURED PROPERTY TAX	-42,715,292	-41,668,499	-4,342,090	-41,668,499	0
0812UNSECURED PROP.TAXES	-5,523,592	-4,170,594	0	-4,170,594	0
0814PROPERTY TAXES SB813	-2,578,800	-2,075,920	-518,328	-2,075,920	0
0816ERAF TAX	-40,854,450	-22,264,990	-4,394,248	-22,264,990	0
0818RDA-FCILITIES AMT	0	-125	-13	-125	0
0822LOCAL GRANT/CONTRACT	0	0	0	0	0
0846COMMISSIONS	-7,452	-3,595	0	-3,595	0
0860INTEREST INCOME	-750,000	-1,247,697	-548,549	-1,247,697	0
0861TRAN INTEREST INC	0	-124,963	0	-124,963	0
0865TRAN PREMIUM REVENUE	0	-63,850	0	-63,850	0
0886DEPT OF JUSTICE FEES	0	-19,196	-1,276	-19,196	0
0887FBI FEES	0	-8,484	-568	-8,484	0
0888LOCAL FINGERPRINTING	0	-19,629	-7,938	-19,629	0
0889MISC. ADMISSIONS REV	-500	-495	-115	-495	0
0892RETURN CHECK FEES	-4,793	-3,623	-300	-3,623	0
0893FEES, OTHER	-126,653	-96,837	-1,785	-96,837	0
0895OTHER LOCAL REVENUE	-165,273	-143,872	-24,612	-143,872	0
0896FACILITIES RENTAL	0	-32,521	0	-32,521	0
0897FH-UNCLAIM STUD REV	-21,088	-34,743	-9,153	-34,743	0
0899DA-UNCLAIM STUD REV	-38,000	-60,547	-15,921	-60,547	0
0940SALES-SURPLUS ITEMS	0	-6,390	0	-6,390	0
0941SALES-PRINTED MATRLS	0	0	0	0	0
0942SALES-CLASS SCHED.AD	-10,629	-6,780	-750	-6,780	0
0957ENROLLMENT VERIFS	0	-2,830	-558	-2,830	0
0961FH NON-RES TUITION	-5,269,000	-4,792,500	3,071	-4,792,500	0
0962DA NON-RES TUITION	-6,375,000	-6,125,195	11,603	-6,125,195	0
0965FH ENROLLMENT-REG	-5,346,952	-5,866,955	-8,593	-5,866,955	0
0966DA ENROLLMENT-REG	-11,229,734	-10,697,335	1,985	-10,697,335	-16,564,290
0967FH ENROLLMNT-DIF FEE	0	-33	0	-33	0
0971FH ENROLLMENT WAIVED	733,700	1,122,467	-9,051	1,122,467	0
0972DA ENROLLMENT WAIVED	1,872,200	2,898,655	0	2,898,655	4,021,121
0973PARKING FINES-FH	-310,000	-283,022	-40,568	-283,022	0
0974PARKING FINES-DA	-350,000	-332,588	-54,051	-332,588	0
0975FIELD TRIP REVENUE	-360	0	0	0	0
0976TRANSCRIPTS-RUSH	-242,233	-279,156	-26,846	-279,156	0
0977CLASS AUDITING	-8,565	-7,159	0	-7,159	0
0978PARKING FINES	0	0	0	0	0
0979TRANSCRIPTS-REG	-45,008	-53,848	-6,674	-53,848	0
0980LIBRARY FINES	-24,000	-17,443	-1,835	-17,443	0
0982REGIS SUPPORT FEE	-148,337	-161,478	225	-161,478	0
0986FINGERPRINTING FEES	0	0	6,810	0	0
0990MATERIALS FEES	-398,522	-388,863	532	-388,863	0
992LOST BOOK FINES	0	-4,067	-759	-4,067	0
TOTAL	-152,250,462	-151,545,690	-15,851,982	-151,545,690	0

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee Collection and Waiver Claim
(EFCW 1.8-4)
Enrollment Fee Information
For FY 1999-2005

	Enrollment Fee		Average Enrollment Fee for FY
Fall 1999	$8.00		
Winter 2000	$7.00		
Spring 2000	$7.00		$7.33
Fall 2000	$7.00		
Winter 2001	$7.00		
Spring 2001	$7.00		$7.00
Fall 2001	$7.00	ok	
Winter 2002	$7.00		
Spring 2002	$7.00		$7.00
Fall 2002	$7.00		
Winter 2003	$7.00		
Spring 2003	$7.00		$7.00
Fall 2003	$7.00		
Winter 2004	$12.00		
Spring 2004	$12.00	ok	$10.33
Fall 2004	$12.00		
Winter 2005	$17.00		
Sprint 2005	$17.00		$15.33

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

Assoc. Registrar

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
ACED, SHAWNA D				1GU-1ADMR														
555-13-9051	120094	00	01	1-41287-2170	LBR		41936.29	0	.00	0	.00	0	1701.48	0	.00	0	.00	0
	120098	00	01	1-41287-2170	LBR		11751.48	0	4935.62	0	.00	0	417.29	0	175.50	0	.00	0
	120094	00	01	1-41287-3100	BEN		16624.61	0	.00	0	.00	0						
	120098	00	01	1-41287-3100	BEN		4405.88	0	1850.47	0	.00	0						
				LABOR TOTALS			53,687.77		4,935.62		.00		2,118.77		175.50		.00	
				BENEFIT TOTALS			21,030.49		1,850.47		.00							
ACEVEDO AVILA, VERONICA G				2CO-2COUN														
550-37-3412	258874	00	01	1-42248-1260	LBR		31165.66	0	2833.23	0	.00	0	1279.05	0	116.27	0	.00	0
	258874	00	01	1-42248-3100	BEN		14202.92	0	1178.69	0	.00	0						
	258874	00	01	1-42250-1160	LBR		8904.69	0	809.53	0	.00	0	187.37	0	17.04	0	.00	0
	258874	00	01	1-42250-3100	BEN		3721.73	0	336.78	0	.00	0						
	292001	03	01	1-42801-1430	LBR		250.00	0	.00	0	.00	0	5.00	0	.00	0	.00	0
	294001	03	01	1-42801-1430	LBR		750.00	0	.00	0	.00	0	15.00	0	.00	0	.00	0
	292001	03	01	1-42801-3200	BEN		9.83	0	.00	0	.00	0						
	294001	03	01	1-42801-3200	BEN		29.54	0	.00	0	.00	0						
	258874	00	01	2-12264-1260	LBR		4452.16	0	404.74	0	.00	0	93.49	0	8.50	0	.00	0
	258874	00	01	2-12264-3100	BEN		1860.86	0	168.38	0	.00	0						
				LABOR TOTALS			45,522.51		4,047.50		.00		1,579.91		141.81		.00	
				BENEFIT TOTALS			19,824.88		1,683.85		.00							
ACEVEDO, JOSE J				4OR-4OPER														
565-84-2266	430432	00	01	1-41118-2180	LBR		55123.82	0	4593.47	0	.00	0	2088.00	0	174.00	0	.00	0
	430432	00	01	1-41118-2360	LBR		3276.25	0	316.79	0	.00	0	82.50	0	8.00	0	.00	0
	430432	00	01	1-41118-3100	BEN		21447.00	0	1789.32	0	.00	0						
	430432	00	01	1-41118-3200	BEN		257.02	0	24.23	0	.00	0						
				LABOR TOTALS			58,400.07		4,910.26		.00		2,170.50		182.00		.00	
				BENEFIT TOTALS			21,704.02		1,813.55		.00							
ACKER, MIKE J																		
556-15-5372	192001	02	01	1-51506-1320	LBR		2707.99	0	123.51	0	.00	0	54.18	0	.00	0	.00	0
	192002	02	01	1-51506-1320	LBR		2707.98	0	123.51	0	.00	0	54.00	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5535.10	0	366.20	0	.00	0	108.00	0	.00	0	.00	0
	192001	02	01	1-51506-3100	BEN		215.77	0	9.84	0	.00	0						
	192002	02	01	1-51506-3100	BEN		215.86	0	9.85	0	.00	0						
	193001	02	01	1-51506-3100	BEN		441.14	0	29.19	0	.00	0						
				LABOR TOTALS			10,951.07		613.22		.00		216.18		.00		.00	
				BENEFIT TOTALS			872.77		48.88		.00							
ADAMS, BRANDON DAVID																		
467-53-3883	193001	02	01	1-41616-1320	LBR		3520.92	0	232.95	0	.00	0	72.00	0	.00	0	.00	0
	193001	02	01	1-41616-3100	BEN		358.08	0	23.69	0	.00	0						

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	194002	02	01	1-41654-3100		BEN	17.44	0	1.17	0	.00	0						
	194003	02	01	1-41654-3100		BEN	17.41	0	1.14	0	.00	0						
	194010	02	01	1-41654-3100		BEN	17.44	0	1.15	0	.00	0						
	174001	03	01	1-41662-1445		LBR	457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41662-3100		BEN	46.50	0	15.50	0	.00	0						
				LABOR TOTALS			13,595.34		2,236.02		.00		214.00		24.00		.00	
				BENEFIT TOTALS			1,382.63		227.40		.00							
ALLEN, ALISHA MARIE				1IT-1NASA														
557-83-2698	280001	00	01	2-14520-2310		LBR	12159.25	0	1188.00	0	.00	0	1164.75	0	108.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	227.39	0	22.22	0	.00	0						
				LABOR TOTALS			12,159.25		1,188.00		.00		1,164.75		108.00		.00	
				BENEFIT TOTALS			227.39		22.22		.00							
ALLEN, DOROTHY JEAN				2AC-2BOOK														
551-44-9526	260001	00	01	1-48226-2350		LBR	134.00	0	134.00	0	.00	0	16.75	0	16.75	0	.00	0
	260001	00	01	1-48226-3200		BEN	13.63	0	13.63	0	.00	0						
				LABOR TOTALS			134.00		134.00		.00		16.75		16.75		.00	
				BENEFIT TOTALS			13.63		13.63		.00							
ALLIE, BARBARA JEAN				-														
571-58-1798	292001	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	292002	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	293001	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	293002	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	294001	02	01	1-42606-1320		LBR	4812.88	0	1816.57	0	.00	0	72.00	0	24.00	0	.00	0
	292001	02	01	1-42606-3100		BEN	367.09	0	24.29	0	.00	0						
	292002	02	01	1-42606-3100		BEN	367.10	0	24.29	0	.00	0						
	293001	02	01	1-42606-3100		BEN	367.07	0	24.27	0	.00	0						
	293002	02	01	1-42606-3100		BEN	367.10	0	24.29	0	.00	0						
	294001	02	01	1-42606-3100		BEN	383.61	0	144.79	0	.00	0						
				LABOR TOTALS			23,236.00		3,035.53		.00		360.00		24.00		.00	
				BENEFIT TOTALS			1,851.97		241.93		.00							
ALMASI, MAZIAR MICHAEL				1CB-1CTIS														
625-84-3350	130041	00	01	1-41511-2170		LBR	59680.09	10624	5450.23	0	.00	0	1566.00	0	174.00	0	.00	0
	130041	00	01	1-41511-3100		BEN	22301.64	0	1959.63	0	.00	0						
				LABOR TOTALS			59,680.09		5,450.23		.00		1,566.00		174.00		.00	
				BENEFIT TOTALS			22,301.64		1,959.63		.00							
ALMENDAREZ, SUSAN ELLEN				1GU-1ADMR														
549-98-1198	130067	00	01	1-41287-2170		LBR	39123.52	0	3392.09	0	.00	0	2100.76	0	174.00	0	.00	0
	130067	00	01	1-41287-3100		BEN	17941.12	0	1523.05	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR.PER.
				LABOR TOTALS			39,123.52		3,392.09		.00		2,100.76		174.00		
				BENEFIT TOTALS			17,941.12		1,523.05		.00						
ALSOP, JOHN				2BH-2OTI													
561-08-2947	180001	00	01	2-12249-2310	LBR		323.00	0	323.00	0	.00	0	40.38	0	40.38	0	
	180001	00	01	2-12249-3200	BEN		6.04	0	6.04	0	.00	0					
	180001	00	01	2-12480-2310	LBR		323.00	0	323.00	0	.00	0	40.37	0	40.37	0	
	180001	00	01	2-12480-3200	BEN		6.04	0	6.04	0	.00	0					
				LABOR TOTALS			646.00		646.00		.00		80.75		80.75		
				BENEFIT TOTALS			12.08		12.08		.00						
ALSPAUGH, GAYLE R				4OR-4OPER													
370-46-1133	430080	00	01	1-41139-2180	LBR		34326.21	0	.00	0	.00	0	1305.00	0	.00	0	
	430080	00	01	1-41139-2360	LBR		153.98	0	.00	0	.00	0	3.00	0	.00	0	
	430080	00	01	1-41139-3100	BEN		12726.83	0	.00	0	.00	0					
	430080	00	01	1-41139-3200	BEN		12.13	0	.00	0	.00	0					
	436602	00	01	6-10570-2185	LBR		9923.98	0	.00	0	.00	0	290.02	0	.00	0	.00
	436602	00	01	6-10570-3100	BEN		5145.84	0	.00	0	.00	0					
	436602	00	01	6-10585-2150	LBR		566.32	0	.00	0	.00	0	16.55	0	.00	0	.00
	436602	00	01	6-10585-3100	BEN		373.41	0	.00	0	.00	0					
				LABOR TOTALS			44,970.49		.00		.00		1,614.57		.00		.00
				BENEFIT TOTALS			18,258.21		.00		.00						
ALVARADO, STEVEN FRANK				1BH-1EMTP													
557-15-5389	160001	00	01	1-51142-2350	LBR		192.38	0	.00	0	.00	0	9.50	0	.00	0	.00
	160001	00	01	1-51142-3200	BEN		19.56	0	.00	0	.00	0					
				LABOR TOTALS			192.38		.00		.00		9.50		.00		.00
				BENEFIT TOTALS			19.56		.00		.00						
ALVARADO, WALTER A				2LA-2LART													
572-79-4827	230248	00	01	1-42662-2220	LBR		30358.93	8777	3563.63	0	.00	0	1068.00	0	174.00	0	.00
	230248	00	01	1-42662-3100	BEN		15599.67	4406	1878.82	0	.00	0					
	434503	00	01	1-44358-2170	LBR		3724.32	3160-	.00	0	.00	0	337.41	0	.00	0	.00
	434503	00	01	1-44358-3100	BEN		2339.71	1640-	.00	0	.00	0					
	230246	00	01	1-52362-2170	LBR		336.92	0	.00	0	.00	0	15.82	0	.00	0	.00
	230246	00	01	1-52362-3100	BEN		214.32	0	.00	0	.00	0					
	434503	00	01	2-54370-2170	LBR		6620.82	5617-	.00	0	.00	0	599.81	0	.00	0	.00
	434503	00	01	2-54370-3100	BEN		4309.47	2765-	.00	0	.00	0					
				LABOR TOTALS			41,040.99		3,563.63		.00		2,021.04		174.00		.00
				BENEFIT TOTALS			22,463.17		1,878.82		.00						
ALVAREZ, AUDREY A				4OR-4OPER													
571-08-3719	430147	00	01	1-41120-2180	LBR		53941.13	0	3891.57	0	.00	0	2118.75	0	174.00	0	.00
	430147	00	01	1-41120-3100	BEN		21137.54	0	1682.39	0	.00	0					
	430147	00	01	1-51911-2360	LBR		817.16	0	817.16	0	.00	0	20.50	0	20.50	0	.00

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE / RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE / RLOC	HOURS MO-TO-DATE/ DIRECT	HOURS MO-TO-DATE/ RLOC	HOURS CURR PERIOD DIRECT	HOURS CURR PERIOD RLOC
	291001	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	.00	0
	293003	02	01	1-42760-1330	LBR		74.48	0	4.93	0	.00	0	1.00	0	.00	0	.00	0
	293004	02	01	1-42760-1330	LBR		223.43	0	14.78	0	.00	0	3.00	0	.00	0	.00	0
	294006	02	01	1-42760-1330	LBR		714.99	0	714.99	0	.00	0	8.00	0	8.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		596.16	0	198.72	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		143.47	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		200.73	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		135.09	0	38.49	0	.00	0						
	291001	02	01	1-42760-3100	BEN		746.89	0	.00	0	.00	0						
	291002	02	01	1-42760-3100	BEN		746.88	0	.00	0	.00	0						
	292001	02	01	1-42760-3100	BEN		1238.36	0	66.82	0	.00	0						
	292002	02	01	1-42760-3100	BEN		1238.33	0	66.81	0	.00	0						
	293001	02	01	1-42760-3100	BEN		1705.98	0	66.82	0	.00	0						
	293003	02	01	1-42760-3100	BEN		22.79	0	.95	0	.00	0						
	293004	02	01	1-42760-3100	BEN		68.41	0	2.86	0	.00	0						
	294001	02	01	1-42760-3100	BEN		1170.06	0	381.20	0	.00	0						
	294002	02	01	1-42760-3100	BEN		1170.03	0	381.16	0	.00	0						
	294006	02	01	1-42760-3100	BEN		138.52	0	138.52	0	.00	0						
				LABOR TOTALS			41,239.84		5,903.37		.00		476.00		52.00		.00	
				BENEFIT TOTALS			8,839.70		1,143.63		.00							
AVANCENA, JEOFFREY				1GU-1ADMR														
616-47-2158	180001	00	01	1-41287-2310	LBR		1696.00	1016-	.00	0	.00	0	339.00	0	.00	0	.00	0
	180001	00	01	1-41287-3200	BEN		31.72	19-	.00	0	.00	0						
	180001	00	01	2-51285-2310	LBR		1016.00	1016	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-51285-3200	BEN		19.00	19	.00	0	.00	0						
				LABOR TOTALS			2,712.00		.00		.00		339.00		.00		.00	
				BENEFIT TOTALS			50.72		.00		.00							
AVELLANEDA, SHERYL LAVERN				2AC-2BOOK														
529-64-1020	260001	00	01	1-48226-2350	LBR		412.00	0	.00	0	.00	0	51.50	0	.00	0	.00	0
	260001	00	01	1-48226-3200	BEN		41.89	0	.00	0	.00	0						
				LABOR TOTALS			412.00		.00		.00		51.50		.00		.00	
				BENEFIT TOTALS			41.89		.00		.00							
AVILA-CORTES, RENE				2AC-2CUST														
625-98-6282	230580	00	01	1-42112-2180	LBR		48080.74	0	4006.72	0	.00	0	2094.00	0	174.00	0	.00	0
	230580	00	01	1-42112-2360	LBR		463.65	0	.00	0	.00	0	12.00	0	.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PROGRAM FY=05

FA Coordinator

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS DI
	280001	00	01	2-12684-3200	BEN		205.63	84-	.00	0	.00	0					
				LABOR TOTALS			3,924.00		.00		.00		327.00		.00		
				BENEFIT TOTALS			373.57		.00		.00						
BLOOM, SUSAN LYNN				2ST-2PNAI													
547-02-1768	230139	00	01	1-42272-2170	LBR		55998.72	0	4762.10	0	.00	0	2088.00	0	174.00	0	
	230139	00	01	1-42272-2360	LBR		.00	117-	117.23-	117-	.00	0	3.00	0	.00	0	
	230139	00	01	1-42272-3100	BEN		25555.74	0	2163.19	0	.00	0					
	230139	00	01	1-42272-3200	BEN		.00	9-	9.31-	9-	.00	0					
	230139	00	01	2-12681-2360	LBR		558.54	117	117.23	117	.00	0	10.75	0	.00	0	
	230139	00	01	2-12681-3200	BEN		41.40	9	9.31	9	.00	0					
				LABOR TOTALS			56,557.26		4,762.10		.00		2,101.75		174.00		
				BENEFIT TOTALS			25,597.14		2,163.19		.00						
BLUMENBERG, SUSAN FLORENC				1IT-1NASA													
555-66-0494	180001	00	01	2-14520-2310	LBR		11997.00	0	577.50	0	.00	0	1154.00	0	52.50	0	
	180001	00	01	2-14520-3200	BEN		224.35	0	10.80	0	.00	0					
				LABOR TOTALS			11,997.00		577.50		.00		1,154.00		52.50		
				BENEFIT TOTALS			224.35		10.80		.00						
BOARD LILJENSTOLPE, REBEC				2LA-2ENGL													
560-87-4273	250040	00	01	1-42652-1160	LBR		46336.16	0	4877.98	0	.00	0	1295.98	0	149.97	0	
	250040	00	01	1-42652-3100	BEN		18472.44	0	1735.60	0	.00	0					
	256639	00	01	6-10570-1185	LBR		4545.54	0	.00	0	.00	0	104.00	0	.00	0	.00 0
	256639	00	01	6-10570-3100	BEN		1709.42	0	.00	0	.00	0					
				LABOR TOTALS			50,881.70		4,877.98		.00		1,399.98		149.97		.00
				BENEFIT TOTALS			20,181.86		1,735.60		.00						
BOATMAN, RANDY ALAN																	
549-37-7380	192001	02	01	1-51502-1320	LBR		3911.47	0	178.39	0	.00	0	78.00	0	.00	0	.00 0
	193001	02	01	1-51502-1320	LBR		5535.10	0	366.20	0	.00	0	108.10	0	.00	0	.00 0
	192001	02	01	1-51502-3100	BEN		311.74	0	14.22	0	.00	0					
	193001	02	01	1-51502-3100	BEN		441.14	0	29.19	0	.00	0					
				LABOR TOTALS			9,446.57		544.59		.00		186.10		.00		.00
				BENEFIT TOTALS			752.88		43.41		.00						
BOBROVICH, MARINA VLADIMI				1GU-1CNSL													
605-08-1475	140001	00	01	1-44036-3100	BEN		39.68	39	14.25	14	.00	0					
	140001	00	01	2-31111-2700	LBR		2122.00	0	298.00	0	.00	0	265.25	0	37.25	0	.00 0
	140001	00	01	2-31111-3100	BEN		.00	39-	8.68-	14-	.00	0					
				LABOR TOTALS			2,122.00		298.00		.00		265.25		37.25		.00
				BENEFIT TOTALS			39.68		5.57		.00						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PROGRA
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	D
	200003	00	01	1-42223-3200	BEN		.00	60-	.00	0	.00	0					
	234844	00	01	1-42224-2350	LBR		.00	243-	.00	0	.00	0	13.75	0	.00	0	
	260001	00	01	1-42224-2350	LBR		.00	395-	.00	0	.00	0	25.50	0	.00	0	
	260002	00	01	1-42224-2350	LBR		.00	99-	.00	0	.00	0	2.75	0	.00	0	
	234844	00	01	1-42224-2355	LBR		.00	1158-	.00	0	.00	0	65.40	0	.00	0	
	234844	00	01	1-42224-3200	BEN		.00	89-	.00	0	.00	0					
	260001	00	01	1-42224-3200	BEN		.00	40-	.00	0	.00	0					
	260002	00	01	1-42224-3200	BEN		.00	7-	.00	0	.00	0					
				LABOR TOTALS			2,493.19		.00		.00		145.90		.00		
				BENEFIT TOTALS			253.56		.00		.00						
BOOYE, MARILYN				4HA-4HURS													
545-49-3016	430077	00	01	1-44062-2170	LBR		64350.91	0	5362.58	0	.00	0	2088.00	0	174.00	0	
	430077	00	01	1-44062-3100	BEN		27125.01	0	2260.41	0	.00	0					
				LABOR TOTALS			64,350.91		5,362.58		.00		2,088.00		174.00		
				BENEFIT TOTALS			27,125.01		2,260.41		.00						
BORELLA, DIANE JEANNE				2CO-2TSTG													
572-66-1420	260008	00	01	1-42226-2350	LBR		689.49	1205-	.00	0	.00	0	193.75	0	.00	0	
	260008	00	01	1-42226-3200	BEN		70.13	122-	.00	0	.00	0					
	260008	00	01	1-48410-2350	LBR		1205.39	1205	.00	0	.00	0	.00	0	.00	0	
	260008	00	01	1-48410-3200	BEN		122.62	122	.00	0	.00	0					
				LABOR TOTALS			1,894.88		.00		.00		193.75		.00		
				BENEFIT TOTALS			192.75		.00		.00						
BORELLI, DEBORAH LYNN				1SS-1BSDV													
381-70-3519	130129	00	01	1-41803-2170	LBR		1385.85	0	.00	0	.00	0	55.36	0	.00	0	
	130129	00	01	1-41803-3100	BEN		210.29	0	.00	0	.00	0					
	130129	00	01	6-10585-2150	LBR		2956.25	0	.00	0	.00	0	118.10	0	.00	0	
	130129	00	01	6-10585-3100	BEN		448.56	0	.00	0	.00	0					
				LABOR TOTALS			4,342.10		.00		.00		173.46		.00		
				BENEFIT TOTALS			658.85		.00		.00						
BORELLI, DENNIS				2AB-2CASH													
016-34-7897	220148	00	01	1-42149-2170	LBR		30437.00	0	.00	0	.00	0	882.75	0	.00	0	
	220148	00	01	1-42149-2360	LBR		109.50	0	.00	0	.00	0	3.13	0	.00	0	
	220148	00	01	1-42149-3100	BEN		11313.12	0	.00	0	.00	0					
	220148	00	01	6-10585-2150	LBR		8769.71	0	.00	0	.00	0	250.67	0	.00	0	.00 0
	220148	00	01	6-10585-3100	BEN		2038.46	0	.00	0	.00	0					
				LABOR TOTALS			39,316.21		.00		.00		1,136.55		.00		.00
				BENEFIT TOTALS			13,351.58		.00		.00						
BOSMANN, LIZALOU T				1BH-1EMT													
618-03-1541	160001	00	01	1-51820-2350	LBR		4327.50	0	1102.50	0	.00	0	144.25	0	36.75	0	.00 0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
BOWERS, SHELLY L				1GU-1ADMR														
557-23-9025	130103	00	01	1-41287-2170	LBR		47291.71	0	3881.50	0	.00	0	2088.00	0	174.00	0	.00	0
	130103	00	01	1-41287-3100	BEN		24071.71	0	1993.36	0	.00	0						
				LABOR TOTALS			47,291.71		3,881.50		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			24,071.71		1,993.36		.00							
BOWERSOX, VIRGINIA R				2CO-2TSTG														
104-22-3891	260008	00	01	1-42226-2350	LBR		1091.06	1287-	.00	0	.00	0	199.00	0	.00	0	.00	0
	260008	00	01	1-42226-3200	BEN		111.81	130-	.00	0	.00	0						
	260008	00	01	1-48410-2350	LBR		1287.00	1287	.00	0	.00	0	.00	0	.00	0	.00	0
	260008	00	01	1-48410-3200	BEN		130.00	130	.00	0	.00	0						
				LABOR TOTALS			2,378.06		.00		.00		199.00		.00		.00	
				BENEFIT TOTALS			241.81		.00		.00							
BOWMAN, RONALD E																		
500-40-0110	292001	02	01	1-42760-1320	LBR		4812.91	0	318.44	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		4812.91	0	318.44	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4812.87	0	318.42	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5010.66	0	1891.24	0	.00	0	60.00	0	20.00	0	.00	0
	292001	02	01	1-42760-3100	BEN		383.57	0	25.38	0	.00	0						
	292002	02	01	1-42760-3100	BEN		383.64	0	25.39	0	.00	0						
	293001	02	01	1-42760-3100	BEN		383.60	0	25.36	0	.00	0						
	294001	02	01	1-42760-3100	BEN		399.38	0	150.75	0	.00	0						
				LABOR TOTALS			19,449.35		2,846.54		.00		240.00		20.00		.00	
				BENEFIT TOTALS			1,550.19		226.88		.00							
BOYD, MICHELLE CHRISTINE				1FA-IF A														
572-99-0514	180001	00	01	1-48121-2310	LBR		1680.00	1680	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-48121-3200	BEN		31.41	31	.00	0	.00	0						
	180001	00	01	1-51618-2310	LBR		1207.50	1830-	295.00	0	.00	0	303.75	0	29.50	0	.00	0
	180001	00	01	1-51618-2320	LBR		187.50	0	7.50	0	.00	0	12.50	0	.50	0	.00	0
	180001	00	01	1-51618-2360	LBR		110.00	0	.00	0	.00	0	5.50	0	.00	0	.00	0
	180001	00	01	1-51618-3200	BEN		28.16	34-	5.66	0	.00	0						
	180001	00	01	1-51643-2310	LBR		.00	0	150.00-	150-	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-51643-3200	BEN		.00	0	2.81-	2-	.00	0						
	180001	00	01	2-11028-2310	LBR		150.00	150	150.00	150	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-11028-3200	BEN		2.81	2	2.81	2	.00	0						
	180001	00	01	6-18231-0000	LBR		960.00	960	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	51	6-18231-0000	LBR		960.00-	960-	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	6-18320-3100	BEN		17.95	17	.00	0	.00	0						
	180001	00	51	6-18320-3100	BEN		17.95-	17-	.00	0	.00	0						
				LABOR TOTALS			3,335.00		302.50		.00		321.75		30.00		.00	
				BENEFIT TOTALS			62.38		5.66		.00							
BOYETT, DOUGLAS A				1PE-1H P														

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	293001	02	01	1-42606-1320	LBR		4171.38	0	276.00	0	.00	0	48.00	0	.00	0	.00	0
	293003	03	01	1-42606-1320	LBR		333.70	0	22.07	0	.00	0	3.84	0	.00	0	.00	0
	291001	02	01	1-42606-3100	BEN		289.88	0	.00	0	.00	0						
	292001	02	01	1-42606-3100	BEN		332.45	0	21.99	0	.00	0						
	292004	03	01	1-42606-3100	BEN		56.52	0	3.75	0	.00	0						
	293001	02	01	1-42606-3100	BEN		332.46	0	22.01	0	.00	0						
	293003	03	01	1-42606-3100	BEN		26.60	0	1.75	0	.00	0						
	273001	03	01	1-42626-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42626-3100	BEN		47.52	0	.00	0	.00	0						
	291002	02	01	1-42804-1320	LBR		4545.42	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42804-1320	LBR		5213.03	0	344.90	0	.00	0	48.00	0	.00	0	.00	0
	292003	02	01	1-42804-1320	LBR		5213.03	0	344.90	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42804-1320	LBR		5213.04	0	344.91	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42804-3100	BEN		362.29	0	.00	0	.00	0						
	292002	02	01	1-42804-3100	BEN		415.47	0	27.49	0	.00	0						
	292003	02	01	1-42804-3100	BEN		415.49	0	27.49	0	.00	0						
	293002	02	01	1-42804-3100	BEN		415.46	0	27.49	0	.00	0						
				LABOR TOTALS			34,399.59		2,251.85		.00		386.04		12.00		.00	
				BENEFIT TOTALS			2,741.67		179.50		.00							
BRESNAN, PATRICK S				2SS-2HIST														
324-30-9111	250089	00	01	1-42806-1105	LBR		7500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250089	00	01	1-42806-1160	LBR		47312.53	0	4731.25	0	.00	0	840.00	0	84.00	0	.00	0
	291001	02	01	1-42806-1320	LBR		5354.34	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	250089	00	01	1-42806-3100	BEN		13298.55	0	1230.14	0	.00	0						
	291001	02	01	1-42806-3100	BEN		584.04	17	.00	0	.00	0						
	250089	00	01	1-42820-1105	LBR		5000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250089	00	01	1-42820-1160	LBR		31541.57	0	3154.16	0	.00	0	560.00	0	56.00	0	.00	0
	292001	02	01	1-42820-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42820-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0	.00	0
	250089	00	01	1-42820-3100	BEN		11111.49	0	820.10	0	.00	0						
	292001	02	01	1-42820-3100	BEN		113.67	0	7.52	0	.00	0						
	292002	02	01	1-42820-3100	BEN		113.63	0	7.52	0	.00	0						
				LABOR TOTALS			105,728.48		8,482.17		.00		1,544.00		140.00		.00	
				BENEFIT TOTALS			25,221.38		2,065.28		.00							
BREWER, PAMELA S				1GU-1ADMR														
570-94-1805	130195	00	01	1-41287-2170	LBR		3819.72	0	330.71	0	.00	0	182.94	0	14.85	0	.00	0
	130195	00	01	1-41287-3100	BEN		2011.77	0	170.65	0	.00	0						
	130195	00	01	2-11423-2170	LBR		37631.99	6271	3541.88	0	.00	0	1445.40	0	159.15	0	.00	0
	130195	00	01	2-11423-3100	BEN		19779.79	3372	1827.72	0	.00	0						
	130195	00	01	2-11651-2170	LBR		3277.80	3287-	.00	0	.00	0	318.32	0	.00	0	.00	0
	130195	00	01	2-11651-3100	BEN		1766.30	1768-	.00	0	.00	0						
	130195	00	01	6-51217-0000	LBR		3287.26	3287	.00	0	.00	0	.00	0	.00	0	.00	0
	130195	00	11	6-51217-0000	LBR		3287.26-	3287-	.00	0	.00	0	.00	0	.00	0	.00	0
	130195	00	01	6-51310-3100	BEN		1768.29	1768	.00	0	.00	0						
	130195	00	11	6-51310-3100	BEN		1768.29-	1768-	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
				LABOR TOTALS			44,729.51		3,872.59		.00		1,946.66		174.00		.00	
				BENEFIT TOTALS			23,557.86		1,998.37		.00							
BREWSTER, MICHELLE S				2BH-2ENVS														
568-85-6477	280001	00	01	1-48700-2310	LBR		1041.25	0	280.00	0	.00	0	119.00	0	32.00	0		
	280001	00	01	1-48700-3200	BEN		19.47	0	5.24	0	.00	0						
				LABOR TOTALS			1,041.25		280.00		.00		119.00		32.00			
				BENEFIT TOTALS			19.47		5.24		.00							
BRIEN, RICHARD HERMAN				-														
454-58-6726	293002	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294002	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294003	03	01	1-42021-1430	LBR		100.00	0	100.00	0	.00	0	2.00	0	2.00	0		
	293002	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294002	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294003	03	01	1-42021-3200	BEN		7.72	0	7.72	0	.00	0						
	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		7.72	0	.00	0	.00	0						
	291001	02	01	1-42502-1320	LBR		5096.34	0	.00	0	.00	0	60.00	0	.00	0		
	292001	02	01	1-42502-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	293001	02	01	1-42502-1320	LBR		5407.62	0	357.78	0	.00	0	60.00	0	.00	0		
	294001	02	01	1-42502-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	272001	03	01	1-42502-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42502-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42502-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42502-3100	BEN		47.74	0	.00	0	.00	0						
	273001	03	01	1-42502-3100	BEN		47.73	0	.00	0	.00	0						
	274001	03	01	1-42502-3100	BEN		47.73	0	15.91	0	.00	0						
	291001	02	01	1-42502-3100	BEN		393.44	0	.00	0	.00	0						
	292001	02	01	1-42502-3100	BEN		417.48	0	27.63	0	.00	0						
	293001	02	01	1-42502-3100	BEN		417.44	0	27.60	0	.00	0						
	294001	02	01	1-42502-3100	BEN		417.47	0	157.58	0	.00	0						
				LABOR TOTALS			23,574.29		3,062.73		.00		284.00		26.00			
				BENEFIT TOTALS			1,819.91		236.44		.00							
BRIGGS, MARCIA E				-														
570-90-2899	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42606-1320	LBR		5812.27	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	291002	02	01	1-42606-1320	LBR		5812.26	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	292001	02	01	1-42606-1320	LBR		5213.03	0	344.90	0	.00	0	72.00	0	.00	0	.00	0
	292002	02	01	1-42606-1320	LBR		5213.03	0	344.90	0	.00	0	72.00	0	.00	0	.00	0
	293001	02	01	1-42606-1320	LBR		5213.04	0	344.91	0	.00	0	72.00	0	.00	0	.00	0
	293002	02	01	1-42606-1320	LBR		5213.04	0	344.91	0	.00	0	72.00	0	.00	0	.00	0
	294001	02	01	1-42606-1320	LBR		5213.04	0	1967.62	0	.00	0	72.00	0	24.00	0	.00	0
	272001	03	01	1-42606-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
				BENEFIT TOTALS			25,866.50		2,500.29		.00							
BUNCE, DANIEL J				-														
548-75-9928	293002	02	01	1-42808-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	294002	02	01	1-42808-1320	LBR		4867.32	0	1837.12	0	.00	0	48.00	0	16.00	0	.00	0
	293002	02	01	1-42808-3100	BEN		1213.98	0	65.52	0	.00	0						
	294002	02	01	1-42808-3100	BEN		1139.48	0	373.84	0	.00	0						
	291001	02	01	1-42820-1320	LBR		4587.16	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42820-1320	LBR		4587.16	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42820-1320	LBR		4867.34	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42820-1320	LBR		4867.33	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	292003	03	01	1-42820-1320	LBR		389.38	0	25.76	0	.00	0	3.84	0	.00	0	.00	0
	293001	02	01	1-42820-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42820-1320	LBR		4867.32	0	1837.12	0	.00	0	48.00	0	16.00	0	.00	0
	272001	03	01	1-42820-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42820-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42820-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42820-3100	BEN		152.32	0	.00	0	.00	0						
	273001	03	01	1-42820-3100	BEN		156.24	0	.00	0	.00	0						
	274001	03	01	1-42820-3100	BEN		146.10	0	41.94	0	.00	0						
	291001	02	01	1-42820-3100	BEN		572.02	0	.00	0	.00	0						
	291002	02	01	1-42820-3100	BEN		572.05	0	.00	0	.00	0						
	292001	02	01	1-42820-3100	BEN		1185.10	0	65.53	0	.00	0						
	292002	02	01	1-42820-3100	BEN		1185.14	0	65.54	0	.00	0						
	292003	03	01	1-42820-3100	BEN		88.36	0	5.24	0	.00	0						
	293001	02	01	1-42820-3100	BEN		1214.01	0	65.53	0	.00	0						
	294001	02	01	1-42820-3100	BEN		1139.48	0	373.83	0	.00	0						
				LABOR TOTALS			40,622.75		5,194.22		.00		423.84		36.00		.00	
				BENEFIT TOTALS			8,764.28		1,056.97		.00							
BURANEK, BEVERLY A				1AA-1IEDR														
327-40-7174	130033	00	01	1-41362-2170	LBR		59056.70	0	5314.27	0	.00	0	2111.32	0	179.25	0	.00	0
	130033	00	01	1-41362-2360	LBR		6455.35	0	160.34	0	.00	0	207.00	0	5.25	0	.00	0
	130033	00	01	1-41362-3100	BEN		26800.53	0	2304.25	0	.00	0						
	130033	00	01	1-41362-3200	BEN		498.61	0	12.09	0	.00	0						
				LABOR TOTALS			65,512.05		5,474.61		.00		2,318.32		184.50		.00	
				BENEFIT TOTALS			27,299.14		2,316.34		.00							
BURFINE, MARYALICE S				2ST-2ADMI														
562-58-1761	230316	00	01	1-42287-2170	LBR		49935.50	0	4161.29	0	.00	0	2088.00	0	174.00	0	.00	0
	230316	00	01	1-42287-3100	BEN		20234.55	0	1686.22	0	.00	0						
				LABOR TOTALS			49,935.50		4,161.29		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			20,234.55		1,686.22		.00							
BURGUNDER, JANE E				-														
206-44-1333	292001	02	01	1-42606-1320	LBR		4812.91	0	318.44	0	.00	0	72.00	0	.00	0	.00	0

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	191004	02	01	1-41250-1320	LBR		1770.60	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	191005	02	01	1-41250-1320	LBR		1770.61	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	194001	02	01	1-41250-1320	LBR		1492.12	0	98.72	0	.00	0	12.00	0	.00	0	.00	0
	191002	02	01	1-41250-3100	BEN		212.93	0	.00	0	.00	0						
	191003	02	01	1-41250-3100	BEN		141.19	0	.00	0	.00	0						
	191004	02	01	1-41250-3100	BEN		141.18	0	.00	0	.00	0						
	191005	02	01	1-41250-3100	BEN		70.07	0	.00	0	.00	0						
	194001	02	01	1-41250-3100	BEN		59.00	0	3.90	0	.00	0						
	193001	02	01	2-21231-1320	LBR		3129.69	0	207.06	0	.00	0	36.00	0	.00	0	.00	0
	191008	03	01	2-21231-1430	LBR		4769.20	0	.00	0	.00	0	96.00	0	.00	0	.00	0
	193001	02	01	2-21231-3100	BEN		123.75	0	8.19	0	.00	0						
	191008	03	01	2-21231-3200	BEN		600.28	27	.00	0	.00	0						
	150015	00	01	2-21295-1205	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150015	00	01	2-21295-1260	LBR		77787.43	0	7778.74	0	.00	0	1330.00	0	133.00	0	.00	0
	150015	00	01	2-21295-3100	BEN		24594.29	0	2157.57	0	.00	0						
				LABOR TOTALS			96,260.86		8,084.52		.00		1,522.00		133.00		.00	
				BENEFIT TOTALS			25,942.69		2,169.66		.00							
CASTANO, WILFRED Q				2CA-2PHTG														
526-66-3868	250042	00	01	1-42636-1105	LBR		8750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250042	00	01	1-42636-1160	LBR		81881.50	0	8188.15	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291003	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42636-1320	LBR		4316.82	0	285.60	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42636-1320	LBR		4171.39	0	275.99	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42636-1320	LBR		2233.50	0	147.78	0	.00	0	36.00	0	.00	0	.00	0
	250042	00	01	1-42636-3100	BEN		26126.52	0	2212.28	0	.00	0						
	291001	02	01	1-42636-3100	BEN		644.54	49	.00	0	.00	0						
	291002	02	01	1-42636-3100	BEN		595.28	0	.00	0	.00	0						
	291003	02	01	1-42636-3100	BEN		595.25	0	.00	0	.00	0						
	292001	02	01	1-42636-3100	BEN		170.90	0	11.35	0	.00	0						
	292002	02	01	1-42636-3100	BEN		165.14	0	10.95	0	.00	0						
	293001	02	01	1-42636-3100	BEN		88.54	0	5.86	0	.00	0						
				LABOR TOTALS			116,202.91		8,897.52		.00		1,688.00		140.00		.00	
				BENEFIT TOTALS			28,386.17		2,240.44		.00							
CASTILLO, CINDY				2ST-2FNAI														
547-76-4892	210024	00	01	1-42272-2105	LBR		2500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	210024	00	01	1-42272-2110	LBR		93840.44	0	7820.04	0	.00	0	2088.00	0	174.00	0	.00	0
	210024	00	01	1-42272-3100	BEN		29690.28	0	2462.30	0	.00	0						
				LABOR TOTALS			96,340.44		7,820.04		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			29,690.28		2,462.30		.00							
CASTILLO, CLAIRE LOPEZ				1IT-1NASA														
573-81-9714	280001	00	01	2-14520-2310	LBR		6585.00	0	.00	0	.00	0	658.50	0	.00	0	.00	0

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DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 141
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	273001	03	01	1-42656-3100	BEN		64.35	0	.00	0	.00	0						
	274001	03	01	1-42656-3100	BEN		67.26	0	22.42	0	.00	0						
	292001	02	01	1-42656-3100	BEN		337.90	0	22.35	0	.00	0						
	292002	02	01	1-42656-3100	BEN		337.89	0	22.36	0	.00	0						
	292003	02	01	1-42656-3100	BEN		337.92	0	22.37	0	.00	0						
	293001	02	01	1-42656-3100	BEN		337.91	0	22.35	0	.00	0						
	293002	02	01	1-42656-3100	BEN		337.86	0	22.35	0	.00	0						
	294001	02	01	1-42656-3100	BEN		1220.75	0	460.76	0	.00	0						
				LABOR TOTALS			24,892.38		4,868.72		.00		324.00		44.00			
				BENEFIT TOTALS			3,041.84		594.96		.00							
CHACON, BEATRIZ CORONADO				1SM-1FAID														
558-06-5609	110010	00	01	1-41272-1210	LBR		8927.99	0	3289.26	0	.00	0	236.14	0	87.00	0		
	110010	00	01	1-41272-3100	BEN		2879.84	0	1281.14	0	.00	0						
	110010	00	01	1-41378-1210	LBR		8928.02	0	3289.27	0	.00	0	236.15	0	87.00	0		
	110010	00	01	1-41378-3100	BEN		2879.90	0	1281.15	0	.00	0						
				LABOR TOTALS			17,856.01		6,578.53		.00		472.29		174.00			
				BENEFIT TOTALS			5,759.74		2,562.29		.00							
CHADDA, AMARJIT S																		
565-84-1284	191001	02	01	1-41760-1320	LBR		6005.82	0	.00	0	.00	0	60.00	0	.00	0		
	192001	02	01	1-41760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0		
	194001	02	01	1-41760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0		
	194002	02	01	1-41760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0		
	172001	03	01	1-41760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0		
	174001	03	01	1-41760-1445	LBR		596.16	0	198.72	0	.00	0	12.00	0	4.00	0		
	172001	03	01	1-41760-3100	BEN		23.66	0	.00	0	.00	0						
	174001	03	01	1-41760-3100	BEN		23.67	0	7.89	0	.00	0						
	191001	02	01	1-41760-3100	BEN		238.43	0	.00	0	.00	0						
	192001	02	01	1-41760-3100	BEN		206.97	0	13.69	0	.00	0						
	194001	02	01	1-41760-3100	BEN		206.95	0	78.11	0	.00	0						
	194002	02	01	1-41760-3100	BEN		206.97	0	78.11	0	.00	0						
				LABOR TOTALS			22,837.25		4,478.86		.00		264.00		44.00			
				BENEFIT TOTALS			906.65		177.80		.00							
CHAE, JAE WOO				2AC-2BOOK														
625-49-0292	280001	00	01	1-48226-2310	LBR		168.75	0	168.75	0	.00	0	25.00	0	25.00	0		
	280001	00	01	1-48226-3200	BEN		3.16	0	3.16	0	.00	0						
				LABOR TOTALS			168.75		168.75		.00		25.00		25.00			
				BENEFIT TOTALS			3.16		3.16		.00							
CHAI, CHRISTINE SEUNG-EUN				2LA-2RDNS														
560-85-4795	260001	00	01	1-42211-2350	LBR		160.55	160	.00	0	.00	0	.00	0	.00	0		
	260001	00	01	1-42211-3200	BEN		6.37	6	.00	0	.00	0						
	260001	00	01	1-42224-2350	LBR		.00	160-	.00	0	.00	0	3.50	0	.00	0		

No title given - only need for averages - no actual hrs for this employee

1210 = CE MGR SAL NONINSTR

17,856•01 +
5,759•74 +
23,615•75 *
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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC	CURR-PERIOD HOURS DIRECT	CURR-PERIOD HOURS RLOC
				BENEFIT TOTALS			197.54		74.56		.00							
CHANG, SAMANTHA HEE				2PS-2CHEM														
626-32-4020	280002	00	01	1-42754-2310		LBR	1916.27	0	97.50	0	.00	0	255.50	0	13.00	0	.00	0
	280002	00	01	1-42754-3200		BEN	41.27	0	1.82	0	.00	0						
				LABOR TOTALS			1,916.27		97.50		.00		255.50		13.00		.00	
				BENEFIT TOTALS			41.27		1.82		.00							
CHANG, SANSAN				1CB-1CTIS														
274-88-3482	180001	00	01	2-11016-2310		LBR	1840.00	360-	.00	0	.00	0	220.00	0	.00	0	.00	0
	180001	00	01	2-11016-2200		BEN	34.41	6-	.00	0	.00	0						
				LABOR TOTALS			1,840.00		.00		.00		220.00		.00		.00	
				BENEFIT TOTALS			34.41		.00		.00							
CHANG, WEN-YEN EDDIE				2LA-2TUTR														
603-47-2570	280001	00	01	1-42220-2410		LBR	88.00	0	.00	0	.00	0	11.00	0	.00	0	.00	0
	280001	00	01	1-42220-3200		BEN	1.65	0	.00	0	.00	0						
				LABOR TOTALS			88.00		.00		.00		11.00		.00		.00	
				BENEFIT TOTALS			1.65		.00		.00							
CHAO, CAROL				1IT-1NASA														
044-72-2438	180001	00	01	2-14520-2310		LBR	2760.00	0	1040.00	0	.00	0	276.00	0	104.00	0	.00	0
	180001	00	01	2-14520-3200		BEN	51.62	0	19.45	0	.00	0						
				LABOR TOTALS			2,760.00		1,040.00		.00		276.00		104.00		.00	
				BENEFIT TOTALS			51.62		19.45		.00							
CHAO, CHOI TENG				1SS-1ACTG														
614-43-7705	180002	00	01	1-41046-2310		LBR	236.00	0	.00	0	.00	0	29.50	0	.00	0	.00	0
	180002	00	01	1-41046-3200		BEN	4.41	0	.00	0	.00	0						
	180001	00	01	1-41095-2410		LBR	1812.38	0	.00	0	.00	0	268.50	0	.00	0	.00	0
	180001	00	01	1-41095-3200		BEN	33.89	0	.00	0	.00	0						
	180003	00	01	1-41287-2310		LBR	1352.00	0	.00	0	.00	0	169.00	0	.00	0	.00	0
	180003	00	01	1-41287-3200		BEN	25.29	0	.00	0	.00	0						
				LABOR TOTALS			3,400.38		.00		.00		467.00		.00		.00	
				BENEFIT TOTALS			63.59		.00		.00							
CHAO, NANCY TU-NING				2AB-2CASH														
548-15-8976	220148	00	01	1-42149-2170		LBR	11429.66	0	5714.83	0	.00	0	353.63	0	179.63	0	.00	0
	220148	00	01	1-42149-2360		LBR	98.53	0	98.53	0	.00	0	2.00	0	2.00	0	.00	0
	220148	00	01	1-42149-3100		BEN	3955.90	0	1979.99	0	.00	0						
	220148	00	01	1-42149-3200		BEN	7.03	0	7.03	0	.00	0						
	430046	00	01	1-44046-2170		LBR	50841.21	0	.00	0	.00	0	1619.72	0	.00	0	.00	0
	430046	00	01	1-44046-3100		BEN	17832.77	0	.00	0	.00	0						
	430046	00	01	2-14610-2170		LBR	3768.41	0	.00	0	.00	0	120.28	0	.00	0	.00	0

Cashiering Supervisor

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC	
	430046	00	01	2-14610-3100	BEN		1321.79	0	.00	0	.00	0							
				LABOR TOTALS			66,137.81		5,813.36		.00		2,095.63		1				
				BENEFIT TOTALS			23,117.49		1,987.02		.00								0• C
CHAPMAN, CAROLE				2LS-2LIB															
571-25-2128	230198	00	01	1-42306-2170	LBR		61653.51	0	5137.79	0	.00	0	2088.00	0	1				66,137•81 +
	230198	00	01	1-42306-3100	BEN		27200.87	0	2266.74	0	.00	0							23,117•49 +
				LABOR TOTALS			61,653.51		5,137.79		.00		2,088.00		1				89,255•30 *
				BENEFIT TOTALS			27,200.87		2,266.74		.00								
CHAR, DORIS				2CO-2TSTG															
538-32-1785	260002	00	01	1-42226-2350	LBR		2174.91	0	513.85	0	.00	0	182.00	0					0• C
	260002	00	01	1-42226-3200	BEN		221.21	0	52.27	0	.00	0							
				LABOR TOTALS			2,174.91		513.85		.00		182.00						89,255•3 +
				BENEFIT TOTALS			221.21		52.27		.00								98•53 −
CHARUKESNANT, SARAH MEILY																			89,156•77 *
563-75-0249	294001	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0					
	274001	03	01	1-42662-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0					
	274001	03	01	1-42662-3100	BEN		55.86	0	18.62	0	.00	0							89,156•77 ÷
	294001	02	01	1-42662-3100	BEN		549.75	0	207.50	0	.00	0							1,800• =
				LABOR TOTALS			4,955.94		1,850.42		.00		72.00						49•53153 *
				BENEFIT TOTALS			605.61		226.12		.00								
CHATSIRICHAI, NATHEE				1FS-1CFI															0• C
510-13-5185	160001	00	01	1-48305-2350	LBR		1290.60	0	.00	0	.00	0	108.00	0	.00	0	.00	0	
	160001	00	01	1-48305-3200	BEN		131.26	0	.00	0	.00	0							
				LABOR TOTALS			1,290.60		.00		.00		108.00		.00		.00		
				BENEFIT TOTALS			131.26		.00		.00								
CHAU, BICH NGOC				2AC-2BOOK															
603-48-9803	280001	00	01	1-48226-2310	LBR		3315.95	0	335.81	0	.00	0	491.25	0	49.75	0	.00	0	
	280001	00	01	1-48226-3200	BEN		62.00	0	6.28	0	.00	0							
				LABOR TOTALS			3,315.95		335.81		.00		491.25		49.75		.00		
				BENEFIT TOTALS			62.00		6.28		.00								
CHAU, WAI				2AC-2BOOK															
621-47-5196	280001	00	01	1-48226-2310	LBR		175.50	0	.00	0	.00	0	26.00	0	.00	0	.00	0	
	280001	00	01	1-48226-3200	BEN		3.29	0	.00	0	.00	0							
	280002	00	01	1-48228-2310	LBR		887.63	0	.00	0	.00	0	131.50	0	.00	0	.00	0	
	280002	00	01	1-48228-3200	BEN		16.59	0	.00	0	.00	0							
				LABOR TOTALS			1,063.13		.00		.00		157.50		.00		.00		

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REP PRO F

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC
CHEN, HSIN TSUNG				2AC-2BOOK												
626-64-9410	280004	00	01	1-48226-2310	LBR		121.50	0	.00	0	.00	0	18.00	0	.00	0
	280004	00	01	1-48226-3200	BEN		11.56	0	.00	0	.00	0				
	280006	00	01	2-12919-2310	LBR		345.00	0	.00	0	.00	0	46.00	0	.00	0
	280006	00	01	2-12919-3200	BEN		32.84	0	.00	0	.00	0				
				LABOR TOTALS			466.50		.00		.00		64.00		.00	
				BENEFIT TOTALS			44.40		.00		.00					
CHEN, I				1SM-1FAID												
456-63-5850	132214	00	01	2-11684-2170	LBR		33987.72	0	3919.15	0	.00	0	1557.71	0	174.00	0
	132214	00	01	2-11684-2360	LBR		949.58	0	.00	0	.00	0	29.00	0	.00	0
	132214	00	01	2-11684-3100	BEN		16075.16	0	1951.05	0	.00	0				
	132214	00	01	2-11684-3200	BEN		73.77	0	.00	0	.00	0				
				LABOR TOTALS			34,937.30		3,919.15		.00		1,586.71		174.00	
				BENEFIT TOTALS			16,148.93		1,951.05		.00					
CHEN, JANE JAO RONG				-												
358-60-4657	194001	02	01	1-41654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0
	194001	02	01	1-41654-3100	BEN		355.57	0	134.20	0	.00	0				
	174001	03	01	1-41656-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.00	0
	174001	03	01	1-41656-3100	BEN		40.65	0	13.55	0	.00	0				
				LABOR TOTALS			5,132.46		1,913.98		.00		72.00		24.00	
				BENEFIT TOTALS			396.22		147.75		.00					
CHEN, LI-CHIH WANG				-												
613-28-1776	292001	02	01	2-62350-1440	LBR		356.27	0	.00	0	.00	0	20.50	0	.00	0
	293001	02	01	2-62350-1440	LBR		260.70	0	.00	0	.00	0	15.00	0	.00	0
	293002	02	01	2-62350-1440	LBR		82.56	0	.00	0	.00	0	4.75	0	.00	0
	293003	02	01	2-62350-1440	LBR		86.90	0	.00	0	.00	0	5.00	0	.00	0
	294001	02	01	2-62350-1440	LBR		260.70	0	.00	0	.00	0	15.00	0	.00	0
	294002	02	01	2-62350-1440	LBR		252.01	0	252.01	0	.00	0	14.50	0	14.50	0
	292001	02	01	2-62350-3200	BEN		27.49	0	.00	0	.00	0				
	293001	02	01	2-62350-3200	BEN		20.13	0	.00	0	.00	0				
	293002	02	01	2-62350-3200	BEN		6.38	0	.00	0	.00	0				
	293003	02	01	2-62350-3200	BEN		6.71	0	.00	0	.00	0				
	294001	02	01	2-62350-3200	BEN		20.13	0	.00	0	.00	0				
	294002	02	01	2-62350-3200	BEN		19.45	0	19.45	0	.00	0				
	292002	02	01	2-62352-1440	LBR		104.27	0	.00	0	.00	0	6.00	0	.00	0
	293004	02	01	2-62352-1440	LBR		104.28	0	.00	0	.00	0	6.00	0	.00	0
	292002	02	01	2-62352-3200	BEN		8.06	0	.00	0	.00	0				
	293004	02	01	2-62352-3200	BEN		8.05	0	.00	0	.00	0				
	260003	00	01	2-62404-2350	LBR		743.52	0	.00	0	.00	0	48.00	0	.00	0
	260003	00	01	2-62404-3200	BEN		75.61	0	.00	0	.00	0				
				LABOR TOTALS			2,251.21		252.01		.00		134.75		14.50	

FA Outreach Coordinator

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
				LABOR TOTALS			3,940.14		330.88		.00		565.25		45.50		.00	
				BENEFIT TOTALS			73.68		6.19		.00							
CHEN, YUFEN				2AC-2CMPS														
605-51-6471	280001	00	01	1-48224-2310		LBR	177.19	0	70.88	0	.00	0	26.25	0	10.50	0	.00	0
	280001	00	01	1-48224-3200		BEN	3.32	0	1.33	0	.00	0						
				LABOR TOTALS			177.19		70.88		.00		26.25		10.50		.00	
				BENEFIT TOTALS			3.32		1.33		.00							
CHENEY, ERIN JOAN																		
568-35-8808	192001	02	01	1-41451-1320		LBR	942.62	0	62.37	0	.00	0	18.00	0	.00	0	.00	0
	192002	02	01	1-41451-1320		LBR	784.19	0	51.88	0	.00	0	15.00	0	.00	0	.00	0
	193001	02	01	1-41451-1320		LBR	1885.23	0	124.74	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	1-41451-1320		LBR	1885.23	0	124.74	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41451-1320		LBR	1885.23	0	711.57	0	.00	0	36.00	0	12.00	0	.00	0
	194002	02	01	1-41451-1320		LBR	1885.23	0	711.57	0	.00	0	36.00	0	12.00	0	.00	0
	192001	02	01	1-41451-3100		BEN	75.12	0	4.97	0	.00	0						
	192002	02	01	1-41451-3100		BEN	62.50	0	4.14	0	.00	0						
	193001	02	01	1-41451-3100		BEN	150.21	0	9.94	0	.00	0						
	193002	02	01	1-41451-3100		BEN	150.28	0	9.93	0	.00	0						
	194001	02	01	1-41451-3100		BEN	150.24	0	56.72	0	.00	0						
	194002	02	01	1-41451-3100		BEN	150.26	0	56.70	0	.00	0						
				LABOR TOTALS			9,267.73		1,786.87		.00		177.00		24.00			
				BENEFIT TOTALS			738.61		142.40		.00							
CHENEY, MELODIE DAWN				2ST-2ADMI														
573-06-4335	230077	00	01	1-42287-2170		LBR	46096.85	0	3891.30	0	.00	0	2106.00	0	174.00	0		
	230077	00	01	1-42287-3100		BEN	19420.26	0	1628.93	0	.00	0						
				LABOR TOTALS			46,096.85		3,891.30		.00		2,106.00		174.00			
				BENEFIT TOTALS			19,420.26		1,628.93		.00							
CHENG, ALEX				2AC-2BOOK														
621-64-2180	280001	00	01	1-48226-2310		LBR	172.13	0	.00	0	.00	0	25.50	0	.00	0		
	280001	00	01	1-48226-3200		BEN	3.22	0	.00	0	.00	0						
				LABOR TOTALS			172.13		.00		.00		25.50		.00			
				BENEFIT TOTALS			3.22		.00		.00							
CHENG, ALVEN																		
561-69-3905	194001	02	01	1-41477-1330		LBR	2001.03	0	755.27	0	.00	0	48.00	0	16.00	0	.00	0
	194001	02	01	1-41477-3100		BEN	154.48	0	58.30	0	.00	0						
				LABOR TOTALS			2,001.03		755.27		.00		48.00		16.00		.00	
				BENEFIT TOTALS			154.48		58.30		.00							

A&R Assistant

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
BENEFIT TOTALS							16.95		1.26		.00							
CHRESTENSON, KIM LEA			1IT-1NASA															
005-66-5788	280001	00	01	2-14520-2310	LBR		11754.00	0	1464.00	0	.00	0	1173.00	0	144.00	0	.00	0
	280001	00	01	2-14520-3200	BEN		450.09	0	27.38	0	.00	0						
LABOR TOTALS							11,754.00		1,464.00		.00		1,173.00		144.00		.00	
BENEFIT TOTALS							450.09		27.38		.00							
CHRISTENSEN, JESSICA THER			1LB-1TUTR															
619-29-3623	180001	00	01	1-41095-2310	LBR		644.63	0	209.25	0	.00	0	95.50	0	31.00	0	.00	0
	180001	00	01	1-41095-3200	BEN		12.05	0	3.91	0	.00	0						
LABOR TOTALS							644.63		209.25		.00		95.50		31.00			
BENEFIT TOTALS							12.05		3.91		.00							
CHRISTENSEN, JOSEPHINE TH			1IO-1MFLD															
549-96-0903	132230	00	01	2-11683-2170	LBR		9844.53	0	.00	0	.00	0	522.00	0	.00			
	132230	00	01	2-11683-3100	BEN		2487.16	0	.00	0	.00	0						
	132230	00	01	2-11684-2170	LBR		30442.66	0	3307.36	0	.00	0	1566.00	0	174.00			
	132230	00	01	2-11684-2360	LBR		1076.33	0	.00	0	.00	0	37.75	0	.00			
	132230	00	01	2-11684-3100	BEN		13630.48	0	1824.47	0	.00	0						
	132230	00	01	2-11684-3200	BEN		84.66	0	.00	0	.00	0						
LABOR TOTALS							41,363.52		3,307.36		.00		2,125.75		174.00			
BENEFIT TOTALS							16,202.30		1,824.47		.00							
CHRISTENSEN, LINDA ANN			1FA-1FADV															
619-05-4963	180001	00	01	1-48121-2310	LBR		720.00	720	.00	0	.00	0	.00	0	.00			
	180001	00	01	1-48121-3200	BEN		18.14	18	.00	0	.00	0						
	180001	00	01	1-51643-2310	LBR		.00	1326-	156.00-	606-	.00	0	110.50	0	37.50			
	180001	00	01	1-51643-2320	LBR		36.00	0	.00	0	.00	0	2.00	0	.00			
	180001	00	01	1-51643-3200	BEN		.00	34-	4.84-	16-	.00	0						
	180001	00	01	2-11028-2310	LBR		606.00	606	606.00	606	.00	0	.00	0	.00			
	180001	00	01	2-11028-3200	BEN		16.19	16	16.19	16	.00	0						
LABOR TOTALS							1,362.00		450.00		.00		112.50		37.50		.00	
BENEFIT TOTALS							34.33		11.35		.00							
CHRISTENSON, JOHN F			4ET-4TSC1															
101-44-3077	430176	00	01	1-41200-2170	LBR		54046.20	0	5005.34	0	.00	0	1929.81	0	174.00	0	.00	
	430176	00	01	1-41200-2360	LBR		164.29	0	.00	0	.00	0	4.00	0	.00	0	.00	
	430176	00	01	1-41200-3100	BEN		20673.02	0	1426.35	0	.00	0						
	430176	00	01	1-41200-3200	BEN		13.06	0	.00	0	.00	0						
	430176	00	01	6-10585-2150	LBR		2546.39	0	2546.39	0	.00	0	88.52	0	88.52	0	.00	
	430176	00	01	6-10585-3100	BEN		725.64	0	725.64	0	.00	0						
LABOR TOTALS							56,756.88		7,551.73		.00		2,022.33		262.52		.00	
BENEFIT TOTALS							21,411.72		2,151.99		.00							

FA Outreach Assistant

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	HOURS CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	293001	02	01	1-42654-3100	BEN		1251.43	0	81.40	0	.00	0						
	293002	02	01	1-42654-3100	BEN		1251.45	0	81.41	0	.00	0						
	294001	02	01	1-42654-3100	BEN		1530.14	0	464.36	0	.00	0						
	294005	02	01	1-42654-3100	BEN		120.90	0	6.21	0	.00	0						
	272001	03	01	1-42680-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42680-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42680-1445	LBR		642.48	0	214.16	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42680-3100	BEN		158.40	0	.00	0	.00	0						
	273001	03	01	1-42680-3100	BEN		159.21	0	.00	0	.00	0						
	274001	03	01	1-42680-3100	BEN		197.12	0	52.11	0	.00	0						
				LABOR TOTALS			27,695.92		3,486.50		.00		266.00		20.00		.00	
				BENEFIT TOTALS			7,184.55		848.29		.00							
COLE, JERRY R				1PE-1H P														
565-48-0025	153338	00	01	1-41702-1160	LBR		24323.60	0	2432.36	0	.00	0	1740.00	0	174.00	0	.00	0
	153338	00	01	1-41702-3100	BEN		915.82	0	280.52	0	.00	0						
				LABOR TOTALS			24,323.60		2,432.36		.00		1,740.00		174.00		.00	
				BENEFIT TOTALS			915.82		280.52		.00							
COLE, MICHAEL CHARLES				2CA-2ARTS														
573-56-0126	250234	00	01	1-42612-1105	LBR		8750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250234	00	01	1-42612-1160	LBR		81881.50	0	8188.15	0	.00	0	1400.00	0	140.00	0	.00	0
	293001	02	01	1-42612-1320	LBR		3129.69	0	207.06	0	.00	0	36.00	0	.00	0	.00	0
	250234	00	01	1-42612-3100	BEN		26033.48	0	2495.15	0	.00	0						
	293001	02	01	1-42612-3100	BEN		123.72	0	8.19	0	.00	0						
	292001	03	01	2-12909-1430	LBR		645.84	0	645.84	0	.00	0	13.00	0	13.00	0	.00	0
	293002	03	01	2-12909-1430	LBR		1192.32	0	1192.32	0	.00	0	24.00	0	24.00	0	.00	0
	294001	03	01	2-12909-1430	LBR		1341.36	0	1341.36	0	.00	0	27.00	0	27.00	0	.00	0
	292001	03	01	2-12909-3200	BEN		25.56	0	25.56	0	.00	0						
	293002	03	01	2-12909-3200	BEN		47.17	0	47.17	0	.00	0						
	294001	03	01	2-12909-3200	BEN		53.07	0	53.07	0	.00	0						
				LABOR TOTALS			96,940.71		11,574.73		.00		1,500.00		204.00		.00	
				BENEFIT TOTALS			26,283.00		2,629.14		.00							
COLE, NANCY J				2ST-2VPST														
492-46-4432	230271	00	01	1-42215-2170	LBR		64923.15	0	5410.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230271	00	01	1-42215-3100	BEN		27894.40	0	2324.52	0	.00	0						
				LABOR TOTALS			64,923.15		5,410.26		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			27,894.40		2,324.52		.00							
COLE, SHERI L				2ST-2ADMI														
542-74-5040	234512	00	01	1-42287-2170	LBR		36688.41	0	2425.45	0	.00	0	2001.00	0	130.50	0	.00	0
	234512	00	01	1-42287-3100	BEN		21822.49	0	1684.50	0	.00	0						
				LABOR TOTALS			36,688.41		2,425.45		.00		2,001.00		130.50		.00	

NBR Assistant

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
BENEFIT TOTALS							21,822.49		1,684.50		.00							
COLEMAN, DAVID				2CO-2COUN														
568-31-4578	250083	00	01	1-42248-1205	LBR		1400.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	1-42248-1260	LBR		63048.68	0	5731.70	0	.00	0	1091.86	0	99.26	0		
	250083	00	01	1-42248-3100	BEN		17824.66	0	1496.54	0	.00	0						
	250083	00	01	1-42250-1105	LBR		400.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	1-42250-1160	LBR		18014.09	0	1637.64	0	.00	0	312.08	0	28.37	0		
	250083	00	01	1-42250-3100	BEN		4756.54	0	427.59	0	.00	0						
	257705	00	01	1-42381-1250	LBR		4503.51	0	409.41	0	.00	0	1559.91	0	141.81	0		
	257705	00	01	1-42381-3100	BEN		1133.07	0	106.89	0	.00	0						
	250083	00	01	2-12264-1205	LBR		200.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	2-12264-1260	LBR		9006.88	0	818.81	0	.00	0	155.97	0	14.18	0		
	250083	00	01	2-12264-3100	BEN		2378.02	0	213.76	0	.00	0						
LABOR TOTALS							96,573.16		8,597.56		.00		3,119.82		283.62			
BENEFIT TOTALS							26,092.29		2,244.78		.00							
COLEMAN, FRANK EUGUNE				-														
570-27-6347	192001	02	01	1-51504-1320	LBR		1548.23	0	64.10	0	.00	0	28.00	0	.00	0		
	192002	02	01	1-51504-1320	LBR		1412.19	0	34.08	0	.00	0	25.98	0	.00	0		
	192003	02	01	1-51504-1320	LBR		1327.06	993	54.94	0	.00	0	4.80	0	.00	0		
	192001	02	01	1-51504-3100	BEN		120.84	0	2.55	0	.00	0						
	192002	02	01	1-51504-3100	BEN		111.15	0	1.34	0	.00	0						
	192003	02	01	1-51504-3100	BEN		103.56	79	2.19	0	.00	0						
LABOR TOTALS							4,287.48		153.12		.00		58.78		.00		.00	
BENEFIT TOTALS							335.55		6.08		.00							
COLEMAN, JESSICA ADRIANNA				2LA-2LART														
553-73-9403	240001	00	01	1-44036-3100	BEN		46.75	46	.00	0	.00	0						
	280001	00	01	1-48308-2410	LBR		1263.00	0	.00	0	.00	0	105.25	0	.00	0	.00	0
	280001	00	01	1-48308-3200	BEN		23.62	0	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		2500.00	0	.00	0	.00	0	250.00	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	46-	.00	0	.00	0						
LABOR TOTALS							3,763.00		.00		.00		355.25		.00		.00	
BENEFIT TOTALS							70.37		.00		.00							
COLEMAN, JUDY C				2CO-2COUN														
559-78-6477	250001	00	01	1-42248-1205	LBR		3500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	1-42248-1260	LBR		64988.53	0	5908.04	0	.00	0	1091.97	0	99.27	0	.00	0
	250001	00	01	1-42248-3100	BEN		17495.11	0	1480.22	0	.00	0						
	250001	00	01	1-42250-1105	LBR		1000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	1-42250-1160	LBR		18567.96	0	1688.00	0	.00	0	311.96	0	28.36	0	.00	0
	250001	00	01	1-42250-3100	BEN		4998.52	0	422.92	0	.00	0						
	250001	00	01	2-12264-1205	LBR		500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	2-12264-1260	LBR		9283.94	0	844.00	0	.00	0	155.98	0	14.18	0	.00	0
	250001	00	01	2-12264-3100	BEN		2499.37	0	211.46	0	.00	0						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 191
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
				BENEFIT TOTALS			621.79		25.74		.00							
COLLIGAN, MARY K				21A-2RDNS														
274-44-0112	260018	00	01	1-42211-2350		LBR	270.53	270	.00	0	.00	0	.00	0	.00	0	.00	0
	260018	00	01	1-42211-3200		BEN	31.79	31	.00	0	.00	0						
	260018	00	01	1-42223-2350		LBR	206.12	270-	.00	0	.00	0	9.25	0	.00	0	.00	0
	260018	00	01	1-42223-3200		BEN	8.18	31-	.00	0	.00	0						
	291001	02	01	1-42662-1320		LBR	6959.92	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42662-1320		LBR	6959.92	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	291003	03	01	1-42662-1330		LBR	795.32	0	.00	0	.00	0	10.00	0	.00	0		
	291004	03	01	1-42662-1330		LBR	397.66	0	.00	0	.00	0	5.00	0	.00	0		
	293005	02	01	1-42662-1330		LBR	927.14	0	61.34	0	.00	0	10.00	0	.00	0		
	272001	03	01	1-42662-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42662-1445		LBR	618.36	0	.00	0	.00	0	12.00	0	.00	0		
	272001	03	01	1-42662-3100		BEN	74.57	0	.00	0	.00	0						
	273001	03	01	1-42662-3100		BEN	75.56	0	.00	0	.00	0						
	291001	02	01	1-42662-3100		BEN	849.72	0	.00	0	.00	0						
	291002	02	01	1-42662-3100		BEN	849.78	0	.00	0	.00	0						
	291003	03	01	1-42662-3100		BEN	97.10	0	.00	0	.00	0						
	291004	03	01	1-42662-3100		BEN	48.55	0	.00	0	.00	0						
	292001	02	01	1-42662-3100		BEN	734.28	0	49.20	0	.00	0						
	292002	02	01	1-42662-3100		BEN	734.27	0	49.18	0	.00	0						
	293001	02	01	1-42662-3100		BEN	743.49	0	49.19	0	.00	0						
	293002	02	01	1-42662-3100		BEN	743.50	0	49.18	0	.00	0						
	293005	02	01	1-42662-3100		BEN	113.30	0	7.50	0	.00	0						
				LABOR TOTALS			42,090.07		1,671.50		.00		418.25		.00			
				BENEFIT TOTALS			5,104.09		204.25		.00							
COLLINGS, EARL				1AP-1PR														
559-42-9972	130265	00	01	1-41047-2170		LBR	89971.63	0	7746.23	0	.00	0	2088.00	0	174.00	0	.00	0
	130265	00	01	1-41047-2360		LBR	190.69	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	130265	00	01	1-41047-3100		BEN	32855.24	0	2766.04	0	.00	0						
	130265	00	01	1-41047-3200		BEN	14.59	0	.00	0	.00	0						
				LABOR TOTALS			90,162.32		7,746.23		.00		2,091.00		174.00		.00	
				BENEFIT TOTALS			32,869.83		2,766.04		.00							
COLLINS, JACQUELINE JEAN				-														
549-94-2950	194001	02	01	1-41656-1320		LBR	5181.99	0	1955.89	0	.00	0	60.00	0	20.00	0	.00	0
	194001	02	01	1-41656-3100		BEN	633.23	0	239.01	0	.00	0						
				LABOR TOTALS			5,181.99		1,955.89		.00		60.00		20.00		.00	
				BENEFIT TOTALS			633.23		239.01		.00							

Web Coordinator

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
COLSON, MERRY				-														
563-70-3366	191001	02	01	2-21291-1320	LBR		1065.24	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	191002	02	01	2-21291-1320	LBR		1065.24	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	2-21291-1320	LBR		1570.23	0	103.89	0	.00	0	36.00	0	.00	0	.00	0
	192002	02	01	2-21291-1320	LBR		1427.46	0	94.44	0	.00	0	36.00	0	.00	0	.00	0
	192003	02	01	2-21291-1320	LBR		1427.46	0	94.44	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	193003	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	194002	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	194003	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	191001	02	01	2-21291-3100	BEN		130.15	0	.00	0	.00	0						
	191002	02	01	2-21291-3100	BEN		130.19	0	.00	0	.00	0						
	192001	02	01	2-21291-3100	BEN		191.88	0	12.70	0	.00	0						
	192002	02	01	2-21291-3100	BEN		174.45	0	11.54	0	.00	0						
	192003	02	01	2-21291-3100	BEN		174.41	0	11.53	0	.00	0						
	193001	02	01	2-21291-3100	BEN		209.33	0	13.85	0	.00	0						
	193002	02	01	2-21291-3100	BEN		209.32	0	13.86	0	.00	0						
	193003	02	01	2-21291-3100	BEN		209.33	0	13.85	0	.00	0						
	194001	02	01	2-21291-3100	BEN		209.33	0	79.01	0	.00	0						
	194002	02	01	2-21291-3100	BEN		209.32	0	79.01	0	.00	0						
	194003	02	01	2-21291-3100	BEN		209.32	0	79.00	0	.00	0						
				LABOR TOTALS			16,833.45		2,572.44		.00		372.00		36.00		.00	
				BENEFIT TOTALS			2,057.03		314.35		.00							
COLVARD, JOYCE A				-														
579-54-1256	291001	02	01	1-42506-1320	LBR		4285.32	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42506-1320	LBR		3746.98	0	247.91	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42506-1320	LBR		2432.26	0	160.93	0	.00	0	31.20	0	.00	0	.00	0
	293001	02	01	1-42506-1320	LBR		5304.39	0	350.94	0	.00	0	68.04	0	.00	0	.00	0
	293002	02	01	1-42506-1320	LBR		3746.97	0	247.92	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42506-1320	LBR		3746.97	0	1414.27	0	.00	0	48.00	0	16.00	0	.00	0
	294002	02	01	1-42506-1320	LBR		4070.58	0	1536.40	0	.00	0	52.20	0	17.40	0	.00	0
	291001	00	01	1-42506-3100	BEN		7.11	7	.00	0	.00	0						
	291001	02	01	1-42506-3100	BEN		115.10	7	.00	0	.00	0						
	292001	02	01	1-42506-3100	BEN		107.65	0	19.47	0	.00	0						
	292002	02	01	1-42506-3100	BEN		69.86	0	12.63	0	.00	0						
	293001	02	01	1-42506-3100	BEN		152.38	0	27.55	0	.00	0						
	293002	02	01	1-42506-3100	BEN		107.63	0	19.46	0	.00	0						
	294001	02	01	1-42506-3100	BEN		186.72	0	111.03	0	.00	0						
	294002	02	01	1-42506-3100	BEN		207.08	0	120.62	0	.00	0						
				LABOR TOTALS			27,333.47		3,958.37		.00		343.44		33.40		.00	
				BENEFIT TOTALS			953.53		310.76		.00							
COMANDA, DEBORAH				1GU-1ADMR														
558-04-3475	130220	00	01	1-41054-2170	LBR		37436.49	0	4159.61	0	.00	0	1566.00	0	174.00	0	.00	0

Senior Cashier

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO - OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC	CURR-PERIOD DIRECT	RLOC
	130220	00	01	1-41054-3100	BEN	15128.73	0	1685.85	0	.00	0						
	234410	00	01	1-48226-2170	LBR	12478.83	0	.00	0	.00	0	522.00	0	.00	0		
	234410	00	01	1-48226-3100	BEN	5101.43	0	.00	0	.00	0						
LABOR TOTALS						49,915.32		4,159.61		.00		2,088.00		174.00			
BENEFIT TOTALS						20,230.16		1,685.85		.00							
CONENS, PATRICIA D				4HA-4HURS													
558-04-3236	470011	00	01	1-44022-2170	LBR	6628.59	0	565.58	0	.00	0	215.49	0	17.39	0		
	470011	00	01	1-44022-3100	BEN	2370.31	0	200.33	0	.00	0						
	470011	00	01	1-44062-2170	LBR	59659.55	0	5090.46	0	.00	0	1879.26	0	156.61	0		
	470011	00	01	1-44062-3100	BEN	21332.95	0	1802.96	0	.00	0						
LABOR TOTALS						66,288.14		5,656.04		.00		2,094.75		174.00			
BENEFIT TOTALS						23,703.26		2,003.29		.00							
CONLIN, MARGARET E																	
564-37-6520	192002	03	01	1-41456-1430	LBR	560.86	211	.00	0	.00	0	8.59	0	.00	0		
	192002	03	01	1-41456-3200	BEN	43.30	16	.00	0	.00	0						
	193001	02	01	1-41457-1320	LBR	1578.16	0	104.40	0	.00	0	39.00	0	.00	0		
	193001	02	01	1-41457-3100	BEN	121.82	0	8.05	0	.00	0						
	191001	02	01	1-41477-1320	LBR	144.18	0	.00	0	.00	0	3.30	0	.00	0		
	191002	02	01	1-41477-1320	LBR	1431.42	0	.00	0	.00	0	33.00	0	.00	0		
	192001	02	01	1-41477-1320	LBR	2626.10	0	173.75	0	.00	0	64.98	0	.00	0		
	194001	02	01	1-41477-1320	LBR	2523.93	0	952.63	0	.00	0	36.00	0	12.00	0	.00	0
	191001	02	01	1-41477-3100	BEN	11.12	0	.00	0	.00	0						
	191002	02	01	1-41477-3100	BEN	110.49	0	.00	0	.00	0						
	192001	02	01	1-41477-3100	BEN	202.75	0	13.42	0	.00	0						
	194001	02	01	1-41477-3100	BEN	194.85	0	73.55	0	.00	0						
LABOR TOTALS						8,864.65		1,230.78		.00		184.87		12.00		.00	
BENEFIT TOTALS						684.33		95.02		.00							
CONLU, ROWENALYN BADIANGO				1IT-INASA													
586-90-3352	280001	00	01	2-14520-2310	LBR	7111.50	0	.00	0	.00	0	646.50	0	.00	0	.00	0
	280001	00	01	2-14520-3200	BEN	132.98	0	.00	0	.00	0						
LABOR TOTALS						7,111.50		.00		.00		646.50		.00		.00	
BENEFIT TOTALS						132.98		.00		.00							
CONROY, CHRISTOPHER THOMA				2AC-2BOOK													
612-28-5078	280001	00	01	1-48226-2310	LBR	415.13	0	.00	0	.00	0	61.50	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN	7.76	0	.00	0	.00	0						
LABOR TOTALS						415.13		.00		.00		61.50		.00		.00	
BENEFIT TOTALS						7.76		.00		.00							
CONROY, LINDA CHRISTINA																	
561-11-8195	293001	03	01	1-48410-1430	LBR	801.00	0	.00	0	.00	0	16.02	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT P
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CU DIR
	272001	03	01	1-42456-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0	.0
	273001	03	01	1-42456-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	274001	03	01	1-42456-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00	0	.00 0
	272001	03	01	1-42456-3100	BEN		43.88	0	.00	0	.00	0					
	273001	03	01	1-42456-3100	BEN		45.66	0	.00	0	.00	0					
	274001	03	01	1-42456-3100	BEN		45.66	0	15.22	0	.00	0					
	292001	02	01	1-42456-3100	BEN		191.94	0	12.70	0	.00	0					
	293001	02	01	1-42456-3100	BEN		199.88	0	13.22	0	.00	0					
	293002	02	01	1-42456-3100	BEN		199.84	0	13.23	0	.00	0					
	293003	02	01	1-42456-3100	BEN		171.09	0	11.31	0	.00	0					
	293004	02	01	1-42456-3100	BEN		171.11	0	11.33	0	.00	0					
	294001	02	01	1-42456-3100	BEN		199.85	0	75.43	0	.00	0					
	294002	02	01	1-42456-3100	BEN		171.09	0	64.57	0	.00	0					
	294003	02	01	1-42456-3100	BEN		171.10	0	64.58	0	.00	0					
	294004	03	01	2-12911-1430	LBR		1002.75	0	1002.75	0	.00	0	21.00	0	21.00	0	.00 0
	294004	03	01	2-12911-3200	BEN		79.92	0	79.92	0	.00	0					
				LABOR TOTALS			21,317.50		4,535.93		.00		347.00		61.00		.00
				BENEFIT TOTALS			1,698.99		361.51		.00						
COYLE, JOHN M																	
569-80-1465	194001	02	01	1-41764-1320	LBR		1801.17	0	679.83	0	.00	0	36.00	0	12.00	0	.00 0
	194001	02	01	1-41764-3100	BEN		143.55	0	54.19	0	.00	0					
				LABOR TOTALS			1,801.17		679.83		.00		36.00		12.00		.00
				BENEFIT TOTALS			143.55		54.19		.00						
COYNE, SHEILA NORA				4ET-4IS													
611-07-6918	430061	00	01	1-44754-2170	LBR		90065.48	0	7816.04	0	.00	0	2109.75	0	174.00	0	.00 0
	430061	00	01	1-44754-3100	BEN		33077.64	0	2822.85	0	.00	0					
				LABOR TOTALS			90,065.48		7,816.04		.00		2,109.75		174.00		.00
				BENEFIT TOTALS			33,077.64		2,822.85		.00						
COZZENS, SHERRI SHINN																	
570-70-4939	292010	03	01	1-42450-1430	LBR		.00	667-	.00	0	.00	0	13.35	0	.00	0	.00 0
	292010	03	01	1-42450-3200	BEN		.00	26-	.00	0	.00	0					
	250171	00	01	1-42458-1160	LBR		76644.09	0	7664.41	0	.00	0	1400.00	0	140.00	0	.00 0
	292001	02	01	1-42458-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00 0
	292002	03	01	1-42458-1320	LBR		76.94	0	5.09	0	.00	0	.96	0	.00	0	.00 0
	293001	02	01	1-42458-1320	LBR		1923.42	0	127.26	0	.00	0	24.00	0	.00	0	.00 0
	292010	03	01	1-42458-1430	LBR		667.50	667	.00	0	.00	0	.00	0	.00	0	.00 0
	293010	03	01	1-42458-1430	LBR		667.50	445	.00	0	.00	0	4.45	0	.00	0	.00 0
	294010	03	01	1-42458-1430	LBR		667.50	0	222.50	0	.00	0	13.35	0	4.45	0	.00 0
	250171	00	01	1-42458-3100	BEN		23541.09	0	2121.51	0	.00	0					
	292001	02	01	1-42458-3100	BEN		38.17	0	2.52	0	.00	0					
	292002	03	01	1-42458-3100	BEN		3.05	0	.20	0	.00	0					
	293001	02	01	1-42458-3100	BEN		76.36	0	5.05	0	.00	0					
	292010	03	01	1-42458-3200	BEN		26.52	26	.00	0	.00	0					

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC
				LABOR TOTALS			28,995.56		3,182.41		.00		599.89		53.33	
				BENEFIT TOTALS			1,151.11		126.34		.00					
CROSS, STANLEY G				4SS-4DSS1												
556-15-0031	420012	00	01	1-44358-2170	LBR		22189.40	0	2309.16	0	.00	0	612.16	0	62.64	0
	421108	00	01	1-44358-2170	LBR		4920.37	0	.00	0	.00	0	139.51	0	.00	0
	420012	00	01	1-44358-2360	LBR		1611.23	0	139.34	0	.00	0	28.44	0	2.52	0
	421108	00	01	1-44358-2360	LBR		377.66	0	.00	0	.00	0	6.84	0	.00	0
	420012	00	01	1-44358-3100	BEN		8869.13	0	916.55	0	.00	0				
	421108	00	01	1-44358-3100	BEN		2016.77	0	.00	0	.00	0				
	420012	00	01	1-44358-3200	BEN		124.15	0	10.54	0	.00	0				
	421108	00	01	1-44358-3200	BEN		29.14	0	.00	0	.00	0				
	420012	00	01	1-51911-2360	LBR		442.37	0	.00	0	.00	0	8.00	0	.00	0
	420012	00	01	1-51911-3200	BEN		33.47	0	.00	0	.00	0				
	420012	00	01	2-54370-2170	LBR		39448.56	0	4105.22	0	.00	0	1088.29	0	111.36	0
	421108	00	01	2-54370-2170	LBR		8747.48	0	.00	0	.00	0	248.04	0	.00	0
	420012	00	01	2-54370-2360	LBR		2864.59	0	247.73	0	.00	0	50.56	0	4.48	0
	421108	00	01	2-54370-2360	LBR		671.46	0	.00	0	.00	0	12.16	0	.00	0
	420012	00	01	2-54370-3100	BEN		15767.28	0	1629.39	0	.00	0				
	421108	00	01	2-54370-3100	BEN		3585.35	0	.00	0	.00	0				
	420012	00	01	2-54370-3200	BEN		220.76	0	18.74	0	.00	0				
	421108	00	01	2-54370-3200	BEN		51.85	0	.00	0	.00	0				
				LABOR TOTALS			81,273.12		6,801.45		.00		2,194.00		181.00	
				BENEFIT TOTALS			30,697.90		2,575.22		.00					
CROTTY, SEAN MICHAEL				2BH-2ENVS												
569-83-6286	280001	00	01	1-48700-2310	LBR		393.75	0	87.50	0	.00	0	45.00	0	10.00	0
	280001	00	01	1-48700-3200	BEN		7.37	0	1.64	0	.00	0				
				LABOR TOTALS			393.75		87.50		.00		45.00		10.00	
				BENEFIT TOTALS			7.37		1.64		.00					
CRUMPTON, DINA D				2ST-2ADMI												
557-15-5372	230103	00	01	1-42287-2170	LBR		33598.59	0	3397.57	0	.00	0	1654.09	0	174.00	0
	230103	00	01	1-42287-3100	BEN		14990.17	0	1524.20	0	.00	0				
	236603	00	01	6-10570-2185	LBR		6220.70	0	.00	0	.00	0	289.28	0	.00	0
	236603	00	01	6-10570-3100	BEN		3098.47	0	.00	0	.00	0				
				LABOR TOTALS			39,819.29		3,397.57		.00		1,943.37		174.00	
				BENEFIT TOTALS			18,088.64		1,524.20		.00					
CRUTCHFIELD, GARY L				-												
304-48-2498	292001	02	01	1-42503-1320	LBR		5331.56	0	352.75	0	.00	0	72.00	0	.00	0
	292002	02	01	1-42503-1320	LBR		835.81	0	55.30	0	.00	0	9.99	0	.00	0
	272001	03	01	1-42503-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0
	272001	03	01	1-42503-3100	BEN		40.31	0	.00	0	.00	0				
	292001	02	01	1-42503-3100	BEN		347.64	0	23.00	0	.00	0				
	292002	02	01	1-42503-3100	BEN		54.48	0	3.60	0	.00	0				

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
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					LABOR TOTALS			285.00		.00		.00		28.50		.00		
					BENEFIT TOTALS			5.33		.00		.00						
DESAI, SIDDHARTH GIRISH		2WF-2OTI																
021-82-7158	280004	00	01	2-12249-3200		LBR		2096.00	0	.00	0	.00	0	262.00	0	.00	0	
	280004	00	01	2-12249-3200		BEN		118.52	81-	.00	0	.00	0					
	280004	00	01	2-12640-3200		BEN		81.01	81	.00	0	.00	0					
					LABOR TOTALS			2,096.00		.00		.00		262.00		.00		
					BENEFIT TOTALS			199.53		.00		.00						
DESCHENE, QUEENA QUY		2ST-2CLIF																
546-89-6103	280001	00	01	1-48410-2310		LBR		8118.00	1386	2364.00	1386	.00	0	561.00	0	81.50	0	.00 0
	280001	00	01	1-48410-3200		BEN		151.82	25	44.21	25	.00	0					
					LABOR TOTALS			8,118.00		2,364.00		.00		561.00		81.50		.00
					BENEFIT TOTALS			151.82		44.21		.00						
DESHMUKH, ERIKA DAWN		2CD-2C D																
572-11-0049	280001	00	01	1-48410-2410		LBR		4661.01	4661	.00	0	.00	0	.00	0	.00	0	.00 0
	280001	00	01	1-48410-3200		BEN		105.86	105	.00	0	.00	0					
	280001	00	01	2-62352-2410		LBR		3846.44	4661-	701.25	0	.00	0	667.25	0	55.00	0	.00 0
	280001	00	01	2-62352-3200		BEN		53.22	105-	13.11	0	.00	0					
					LABOR TOTALS			8,507.45		701.25		.00		667.25		55.00		.00
					BENEFIT TOTALS			159.08		13.11		.00						
DESHONG, RACHEL TAMAR		1PE-1PEDV																
573-91-3899	180002	00	01	1-41745-2310		LBR		80.00	0	.00	0	.00	0	8.00	0	.00	0	.00 0
	180002	00	01	1-41745-3200		BEN		1.50	0	.00	0	.00	0					
	140004	00	01	1-44036-3100		BEN		4.20	4	.00	0	.00	0					
	140005	00	01	1-44036-3100		BEN		1.03	1	1.03	1	.00	0					
	140004	00	01	2-31111-2700		LBR		225.00	0	.00	0	.00	0	22.50	0	.00	0	.00 0
	140005	00	01	2-31111-2700		LBR		55.00	0	.00	0	.00	0	5.50	0	.00	0	.00 0
	140005	00	01	2-31111-3100		BEN		.00	1-	1.03-	1-	.00	0					
					LABOR TOTALS			360.00		.00		.00		36.00		.00		.00
					BENEFIT TOTALS			6.73		.00		.00						
DESHPANDE, MRINMAIE HEMAN		1GU-1ADMR																
619-04-9821	130168	00	01	1-41287-2170		LBR		36038.37	0	3462.09	0	.00	0	2055.06	0	174.00	0	.00 0
	130168	00	01	1-41287-3100		BEN		21684.55	0	1904.39	0	.00	0					
					LABOR TOTALS			36,038.37		3,462.09		.00		2,055.06		174.00		.00
					BENEFIT TOTALS			21,684.55		1,904.39		.00						
DESILETS, LENORE MICHELLE		2PS-2MATH																
551-47-7574	258894	00	01	1-42760-1160		LBR		33445.81	0	5574.42	0	.00	0	1260.02	0	151.56	0	.00 0
	258894	00	01	1-42760-3100		BEN		11528.46	0	1503.66	0	.00	0					

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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				LABOR TOTALS			1,152.00		224.00		.00		18.00		6.00			
				BENEFIT TOTALS			117.16		22.77		.00							
DUONG, QUYNH ANH THI				2BH-2OTI														
624-42-2556	180001	00	01	2-12480-2310	LBR		254.00	0	.00	0	.00	0	31.76	0	.00	0		
	180005	00	01	2-12480-2310	LBR		33.00	33	.00	0	.00	0	.00	0	.00	0		
	180001	00	01	2-12480-3200	BEN		8.44	0	.00	0	.00	0						
	180005	00	01	2-12480-3200	BEN		.61	0	.00	0	.00	0						
	180001	00	01	2-12640-2310	LBR		254.00	0	.00	0	.00	0	31.74	0	.00	0	.00	0
	180005	00	01	2-12640-2310	LBR		33.00	33	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-12640-3200	BEN		8.41	0	.00	0	.00	0						
	180005	00	01	2-12640-3200	BEN		.62	0	.00	0	.00	0						
				LABOR TOTALS			574.00		.00		.00		63.50		.00		.00	
				BENEFIT TOTALS			18.08		.00		.00							
DUONG, THO DUC				2CE-2OLDA														
586-38-8358	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							
DUONG, TUNG THI				1SM-1FAID														
625-50-9230	130026	00	01	1-41272-2170	LBR		44864.56	0	3738.72	0	.00	0	1943.42	0	161.95	0	.00	0
	130026	00	01	1-41272-2360	LBR		193.38	0	.00	0	.00	0	5.58	0	.00	0	.00	0
	130026	00	01	1-41272-3100	BEN		22592.89	0	1882.14	0	.00	0						
	130026	00	01	1-41272-3200	BEN		14.46	0	.00	0	.00	0						
	130026	00	01	2-11683-2170	LBR		813.79	0	.00	0	.00	0	36.15	0	.00	0	.00	0
	130026	00	01	2-11683-3100	BEN		415.38	0	.00	0	.00	0						
	130026	00	01	2-11684-2170	LBR		2519.79	0	277.79	0	.00	0	108.43	0	12.05	0	.00	0
	130026	00	01	2-11684-2360	LBR		14.37	0	.00	0	.00	0	.42	0	.00	0	.00	0
	130026	00	01	2-11684-3100	BEN		1263.43	0	139.86	0	.00	0						
	130026	00	01	2-11684-3200	BEN		1.08	0	.00	0	.00	0						
				LABOR TOTALS			48,405.89		4,016.51		.00		2,094.00		174.00		.00	
				BENEFIT TOTALS			24,287.24		2,022.00		.00							
DUPRE, TIMOTHY EUGENE				-														
569-76-1179	192001	03	01	1-41378-1430	LBR		7131.61	0	.00	0	.00	0	166.48	0	.00	0	.00	0
	192001	03	01	1-41378-3200	BEN		871.49	0	.00	0	.00	0						
				LABOR TOTALS			7,131.61		.00		.00		166.48		.00		.00	
				BENEFIT TOTALS			871.49		.00		.00							
DURAN BEZAK, MARIA RAQUEL				-														
564-64-1638	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						

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LABOR TOTALS							38,324.04		3,472.16		.00		420.00		20.00		.00	
BENEFIT TOTALS							4,683.18		424.30		.00							
ELLYSON, ADAM W			2CA-2EUPH															
030-52-2166	260002	00	01	1-42384-2350	LBR		400.00	400	.00	0	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-42384-3200	BEN		40.64	40	.00	0	.00	0						
	260001	00	01	1-48304-2350	LBR		773.50	1778-	.00	0	.00	0	94.50	0	.00	0	.00	0
	260002	00	01	1-48304-2350	LBR		204.00	1200-	.00	0	.00	0	52.00	0	.00	0	.00	0
	260001	00	01	1-48304-3200	BEN		80.84	178-	.00	0	.00	0						
	260002	00	01	1-48304-3200	BEN		22.15	120-	.00	0	.00	0						
	260001	00	01	1-48404-2350	LBR		1778.00	1778	.00	0	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-48404-2350	LBR		800.00	800	.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48404-3200	BEN		178.66	178	.00	0	.00	0						
	260002	00	01	1-48404-3200	BEN		80.00	80	.00	0	.00	0						
	260002	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260002	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
LABOR TOTALS							5,615.50		.00		.00		188.00		.00		.00	
BENEFIT TOTALS							571.11		.00		.00							
ELLZEY, SUZANNE LOUISE			-															
549-13-1156	192001	02	01	1-41502-1320	LBR		1465.41	0	96.96	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	1-41502-3100	BEN		116.81	0	7.73	0	.00	0						
	193001	02	01	1-41507-1320	LBR		2934.75	0	194.16	0	.00	0	48.00	0	.00	0	.00	0
	193001	02	01	1-41507-3100	BEN		233.89	0	15.47	0	.00	0						
LABOR TOTALS							4,400.16		291.12		.00		72.00		.00		.00	
BENEFIT TOTALS							350.70		23.20		.00							
ELOFF, DANIEL C			4SS-4DSS2															
279-74-7308	280001	00	01	1-44358-2310	LBR		6812.00	0	700.00	0	.00	0	844.00	0	80.00	0	.00	0
	280001	00	01	1-44358-2320	LBR		108.56	0	6.56	0	.00	0	9.00	0	.50	0	.00	0
	280001	00	01	1-44358-2360	LBR		24.00	0	.00	0	.00	0	1.50	0	.00	0	.00	0
	280001	00	01	1-44358-3200	BEN		242.92	0	13.21	0	.00	0						
LABOR TOTALS							6,944.56		706.56		.00		854.50		80.50		.00	
BENEFIT TOTALS							242.92		13.21		.00							
ELVIN, LINDA LU			2AS-2DLCT															
359-38-4826	220169	00	01	1-42404-2170	LBR		72798.77	0	6334.65	0	.00	0	2094.00	0	174.00	0	.00	0
	230169	00	01	1-42404-2170	LBR		531.78	0	.00	0	.00	0	.00	0	.00	0	.00	0
	220169	00	01	1-42404-3100	BEN		29102.10	0	2466.61	0	.00	0						
	230169	00	01	1-42404-3100	BEN		210.34	0	.00	0	.00	0						
LABOR TOTALS							73,330.55		6,334.65		.00		2,094.00		174.00		.00	
BENEFIT TOTALS							29,312.44		2,466.61		.00							
ELWELL, JEAN			2ST-2ADMI															

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DATE RUN 07/20/05
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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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562-45-3881	230149	00	01	1-42287-2170	LBR			63249.15	0	5398.26	0	.00	0	2088.00	0	174.00	0	
	230149	00	01	1-42287-3100	BEN			23058.63	0	1948.60	0	.00	0					
				LABOR TOTALS				63,249.15		5,398.26		.00		2,088.00		174.00		
				BENEFIT TOTALS				23,058.63		1,948.60		.00						
ELWELL, SUSANNE E				4FC-4FACA														
573-49-2710	430136	00	01	1-48301-2170	LBR			64091.36	0	5778.73	0	.00	0	1929.82	0	174.00	0	
	430136	00	01	1-48301-3100	BEN			23237.36	0	2029.31	0	.00	0					
				LABOR TOTALS				64,091.36		5,778.73		.00		1,929.82		174.00		
				BENEFIT TOTALS				23,237.36		2,029.31		.00						
ELY, JIMMY VERN				-														
519-62-9446	192001	02	01	1-51504-1320	LBR			2734.64	0	113.19	0	.00	0	82.84	0	.00	0	.00 0
	192002	02	01	1-51504-1320	LBR			2734.64	0	113.19	0	.00	0	52.05	0	.00	0	.00 0
	192001	02	01	1-51504-3100	BEN			211.08	0	8.72	0	.00	0					
	192002	02	01	1-51504-3100	BEN			211.19	0	8.75	0	.00	0					
				LABOR TOTALS				5,469.28		226.38		.00		134.89		.00		.00
				BENEFIT TOTALS				422.27		17.47		.00						
EMAMI, BAHARA				2CA-2F/TV														
615-12-7528	280001	00	01	2-12902-2310	LBR			5702.00	448	1140.00	0	.00	0	571.00	0	114.00	0	.00 0
	280001	00	01	2-12902-3200	BEN			155.61	42	21.32	0	.00	0					
				LABOR TOTALS				5,702.00		1,140.00		.00		571.00		114.00		.00
				BENEFIT TOTALS				155.61		21.32		.00						
EMMERICH, NANCY M				-														
549-90-6074	192001	02	01	1-41502-1320	LBR			520.84	0	34.46	0	.00	0	6.00	0	.00	0	.00 0
	192002	02	01	1-41502-1320	LBR			1041.68	0	68.92	0	.00	0	12.00	0	.00	0	.00 0
	192001	02	01	1-41502-3100	BEN			52.97	0	3.50	0	.00	0					
	192002	02	01	1-41502-3100	BEN			105.94	0	7.01	0	.00	0					
				LABOR TOTALS				1,562.52		103.38		.00		18.00		.00		.00
				BENEFIT TOTALS				158.91		10.51		.00						
EMRANI, HAMIDEH ALSADAT				1LB-1TUTR														
613-39-3949	180002	00	01	1-41095-2410	LBR			614.25	0	.00	0	.00	0	91.00	0	.00	0	.00 0
	180003	00	01	1-41095-2410	LBR			356.00	0	.00	0	.00	0	44.50	0	.00	0	.00 0
	180002	00	01	1-41095-3200	BEN			11.49	0	.00	0	.00	0					
	180003	00	01	1-41095-3200	BEN			6.66	0	.00	0	.00	0					
				LABOR TOTALS				970.25		.00		.00		135.50		.00		.00
				BENEFIT TOTALS				18.15		.00		.00						
ENDEMANN, GERDA CONSTANCE				-														
559-04-4098	193010	03	01	1-41411-1430	LBR			22.50	0	.00	0	.00	0	1.50	0	.00	0	.00 0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC
	192002	02	01	1-41656-3100	BEN		386.84	0	25.59	0	.00	0				
	193001	02	01	1-41656-3100	BEN		435.24	0	28.79	0	.00	0				
	194001	02	01	1-41656-3100	BEN		386.84	0	146.01	0	.00	0				
	194002	02	01	1-41656-3100	BEN		386.82	0	146.00	0	.00	0				
	194003	02	01	1-41656-3100	BEN		6.63	0	.44	0	.00	0				
				LABOR TOTALS			26,912.00		5,015.17		.00		337.00		44.00	
				BENEFIT TOTALS			2,077.62		387.17		.00					
FAST, TIFFANY E				2BH-2BIOL												
618-07-3040	260009	00	01	1-48700-2350	LBR		774.51	0	.00	0	.00	0	50.00	0	.00	0
	260009	00	01	1-48700-3200	BEN		78.76	0	.00	0	.00	0				
				LABOR TOTALS			774.51		.00		.00		50.00		.00	
				BENEFIT TOTALS			78.76		.00		.00					
FEIG, KONNILYN				1SS-1HIST												
517-34-4223	150138	00	01	1-41806-1105	LBR		7750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150138	00	01	1-41806-1160	LBR		80180.40	0	8018.04	0	.00	0	1330.00	0	133.00	0	.00	0
	191001	02	01	1-41806-1320	LBR		5739.23	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	192001	02	01	1-41806-1320	LBR		5056.64	0	334.57	0	.00	0	48.00	0	.00	0	.00	0
	192002	02	01	1-41806-1320	LBR		5056.64	0	334.57	0	.00	0	48.00	0	.00	0	.00	0
	193001	02	01	1-41806-1320	LBR		5056.65	0	334.56	0	.00	0	48.00	0	.00	0	.00	0
	193002	02	01	1-41806-1320	LBR		5056.65	0	334.56	0	.00	0	48.00	0	.00	0	.00	0
	150138	00	01	1-41806-3100	BEN		26916.03	0	2298.92	0	.00	0						
	191001	02	01	1-41806-3100	BEN		709.26	19	.00	0	.00	0						
	192001	02	01	1-41806-3100	BEN		200.73	0	13.29	0	.00	0						
	192002	02	01	1-41806-3100	BEN		200.75	0	13.28	0	.00	0						
	193001	02	01	1-41806-3100	BEN		200.78	0	13.28	0	.00	0						
	193002	02	01	1-41806-3100	BEN		200.72	0	13.28	0	.00	0						
				LABOR TOTALS			113,896.21		9,356.30		.00		1,570.00		133.00		.00	
				BENEFIT TOTALS			28,428.27		2,352.05		.00							
FELDMAN, JOYCE K				2ST-2FNAI												
015-32-4667	230372	00	01	2-12681-2170	LBR		41327.43	0	4559.17	0	.00	0	1566.00	0	174.00	0	.00	0
	230372	00	01	2-12681-3100	BEN		15998.10	0	1770.61	0	.00	0						
	230372	00	01	2-12684-2170	LBR		13382.61	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	230372	00	01	2-12684-3100	BEN		5249.33	0	.00	0	.00	0						
				LABOR TOTALS			54,710.04		4,559.17		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,247.43		1,770.61		.00							
FELDMAN, SUSAN				2CE-2OLDA												
138-44-0265	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	FISC-TO-DATE HOURS DIRECT	RLOC	MO-TO-DATE HOURS DIRECT	RLOC	OTHER STATISTICS	
				LABOR TOTALS			403.68		.00		.00		39.00		.00			
				BENEFIT TOTALS			41.06		.00		.00							
FIELDS, KATHRYN S				2AC-2DNCS														
565-84-4946	260002	00	01	1-48406-2350	LBR		751.17	0	86.87	0	.00	0	73.50	0	8.50	0		
	260002	00	01	1-48406-2360	LBR		42.15	0	.00	0	.00	0	2.75	0	.00	0		
	260002	00	01	1-48406-3200	BEN		80.68	0	8.83	0	.00	0						
				LABOR TOTALS			793.32		86.87		.00		76.25		8.50			
				BENEFIT TOTALS			80.68		8.83		.00							
FIFIELD, PATRICIA A				2ST-2ADMI														
549-62-7356	220218	00	01	1-42287-2170	LBR		8993.07	0	769.14	0	.00	0	261.03	0	21.76	0		
	220218	00	01	1-42287-3100	BEN		3113.00	0	263.60	0	.00	0						
	220218	00	01	2-12650-2170	LBR		62949.46	0	5383.84	0	.00	0	1826.97	0	152.24	0		
	220218	00	01	2-12650-3100	BEN		21789.69	0	1845.09	0	.00	0						
				LABOR TOTALS			71,942.53		6,152.98		.00		2,088.00		174.00			
				BENEFIT TOTALS			24,902.69		2,108.69		.00							
FIGLIOMENI, PAUL				2AC-2CMPS														
553-96-6211	230178	00	01	1-48224-2170	LBR		47414.16	0	4106.69	0	.00	0	1506.73	0	130.51	0	.00	0
	230178	00	01	1-48224-2360	LBR		1612.71	0	212.42	0	.00	0	34.14	0	4.50	0	.00	0
	230178	00	01	1-48224-3100	BEN		20432.69	0	1720.97	0	.00	0						
	230178	00	01	1-48224-3200	BEN		124.67	0	16.25	0	.00	0						
	230178	00	01	1-48228-2170	LBR		15804.36	0	1368.86	0	.00	0	502.17	0	43.49	0	.00	0
	230178	00	01	1-48228-2360	LBR		537.50	0	70.80	0	.00	0	11.36	0	1.50	0	.00	0
	230178	00	01	1-48228-3100	BEN		6810.64	0	573.64	0	.00	0						
	230178	00	01	1-48228-3200	BEN		41.57	0	5.42	0	.00	0						
				LABOR TOTALS			65,368.73		5,758.77		.00		2,054.40		180.00		.00	
				BENEFIT TOTALS			27,409.57		2,316.28		.00							
FIGUEROA, JESUS O				2AC-2BOOK														
554-91-4317	280001	00	01	1-48226-2310	LBR		637.88	0	251.44	0	.00	0	94.50	0	37.25	0	.00	0
	280001	00	01	1-48226-3200	BEN		11.93	0	4.70	0	.00	0						
				LABOR TOTALS			637.88		251.44		.00		94.50		37.25		.00	
				BENEFIT TOTALS			11.93		4.70		.00							
FIGUEROA, NANCY G				2AC-2BOOK														
558-83-2780	280001	00	01	1-48226-2310	LBR		756.01	0	259.88	0	.00	0	112.00	0	38.50	0	.00	0
	280001	00	01	1-48226-3200	BEN		28.26	0	9.72	0	.00	0						
				LABOR TOTALS			756.01		259.88		.00		112.00		38.50		.00	
				BENEFIT TOTALS			28.26		9.72		.00							
FILIPPINI, ROBERT JAMES				-														

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
	293001	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	291001	02	01	1-42662-3100	BEN		458.46	0	.00	0	.00	0						
	291002	02	01	1-42662-3100	BEN		458.51	0	.00	0	.00	0						
	292001	02	01	1-42662-3100	BEN		435.21	0	28.80	0	.00	0						
	292002	02	01	1-42662-3100	BEN		435.26	0	28.80	0	.00	0						
	293001	02	01	1-42662-3100	BEN		435.14	0	28.79	0	.00	0						
	293002	02	01	1-42662-3100	BEN		435.27	0	28.80	0	.00	0						
	260002	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260002	00	01	1-52363-3200	BEN		257.85	0	129.70	0	.00	0						
				LABOR TOTALS			37,768.05		3,171.98		.00		453.50		40.00		.00	
				BENEFIT TOTALS			2,915.70		244.89		.00							
FRIEND, JULIE ELIZABETH																		
562-11-7061	294002	03	01	1-42021-1430	LBR		100.00	0	100.00	0	.00	0	2.00	0	2.00	0	.00	0
	294002	03	01	1-42021-3200	BEN		7.72	0	7.72	0	.00	0						
	293001	02	01	1-42458-1320	LBR		3443.96	0	227.86	0	.00	0	180.00	0	.00	0	.00	0
	294001	02	01	1-42458-1320	LBR		6874.95	0	2594.89	0	.00	0	120.00	0	40.00	0	.00	0
	293001	02	01	1-42458-3100	BEN		265.85	0	17.58	0	.00	0						
	294001	02	01	1-42458-3100	BEN		530.76	0	200.34	0	.00	0						
				LABOR TOTALS			10,418.91		2,922.75		.00		302.00		42.00		.00	
				BENEFIT TOTALS			804.33		225.64		.00							
FRIESEN, HAZEL JOAN				2SE-2EDC														
546-56-6098	250187	00	01	2-22227-1160	LBR		24564.36	0	2456.44	0	.00	0	420.00	0	42.00	0	.00	0
	250187	00	01	2-22227-1260	LBR		57317.14	0	5731.71	0	.00	0	980.00	0	98.00	0	.00	0
	291010	03	01	2-22227-1430	LBR		5771.66	0	.00	0	.00	0	112.00	0	.00	0	.00	0
	250187	00	01	2-22227-3100	BEN		19938.23	0	1831.95	0	.00	0						
	291010	03	01	2-22227-3200	BEN		713.26	19	.00	0	.00	0						
				LABOR TOTALS			87,653.16		8,188.15		.00		1,512.00		140.00		.00	
				BENEFIT TOTALS			20,651.49		1,831.95		.00							
FRIESON, WILLIE J				1FS-1CFI														
418-72-0926	130160	00	01	1-41181-2170	LBR		64295.38	0	5404.58	0	.00	0	2104.50	0	174.00	0	.00	0
	130160	00	01	1-41181-2360	LBR		505.44	0	.00	0	.00	0	16.50	0	.00	0	.00	0
	130160	00	01	1-41181-3100	BEN		23297.53	0	1949.94	0	.00	0						
	130160	00	01	1-41181-3200	BEN		40.00	0	.00	0	.00	0						
				LABOR TOTALS			64,800.82		5,404.58		.00		2,121.00		174.00		.00	
				BENEFIT TOTALS			23,337.53		1,949.94		.00							
FRISCHE, ALLEN R				2AB-2BGTP														
545-15-5732	210016	00	01	1-42150-2110	LBR		45032.66	0	.00	0	.00	0	1052.70	0	.00	0	.00	0
	210016	00	01	1-42150-3100	BEN		16602.23	0	.00	0	.00	0						
	210016	00	01	6-10585-2150	LBR		13004.58	0	.00	0	.00	0	304.00	0	.00	0	.00	0
	210016	00	01	6-10585-3100	BEN		2652.78	0	.00	0	.00	0						

Dir. Budget & personnel

FOOTHILL DE ANZA COM[illegible]TY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ	TYPE	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC	
LABOR TOTALS							58,037.24		.00		.00		1,356.70		.00		.00		
BENEFIT TOTALS							19,255.01		.00		.00								
FRITZ, ANDREW CORBIN				1IT-1NASA															
545-59-2824	180002	00	01	2-14520-2310	LBR		5110.00	0	1020.00	0	.00	0	511.00	0	102.00	0	.00	0	
	180002	00	01	2-14520-3200	BEN		95.56	0	19.07	0	.00	0							
LABOR TOTALS							5,110.00		1,020.00		.00		511.00		102.00		.00		
BENEFIT TOTALS							95.56		19.07		.00								
RITZ, MICHELE LORRAINE				2CB-2GBUS															
063-60-7580	250034	00	01	1-42502-1160	LBR		74693.99	0	7469.40	0	.00	0	1400.00	0	14				
	250034	00	01	1-42502-3100	BEN		22994.23	0	2097.26	0	.00	0							
LABOR TOTALS							74,693.99		7,469.40		.00		1,400.00		14				
BENEFIT TOTALS							22,994.23		2,097.26		.00								
FROGNER, ASHELEY M				2CE-2OLDA															
624-07-1370	260003	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0					
	260003	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0							
LABOR TOTALS							1,660.00		.00		.00		41.50						
BENEFIT TOTALS							168.82		.00		.00								
FU, BILL SHIH CHIEH																			
562-89-1909	293001	02	01	1-42504-1320	LBR		3998.46	0	264.54	0	.00	0	60.00	0					
	273001	03	01	1-42504-1445	LBR		457.20	0	.00	0	.00	0	12.00	0					
	273001	03	01	1-42504-3100	BEN		87.15	0	.00	0	.00	0							
	293001	02	01	1-42504-3100	BEN		738.66	0	26.90	0	.00	0							
	232236	00	01	1-52023-2170	LBR		2652.10	0	.00	0	.00	0	91.65	0					
	232236	00	01	1-52023-3100	BEN		1078.71	0	.00	0	.00	0							
	232236	00	01	1-52063-2170	LBR		5932.53	0	.00	0	.00	0	221.88	0					
	232236	00	01	1-52063-3100	BEN		2314.07	0	.00	0	.00	0							
	232236	00	01	2-12572-2170	LBR		25753.84	6951	.00	0	.00	0	679.53	0					
	232236	00	01	2-12572-3100	BEN		10178.53	2679	.00	0	.00	0							
	236604	00	01	6-10570-2185	LBR		2856.27	0	.00	0	.00	0	104.31	0					
	236604	00	01	6-10570-3100	BEN		1215.72	0	.00	0	.00	0							
	232236	00	01	6-10585-2150	LBR		1179.60	0	.00	0	.00	0	43.08	0	.00	0	.00	0	
	232236	00	01	6-10585-3100	BEN		526.79	0	.00	0	.00	0							
LABOR TOTALS							42,830.00		264.54		.00		1,212.45		.00		.00		
BENEFIT TOTALS							16,139.63		26.90		.00								
FU, BIN				2AC-2BOOK															
621-19-5601	280001	00	01	1-48226-2310	LBR		433.68	0	106.31	0	.00	0	64.25	0	15.75	0	.00	0	
	280001	00	01	1-48226-3200	BEN		8.12	0	1.99	0	.00	0							
LABOR TOTALS							433.68		106.31		.00		64.25		15.75		.00		

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE/ DIRECT	RLOC I
				LABOR TOTALS			36,560.01		3,471.97		.00		649.76		42.00	
				BENEFIT TOTALS			2,822.44		268.04		.00					
GANNON, PATRICK L				2AC-2CMPS												
606-68-6785	210054	00	01	1-48224-2110	LBR		66074.96	0	5506.24	0	.00	0	1670.40	0	139.20	0
	210054	00	01	1-48224-3100	BEN		24770.49	0	2024.40	0	.00	0				
	210054	00	01	1-48228-2110	LBR		16518.90	0	1376.58	0	.00	0	417.60	0	34.80	0
	210054	00	01	1-48228-3100	BEN		6192.64	0	506.11	0	.00	0				
				LABOR TOTALS			82,593.86		6,882.82		.00		2,088.00		174.00	
				BENEFIT TOTALS			30,963.13		2,530.51		.00					
GAO, HAILUN				2BH-2ENVS												
623-46-0290	280001	00	01	2-12916-2310	LBR		476.88	0	.00	0	.00	0	54.50	0	.00	0
	280001	00	01	2-12916-3200	BEN		8.92	0	.00	0	.00	0				
				LABOR TOTALS			476.88		.00		.00		54.50		.00	
				BENEFIT TOTALS			8.92		.00		.00					
GARBACEA, DELIA-MANUELA				2CB-2CIS												
616-90-3089	250111	00	01	1-42503-1160	LBR		78144.10	0	7814.41	0	1800.00	1800	1400.00	0	140.00	0
	291001	02	01	1-42503-1320	LBR		6585.44	0	.00	0	.00	0	72.00	0	.00	0
	292001	02	01	1-42503-1320	LBR		2146.77	0	142.03	0	.00	0	36.00	0	.00	0
	293001	02	01	1-42503-1320	LBR		2146.74	0	142.02	0	.00	0	36.00	0	.00	0
	250111	00	01	1-42503-3100	BEN		11996.09	0	1153.79	0	.00	0				
	291001	02	01	1-42503-3100	BEN		789.65	21	.00	0	.00	0				
	292001	02	01	1-42503-3100	BEN		85.22	0	5.64	0	.00	0				
	293001	02	01	1-42503-3100	BEN		85.23	0	5.64	0	.00	0				
	250111	00	01	1-44043-1160	LBR		.00	0	.00	0	1800.00-	1800-	.00	0	.00	0
				LABOR TOTALS			89,023.05		8,098.46		.00		1,544.00		140.00	
				BENEFIT TOTALS			12,956.19		1,165.07		.00					
GARCIA, ALMA D				2ST-2FNAI												
609-10-7667	232222	00	01	2-12681-2170	LBR		30669.53	0	3548.65	0	.00	0	1574.00	0	174.00	0
	232222	00	01	2-12681-2360	LBR		2696.67	0	107.07	0	.00	0	93.50	0	3.50	0
	232222	00	01	2-12681-3100	BEN		13831.99	0	1560.13	0	.00	0				
	232222	00	01	2-12681-3200	BEN		208.96	0	8.19	0	.00	0				
	232222	00	01	2-12684-2170	LBR		9540.11	0	.00	0	.00	0	514.00	0	.00	0
	232222	00	01	2-12684-3100	BEN		4434.21	0	.00	0	.00	0				
				LABOR TOTALS			42,906.31		3,655.72		.00		2,181.50		177.50	
				BENEFIT TOTALS			18,475.16		1,568.32		.00					
GARCIA, ARTURO				2AC-2CUST												
605-22-5937	230675	00	01	1-41139-2180	LBR		10329.76	0	.00	0	.00	0	499.91	0	.00	0
	430080	00	01	1-41139-2180	LBR		7607.84	0	3803.92	0	.00	0	355.50	0	175.50	0
	230675	00	01	1-41139-2360	LBR		1245.04	0	.00	0	.00	0	40.50	0	.00	0
	430080	00	01	1-41139-2360	LBR		793.00	0	793.00	0	.00	0	35.00	0	35.00	0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HO MO- DIREC
	194001	02	01	1-41810-1320	LBR		4145.61	0	1564.73	0	.00	0	48.00	0	16.0
	174001	03	01	1-41810-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.0
	174001	03	01	1-41810-3100	BEN		101.21	0	30.56	0	.00	0			
	193001	02	01	1-41810-3100	BEN		826.73	0	47.76	0	.00	0			
	194001	02	01	1-41810-3100	BEN		791.79	0	272.45	0	.00	0			
				LABOR TOTALS			8,817.90		2,014.58		.00		108.00		20.0(
				BENEFIT TOTALS			1,719.73		350.77		.00				
GOBENA, LELLO TILAHUN				2LS-2LIB											
475-39-7762	280002	00	01	1-42306-2310	LBR		2128.44	0	325.94	0	.00	0	243.25	0	37.25
	280002	00	01	1-42306-3200	BEN		39.81	0	6.10	0	.00	0			
	240002	00	01	1-44036-3100	BEN		37.64	37	.00	0	.00	0			
	240002	00	01	2-32111-2700	LBR		2012.50	0	.00	0	.00	0	230.00	0	.00
	240002	00	01	2-32111-3100	BEN		.00	37-	.00	0	.00	0			
				LABOR TOTALS			4,140.94		325.94		.00		473.25		37.25
				BENEFIT TOTALS			77.45		6.10		.00				
GODDARD, NETTYE GEORGE				-											
422-18-5869	272001	03	01	1-42680-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00
	274001	03	01	1-42680-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00
	272001	03	01	1-42680-3100	BEN		22.74	0	.00	0	.00	0			
	274001	03	01	1-42680-3100	BEN		22.74	0	7.58	0	.00	0			
	292001	02	01	1-42682-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00
	294001	02	01	1-42682-1320	LBR		4510.02	0	1702.26	0	.00	0	48.00	0	16.00
	292001	02	01	1-42682-3100	BEN		179.05	0	11.85	0	.00	0			
	294001	02	01	1-42682-3100	BEN		179.05	0	67.58	0	.00	0			
				LABOR TOTALS			10,166.08		2,191.64		.00		120.00		20.00
				BENEFIT TOTALS			403.58		87.01		.00				
GODINEZ, CHRISTY				1SM-1FAID											
327-46-1855	130161	00	01	1-41272-2170	LBR		52642.03	0	4386.83	0	.00	0	1956.54	0	163.04
	130161	00	01	1-41272-3100	BEN		20202.35	0	1683.53	0	.00	0			
	130161	00	01	2-11683-2170	LBR		864.47	0	.00	0	.00	0	32.87	0	.00
	130161	00	01	2-11683-3100	BEN		334.97	0	.00	0	.00	0			
	130161	00	01	2-11684-2170	LBR		2667.54	0	294.34	0	.00	0	98.59	0	10.96
	130161	00	01	2-11684-3100	BEN		1020.61	0	112.96	0	.00	0			
				LABOR TOTALS			56,174.04		4,681.17		.00		2,088.00		174.00
				BENEFIT TOTALS			21,557.93		1,796.49		.00				
GODLEY, JANE E				-											
555-62-8477	291006	03	01	1-42248-1430	LBR		526.72	0	.00	0	.00	0	12.00	0	.00
	291006	03	01	1-42248-3200	BEN		41.97	0	.00	0	.00	0			
	292001	02	01	1-42250-1320	LBR		1840.63	0	121.78	0	.00	0	24.00	0	.00
	292002	02	01	1-42250-1320	LBR		1844.77	0	122.05	0	.00	0	24.00	0	.00
	293001	02	01	1-42250-1320	LBR		1840.62	0	121.77	0	.00	0	24.00	0	.00

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	HOURS CURR-PERIOD DIRECT	CURR-PERIOD RLOC
GONZALEZ, ALBERT				-														
559-96-4870	192001	02	01	1-51505-1320	LBR		5704.77	0	260.19	0	.00	0	108.00	0	.00	0	.00	0
	193001	02	01	1-51505-1320	LBR		5191.21	0	1281.28	0	.00	0	108.10	0	21.62	0	.00	0
	192001	02	01	1-51505-3100	BEN		454.67	0	20.74	0	.00	0						
	193001	02	01	1-51505-3100	BEN		413.73	0	102.12	0	.00	0						
				LABOR TOTALS			10,895.98		1,541.47		.00		216.10		21.62		.00	
				BENEFIT TOTALS			868.40		122.86		.00							
GONZALEZ, AMELIA				-														
564-98-8866	191001	02	01	1-41616-1320	LBR		3991.66	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	192001	02	01	1-41616-1320	LBR		4400.17	0	291.13	0	.00	0	72.00	0	.00	0	.00	0
	193001	02	01	1-41616-1320	LBR		4400.16	0	291.12	0	.00	0	72.00	0	.00	0	.00	0
	194001	02	01	1-41616-1320	LBR		4400.16	0	1660.80	0	.00	0	72.00	0	24.00	0	.00	0
	194002	02	01	1-41616-1330	LBR		161.66	0	10.70	0	.00	0	3.00	0	.00	0	.00	0
	194003	02	01	1-41616-1330	LBR		226.32	0	226.32	0	.00	0	3.00	0	3.00	0	.00	0
	191001	02	01	1-41616-3100	BEN		487.78	0	.00	0	.00	0						
	192001	02	01	1-41616-3100	BEN		537.69	0	35.57	0	.00	0						
	193001	02	01	1-41616-3100	BEN		537.69	0	35.58	0	.00	0						
	194001	02	01	1-41616-3100	BEN		537.71	0	202.96	0	.00	0						
	194002	02	01	1-41616-3100	BEN		19.75	0	1.31	0	.00	0						
	194003	02	01	1-41616-3100	BEN		27.65	0	27.65	0	.00	0						
				LABOR TOTALS			17,580.13		2,480.07		.00		270.00		27.00		.00	
				BENEFIT TOTALS			2,148.27		303.07		.00							
GONZALEZ, ELENA M				-														
564-74-3197	192001	02	01	1-41654-1320	LBR		3044.28	0	201.42	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	1-41654-1320	LBR		3044.28	0	201.42	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41654-1320	LBR		3044.28	0	1149.04	0	.00	0	36.00	0	12.00	0	.00	0
	172001	03	01	1-41654-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		14.44	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		76.72	0	5.08	0	.00	0						
	193001	02	01	1-41654-3100	BEN		76.71	0	5.07	0	.00	0						
	194001	02	01	1-41654-3100	BEN		76.72	0	28.96	0	.00	0						
				LABOR TOTALS			9,705.88		1,551.88		.00		120.00		12.00		.00	
				BENEFIT TOTALS			244.59		39.11		.00							
GONZALEZ, IMELDA				4HA-4HURS														
551-43-4467	470012	00	01	1-44062-2170	LBR		65184.07	0	5586.04	0	.00	0	2088.00	0	174.00	0	.00	0
	470012	00	01	1-44062-3100	BEN		25709.41	0	2361.83	0	.00	0						
				LABOR TOTALS			65,184.07		5,586.04		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			25,709.41		2,361.83		.00							
GONZALEZ, ISMAEL				-														
573-50-3087	191001	03	01	1-41378-1430	LBR		3332.85	0	.00	0	.00	0	63.75	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ CURR-PERIOD DIRECT	HOURS MO-TO-DATE/ CURR-PERIOD RLOC
	192001	03	01	1-41378-1430	LBR		13733.01	0	.00	0	.00	0	255.00	0	.00	0
	193001	03	01	1-41378-1430	LBR		8031.00	0	.00	0	.00	0	150.00	0	.00	0
	193010	03	01	1-41378-1430	LBR		4283.20	0	.00	0	.00	0	80.00	0	.00	0
	194001	03	01	1-41378-1430	LBR		7897.16	0	.00	0	.00	0	147.50	0	.00	0
	191001	03	01	1-41378-3200	BEN		132.30	0	.00	0	.00	0				
	192001	03	01	1-41378-3200	BEN		545.19	0	.00	0	.00	0				
	193001	03	01	1-41378-3200	BEN		318.83	0	.00	0	.00	0				
	193010	03	01	1-41378-3200	BEN		170.05	0	.00	0	.00	0				
	194001	03	01	1-41378-3200	BEN		313.52	0	.00	0	.00	0				
				LABOR TOTALS			37,277.22		.00		.00		696.25		.00	
				BENEFIT TOTALS			1,479.89		.00		.00					
GONZALEZ, PETER ANTHONY																
559-15-2116	192001	02	01	1-51505-1320	LBR		5704.77	0	260.19	0	.00	0	108.00	0	.00	0
	193001	02	01	1-51505-1320	LBR		2915.21	0	646.62	0	.00	0	54.12	0	9.02	0
	193003	02	01	1-51505-1330	LBR		171.39	0	11.34	0	.00	0	3.00	0	.00	0
	192001	02	01	1-51505-3100	BEN		454.68	0	20.74	0	.00	0				
	193001	02	01	1-51505-3100	BEN		232.37	0	51.56	0	.00	0				
	193003	02	01	1-51505-3100	BEN		13.64	0	.89	0	.00	0				
				LABOR TOTALS			8,791.37		918.15		.00		165.12		9.02	
				BENEFIT TOTALS			700.69		73.19		.00					
GONZALEZ, VIOLET C				2BH-2OTI												
564-13-9711	280002	00	01	2-12249-2310	LBR		436.00	0	240.00	0	.00	0	54.50	0	30.00	0
	280002	00	01	2-12249-3200	BEN		8.15	0	4.49	0	.00	0				
	280001	00	01	2-12480-2310	LBR		260.00	0	.00	0	.00	0	32.50	0	.00	0
	280002	00	01	2-12480-2310	LBR		436.00	0	240.00	0	.00	0	54.50	0	30.00	0
	280001	00	01	2-12480-3200	BEN		4.86	0	.00	0	.00	0				
	280002	00	01	2-12480-3200	BEN		8.16	0	4.49	0	.00	0				
	280001	00	01	2-12640-2310	LBR		260.00	0	.00	0	.00	0	32.50	0	.00	0
	280001	00	01	2-12640-3200	BEN		4.86	0	.00	0	.00	0				
				LABOR TOTALS			1,392.00		480.00		.00		174.00		60.00	
				BENEFIT TOTALS			26.03		8.98		.00					
GOODMAN, JULIE SMITH				2LA-2RDNS												
557-76-1484	260002	00	01	1-42211-2350	LBR		499.30	499	.00	0	.00	0	.00	0	.00	0
	260003	00	01	1-42211-2350	LBR		189.95	189	.00	0	.00	0	.00	0	.00	0
	260005	00	01	1-42211-2350	LBR		1681.40	1681	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-42211-3200	BEN		50.79	50	.00	0	.00	0				
	260003	00	01	1-42211-3200	BEN		19.31	19	.00	0	.00	0				
	260005	00	01	1-42211-3200	BEN		171.00	171	.00	0	.00	0				
	234864	00	01	1-42212-2350	LBR		55.22	55	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-42212-2350	LBR		36.18	36	.00	0	.00	0	.00	0	.00	0
	234864	00	01	1-42212-2355	LBR		920.67	920	.00	0	.00	0	.00	0	.00	0
	234864	00	01	1-42212-3200	BEN		99.52	99	.00	0	.00	0				
	260001	00	01	1-42212-3200	BEN		2.76	2	.00	0	.00	0				

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT CD	ACCT NO	OBJ CODE	TYPE	RCD	FISCAL-TO-DATE AMOUNTS DIRECT	RLOC	MONTH-TO-DATE AMOUNTS DIRECT	RLOC	CURRENT-PERIOD AMOUNTS DIRECT	RLOC	FISC-TO-DATE HOURS DIRECT	RLOC	MO-TO-DATE HOURS DIRECT	RLOC		
					LABOR TOTALS				42,006.33		4,201.37		.00		1,771.64		174.00			
					BENEFIT TOTALS				22,974.26		2,062.21		.00							
GUDANETS, YAN					1IT-1NASA															
302-90-5027	280001	00	01	2-14520-2310			LBR		877.50	0	.00	0	.00	0	87.75	0	.00	0		
	280001	00	01	2-14520-3200			BEN		83.54	0	.00	0	.00	0						
					LABOR TOTALS				877.50		.00		.00		87.75		.00			
					BENEFIT TOTALS				83.54		.00		.00							
GUEVARA, ALFONSO C					2AC-2ECFR															
565-62-5046	230001	00	01	1-52026-2170			LBR		81557.52	0	6796.46	0	.00	0	2092.50	0	178.50	0		
	230001	00	01	1-52026-2360			LBR		234.36	0	.00	0	.00	0	4.00	0	.00	0		
	230001	00	01	1-52026-3100			BEN		31399.61	0	2662.55	0	.00	0						
	230001	00	01	1-52026-3200			BEN		17.69	0	.00	0	.00	0						
	230001	00	01	1-52239-2360			LBR		1376.87	0	1376.87	0	.00	0	23.00	0	23.00	0	.00	0
	230001	00	01	1-52239-3200			BEN		104.17	0	104.17	0	.00	0						
					LABOR TOTALS				83,168.75		8,173.33		.00		2,119.50		201.50		.00	
					BENEFIT TOTALS				31,521.47		2,766.72		.00							
GUEVARA, DAWNIS CATHERINE					2PE-2PE															
545-75-0017	250276	00	01	1-42702-1160			LBR		62596.60	0	6259.66	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42702-1320			LBR		1417.44	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	291002	02	01	1-42702-1320			LBR		4256.56	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	250276	00	01	1-42702-3100			BEN		18980.63	0	1909.12	0	.00	0						
	291001	02	01	1-42702-3100			BEN		122.79	9	.00	0	.00	0						
	291002	02	01	1-42702-3100			BEN		340.41	0	.00	0	.00	0						
	257712	00	01	1-42740-1160			LBR		6259.66	0	.00	0	.00	0	281.81	0	.00	0	.00	0
	257712	00	01	1-42740-3100			BEN		3708.26	0	.00	0	.00	0						
					LABOR TOTALS				74,530.26		6,259.66		.00		1,777.81		140.00		.00	
					BENEFIT TOTALS				23,152.09		1,909.12		.00							
GUEVARA, ERIKA C					2ST-2EOPS															
099-40-2064	230011	00	01	2-12664-2170			LBR		57161.86	0	4776.07	0	.00	0	2088.00	0	174.00	0	.00	0
	230011	00	01	2-12664-3100			BEN		26165.29	0	2183.11	0	.00	0						
					LABOR TOTALS				57,161.86		4,776.07		.00		2,088.00		174.00		.00	
					BENEFIT TOTALS				26,165.29		2,183.11		.00							
GUEVARA, JORGE					2IC-2IIS															
561-72-9513	250125	00	01	1-42682-1160			LBR		79662.80	0	7966.28	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42682-1320			LBR		5388.50	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42682-1320			LBR		5388.50	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42682-1320			LBR		4692.22	0	310.45	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42682-1320			LBR		4692.21	0	310.44	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42682-1320			LBR		4692.21	0	1771.03	0	.00	0	48.00	0	16.00	0	.00	0

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DATE RUN 07/20/05
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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE/ CURR-PERIOD HOURS DIRECT	MO-TO-DATE/ CURR-PERIOD HOURS RLOC	CURR-PERIOD HOURS
LABOR TOTALS							44,882.91		4,537.66		.00		2,134.63		200.25		
BENEFIT TOTALS							24,374.94		2,122.56		.00						
GURYEV, OLEG BORISOVICH	1LB-1TUTR																
617-25-3989	140004	00	01	1-44036-3100	BEN		3.93	3	.00	0	.00	0					
	140005	00	01	1-44036-3100	BEN		56.69	56	11.86	11	.00	0					
	140004	00	01	2-31111-2700	LBR		210.00	0	.00	0	.00	0	21.00	0	.00	0	
	140005	00	01	2-31111-2700	LBR		3031.52	0	123.63	0	.00	0	282.00	0	11.50	0	
	140005	00	01	2-31111-3100	BEN		.00	56-	9.55-	11-	.00	0					
LABOR TOTALS							3,241.52		123.63		.00		303.00		11.50		
BENEFIT TOTALS							60.62		2.31		.00						
GURYEVA, GANNA IVANOVNA	1BH-1D H																
617-25-9852	140005	00	01	1-44036-3100	BEN		55.43	55	.00	0	.00	0					
	140005	00	01	2-31111-2700	LBR		2964.00	0	.00	0	.00	0	247.00	0	.00	0	
	140005	00	01	2-31111-3100	BEN		.00	55-	.00	0	.00	0					
LABOR TOTALS							2,964.00		.00		.00		247.00		.00		
BENEFIT TOTALS							55.43		.00		.00						
GUSMAN, FRANCES ANN	1SM-1SM																
568-66-9917	110100	00	01	1-41067-1210	LBR		54892.33	227	4555.45	0	.00	0	1044.11	0	87.04	0	.00	0
	110100	00	01	1-41067-3100	BEN		14396.89	59	1194.79	0	.00	0						
	110100	00	01	1-41068-1210	LBR		49414.10	204	4100.76	0	.00	0	939.86	0	78.31	0	.00	0
	110100	00	01	1-41068-3100	BEN		12960.04	53	1075.52	0	.00	0						
	110100	00	01	2-11424-1210	LBR		4135.62	22	454.61	0	.00	0	78.00	0	8.65	0	.00	0
	110100	00	01	2-11424-3100	BEN		1082.06	5	119.24	0	.00	0						
	110100	00	01	2-11655-1210	LBR		887.84	0	.00	0	.00	0	17.34	0	.00	0	.00	0
	110100	00	01	2-11655-3100	BEN		235.68	0	.00	0	.00	0						
LABOR TOTALS							109,329.89		9,110.82		.00		2,079.31		174.00		.00	
BENEFIT TOTALS							28,674.67		2,389.55		.00							
GUSTAFSON, MARK RICHARD	2CA-2MUSI																
555-82-2434	260003	00	01	1-42622-2350	LBR		1301.16	0	123.92	0	.00	0	84.00	0	8.00	0	.00	0
	260003	00	01	1-42622-3200	BEN		132.36	0	12.61	0	.00	0						
LABOR TOTALS							1,301.16		123.92		.00		84.00		8.00		.00	
BENEFIT TOTALS							132.36		12.61		.00							
GUSTAFSON, MICHAEL LUTHER	-																
526-70-7659	192001	02	01	1-41765-1320	LBR		131.93-	0	.00	0	.00	0	.00	0	.00	0	.00	0
	192002	02	01	1-41765-1320	LBR		158.31-	0	.00	0	.00	0	.00	0	.00	0	.00	0
	192001	02	01	1-41765-3100	BEN		10.06-	0	.00	0	.00	0						
	192002	02	01	1-41765-3100	BEN		12.06-	0	.00	0	.00	0						
LABOR TOTALS							290.24-		.00		.00		.00		.00		.00	

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Dear Student Outreach

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	430497	00	01	2-84110-2360	LBR		35.04	0	35.04	0	.00	0	1.00	0	1.00	0	.00	0
	430497	00	01	2-84110-3200	BEN		2.68	0	2.68	0	.00	0						
LABOR TOTALS							47,918.26		4,134.30		.00		2,098.00		176.00		.00	
BENEFIT TOTALS							19,771.77		1,673.52		.00							
HAMILTON, LOIS E				2WF-20TI														
541-48-8357	232280	00	01	2-12239-2170	LBR		24965.46	4222	.00	0	.00	0	854.87	0	.00	0		0
	232280	00	01	2-12239-3100	BEN		12205.47	2072	.00	0	.00	0						
	232280	00	01	6-10585-2150	LBR		414.93	0	.00	0	.00	0	17.10	0	.00	0		0
	232280	00	01	6-10585-3100	BEN		198.37	0	.00	0	.00	0						
LABOR TOTALS							25,380.39		.00		.00		871.97		.00			
BENEFIT TOTALS							12,403.84		.00		.00							
HAMILTON, WEBSTER M																		
574-30-6221	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42656-1320	LBR		2508.38	0	.00	0	.00	0	36.00	0	.00	0		
	292001	02	01	1-42656-1320	LBR		2765.13	0	182.95	0	.00	0	36.00	0	.00	0		
	293001	02	01	1-42656-1320	LBR		2889.45	0	191.16	0	.00	0	36.00	0	.00	0		
	294001	02	01	1-42656-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0		
	294002	02	01	1-42656-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0		
	294010	02	01	1-42656-1320	LBR		247.56	0	16.38	0	.00	0	3.00	0	.00	0		
	272001	03	01	1-42656-1445	LBR		526.70	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42656-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42656-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42656-3100	BEN		64.37	0	.00	0	.00	0						
	273001	03	01	1-42656-3100	BEN		67.26	0	.00	0	.00	0						
	274001	03	01	1-42656-3100	BEN		67.26	0	22.42	0	.00	0						
	291001	02	01	1-42656-3100	BEN		306.53	0	.00	0	.00	0						
	292001	02	01	1-42656-3100	BEN		337.88	0	22.35	0	.00	0						
	293001	02	01	1-42656-3100	BEN		353.11	0	23.37	0	.00	0						
	294001	02	01	1-42656-3100	BEN		353.09	0	133.26	0	.00	0						
	294002	02	01	1-42656-3100	BEN		353.10	0	133.27	0	.00	0						
	294010	02	01	1-42656-3100	BEN		30.25	0	2.01	0	.00	0						
LABOR TOTALS							15,917.00		2,755.15		.00		221.00		28.00			
BENEFIT TOTALS							1,945.07		336.68		.00							
HAMILTON-KILILI, ASHER LY 1SM-1FAID																		
520-21-3408	132214	00	01	2-11683-2170	LBR		3826.92	0	.00	0	.00	0	174.00	0	.00	0		
	132214	00	01	2-11683-3100	BEN		1650.39	0	.00	0	.00	0						
	132214	00	01	6-10585-2150	LBR		1039.87	0	.00	0	.00	0	47.28	0	.00	0		
	132214	00	01	6-10585-3100	BEN		448.48	0	.00	0	.00	0						
LABOR TOTALS							4,866.79		.00		.00		221.28		.00			
BENEFIT TOTALS							2,098.87		.00		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
546-80-3253	130380	00	01	1-41306-2170		LBR	46551.03	0	4393.11	0	.00	0	1946.32	0	174.00	0	.00	0
	130380	00	01	1-41306-3100		BEN	23997.31	0	2108.78	0	.00	0						
				LABOR TOTALS			46,551.03		4,393.11		.00		1,946.32		174.00		.00	
				BENEFIT TOTALS			23,997.31		2,108.78		.00							
HARDING, MICHAEL J				-														
546-56-8745	292001	02	01	1-42764-1320		LBR	4327.07	0	286.28	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42764-1320		LBR	3163.77	0	209.31	0	.00	0	36.00	0	.00	0	.00	0
	293001	02	01	1-42764-1320		LBR	4327.08	0	286.29	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42764-1320		LBR	3163.77	0	209.31	0	.00	0	36.00	0	.00	0	.00	0
	272001	03	01	1-42764-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42764-3100		BEN	24.55	0	.00	0	.00	0						
	292001	02	01	1-42764-3100		BEN	171.79	0	11.36	0	.00	0						
	292002	02	01	1-42764-3100		BEN	125.58	0	8.31	0	.00	0						
	293001	02	01	1-42764-3100		BEN	171.81	0	11.37	0	.00	0						
	293002	02	01	1-42764-3100		BEN	125.61	0	8.31	0	.00	0						
	273001	03	01	1-42768-1445		LBR	618.36	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42768-3100		BEN	24.54	0	.00	0	.00	0						
				LABOR TOTALS			16,218.43		991.19		.00		192.00		.00		.00	
				BENEFIT TOTALS			643.88		39.35		.00							
HARGRAVE, GARY L				-														
549-78-5908	192001	02	01	1-51506-1320		LBR	6571.25	0	299.71	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320		LBR	6715.90	0	444.35	0	.00	0	108.00	0	.00	0	.00	0
	192001	02	01	1-51506-3100		BEN	507.29	0	23.14	0	.00	0						
	193001	02	01	1-51506-3100		BEN	518.47	0	34.30	0	.00	0						
				LABOR TOTALS			13,287.15		744.06		.00		216.12		.00		.00	
				BENEFIT TOTALS			1,025.76		57.44		.00							
HARGREAVES, AMBER THERESE				2AC-2BOOK														
622-22-0310	280001	00	01	1-48226-2310		LBR	762.75	0	.00	0	.00	0	113.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200		BEN	14.26	0	.00	0	.00	0						
				LABOR TOTALS			762.75		.00		.00		113.00		.00		.00	
				BENEFIT TOTALS			14.26		.00		.00							
HARRAL, KEVIN				2ST-2FNAI														
545-73-9861	232224	00	01	2-12681-2170		LBR	37269.62	0	4249.27	0	.00	0	1566.00	0	174.00	0	.00	0
	232224	00	01	2-12681-2360		LBR	2357.04	0	540.32	0	.00	0	206.25	0	14.75	0	.00	0
	232224	00	01	2-12681-3100		BEN	15193.09	0	1719.73	0	.00	0						
	232224	00	01	2-12681-3200		BEN	179.11	0	40.90	0	.00	0						
	232224	00	01	2-12684-2170		LBR	11690.76	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	232224	00	01	2-12684-2360		LBR	967.55	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	232224	00	01	2-12684-3100		BEN	4892.83	0	.00	0	.00	0						
	232224	00	01	2-12684-3200		BEN	5.13	0	.00	0	.00	0						

FA
Outreach Coordinator

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE / RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE / RLOC	HOURS MO-TO-DATE/ C DIRECT	HOURS MO-TO-DATE/ C RLOC	DI
LABOR TOTALS							51,384.61		4,789.59		.00		2,155.25		188.75		
BENEFIT TOTALS							20,270.16		1,760.63		.00						
HARRINGTON, SHERWOOD				2PS-2ASTR													
127-38-8638	250352	00	01	1-42768-1160	LBR		76644.10	0	7664.41	0	.00	0	1400.00	0	140.00	0	
	291001	02	01	1-42768-1320	LBR		5790.30	0	.00	0	.00	0	60.00	0	.00	0	
	292001	02	01	1-42768-1320	LBR		5010.61	0	331.50	0	.00	0	60.00	0	.00	0	
	292002	02	01	1-42768-1320	LBR		5010.61	0	331.50	0	.00	0	60.00	0	.00	0	
	292003	03	01	1-42768-1320	LBR		401.01	0	26.68	0	.00	0	4.83	0	.00	0	
	292004	03	01	1-42768-1320	LBR		401.01	0	26.68	0	.00	0	4.83	0	.00	0	
	293001	02	01	1-42768-1320	LBR		5010.65	0	331.52	0	.00	0	60.00	0	.00	0	
	293002	02	01	1-42768-1320	LBR		5010.66	0	331.53	0	.00	0	60.00	0	.00	0	
	293003	03	01	1-42768-1320	LBR		400.84	0	26.51	0	.00	0	4.80	0	.00	0	
	294001	02	01	1-42768-1320	LBR		5010.66	0	1891.24	0	.00	0	60.00	0	20.00	0	
	294002	02	01	1-42768-1320	LBR		6258.42	0	3139.00	0	.00	0	76.00	0	36.00	0	
	294003	03	01	1-42768-1320	LBR		400.84	0	400.84	0	.00	0	4.80	0	4.80	0	
	250352	00	01	1-42768-3100	BEN		22107.95	0	2353.47	0	.00	0					
	291001	02	01	1-42768-3100	BEN		715.56	19	.00	0	.00	0					
	292001	02	01	1-42768-3100	BEN		198.93	0	13.16	0	.00	0					
	292002	02	01	1-42768-3100	BEN		198.92	0	13.16	0	.00	0					
	292003	03	01	1-42768-3100	BEN		15.93	0	1.06	0	.00	0					
	292004	03	01	1-42768-3100	BEN		15.91	0	1.05	0	.00	0					
	293001	02	01	1-42768-3100	BEN		198.88	0	13.15	0	.00	0					
	293002	02	01	1-42768-3100	BEN		198.94	0	13.17	0	.00	0					
	293003	03	01	1-42768-3100	BEN		15.91	0	1.05	0	.00	0					
	294001	02	01	1-42768-3100	BEN		198.88	0	75.08	0	.00	0					
	294002	02	01	1-42768-3100	BEN		248.49	0	124.63	0	.00	0					
	294003	03	01	1-42768-3100	BEN		15.92	0	15.92	0	.00	0					
LABOR TOTALS							115,349.71		14,501.41		.00		1,855.26		200.80		.00
BENEFIT TOTALS							24,130.22		2,624.90		.00						
HARRIS, ACH'SAH ROLYNCA				1AA-1IEDR													
562-55-2320	130025	00	01	1-41150-2170	LBR		27046.27	0	3734.69	0	.00	0	1312.91	0	174.00	0	.00	0
	130025	00	01	1-41150-3100	BEN		11271.02	0	1592.56	0	.00	0					
LABOR TOTALS							27,046.27		3,734.69		.00		1,312.91		174.00		.00
BENEFIT TOTALS							11,271.02		1,592.56		.00						
HARRIS, HUMPHREY ANDREW				-													
562-11-9663	193002	02	01	1-41521-1320	LBR		2409.13	0	159.39	0	.00	0	54.05	0	.00	0	.00	0
	193002	02	01	1-41521-3100	BEN		192.05	0	12.71	0	.00	0					
	192001	02	01	1-51506-1320	LBR		5415.90	0	247.02	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5535.11	0	1227.71	0	.00	0	108.06	0	18.01	0	.00	0
	192001	02	01	1-51506-3100	BEN		431.67	0	19.69	0	.00	0					
	193001	02	01	1-51506-3100	BEN		441.14	0	97.84	0	.00	0					
LABOR TOTALS							13,360.14		1,634.12		.00		270.23		18.01		.00
BENEFIT TOTALS							1,064.86		130.24		.00						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 422
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC I
	274001	03	01	1-42662-3100	BEN		75.56	0	25.18	0	.00	0				
	293001	02	01	1-42662-3100	BEN		645.83	0	44.28	0	.00	0				
	293002	02	01	1-42662-3100	BEN		645.86	0	44.29	0	.00	0				
	294001	02	01	1-42662-3100	BEN		743.45	0	280.61	0	.00	0				
	294002	02	01	1-42662-3100	BEN		743.50	0	280.62	0	.00	0				
				LABOR TOTALS			24,358.06		5,523.64		.00		253.92		44.00	
				BENEFIT TOTALS			2,976.55		674.98		.00					
HENDERSON MCLEOD, JOYCE M 1SE-1SPED																
566-90-0864	134508	00	01	2-21231-2170	LBR		46535.89	0	4282.55	0	.00	0	1929.82	0	174.00	0
	134508	00	01	2-21231-3100	BEN		23628.73	0	2031.33	0	.00	0				
				LABOR TOTALS			46,535.89		4,282.55		.00		1,929.82		174.00	
				BENEFIT TOTALS			23,628.73		2,031.33		.00					
HENDERSON, APRIL COLONNA 1SM-1EOPS																
560-37-0773	130011	00	01	2-11668-2170	LBR		46708.60	0	4253.17	0	.00	0	1936.56	0	174.00	0
	130011	00	01	2-11668-3100	BEN		19550.06	0	1705.70	0	.00	0				
				LABOR TOTALS			46,708.60		4,253.17		.00		1,936.56		174.00	
				BENEFIT TOTALS			19,550.06		1,705.70		.00					
HENDERSON, BRUCE S 2LA-2RDNS																
422-56-6683	260003	00	01	1-42211-2350	LBR		296.30	296	.00	0	.00	0	.00	0	.00	0
	260003	00	01	1-42211-3200	BEN		11.77	11	.00	0	.00	0				
	250193	00	01	1-42223-1105	LBR		1750.00	0	.00	0	.00	0	.00	0	.00	0
	250193	00	01	1-42223-1160	LBR		77884.44	0	7788.44	0	.00	0	1225.00	0	122.50	0
	260003	00	01	1-42223-2350	LBR		231.89	296-	.00	0	.00	0	10.25	0	.00	0
	250193	00	01	1-42223-3100	BEN		16701.68	0	1648.02	0	.00	0				
	260003	00	01	1-42223-3200	BEN		9.21	11-	.00	0	.00	0				
	250193	00	01	1-42662-1105	LBR		250.00	0	.00	0	.00	0	.00	0	.00	0
	250193	00	01	1-42662-1160	LBR		11126.16	0	1112.62	0	.00	0	175.00	0	17.50	0
	250193	00	01	1-42662-3100	BEN		3992.95	0	235.43	0	.00	0				
				LABOR TOTALS			91,538.79		8,901.06		.00		1,410.25		140.00	
				BENEFIT TOTALS			20,715.61		1,883.45		.00					
HENDRICKSON, MARIBETH B 1SS-1PHIL																
555-64-3158	150195	00	01	1-41820-1105	LBR		4166.25	0	.00	0	.00	0	.00	0	.00	0
	150195	00	01	1-41820-1160	LBR		28130.70	0	2813.07	0	.00	0	1400.00	0	140.00	0
	150195	00	01	1-41820-3100	BEN		14385.19	0	1090.90	0	.00	0				
				LABOR TOTALS			32,296.95		2,813.07		.00		1,400.00		140.00	
				BENEFIT TOTALS			14,385.19		1,090.90		.00					
HENDRIX, VICTORIA LYNN 1FA-1FADV																
614-09-3602	160001	00	01	1-51618-2350	LBR		3463.38	1022-	332.28	0	.00	0	351.00	0	26.00	0	.00	0
	160001	00	01	1-51618-2360	LBR		629.44	0	9.59	0	.00	0	31.00	0	.50	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
FY=0

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC	HOURS D
				LABOR TOTALS			131,576.22		11,085.90		.00		2,091.00		174.00		
				BENEFIT TOTALS			34,720.26		3,109.19		.00						
HOCHSTRASER, ALEX L				2CO-2COUN													
548-80-7646	230612	00	01	1-42287-2170	LBR		26735.17	6546	1682.40	0	.00	0	759.27	0	63.27	0	
	230612	00	01	1-42287-2860	LBR		6.65	0	6.65	0	.00	0	25	0	.25	0	
	230612	00	01	1-42287-3100	BEN		11002.10	2701	1161.11	0	.00	0					
	230612	00	01	1-42287-3200	BEN		.67	0	.67	0	.00	0					
	230612	00	01	1-42300-2170	LBR		26490.05	6546-	.00	0	.00	0	1218.75	0	.00	0	
	230612	00	01	1-42300-3100	BEN		9931.01	2701-	.00	0	.00	0					
	230612	00	01	6-10585-2150	LBR		8142.81	0	8142.81	0	.00	0	306.24	0	306.24	0	
	230612	00	01	6-10585-3100	BEN		1719.75	0	1719.75	0	.00	0					
				LABOR TOTALS			61,374.68		9,831.86		.00		2,284.51		369.76		
				BENEFIT TOTALS			22,653.53		2,881.53		.00						
HODGES, ACACIA EVE				1IT-1NASA													
552-71-5475	180002	00	01	2-14520-2310	LBR		5747.50	0	.00	0	.00	0	574.75	0	.00	0	
	180002	00	01	2-14520-3200	BEN		327.79	0	.00	0	.00	0					
				LABOR TOTALS			5,747.50		.00		.00		574.75		.00		
				BENEFIT TOTALS			327.79		.00		.00						
HODGES, PAMELA				1LB-1LIB													
566-90-0442	130154	00	01	1-41306-2170	LBR		50142.63	0	4317.11	0	.00	0	2088.00	0	174.00	0	
	130154	00	01	1-41306-3100	BEN		24706.04	0	2092.66	0	.00	0					
				LABOR TOTALS			50,142.63		4,317.11		.00		2,088.00		174.00		
				BENEFIT TOTALS			24,706.04		2,092.66		.00						
HOEKENGA, DAVID MARTIN				-													
607-28-2318	192099	03	01	1-41263-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192099	03	01	1-41263-3200	BEN		7.72	0	.00	0	.00	0						
	192001	02	01	1-41662-1320	LBR		4498.71	0	297.65	0	.00	0	72.00	0	.00	0	.00	0
	172001	03	01	1-41662-1445	LBR		457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41662-3100	BEN		35.29	0	.00	0	.00	0						
	192001	02	01	1-41662-3100	BEN		347.31	0	22.98	0	.00	0						
	192002	02	01	1-41820-1320	LBR		3998.47	0	264.55	0	.00	0	60.00	0	.00	0	.00	0
	194001	02	01	1-41820-1320	LBR		3931.81	0	1442.53	0	.00	0	60.00	0	20.00	0	.00	0
	192002	02	01	1-41820-3100	BEN		308.66	0	20.41	0	.00	0						
	194001	02	01	1-41820-3100	BEN		303.53	0	111.37	0	.00	0						
	293001	02	01	1-42804-1320	LBR		3998.46	0	264.54	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42804-3100	BEN		308.66	0	20.43	0	.00	0						
				LABOR TOTALS			16,984.71		2,269.27		.00		254.00		20.00		.00	
				BENEFIT TOTALS			1,311.17		175.19		.00							
HOFBAUER, MICHAEL J				1AA-1PD													

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	E
	191002	02	01	1-41702-3100	BEN		395.38	0	.00	0	.00	0					
	192001	02	01	1-41702-3100	BEN		414.51	0	25.01	0	.00	0					
	192002	02	01	1-41702-3100	BEN		414.49	0	25.02	0	.00	0					
	192003	02	01	1-41702-3100	BEN		414.53	0	25.01	0	.00	0					
	193001	02	01	1-41702-3100	BEN		414.50	0	25.01	0	.00	0					
	193002	02	01	1-41702-3100	BEN		414.52	0	25.01	0	.00	0					
	193003	02	01	1-41702-3100	BEN		414.52	0	25.02	0	.00	0					
	194001	02	01	1-41702-3100	BEN		391.51	0	142.68	0	.00	0					
	194002	02	01	1-41702-3100	BEN		389.15	0	113.28	0	.00	0					
	194003	02	01	1-41702-3100	BEN		389.15	0	113.28	0	.00	0					
				LABOR TOTALS			65,930.82		6,522.14		.00		2,067.76		168.41		
				BENEFIT TOTALS			27,889.04		2,437.56		.00						
HUNTER, GAVIN ROBERT				1SP-1INTL													
609-47-5915	180001	00	01	1-51939-2310	LBR		3472.50	0	312.50	0	.00	0	347.25	0	31.25	0	
	180002	00	01	1-51939-2310	LBR		155.00	0	155.00	0	.00	0	15.50	0	15.50	0	
	180001	00	01	1-51939-3200	BEN		64.93	0	5.84	0	.00	0					
	180002	00	01	1-51939-3200	BEN		2.90	0	2.90	0	.00	0					
				LABOR TOTALS			3,627.50		467.50		.00		362.75		46.75		
				BENEFIT TOTALS			67.83		8.74		.00						
HUNTER, KAREN KAY				2ST-2FNAI													
572-57-3836	240001	00	01	1-44036-3100	BEN		110.61	110	12.44	12	.00	0					
	280001	00	01	2-12681-2310	LBR		1312.50	0	765.00	0	.00	0	131.25	0	76.50	0	
	280001	00	01	2-12681-3200	BEN		24.54	0	14.31	0	.00	0					
	240001	00	01	2-32111-2700	LBR		5915.00	0	.00	0	.00	0	591.50	0	.00	0	
	240001	00	01	2-32111-3100	BEN		.00	110-	12.44-	12-	.00	0					
				LABOR TOTALS			7,227.50		765.00		.00		722.75		76.50		.00
				BENEFIT TOTALS			135.15		14.31		.00						
HUNTER, TERRY A				-													
548-72-2207	192050	03	01	1-41411-1430	LBR		30.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192050	03	01	1-41411-3200	BEN		3.23	0	.00	0	.00	0					
	174001	03	01	1-41606-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41606-3100	BEN		59.28	0	19.76	0	.00	0					
	191001	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191002	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191003	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191004	02	01	1-41702-1320	LBR		2045.64	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	192001	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	192002	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	192003	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	193003	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41702-1320	LBR		2166.03	0	817.55	0	.00	0	36.00	0	12.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC		
	272001	03	01	1-42654-3100		BEN	48.90	0	.00	0	.00	0						
	273001	03	01	1-42654-3100		BEN	48.88	32	.00	0	.00	0						
	274001	03	01	1-42654-3100		BEN	48.89	0	16.30	0	.00	0						
	292001	02	01	1-42654-3100		BEN	256.66	0	16.99	0	.00	0						
	293002	02	01	1-42654-3100		BEN	256.67	0	16.97	0	.00	0						
	293003	02	01	1-42654-3100		BEN	43.97	0	2.90	0	.00	0						
	294001	02	01	1-42654-3100		BEN	256.71	0	96.90	0	.00	0						
	292002	03	01	1-42680-1430		LBR	150.23	0	.00	0	.00	0	3.75	0	.00	0		
	292002	03	01	1-42680-3200		BEN	15.29	0	.00	0	.00	0						
				LABOR TOTALS			9,696.67		1,475.44		.00		147.75		16.00			
				BENEFIT TOTALS			986.14		150.06		.00							
INDRAN, SANJIV				1LB-1TUTR														
602-45-2232	180001	00	01	1-41095-2410		LBR	82.50	82	82.50	82	.00	0	.00	0	.00	0		
	180001	00	01	1-41095-3200		BEN	1.54	1	1.54	1	.00	0						
	180001	00	01	1-41303-2410		LBR	463.50	82-	37.50-	82-	.00	0	79.00	0	6.00	0	.00	0
	180001	00	01	1-41303-3200		BEN	8.66	1-	.70-	1-	.00	0						
				LABOR TOTALS			546.00		45.00		.00		79.00		6.00		.00	
				BENEFIT TOTALS			10.20		.84		.00							
INGALLS, MELISSA H				2BH-2BHES														
567-88-2314	230122	00	01	1-42450-2170		LBR	60381.13	0	5064.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230122	00	01	1-42450-3100		BEN	26848.19	0	2244.25	0	.00	0						
				LABOR TOTALS			60,381.13		5,064.26		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			26,848.19		2,244.25		.00							
INGUITO, KEVIN SCOTT																		
573-49-8671	192050	03	01	1-41411-1430		LBR	30.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192050	03	01	1-41411-3200		BEN	2.38	0	.00	0	.00	0						
	173001	03	01	1-41622-1445		LBR	457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	173001	03	01	1-41622-3100		BEN	36.45	0	.00	0	.00	0						
	192001	02	01	1-41662-1320		LBR	4498.71	0	297.65	0	.00	0	60.00	0	.00	0	.00	0
	192002	02	01	1-41662-1320		LBR	4498.71	0	297.65	0	.00	0	60.00	0	.00	0	.00	0
	193001	02	01	1-41662-1320		LBR	4498.74	0	297.66	0	.00	0	60.00	0	.00	0	.00	0
	193002	02	01	1-41662-1320		LBR	3598.95	0	238.11	0	.00	0	48.00	0	.00	0	.00	0
	192003	02	01	1-41662-1330		LBR	411.31	0	27.21	0	.00	0	6.00	0	.00	0	.00	0
	193003	02	01	1-41662-1330		LBR	205.67	0	13.61	0	.00	0	3.00	0	.00	0	.00	0
	172001	03	01	1-41662-1445		LBR	457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41662-3100		BEN	36.43	0	.00	0	.00	0						
	192001	02	01	1-41662-3100		BEN	358.57	0	23.73	0	.00	0						
	192002	02	01	1-41662-3100		BEN	358.56	0	23.71	0	.00	0						
	192003	02	01	1-41662-3100		BEN	32.78	0	2.17	0	.00	0						
	193001	02	01	1-41662-3100		BEN	358.57	0	23.74	0	.00	0						
	193002	02	01	1-41662-3100		BEN	286.82	0	18.97	0	.00	0						
	193003	02	01	1-41662-3100		BEN	16.38	0	1.08	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	RLOC	HOURS: FISC-TO-DATE DIRECT	RLOC	HOURS: MO-TO-DATE/ DIRECT	RLOC	HOURS: CURR-PERIOD DIRECT	RLOC
LABOR TOTALS							93,150.40		8,440.04		.00		1,400.00		140.00		.00	
BENEFIT TOTALS							25,822.60		2,236.98		.00							
JOSUE SNELLEN, MARIANO AR				2AC-2BOOK														
608-09-4331	280001	00	01	1-48226-2310	LBR		131.63	0	.00	0	.00	0	19.50	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		12.53	0	.00	0	.00	0						
LABOR TOTALS							131.63		.00		.00		19.50		.00		.00	
BENEFIT TOTALS							12.53		.00		.00							
JUAREZ, RICHARD JOHN				-														
549-17-8702	192001	02	01	1-51506-1320	LBR		5704.77	0	260.19	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5830.35	0	385.75	0	.00	0	108.10	0	.00	0	.00	0
	192001	02	01	1-51506-3100	BEN		454.68	0	20.74	0	.00	0						
	193001	02	01	1-51506-3100	BEN		464.69	0	30.75	0	.00	0						
LABOR TOTALS							11,535.12		645.94		.00		216.22		.00		.00	
BENEFIT TOTALS							919.37		51.49		.00							
JUDGE, NAVROOP S				1IT-1NASA														
611-26-0500	280001	00	01	2-14520-2310	LBR		2790.00	0	1075.00	0	.00	0	279.00	0	107.50	0	.00	0
	280001	00	01	2-14520-3200	BEN		52.17	0	20.10	0	.00	0						
LABOR TOTALS							2,790.00		1,075.00		.00		279.00		107.50		.00	
BENEFIT TOTALS							52.17		20.10		.00							
JUDKINS, STAN L				4ET-4TSC2														
564-64-1516	430601	00	01	1-42200-2170	LBR		84585.62	0	7048.76	0	.00	0	2088.00	0	174.00	0	.00	0
	430601	00	01	1-42200-2360	LBR		18.10	0	.00	0	.00	0	.00	0	.00	0	.00	0
	430601	00	01	1-42200-3100	BEN		32029.64	0	2665.20	0	.00	0						
	430601	00	01	1-42200-3200	BEN		3.63	0	.00	0	.00	0						
	430601	00	01	7-64305-2360	LBR		1318.01	0	.00	0	.00	0	22.00	0	.00	0	.00	0
	430601	00	01	7-64305-3200	BEN		99.64	0	.00	0	.00	0						
LABOR TOTALS							85,921.73		7,048.76		.00		2,110.00		174.00		.00	
BENEFIT TOTALS							32,132.91		2,665.20		.00							
JULIEN, SCHNEIDER TONY				1PE-1PEDV														
595-44-6748	180001	00	01	1-41745-2310	LBR		2020.00	0	.00	0	.00	0	202.00	0	.00	0	.00	0
	180001	00	01	1-41745-3200	BEN		37.77	0	.00	0	.00	0						
LABOR TOTALS							2,020.00		.00		.00		202.00		.00		.00	
BENEFIT TOTALS							37.77		.00		.00							
JUNG, HENRY				1GU-1ADMR														
564-29-8270	130058	00	01	1-41287-2170	LBR		43181.69	0	3686.14	0	.00	0	2112.00	0	174.00	0	.00	0
	130058	00	01	1-41287-3100	BEN		18801.91	0	1585.42	0	.00	0						

A&R Day Supervisor

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC		
				LABOR TOTALS			43,181.69		3,686.14		.00		2,112.00		174.00			
				BENEFIT TOTALS			18,801.91		1,585.42		.00							
JURICH, JOSEPH J																		
568-06-2911	192001	02	01	1-51506-1320		LBR	6277.94	0	286.34	0	.00	0	108.12	0	.00	0		
	193001	02	01	1-51506-1320		LBR	6416.10	0	424.50	0	.00	0	108.00	0	.00	0		
	192001	02	01	1-51506-3100		BEN	500.30	0	22.81	0	.00	0						
	193001	02	01	1-51506-3100		BEN	511.37	0	33.84	0	.00	0						
				LABOR TOTALS			12,694.04		710.84		.00		216.12		.00			
				BENEFIT TOTALS			1,011.67		56.65		.00							
JUSUFAGIC, ARMINA				1PE-1PEDV														
626-94-8896	180003	00	01	1-41215-2310		LBR	30.00	0	.00	0	.00	0	3.00	0	.00	0		
	180003	00	01	1-41215-3200		BEN	.56	0	.00	0	.00	0						
	180002	00	01	1-41745-2310		LBR	270.00	0	.00	0	.00	0	27.00	0	.00	0	.00	0
	180002	00	01	1-41745-3200		BEN	5.05	0	.00	0	.00	0						
				LABOR TOTALS			300.00		.00		.00		30.00		.00		.00	
				BENEFIT TOTALS			5.61		.00		.00							
JWO, STEPHANIE CHING				2CB-2OLDA														
604-12-1850	260001	00	01	1-52363-2350		LBR	511.00	0	.00	0	.00	0	50.00	0	.00	0	.00	0
	260001	00	01	1-52363-3200		BEN	51.98	0	.00	0	.00	0						
				LABOR TOTALS			511.00		.00		.00		50.00		.00		.00	
				BENEFIT TOTALS			51.98		.00		.00							
KABAHIT, JEANNIE LEE				1IT-1NASA														
466-93-1699	280001	00	01	2-14520-2310		LBR	9422.00	0	.00	0	.00	0	935.00	0	.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	176.20	0	.00	0	.00	0						
				LABOR TOTALS			9,422.00		.00		.00		935.00		.00		.00	
				BENEFIT TOTALS			176.20		.00		.00							
KADEBA, MYRIAM TAMOUHAN				1GU-1ADMR														
610-37-7480	180001	00	01	1-41287-2310		LBR	3100.00	1856-	580.00	0	.00	0	619.50	0	72.50	0	.00	0
	180002	00	01	1-41287-2310		LBR	128.00	0	128.00	0	.00	0	16.00	0	16.00	0	.00	0
	180001	00	01	1-41287-3200		BEN	57.97	34-	10.85	0	.00	0						
	180002	00	01	1-41287-3200		BEN	2.39	0	2.39	0	.00	0						
	180001	00	01	2-51285-2310		LBR	1856.00	1856	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-51285-3200		BEN	34.70	34	.00	0	.00	0						
				LABOR TOTALS			5,084.00		708.00		.00		635.50		88.50		.00	
				BENEFIT TOTALS			95.06		13.24		.00							
KAHALI, NEGAR				2LA-2LART														
157-08-4606	280001	00	01	1-48410-2310		LBR	330.00	0	.00	0	.00	0	41.25	0	.00	0	.00	0
	280001	00	01	1-48410-3200		BEN	6.18	0	.00	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	C DI
	293003	03	01	1-42248-1430	LBR		716.72	0	.00	0	.00	0	20.01	0	.00	0	
	291007	00	01	1-42248-3200	BEN		70.02	0	.00	0	.00	0					
	292051	03	01	1-42248-3200	BEN		247.88	0	.00	0	.00	0					
	293003	03	01	1-42248-3200	BEN		87.62	0	.00	0	.00	0					
	292001	03	01	2-12664-1430	LBR		7210.16	0	.00	0	.00	0	150.99	0	.00	0	
	293002	03	01	2-12664-1430	LBR		9072.03	0	.00	0	.00	0	189.99	0	.00	0	
	294001	03	01	2-12664-1430	LBR		10027.50	0	3342.50	0	.00	0	210.00	0	70.00	0	
	292001	03	01	2-12664-3200	BEN		881.09	0	.00	0	.00	0					
	293002	03	01	2-12664-3200	BEN		1108.57	0	.00	0	.00	0					
	294001	03	01	2-12664-3200	BEN		1225.36	0	408.46	0	.00	0					
				LABOR TOTALS			29,627.98		3,342.50		.00		625.47		70.00		
				BENEFIT TOTALS			3,620.54		408.46		.00						
KALAHASTI, USHA SUNDARI																	
643-60-0162	292001	02	01	1-42654-1320	LBR		4605.77	0	304.73	0	.00	0	60.00	0	.00	0	
	293001	02	01	1-42654-1320	LBR		4605.78	0	304.74	0	.00	0	60.00	0	.00	0	
	293002	02	01	1-42654-1320	LBR		4605.78	0	304.74	0	.00	0	60.00	0	.00	0	
	294001	02	01	1-42654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0	
	294002	02	01	1-42654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0	
	273001	03	01	1-42654-1445	LBR		526.68	351	.00	0	.00	0	4.00	0	.00	0	
	274001	03	01	1-42654-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.00	0	
	273001	03	01	1-42654-3100	BEN		53.55	35	.00	0	.00	0					
	274001	03	01	1-42654-3100	BEN		53.56	0	17.85	0	.00	0					
	292001	02	01	1-42654-3100	BEN		468.40	0	30.99	0	.00	0					
	293001	02	01	1-42654-3100	BEN		468.40	0	30.99	0	.00	0					
	293002	02	01	1-42654-3100	BEN		468.43	0	31.00	0	.00	0					
	294001	02	01	1-42654-3100	BEN		468.40	0	176.80	0	.00	0					
	294002	02	01	1-42654-3100	BEN		468.42	0	176.80	0	.00	0					
				LABOR TOTALS			24,082.25		4,566.61		.00		316.00		44.00		
				BENEFIT TOTALS			2,449.16		464.43		.00						
KALIANGARA, ARACELI				1SM-1FAID													
564-25-6326	130155	00	01	1-41272-2170	LBR		10543.29	0	1013.16	0	.00	0	407.11	0	37.73	0	
	130155	00	01	1-41272-3100	BEN		4404.83	0	421.59	0	.00	0					
	130072	00	01	1-41287-2170	LBR		3196.17	0	663.86	0	.00	0	112.35	0	24.51	0	
	130072	00	01	1-41287-3100	BEN		1529.37	0	276.24	0	.00	0					
	230107	00	01	1-42287-2170	LBR		26244.56	0	2192.65	0	.00	0	1044.00	0	87.00	0	
	230107	00	01	1-42287-3100	BEN		12065.85	0	912.33	0	.00	0					
	130155	00	01	2-11683-2170	LBR		433.62	0	.00	0	.00	0	16.79	0	.00	0	
	130155	00	01	2-11683-3100	BEN		171.76	0	.00	0	.00	0					
	130155	00	01	2-11684-2170	LBR		289.75	0	69.54	0	.00	0	10.00	0	2.60	0	
	230107	00	01	2-11684-2350	LBR		[illegible]	0	.00	0	.00	0	[illegible]	0	.00	0	
	130155	00	01	2-11684-3100	BEN		130.37	0	28.93	0	.00	0					
	230107	00	01	2-11684-3200	BEN		14.19	0	.00	0	.00	0					
				LABOR TOTALS			40,892.82		3,939.21		.00		1,597.25		151.84		
				BENEFIT TOTALS			18,316.37		1,639.09		.00						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	D
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	
	291003	03	01	1-42760-1330	LBR		191.76	0	.00	0	.00	0	2.50	0	.00	0	
	291001	02	01	1-42760-3100	BEN		666.95	0	.00	0	.00	0					
	291002	02	01	1-42760-3100	BEN		666.95	0	.00	0	.00	0					
	291003	03	01	1-42760-3100	BEN		23.44	0	.00	0	.00	0					
	294001	02	01	1-42760-3100	BEN		637.02	0	240.44	0	.00	0					
				LABOR TOTALS			16,320.64		1,967.62		.00		182.50		20.00		
				BENEFIT TOTALS			1,994.36		240.44		.00						
LAWTON, JONATHAN ADAM				1IT-1NASA													
614-30-2207	180001	00	01	2-14520-2310	LBR		4647.50	0	912.50	0	.00	0	464.75	0	91.25	0	
	180001	00	01	2-14520-3200	BEN		86.90	0	17.06	0	.00	0					
				LABOR TOTALS			4,647.50		912.50		.00		464.75		91.25		
				BENEFIT TOTALS			86.90		17.06		.00						
LAZAR, ALEXIAS NICADEMUS				2CO-2STAR													
551-67-5294	280001	00	01	2-12681-2310	LBR		820.00	0	.00	0	.00	0	82.00	0	.00	0	
	280001	00	01	2-12681-3200	BEN		15.34	0	.00	0	.00	0					
				LABOR TOTALS			820.00		.00		.00		82.00		.00		.00
				BENEFIT TOTALS			15.34		.00		.00						
LAZO, LEONARDO				2ST-2ADMI													
551-91-2895	240001	00	01	1-44036-3100	BEN		59.84	59	.00	0	.00	0					
	280001	00	01	2-12681-2310	LBR		2126.25	0	770.00	0	.00	0	243.00	0	88.00	0	.00 0
	280001	00	01	2-12681-3200	BEN		39.76	0	14.40	0	.00	0					
	240001	00	01	2-32111-2700	LBR		3200.00	0	.00	0	.00	0	400.00	0	.00	0	.00 0
	240001	00	01	2-32111-3100	BEN		.00	59-	.00	0	.00	0					
				LABOR TOTALS			5,326.25		770.00		.00		643.00		88.00		.00
				BENEFIT TOTALS			99.60		14.40		.00						
LE, CHUONG HUY				2ST-2EOPS													
609-34-9022	230162	00	01	1-42378-2170	LBR		12623.46	1616	2697.03	1616	.00	0	458.33	0	43.50	0	.00 0
	230162	00	01	1-42378-3100	BEN		6208.41	795	1319.40	795	.00	0					
	230162	00	01	2-12664-2170	LBR		37870.42	1616-	1626.82	1616-	.00	0	1629.67	0	130.50	0	.00 0
	230162	00	01	2-12664-3100	BEN		18625.29	795-	774.69	795-	.00	0					
				LABOR TOTALS			50,493.88		4,323.85		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			24,833.70		2,094.09		.00						
LE, GIOI THI				2CO-2CCTR													
602-36-5161	230392	00	01	1-42260-2170	LBR		57074.85	0	4762.07	0	.00	0	2100.00	0	174.00	0	.00 0
	230392	00	01	1-42260-3100	BEN		26229.64	0	2187.04	0	.00	0					
				LABOR TOTALS			57,074.85		4,762.07		.00		2,100.00		174.00		.00
				BENEFIT TOTALS			26,229.64		2,187.04		.00						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ CURR-PERIOD DIRECT	MO-TO-DATE/ CURR-PERIOD RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
LABOR TOTALS							7,747.10		1,077.80		.00		493.00		68.00		.00	
BENEFIT TOTALS							787.87		109.61		.00							
LIND, CHERRYL ANN				1IT-1NASA														
495-44-6398	280001	00	01	2-14520-2310		LBR	5807.50	0	.00	0	.00	0	580.75	0	.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	108.60	0	.00	0	.00	0						
LABOR TOTALS							5,807.50		.00		.00		580.75		.00		.00	
BENEFIT TOTALS							108.60		.00		.00							
LINDAUER, CHARLES M				1CB-1CTIS														
060-34-4540	110006	00	01	1-41501-1210		LBR	113826.99	4326-	9846.13	0	.00	0	1988.44	0	165.71	0	.00	0
	110006	00	01	1-41501-3100		BEN	27804.52	1057-	2430.31	0	.00	0						
	110006	00	01	1-41753-1210		LBR	10234.52	0	492.33	0	.00	0	174.09	0	8.29	0	.00	0
	110006	00	01	1-41753-3100		BEN	2500.24	0	121.53	0	.00	0						
LABOR TOTALS							124,061.51		10,338.46		.00		2,162.53		174.00		.00	
BENEFIT TOTALS							30,304.76		2,551.84		.00							
LINDBERG, LOIS HELEN				-														
457-30-6161	292001	02	01	1-42452-1320		LBR	4633.70	0	306.58	0	.00	0	72.00	0	.00	0	.00	0
	291010	03	01	1-42452-1430		LBR	1317.08	0	.00	0	.00	0	24.60	0	.00	0	.00	0
	292001	03	01	1-42452-1430		LBR	3045.52	0	.00	0	.00	0	59.10	0	.00	0	.00	0
	272001	03	01	1-42452-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42452-3100		BEN	24.55	0	.00	0	.00	0						
	292001	02	01	1-42452-3100		BEN	183.98	0	12.17	0	.00	0						
	291010	03	01	1-42452-3200		BEN	52.28	0	.00	0	.00	0						
	292001	03	01	1-42452-3200		BEN	120.89	0	.00	0	.00	0						
LABOR TOTALS							9,614.68		306.58		.00		167.70		.00		.00	
BENEFIT TOTALS							381.70		12.17		.00							
LINDENBAUM, EUGENE NATHAN				-														
273-44-2491	292001	02	01	1-42824-1320		LBR	4867.33	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42824-1320		LBR	4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42824-3100		BEN	387.95	0	25.67	0	.00	0						
	293001	02	01	1-42824-3100		BEN	387.91	0	25.66	0	.00	0						
LABOR TOTALS							9,734.65		644.05		.00		96.00		.00		.00	
BENEFIT TOTALS							775.86		51.33		.00							
LINDKE, WILLIAM JOHN				1GU-1ADMR														
072-38-8586	120098	00	01	1-41287-2170		LBR	62830.07	0	.00	0	.00	0	1750.50	0	.00	0	.00	0
	120098	00	01	1-41287-2860		LBR	100198	0	.00	0	.00	0	2278	0	.00	0	.00	0
	120098	00	01	1-41287-3100		BEN	24336.06	0	.00	0	.00	0						
	120098	00	01	1-41287-3200		BEN	16.17	0	.00	0	.00	0						
	120098	00	01	6-10585-2150		LBR	4044.22	0	.00	0	.00	0	112.00	0	.00	0	.00	0
	120098	00	01	6-10585-3100		BEN	1152.06	0	.00	0	.00	0						

Alex. Supervisor

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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				LABOR TOTALS			66,974.67		.00		.00		1,865.28		.00	
				BENEFIT TOTALS			25,504.29		.00		.00					
LINDORES, COLIN MACKAY																
550-58-7451	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		10.17	0	.00	0	.00	0				
	292001	02	01	1-42702-1320	LBR		1442.57	0	95.45	0	.00	0	24.00	0	.00	0
	292002	02	01	1-42702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0
	293001	02	01	1-42702-1320	LBR		4332.03	0	286.62	0	.00	0	72.00	0	.00	0
	294001	02	01	1-42702-1320	LBR		4332.03	0	1635.09	0	.00	0	72.00	0	24.00	0
	291001	02	01	1-42702-1330	LBR		330.21	0	.00	0	.00	0	6.00	0	.00	0
	272001	03	01	1-42702-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0
	274001	03	01	1-42702-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0
	272001	03	01	1-42702-3100	BEN		55.98	0	.00	0	.00	0				
	274001	03	01	1-42702-3100	BEN		55.98	0	18.66	0	.00	0				
	291001	02	01	1-42702-3100	BEN		33.60	0	.00	0	.00	0				
	292001	02	01	1-42702-3100	BEN		146.67	0	9.70	0	.00	0				
	292002	02	01	1-42702-3100	BEN		220.31	0	14.59	0	.00	0				
	293001	02	01	1-42702-3100	BEN		440.60	0	29.15	0	.00	0				
	294001	02	01	1-42702-3100	BEN		440.56	0	166.28	0	.00	0				
				LABOR TOTALS			13,803.76		2,343.96		.00		236.00		28.00	
				BENEFIT TOTALS			1,403.87		238.38		.00					
LINDSEY, JILL ANN				2AC-2BOOK												
558-04-1693	260002	00	01	1-48226-2350	LBR		280.00	0	.00	0	.00	0	35.00	0	.00	0
	260002	00	01	1-48226-3200	BEN		28.48	0	.00	0	.00	0				
				LABOR TOTALS			280.00		.00		.00		35.00		.00	
				BENEFIT TOTALS			28.48		.00		.00					
LINDSTROM, THOMAS E				4OR-4MASV												
552-60-2688	430555	00	01	1-44059-2170	LBR		73499.69	0	6149.97	0	.00	0	2088.00	0	174.00	0
	430555	00	01	1-44059-3100	BEN		25232.93	0	2108.05	0	.00	0				
				LABOR TOTALS			73,499.69		6,149.97		.00		2,088.00		174.00	
				BENEFIT TOTALS			25,232.93		2,108.05		.00					
LINER, THOMAS SCOTT				1PE-1H P												
566-91-4680	150257	00	01	1-41702-1160	LBR		34090.00	0	3409.01	0	.00	0	793.12	0	79.32	0
	191001	02	01	1-41702-1320	LBR		2207.08	0	.00	0	.00	0	36.00	0	.00	0
	191002	02	01	1-41702-1320	LBR		2207.08	0	.00	0	.00	0	36.00	0	.00	0
	191003	02	01	1-41702-1320	LBR		2207.08	240-	.00	0	.00	0	36.00	0	.00	0
	191004	02	01	1-41702-1320	LBR		4853.39	375-	.00	0	.00	0	72.00	0	.00	0
	191005	02	01	1-41702-1320	LBR		2124.50	0	.00	0	.00	0	36.00	0	.00	0
	192001	02	01	1-41702-1320	LBR		2171.53	2033-	143.32	0	.00	0	72.00	0	.00	0
	192002	02	01	1-41702-1320	LBR		3.26-	3-	.00	0	.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320	LBR		2251.04	0	143.31	0	.00	0	36.00	0	.00	0

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	234887	00	01	1-42212-3200	BEN		78.33	78	.00	0	.00	0					
	260001	00	01	1-42212-3200	BEN		48.05	48	.00	0	.00	0					
	260002	00	01	1-42212-3200	BEN		12.71	12	.00	0	.00	0					
	234887	00	01	1-42224-2350	LBR		.00	168-	.00	0	.00	0	9.50	0	.00	0	.
	260001	00	01	1-42224-2350	LBR		.00	472-	.00	0	.00	0	30.50	0	.00	0	.
	260002	00	01	1-42224-2350	LBR		.00	143-	.00	0	.00	0	4.00	0	.00	0	.
	234887	00	01	1-42224-2355	LBR		.00	583-	.00	0	.00	0	32.95	0	.00	0	.
	234887	00	01	1-42224-3200	BEN		.00	41-	.00	0	.00	0					
	260001	00	01	1-42224-3200	BEN		.00	48-	.00	0	.00	0					
	260002	00	01	1-42224-3200	BEN		.00	12-	.00	0	.00	0					
				LABOR TOTALS			1,367.67		.00		.00		76.95		.00		.
				BENEFIT TOTALS			139.09		.00		.00						
NAKAYAMA, CINDY J				2ST-2ADMI													
569-13-5755	230048	00	01	1-42287-2170	LBR		22973.64	0	1945.65	0	.00	0	1044.00	0	87.00	0	.
	230048	00	01	1-42287-3100	BEN		18348.06	0	1535.62	0	.00	0					
				LABOR TOTALS			22,973.64		1,945.65		.00		1,044.00		87.00		.
				BENEFIT TOTALS			18,348.06		1,535.62		.00						
NAKOLINNA, JAN CHRISTIAN				1SP-1ISAD													
608-39-2707	180003	00	01	1-41300-2310	LBR		1457.50	1457	.00	0	.00	0	.00	0	.00	0	.
	180003	00	01	1-41300-3200	BEN		27.26	27	.00	0	.00	0					
	180003	00	01	1-51939-2310	LBR		505.00	1457-	.00	0	.00	0	196.25	0	.00	0	.
	180003	00	01	1-51939-3200	BEN		9.45	27-	.00	0	.00	0					
				LABOR TOTALS			1,962.50		.00		.00		196.25		.00		.
				BENEFIT TOTALS			36.71		.00		.00						
NARANJO-ALCARAZ, ED TRINI				4SS-4DSS1													
559-87-0339	280001	00	01	1-44358-2310	LBR		620.00	0	516.00	0	.00	0	77.50	0	64.50	0	.
	280001	00	01	1-44358-3200	BEN		11.59	0	9.65	0	.00	0					
				LABOR TOTALS			620.00		516.00		.00		77.50		64.50		.
				BENEFIT TOTALS			11.59		9.65		.00						
NARIMANI, CHRIS MAJID				2ST-2CLIF													
612-47-3362	280001	00	01	1-48406-2310	LBR		64.00	0	.00	0	.00	0	8.00	0	.00	0	.
	280001	00	01	1-48406-3200	BEN		1.20	0	.00	0	.00	0					
				LABOR TOTALS			64.00		.00		.00		8.00		.00		.
				BENEFIT TOTALS			1.20		.00		.00						
NATSU, HIROSHI				1SA-1ACTV													
612-43-3108	180001	00	01	1-48121-2310	LBR		2338.88	0	506.25	0	.00	0	346.50	0	75.00	0	.
	180001	00	01	1-48121-3200	BEN		43.74	0	9.47	0	.00	0					
				LABOR TOTALS			2,338.88		506.25		.00		346.50		75.00		.

A&P Asst.

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	280002	00	01	2-12919-3200	BEN		11.23	0	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		1209.95	0	.00	0	.00	0	179.25	0	.00	0		
	240001	00	01	2-32111-3100	BEN		.00	58-	.00	0	.00	0						
				LABOR TOTALS			2,116.71		58.00		.00		306.50		7.25			
				BENEFIT TOTALS			75.72		1.08		.00							
NGUYEN, HA VAN				2AC-2CMPS														
555-61-7923	230379	00	01	1-48228-2180	LBR		36170.57	0	3318.08	0	.00	0	1929.82	0	174.00	0		
	230379	00	01	1-48228-2360	LBR		3318.85	0	128.72	0	.00	0	114.00	0	4.50	0		
	230379	00	01	1-48228-3100	BEN		21549.09	0	1831.39	0	.00	0						
	230379	00	01	1-48228-3200	BEN		254.64	0	9.85	0	.00	0						
				LABOR TOTALS			39,489.42		3,446.80		.00		2,043.82		178.50			
				BENEFIT TOTALS			21,803.73		1,841.24		.00							
NGUYEN, HAN THI NGOC				2LS-2LIB														
602-29-9759	240001	00	01	1-44036-3100	BEN		65.08	65	14.45	14	.00	0						
	240001	00	01	2-32111-2700	LBR		3480.00	0	202.50	0	.00	0	464.00	0	27.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	65-	10.66-	14-	.00	0						
				LABOR TOTALS			3,480.00		202.50		.00		464.00		27.00		.00	
				BENEFIT TOTALS			65.08		3.79		.00							
NGUYEN, HANH THI HONG				2AC-2BOOK														
617-35-2220	280001	00	01	1-48226-2310	LBR		148.50	0	.00	0	.00	0	22.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.78	0	.00	0	.00	0						
				LABOR TOTALS			148.50		.00		.00		22.00		.00		.00	
				BENEFIT TOTALS			2.78		.00		.00							
NGUYEN, HENRY CONG				2AB-2CASH														
605-52-4144	230151	00	01	1-42149-2170	LBR		48977.97	0	4158.33	0	.00	0	2108.25	0	176.25	0	.00	0
	230151	00	01	1-42149-2360	LBR		1772.93	0	955.65	0	.00	0	67.25	0	40.00	0	.00	0
	230151	00	01	1-42149-3100	BEN		24473.66	0	1991.96	0	.00	0						
	230151	00	01	1-42149-3200	BEN		237.98	0	174.50	0	.00	0						
				LABOR TOTALS			50,750.90		5,113.98		.00		2,175.50		216.25		.00	
				BENEFIT TOTALS			24,711.64		2,166.46		.00							
NGUYEN, HIEN MY				1GU-1ADMR														
611-13-9410	130220	00	01	1-41054-2170	LBR		8662.74	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	130220	00	01	1-41054-3100	BEN		4336.22	0	.00	0	.00	0						
	230024	00	01	1-42218-2220	LBR		25072.09	0	.00	0	.00	0	1321.09	0	.00	0	.00	0
	230024	00	01	1-42218-2360	LBR		219.91	0	.00	0	.00	0	11.00	0	.00	0	.00	0
	230024	00	01	1-42218-3100	BEN		13332.93	0	.00	0	.00	0						
	230024	00	01	1-42218-3200	BEN		39.02	0	.00	0	.00	0						
	230024	00	01	6-10585-2150	LBR		277.49	0	.00	0	.00	0	13.88	0	.00	0	.00	0
	230024	00	01	6-10585-3100	BEN		209.37	0	.00	0	.00	0						

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				LABOR TOTALS				34,232.23		.00		.00		1,867.97		.00		
				BENEFIT TOTALS				17,917.54		.00		.00						
NGUYEN, HIEU TRUNG				4AN-4ACC														
024-82-4843	430025	00	01	1-42805-2170	LBR			651.34	0	421.46	0	.00	0	26.89	0	17.40	0	
	430025	00	01	1-42805-3100	BEN			320.04	0	207.10	0	.00	0					
	430025	00	01	1-44040-2170	LBR			651.34	0	421.46	0	.00	0	34.39	0	24.90	0	
	430059	00	01	1-44040-2170	LBR			40839.66	0	.00	0	.00	0	1806.30	0	.00	0	
	430025	00	01	1-44040-3100	BEN			320.04	0	207.08	0	.00	0					
	430059	00	01	1-44040-3100	BEN			20117.85	0	.00	0	.00	0					
	430025	00	01	1-48126-2170	LBR			781.67	0	505.81	0	.00	0	32.26	0	20.88	0	
	430025	00	01	1-48126-3100	BEN			384.10	0	248.54	0	.00	0					
	430025	00	01	1-48224-2170	LBR			390.88	0	252.87	0	.00	0	16.17	0	10.44	0	
	430025	00	01	1-48224-3100	BEN			192.06	0	124.24	0	.00	0					
	430025	00	01	1-48226-2170	LBR			977.01	0	632.19	0	.00	0	40.33	0	26.10	0	
	430025	00	01	1-48226-3100	BEN			480.09	0	310.64	0	.00	0					
	430025	00	01	1-48228-2170	LBR			130.26	0	84.29	0	.00	0	5.37	0	3.48	0	
	430025	00	01	1-48228-3100	BEN			64.01	0	41.43	0	.00	0					
	430025	00	01	1-48351-2170	LBR			977.01	0	632.19	0	.00	0	40.33	0	26.10	0	
	430025	00	01	1-48351-3100	BEN			480.02	0	310.62	0	.00	0					
	430025	00	01	1-48500-2170	LBR			1954.05	0	1264.39	0	.00	0	80.67	0	52.20	0	
	430025	00	01	1-48500-3100	BEN			960.18	0	621.28	0	.00	0					
	430059	00	01	2-14610-2170	LBR			3026.97	0	.00	0	.00	0	125.67	0	.00	0	
	430059	00	01	2-14610-3100	BEN			1491.16	0	.00	0	.00	0					
				LABOR TOTALS				50,380.19		4,214.66		.00		2,208.38		181.50		
				BENEFIT TOTALS				24,809.55		2,070.93		.00						
NGUYEN, HOANG M				-														
549-77-6368	291001	02	01	1-42503-1320	LBR			5133.42	0	.00	0	.00	0	72.00	0	.00	0	
	292001	02	01	1-42503-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0	
	293001	02	01	1-42503-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0	
	294005	02	01	1-42503-1320	LBR			343.61	0	22.73	0	.00	0	4.00	0	.00	0	
	272001	03	01	1-42503-1445	LBR			573.04	0	.00	0	.00	0	12.00	0	.00	0	
	273001	03	01	1-42503-1445	LBR			573.00	0	.00	0	.00	0	12.00	0	.00	0	
	272001	03	01	1-42503-3100	BEN			45.67	0	.00	0	.00	0					
	273001	03	01	1-42503-3100	BEN			45.66	0	.00	0	.00	0					
	291001	02	01	1-42503-3100	BEN			409.13	0	.00	0	.00	0					
	292001	02	01	1-42503-3100	BEN			319.56	0	21.15	0	.00	0					
	293001	02	01	1-42503-3100	BEN			319.53	0	21.13	0	.00	0					
	294005	02	01	1-42503-3100	BEN			27.39	0	1.82	0	.00	0					
				LABOR TOTALS				14,641.89		553.25		.00		196.00		.00		
				BENEFIT TOTALS				1,166.94		44.10		.00						
NGUYEN, HUNG DUY				2LA-2TUTR														
624-37-9502	280002	00	01	1-42220-2410	LBR			446.25	1515-77-	1069.69-	1515-77-	.00	0	224.25	0	51.00	0	
	280002	00	01	1-42220-3200	BEN			8.34		68.70-		.00	0					

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 739
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
NGUYEN, JENNIFER D				2AB-2ACTV														
566-67-1675	230285	00	01	1-42150-2170	LBR		14467.84	0	1205.64	0	.00	0	522.06	0	43.51	0		
	230285	00	01	1-42150-3100	BEN		6599.79	0	549.97	0	.00	0						
	230285	00	01	1-48409-2170	LBR		43402.09	0	3616.85	0	.00	0	1565.94	0	130.49	0		
	230285	00	01	1-48409-3100	BEN		19798.49	0	1649.90	0	.00	0						
				LABOR TOTALS			57,869.93		4,822.49		.00		2,088.00		174.00			
				BENEFIT TOTALS			26,398.28		2,199.87		.00							
NGUYEN, JOANNA VICTORIA				2AC-2BOOK														
626-92-7310	280001	00	01	1-48226-2310	LBR		933.19	0	.00	0	.00	0	138.25	0	.00	0		
	280001	00	01	1-48226-3200	BEN		35.39	0	.00	0	.00	0						
				LABOR TOTALS			933.19		.00		.00		138.25		.00			
				BENEFIT TOTALS			35.39		.00		.00							
NGUYEN, JOHN PAUL NHAN DU				4CN-4CHAN														
150-88-8202	180001	00	01	1-44010-2310	LBR		1432.50	0	670.00	0	.00	0	143.25	0	67.00	0		
	180001	00	01	1-44010-3200	BEN		26.79	0	12.53	0	.00	0						
	140001	00	01	1-44036-3100	BEN		44.95	44	.00	0	.00	0						
	140001	00	01	2-31111-2700	LBR		2404.00	0	.00	0	.00	0	300.50	0	.00	0		
	140001	00	01	2-31111-3100	BEN		.00	44-	.00	0	.00	0						
				LABOR TOTALS			3,836.50		670.00		.00		443.75		67.00			
				BENEFIT TOTALS			71.74		12.53		.00							
NGUYEN, KATHLEEN LICH				2AC-2BOOK														
618-66-9537	280001	00	01	1-48226-2310	LBR		642.94	0	.00	0	.00	0	95.25	0	.00	0		
	280001	00	01	1-48226-3200	BEN		23.63	0	.00	0	.00	0						
				LABOR TOTALS			642.94		.00		.00		95.25		.00			
				BENEFIT TOTALS			23.63		.00		.00							
NGUYEN, KHANH BAO				2ST-2FNAI														
617-58-0285	240001	00	01	1-44036-3100	BEN		60.95	60	11.46	11	.00	0						
	240001	00	01	2-32111-2700	LBR		3259.95	0	193.50	0	.00	0	303.25	0	18.00	0	.00	
	240001	00	01	2-32111-3100	BEN		.00	60-	7.84-	11-	.00	0						
				LABOR TOTALS			3,259.95		193.50		.00		303.25		18.00		.00	
				BENEFIT TOTALS			60.95		3.62		.00							
NGUYEN, KHANH TRUC				2LS-2LIB														
606-80-2972	280001	00	01	2-12919-2310	LBR		1863.75	0	228.75	0	.00	0	248.50	0	30.50	0	.00	0
	280001	00	01	2-12919-3200	BEN		34.87	0	4.28	0	.00	0						
				LABOR TOTALS			1,863.75		228.75		.00		248.50		30.50		.00	
				BENEFIT TOTALS			34.87		4.28		.00							
NGUYEN, KHANH TUONG				2AC-2CMPS														

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	I
607-49-8797	280001	00	01	1-48224-2310	LBR		632.82	0	.00	0	.00	0	93.75	0	.00	0	
	280001	00	01	1-48224-3200	BEN		11.83	0	.00	0	.00	0					
				LABOR TOTALS			632.82		.00		.00		93.75		.00		
				BENEFIT TOTALS			11.83		.00		.00						
NGUYEN, KIM HONG T				2LS-2LIB													
623-21-3916	240001	00	01	1-44036-3100	BEN		47.43	47	8.35	8	.00	0					
	240001	00	01	2-32111-2700	LBR		2535.00	0	150.00	0	.00	0	338.00	0	20.00	0	.00
	240001	00	01	2-32111-3100	BEN		.00	47-	5.54-	8-	.00	0					
				LABOR TOTALS			2,535.00		150.00		.00		338.00		20.00		.00
				BENEFIT TOTALS			47.43		2.81		.00						
NGUYEN, KIM LOAN THI				-													
586-36-4735	194001	02	01	1-41754-1320	LBR		7242.36	0	2733.56	0	.00	0	108.00	0	36.00	0	.00
	194002	02	01	1-41754-1320	LBR		4477.23	0	1689.89	0	.00	0	72.00	0	24.00	0	.00
	194001	02	01	1-41754-3100	BEN		885.02	0	334.05	0	.00	0					
	194002	02	01	1-41754-3100	BEN		547.11	0	206.49	0	.00	0					
				LABOR TOTALS			11,719.59		4,423.45		.00		180.00		60.00		.00
				BENEFIT TOTALS			1,432.13		540.54		.00						
NGUYEN, LESLIE KHANH				2CO-2MATR													
560-77-1806	230448	00	01	1-42245-2170	LBR		19615.01	0	1634.59	0	.00	0	835.20	0	69.60	0	.00
	230448	00	01	1-42245-3100	BEN		8017.67	0	668.14	0	.00	0					
	230448	00	01	1-42248-2170	LBR		3677.59	0	306.46	0	.00	0	156.48	0	13.04	0	.00
	230448	00	01	1-42248-3100	BEN		1503.23	0	125.27	0	.00	0					
	230448	00	01	2-12650-2170	LBR		25745.59	0	2145.46	0	.00	0	1096.32	0	91.36	0	.00
	230448	00	01	2-12650-3100	BEN		10523.29	0	876.94	0	.00	0					
				LABOR TOTALS			49,038.19		4,086.51		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			20,044.19		1,670.35		.00						
NGUYEN, LONG DUONG				2BH-2OTI													
551-87-9892	280001	00	01	1-48405-2310	LBR		253.00	0	92.00	0	.00	0	31.62	0	11.50	0	.00
	280001	00	01	1-48405-3200	BEN		4.73	0	1.72	0	.00	0					
	280001	00	01	2-12480-2310	LBR		253.00	0	92.00	0	.00	0	31.63	0	11.50	0	.00
	280001	00	01	2-12480-3200	BEN		4.73	0	1.72	0	.00	0					
				LABOR TOTALS			506.00		184.00		.00		63.25		23.00		.00
				BENEFIT TOTALS			9.46		3.44		.00						
NGUYEN, MARTA TROYANO				2LA-2TUTR													
603-35-7869	280003	00	01	1-42220-2410	LBR		752.44	0	203.44	0	.00	0	86.25	0	23.25	0	.00
	280003	00	01	1-42220-3200	BEN		15.90	0	3.80	0	.00	0					
	280003	00	01	1-48407-2410	LBR		821.87	0	.00	0	.00	0	97.25	0	.00	0	.00
	280003	00	01	1-48407-3200	BEN		15.36	0	.00	0	.00	0					
	280001	00	01	2-12919-2310	LBR		4862.88	0	702.00	0	.00	0	633.75	0	87.75	0	.00

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/31/2005

REPORT PROGRA FY=0

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	D
	280002	00	01	2-12681-3200	BEN		48.25	0	7.33	0	.00	0					
				LABOR TOTALS			2,580.00		392.00		.00		322.50		49.00		
				BENEFIT TOTALS			48.25		7.33		.00						
NGUYEN, THANH NHAN HUU				2AB-2CASH													
614-92-4809	240001	00	01	2-32111-2700	LBR		2512.50	0	.00	0	.00	0	251.25	0	.00	0	
				LABOR TOTALS			2,512.50		.00		.00		251.25		.00		
				BENEFIT TOTALS			.00		.00		.00						
NGUYEN, THAO NGUYEN TRAN				2AB-2CASH													
622-90-4472	280001	00	01	1-42149-2310	LBR		1982.50	0	475.00	0	.00	0	198.25	0	47.50	0	
	280001	00	01	1-42149-3200	BEN		37.07	0	8.88	0	.00	0					
	240002	00	01	1-44036-3100	BEN		65.91	65	.00	0	.00	0					
	240002	00	01	2-32111-2700	LBR		3525.00	0	.00	0	.00	0	352.50	0	.00	0	
	240002	00	01	2-32111-3100	BEN		.00	65-	.00	0	.00	0					
				LABOR TOTALS			5,507.50		475.00		.00		550.75		47.50		
				BENEFIT TOTALS			102.98		8.88		.00						
NGUYEN, THU HANG THI				2ST-2FNAI													
605-86-7257	240001	00	01	1-44036-3100	BEN		9.31	9	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		497.50	0	.00	0	.00	0	49.75	0	.00	0	
	240001	00	01	2-32111-3100	BEN		.00	9-	.00	0	.00	0					
				LABOR TOTALS			497.50		.00		.00		49.75		.00		
				BENEFIT TOTALS			9.31		.00		.00						
NGUYEN, THU NGOC				2AB-2CASH													
613-80-1314	280001	00	01	1-42149-2310	LBR		330.00	0	.00	0	.00	0	33.00	0	.00	0	.00 0
	280001	00	01	1-42149-3200	BEN		6.17	0	.00	0	.00	0					
	240001	00	01	1-44036-3100	BEN		18.98	18	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		1015.00	0	.00	0	.00	0	101.50	0	.00	0	.00 0
				LABOR TOTALS			1,345.00		.00		.00		134.50		.00		.00
				BENEFIT TOTALS			25.15		.00		.00						
NGUYEN, THU TRANG THI				2LS-2LIB													
605-86-7470	240002	00	01	1-44036-3100	BEN		9.33	9	.00	0	.00	0					
	240002	00	01	2-32111-2700	LBR		498.76	0	.00	0	.00	0	57.00	0	.00	0	.00 0
	240002	00	01	2-32111-3100	BEN		.00	9-	.00	0	.00	0					
				LABOR TOTALS			498.76		.00		.00		57.00		.00		.00
				BENEFIT TOTALS			9.33		.00		.00						
NGUYEN, THUY B				2AC-2OFCS													
622-37-8645	280001	00	01	1-42158-2310	LBR		2664.38	0	385.00	0	.00	0	304.50	0	44.00	0	.00 0
	280001	00	01	1-42158-3200	BEN		49.83	0	7.20	0	.00	0					

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC
562-95-9430	260001	00	01	1-52363-2350	LBR		2390.00	0	1130.00	0	.00	0	58.50	0	27.00	0
	260001	00	01	1-52363-3200	BEN		243.07	0	114.93	0	.00	0				
				LABOR TOTALS			2,390.00		1,130.00		.00		58.50		27.00	
				BENEFIT TOTALS			243.07		114.93		.00					
OLLER, PAUL DALE				-												
310-48-4596	193001	02	01	1-51505-1320	LBR		2767.56	0	183.10	0	.00	0	54.00	0	.00	0
	194001	02	01	1-51505-1320	LBR		2629.18	0	1035.44	0	.00	0	54.00	0	18.00	0
	193001	02	01	1-51505-3100	BEN		213.65	0	14.14	0	.00	0				
	194001	02	01	1-51505-3100	BEN		202.98	0	79.94	0	.00	0				
				LABOR TOTALS			5,396.74		1,218.54		.00		108.00		18.00	
				BENEFIT TOTALS			416.63		94.08		.00					
OLSEN, LYNN G				1GU-1ADMR												
549-62-7127	120130	00	01	1-41287-2170	LBR		15564.89	0	.00	0	.00	0	1028.87	0	.00	0
	120130	00	01	1-41287-2360	LBR		7.86	0	.00	0	.00	0	.25	0	.00	0
	120130	00	01	1-41287-3100	BEN		11903.95	0	.00	0	.00	0				
	120130	00	01	1-41287-3200	BEN		1.43	0	.00	0	.00	0				
	120130	00	01	6-10585-2150	LBR		437.79	0	.00	0	.00	0	13.93	0	.00	0
	120130	00	01	6-10585-3100	BEN		176.80	0	.00	0	.00	0				
				LABOR TOTALS			16,010.54		.00		.00		1,043.05		.00	
				BENEFIT TOTALS			12,082.18		.00		.00					
OLSEN, MARQUINNA H				1GU-1CNSL												
518-40-1779	153322	00	01	1-41248-1260	LBR		10192.87	0	.00	0	.00	0	783.00	0	.00	0
	153322	00	01	1-41248-3100	BEN		41.80	0	.00	0	.00	0				
	153322	00	01	2-11268-1260	LBR		.00	1132-	1132.57-	1132-	.00	0	87.00	0	.00	0
	153322	00	01	2-11268-3100	BEN		.00	3-	3.80-	3-	.00	0				
	153322	00	01	2-11425-1260	LBR		1132.57	1132	1132.57	1132	.00	0	.00	0	.00	0
	153322	00	01	2-11425-3100	BEN		3.80	3	3.80	3	.00	0				
				LABOR TOTALS			11,325.44		.00		.00		870.00		.00	
				BENEFIT TOTALS			45.60		.00		.00					
OLSEN, NANCY H				-												
524-38-7578	293010	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	294005	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	293010	03	01	1-42021-3200	BEN		12.22	0	.00	0	.00	0				
	294005	03	01	1-42021-3200	BEN		12.22	0	.00	0	.00	0				
	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0				
	292003	02	01	1-42682-1320	LBR		4867.33	0	322.03	0	.00	0	48.00	0	.00	0
	293003	02	01	1-42682-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0
	292003	02	01	1-42682-3100	BEN		594.79	0	39.36	0	.00	0				
	293003	02	01	1-42682-3100	BEN		594.80	0	39.35	0	.00	0				
	292004	03	01	1-42804-1430	LBR		100.50	0	.00	0	.00	0	2.01	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DAT DIRECT	RLO
	194001	02	01	1-41452-3100	BEN		146.66	0	55.36	0	.00	0				
	194002	02	01	1-41452-3100	BEN		259.69	0	98.01	0	.00	0				
	194003	02	01	1-41452-3100	BEN		146.67	0	55.35	0	.00	0				
	194004	02	01	1-41452-3100	BEN		146.62	0	55.34	0	.00	0				
	194005	02	01	1-41452-3100	BEN		26.13	0	26.13	0	.00	0				
				LABOR TOTALS			29,287.31		4,741.43		.00		474.00		62.00	
				BENEFIT TOTALS			2,260.98		366.03		.00					
OWENS-SANDERS, KENDRA				2CA-2CART												
570-86-8472	230070	00	01	1-42600-2170	LBR		24687.64	0	.00	0	.00	0	1233.13	0	.00	0
	230070	00	01	1-42600-3100	BEN		15088.08	0	.00	0	.00	0				
	230070	00	01	6-10585-2150	LBR		350.01	0	.00	0	.00	0	17.10	0	.00	0
	230070	00	01	6-10585-3100	BEN		738.93	0	.00	0	.00	0				
				LABOR TOTALS			25,037.65		.00		.00		1,250.23		.00	
				BENEFIT TOTALS			15,827.01		.00		.00					
OWIESNY, CHERYL L				2PE-2PE												
566-59-3983	250134	00	01	1-42702-1160	LBR		67458.30	0	6745.83	0	.00	0	1400.00	0	140.00	0
	291001	02	01	1-42702-1320	LBR		2293.58	0	.00	0	.00	0	36.00	0	.00	0
	291002	02	01	1-42702-1320	LBR		1146.78	0	.00	0	.00	0	18.00	0	.00	0
	250134	00	01	1-42702-3100	BEN		19902.11	0	2022.62	0	.00	0				
	291001	02	01	1-42702-3100	BEN		189.14	5	.00	0	.00	0				
	291002	02	01	1-42702-3100	BEN		91.72	0	.00	0	.00	0				
	257720	00	01	1-42742-1160	LBR		8432.28	0	.00	0	.00	0	281.81	0	.00	0
	257720	00	01	1-42742-3100	BEN		3895.38	0	.00	0	.00	0				
	260001	00	01	1-48412-2350	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48412-3200	BEN		79.11	0	.00	0	.00	0				
				LABOR TOTALS			81,330.94		6,745.83		.00		1,735.81		140.00	
				BENEFIT TOTALS			24,157.46		2,022.62		.00					
OZANNE, JEANETTE L				2LA-2TUTR												
613-03-1478	280001	00	01	1-42221-2410	LBR		60.00	0	.00	0	.00	0	6.00	0	.00	0
	280001	00	01	1-42221-3200	BEN		1.12	0	.00	0	.00	0				
				LABOR TOTALS			60.00		.00		.00		6.00		.00	
				BENEFIT TOTALS			1.12		.00		.00					
PABROS, ANGELITA M				2ST-2ADMI												
457-39-2232	230219	00	01	1-42287-2170	LBR		49390.76	0	4179.27	0	.00	0	2088.00	0	174.00	0
	230219	00	01	1-42287-3100	BEN		24467.86	0	2047.34	0	.00	0				
				LABOR TOTALS			49,390.76		4,179.27		.00		2,088.00		174.00	
				BENEFIT TOTALS			24,467.86		2,047.34		.00					
PACCIORETTI, MICHAEL				4SS-4DSS2												
568-80-4169	430008	00	01	1-42240-2360	LBR		255.52	0	.00	0	.00	0	5.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ TYPE CODE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC		
PAPE, MARY P				-														
563-78-4446	294001	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294002	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294003	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294001	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	294002	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	294003	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	250086	00	01	1-42503-1160	LBR		79242.81	0	7924.28	0	.00	0	1400.00	0	140.00	0		
	250086	00	01	1-42503-3100	BEN		23220.81	0	2070.01	0	.00	0						
				LABOR TOTALS			79,542.81		7,924.28		.00		1,406.00		140.00			
				BENEFIT TOTALS			23,257.47		2,070.01		.00							
PAPIRI, NICHOLAS ROBERT				1IT-1NASA														
609-20-6071	280001	00	01	2-14520-2310	LBR		8860.00	0	255.00	0	.00	0	886.00	0	25.50	0	.00	0
	280001	00	01	2-14520-3200	BEN		379.88	0	4.77	0	.00	0						
				LABOR TOTALS			8,860.00		255.00		.00		886.00		25.50		.00	
				BENEFIT TOTALS			379.88		4.77		.00							
PARAMITA, PRISILIA				2LA-2TUTR														
620-43-0139	280002	00	01	1-42220-2410	LBR		288.75	691-	402.50-	691-	.00	0	112.00	0	33.00	0	.00	0
	280002	00	01	1-42220-3200	BEN		5.40	12-	7.53-	12-	.00	0						
	280001	00	01	1-48226-2310	LBR		114.75	0	.00	0	.00	0	17.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.14	0	.00	0	.00	0						
	280002	00	01	1-48407-2410	LBR		3306.76	691	691.25	691	.00	0	309.50	0	.00	0	.00	0
	280002	00	01	1-48407-3200	BEN		61.85	12	12.93	12	.00	0						
				LABOR TOTALS			3,710.26		288.75		.00		438.50		33.00		.00	
				BENEFIT TOTALS			69.39		5.40		.00							
PARAMONOVA, EMILY LAY				-														
577-60-9737	194001	02	01	1-41660-1320	LBR		4812.88	0	1816.57	0	.00	0	48.00	0	16.00	0	.00	0
	194001	02	01	1-41660-3100	BEN		383.61	0	144.79	0	.00	0						
				LABOR TOTALS			4,812.88		1,816.57		.00		48.00		16.00		.00	
				BENEFIT TOTALS			383.61		144.79		.00							
PARDO, INES C				1SM-1EOPS														
559-84-8697	130125	00	01	1-41067-2170	LBR		4556.67	0	379.74	0	.00	0	141.86	0	11.83	0	.00	0
	130125	00	01	1-41067-3100	BEN		1927.18	0	160.61	0	.00	0						
	130125	00	01	1-41378-2170	LBR		28950.94	0	2412.55	0	.00	0	902.14	0	75.17	0	.00	0
	130125	00	01	1-41378-3100	BEN		12242.13	0	1020.17	0	.00	0						
	130125	00	01	2-11668-2170	LBR		33507.30	0	2792.29	0	.00	0	1044.00	0	87.00	0	.00	0
	130125	00	01	2-11668-3100	BEN		14168.79	0	1180.74	0	.00	0						
				LABOR TOTALS			67,014.91		5,584.58		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			28,338.10		2,361.52		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC		
				BENEFIT TOTALS			1,271.75		77.97		.00							
PELOIAN, JOYCE E				-														
552-50-4685	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		2.52	0	.00	0	.00	0						
	292001	02	01	1-42760-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	292002	02	01	1-42760-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	293001	02	01	1-42760-1320	LBR		5407.62	0	357.78	0	.00	0	60.00	0	.00	0		
	294001	02	01	1-42760-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	294002	02	01	1-42760-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	272001	03	01	1-42760-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42760-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42760-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42760-3100	BEN		15.58	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		15.57	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		15.57	0	5.19	0	.00	0						
	292001	02	01	1-42760-3100	BEN		136.27	0	9.02	0	.00	0						
	292002	02	01	1-42760-3100	BEN		136.29	0	9.01	0	.00	0						
	293001	02	01	1-42760-3100	BEN		136.29	0	9.03	0	.00	0						
	294001	02	01	1-42760-3100	BEN		136.26	0	51.42	0	.00	0						
	294002	02	01	1-42760-3100	BEN		136.28	0	51.44	0	.00	0						
				LABOR TOTALS			28,993.18		5,361.56		.00		338.00		44.00		.00	
				BENEFIT TOTALS			730.63		135.11		.00							
PELZEL, ROBERT E				1FA-1RAD														
561-88-3121	150230	00	01	1-41633-1105	LBR		5000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150230	00	01	1-41633-1160	LBR		79242.80	0	7924.28	0	.00	0	1400.00	0	140.00	0	.00	0
	191001	02	01	1-41633-1320	LBR		4278.48	0	.00	0	.00	0	84.00	0	.00	0	.00	0
	191002	02	01	1-41633-1320	LBR		4278.48	0	.00	0	.00	0	84.00	0	.00	0	.00	0
	191003	02	01	1-41633-1320	LBR		4399.59	0	.00	0	.00	0	96.00	0	.00	0	.00	0
	150230	00	01	1-41633-3100	BEN		20611.58	0	1798.80	0	.00	0						
	191001	02	01	1-41633-3100	BEN		428.29	28	.00	0	.00	0						
	191002	02	01	1-41633-3100	BEN		399.65	0	.00	0	.00	0						
	191003	02	01	1-41633-3100	BEN		410.94	0	.00	0	.00	0						
				LABOR TOTALS			97,199.35		7,924.28		.00		1,664.00		140.00		.00	
				BENEFIT TOTALS			21,850.46		1,798.80		.00							
PENA-FERRICK, JOAN				2ST-2ADMI														
558-04-4241	230242	00	01	1-42287-2170	LBR		53433.51	0	4465.29	0	.00	0	2103.00	0	174.00	0	.00	0
	230242	00	01	1-42287-3100	BEN		20671.46	0	1725.27	0	.00	0						
				LABOR TOTALS			53,433.51		4,465.29		.00		2,103.00		174.00		.00	
				BENEFIT TOTALS			20,671.46		1,725.27		.00							
PENG, QUAN YING				2AB-2CASH														
546-55-4597	260005	00	01	1-42149-2350	LBR		11871.36	0	1868.64	0	.00	0	864.00	0	136.00	0	.00	0
	260005	00	01	1-42149-2360	LBR		772.88	0	.00	0	.00	0	37.50	0	.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CU DIF	
	280001	00	01	1-48407-3200	BEN		2.70	0	.00	0	.00	0						
				LABOR TOTALS			146.19		2.19		.00		18.25		.25			
				BENEFIT TOTALS			2.74		.04		.00							
PEREZ, ANNETTE				4OR-4MASV														
563-39-0194	430169	00	01	1-44059-2170	LBR		17391.43	0	1455.14	0	.00	0	521.93	0	43.50	0	.00	0
	430169	00	01	1-44059-3100	BEN		6099.47	0	509.53	0	.00	0						
	430169	00	01	7-65501-2170	LBR		52175.49	0	4365.44	0	.00	0	1566.07	0	130.50	0	.00	0
	430169	00	01	7-65501-3100	BEN		18299.29	0	1528.64	0	.00	0						
				LABOR TOTALS			69,566.92		5,820.58		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			24,398.76		2,038.17		.00							
PEREZ, DEBBIE CAMPOS				2LA-2LART														
563-45-9928	280001	00	01	1-52003-2310	LBR		2607.38	0	.00	0	.00	0	204.50	0	.00	0	.00	0
	280001	00	01	1-52003-3200	BEN		162.78	0	.00	0	.00	0						
				LABOR TOTALS			2,607.38		.00		.00		204.50		.00		.00	
				BENEFIT TOTALS			162.78		.00		.00							
PEREZ, DENISE M KORN				1AA-1IEDR														
554-59-9392	130025	00	01	1-41150-2170	LBR		10576.54	0	.00	0	.00	0	348.00	0	.00	0	.00	0
	130177	00	01	1-41150-2170	LBR		56897.72	0	5689.77	0	.00	0	1746.75	0	174.00	0	.00	0
	130025	00	01	1-41150-3100	BEN		4528.36	0	.00	0	.00	0						
	130177	00	01	1-41150-3100	BEN		23259.22	0	2329.83	0	.00	0						
				LABOR TOTALS			67,474.26		5,689.77		.00		2,094.75		174.00		.00	
				BENEFIT TOTALS			27,787.58		2,329.83		.00							
PEREZ, MARLENE VALERIE				2CE-2OLDA														
604-17-3461	260001	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
				LABOR TOTALS			1,660.00		.00		.00		41.50		.00		.00	
				BENEFIT TOTALS			168.82		.00		.00							
PEREZ, SAMUEL				2AB-2CASH														
612-30-5052	260001	00	01	1-42149-2350	LBR		1305.61	0	.00	0	.00	0	127.75	0	.00	0	.00	0
	260001	00	01	1-42149-3200	BEN		132.79	0	.00	0	.00	0						
	160001	00	01	1-48126-2350	LBR		1534.56	0	139.75	0	.00	0	142.75	0	13.00	0	.00	0
	160001	00	01	1-48126-2360	LBR		32.25	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	160001	00	01	1-48126-3200	BEN		159.34	0	14.21	0	.00	0						
				LABOR TOTALS			2,872.42		139.75		.00		272.50		13.00		.00	
				BENEFIT TOTALS			292.13		14.21		.00							
PEREZALONSO, MARIA LEONOR				2CO-2TRSF														
562-67-1466	230437	00	01	1-42263-2170	LBR		53854.60	0	4542.56	0	.00	0	2103.00	0	177.75	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	D
	293001	02	01	1-42620-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	
	292001	02	01	1-42620-3100	BEN		344.71	0	22.81	0	.00	0					
	293001	02	01	1-42620-3100	BEN		223.47	0	14.79	0	.00	0					
				LABOR TOTALS			7,609.80		471.69		.00		132.00		.00		
				BENEFIT TOTALS			606.49		37.60		.00						
PHAN, VAN THI				1IT-1NASA													
610-76-3238	280001	00	01	2-14520-2310	LBR		12210.00	0	1122.00	0	.00	0	1170.50	0	102.00	0	
				LABOR TOTALS			12,210.00		1,122.00		.00		1,170.50		102.00		
				BENEFIT TOTALS			.00		.00		.00						
PHAN, VY MNIM NGUYEN				2ST-2ADMI													
626-66-9963	230054	00	01	1-42287-2170	LBR		42060.29	0	3561.49	0	.00	0	2088.00	0	174.00	0	.00	0
	230054	00	01	1-42287-3100	BEN		22961.94	0	1925.47	0	.00	0						
				LABOR TOTALS			42,060.29		3,561.49		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			22,961.94		1,925.47		.00							
PHELPS, ANDREW RUSSELL				-													
578-58-0734	292001	02	01	1-42760-1320	LBR		5617.91	0	371.69	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5617.92	0	371.70	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5617.92	0	2120.44	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		642.48	0	214.16	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		147.59	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		147.63	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		139.28	0	40.86	0	.00	0						
	292001	02	01	1-42760-3100	BEN		1276.27	0	70.91	0	.00	0						
	293001	02	01	1-42760-3100	BEN		1276.28	0	70.93	0	.00	0						
	294001	02	01	1-42760-3100	BEN		1208.11	0	404.55	0	.00	0						
				LABOR TOTALS			18,781.19		3,077.99		.00		216.00		24.00		.00	
				BENEFIT TOTALS			4,195.16		587.25		.00							
PHILLIPS, ANTHONY JAMES				2CE-2OLDA													
363-70-0762	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							
PHILLIPS, JULIE A				-													
554-88-9084	292011	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293011	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293012	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292011	03	01	1-42415-3200	BEN		3.96	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
				LABOR TOTALS			14,723.67		2,391.81		.00		182.00		20.00		.00	
				BENEFIT TOTALS			584.56		94.96		.00							
RAINEY, KENNETH				2WF-1OPI														
572-98-3450	180001	00	01	2-12633-2310	LBR		560.00	0	.00	0	.00	0	70.00	0	.00	0	.00	0
	180001	00	01	2-12633-3200	BEN		53.31	0	.00	0	.00	0						
	180001	00	01	2-12640-2310	LBR		560.00	0	.00	0	.00	0	70.00	0	.00	0	.00	0
	180001	00	01	2-12640-3200	BEN		53.31	0	.00	0	.00	0						
				LABOR TOTALS			1,120.00		.00		.00		140.00		.00		.00	
				BENEFIT TOTALS			106.62		.00		.00							
RAINEY, PHOENIX ANNABELL				2SE-2PEA														
573-33-0972	280001	00	01	2-22706-2410	LBR		6016.00	0	216.00	0	.00	0	752.00	0	27.00	0	.00	0
	280001	00	01	2-22706-3200	BEN		193.89	0	4.04	0	.00	0						
				LABOR TOTALS			6,016.00		216.00		.00		752.00		27.00		.00	
				BENEFIT TOTALS			193.89		4.04		.00							
RAJESH, SANGHRAJKA PARIT				2AC-2BOOK														
605-45-1897	280001	00	01	1-48226-2310	LBR		1164.38	0	.00	0	.00	0	172.50	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		21.78	0	.00	0	.00	0						
				LABOR TOTALS			1,164.38		.00		.00		172.50		.00		.00	
				BENEFIT TOTALS			21.78		.00		.00							
RAMADANOFF, DAVID D				-														
289-44-4899	192001	02	01	1-41636-1320	LBR		3934.05	0	260.28	0	.00	0	54.00	0	.00	0	.00	0
	193001	02	01	1-41636-1320	LBR		3934.05	0	260.28	0	.00	0	54.00	0	.00	0	.00	0
	194001	02	01	1-41636-1320	LBR		3934.05	0	1484.87	0	.00	0	54.00	0	18.00	0	.00	0
	192001	02	01	1-41636-3100	BEN		256.49	0	16.97	0	.00	0						
	193001	02	01	1-41636-3100	BEN		256.48	0	16.96	0	.00	0						
	194001	02	01	1-41636-3100	BEN		256.50	0	96.82	0	.00	0						
				LABOR TOTALS			11,802.15		2,005.43		.00		162.00		18.00		.00	
				BENEFIT TOTALS			769.47		130.75		.00							
RAMAN, CHANDRIKA				2LA-2TUTR														
615-04-8340	260002	00	01	1-48700-2350	LBR		290.45	0	15.49	0	.00	0	18.75	0	1.00	0	.00	0
	260002	00	01	1-48700-3200	BEN		29.53	0	1.57	0	.00	0						
				LABOR TOTALS			290.45		15.49		.00		18.75		1.00		.00	
				BENEFIT TOTALS			29.53		1.57		.00							
RAMIREZ MOYA, FRANCISCA				2CO-2TSTG														
560-71-7283	230128	00	01	1-42226-2170	LBR		1112.37	0	378.74	0	.00	0	63.14	0	20.88	0	.00	0
	230191	00	01	1-42226-2170	LBR		229.87	0	.00	0	.00	0	13.23	0	.00	0	.00	0
	230128	00	01	1-42226-3100	BEN		657.08	0	220.71	0	.00	0						

DATE RUN 07/20/05
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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC		
	230191	00	01	1-42226-3100	BEN		135.70	0	.00	0	.00	0						
	230128	00	01	2-12650-2170	LBR		7786.32	0	2651.05	0	.00	0	458.86	0	153.12	0		
	230191	00	01	2-12650-2170	LBR		1609.16	0	.00	0	.00	0	92.68	0	.00	0		
	230128	00	01	2-12650-3100	BEN		4599.23	0	1544.87	0	.00	0						
	230191	00	01	2-12650-3100	BEN		949.89	0	.00	0	.00	0						
	230191	00	01	2-12664-2170	LBR		24935.72	0	.00	0	.00	0	1460.09	0	.00	0	.00	0
	230191	00	01	2-12664-3100	BEN		14700.05	0	.00	0	.00	0						
				LABOR TOTALS			35,673.44		3,029.79		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,041.95		1,765.58		.00							
RAMIREZ, MARTHA PATRICIA				1SM-1EOPS														
564-57-8329	180001	00	01	2-11668-2310	LBR		4805.00	0	700.00	0	.00	0	480.50	0	70.00	0	.00	0
	180001	00	01	2-11668-3200	BEN		89.85	0	13.09	0	.00	0						
				LABOR TOTALS			4,805.00		700.00		.00		480.50		70.00		.00	
				BENEFIT TOTALS			89.85		13.09		.00							
RAMIREZ, MYRA C				1IT-1NASA														
556-73-5699	280001	00	01	2-14516-2310	LBR		6715.00	0	892.50	0	.00	0	671.50	0	89.25	0	.00	0
	280001	00	01	2-14516-3200	BEN		125.57	0	16.69	0	.00	0						
				LABOR TOTALS			6,715.00		892.50		.00		671.50		89.25		.00	
				BENEFIT TOTALS			125.57		16.69		.00							
RAMOS, ALEXJANDRO M				1AA-1IEDR														
546-85-4298	140001	00	01	1-44036-3100	BEN		22.22	22	6.92	6	.00	0						
	140001	00	01	2-31111-2700	LBR		1188.00	0	122.00	0	.00	0	148.50	0	15.25	0	.00	0
	140001	00	01	2-31111-3100	BEN		.00	22-	4.64-	6-	.00	0						
				LABOR TOTALS			1,188.00		122.00		.00		148.50		15.25		.00	
				BENEFIT TOTALS			22.22		2.28		.00							
RAMOS, CARMEN M				-														
511-86-3778	191001	02	01	1-41654-1320	LBR		2185.00	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	192001	02	01	1-41654-1320	LBR		2408.61	0	159.36	0	.00	0	30.00	0	.00	0	.00	0
	192002	02	01	1-41654-1320	LBR		2408.61	0	159.36	0	.00	0	30.00	0	.00	0	.00	0
	193001	02	01	1-41654-1320	LBR		1553.27	0	102.76	0	.00	0	28.00	0	.00	0	.00	0
	172001	03	01	1-41654-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		43.88	0	.00	0	.00	0						
	191001	02	01	1-41654-3100	BEN		174.14	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		191.94	0	12.70	0	.00	0						
	192002	02	01	1-41654-3100	BEN		191.96	0	12.70	0	.00	0						
	193001	02	01	1-41654-3100	BEN		123.80	0	8.19	0	.00	0						
	293001	02	01	1-42654-1320	LBR		2889.45	0	191.16	0	.00	0	36.00	0	.00	0	.00	0
	294001	02	01	1-42654-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0	.00	0
	273001	03	01	1-42654-1445	LBR		550.44	550	.00	0	.00	0	.00	0	.00	0	.00	0
	274001	03	01	1-42654-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42654-3100	BEN		43.86	43	.00	0	.00	0						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT OF 860
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT CD	ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT PERIOD DIRECT	AMOUNTS CURRENT PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURRENT PERIOD DIRECT	HOURS CURRENT PERIOD RLOC
	260046	00	01	1-52360-3200		BEN			30.01	0	30.01	0	.00	0						
				LABOR TOTALS					4,513.50		295.00		.00		24.50		3.50			
				BENEFIT TOTALS					459.04		30.01		.00							
BENTERIA, MATILDA P				1SM-1FAID																
570-58-7003	130164	00	01	1-41272-2170		LBR			63813.53	0	5317.78	0	.00	0	1833.21	0	152.76	0		
	130164	00	01	1-41272-3100		BEN			25873.95	0	2156.16	0	.00	0						
	130164	00	01	2-11683-2170		LBR			2169.75	0	.00	0	.00	0	63.71	0	.00	0		
	130164	00	01	2-11683-3100		BEN			888.87	0	.00	0	.00	0						
	130164	00	01	2-11684-2170		LBR			6697.48	0	738.95	0	.00	0	191.08	0	21.24	0		
	130164	00	01	2-11684-3100		BEN			2706.41	0	299.61	0	.00	0						
				LABOR TOTALS					72,680.76		6,056.73		.00		2,088.00		174.00			
				BENEFIT TOTALS					29,469.23		2,455.77		.00							
RESCH, NATHAN P				-																
387-78-5545	191001	02	01	1-41702-1320		LBR			3810.06	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	191002	02	01	1-41702-1320		LBR			6529.66	0	.00	0	.00	0	144.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320		LBR			4415.94	0	292.17	0	.00	0	72.00	0	.00	0	.00	0
	194001	02	01	1-41702-1320		LBR			4415.94	0	1666.76	0	.00	0	72.00	0	24.00	0	.00	0
	191001	02	01	1-41702-3100		BEN			294.14	0	.00	0	.00	0						
	191002	02	01	1-41702-3100		BEN			504.09	0	.00	0	.00	0						
	193001	02	01	1-41702-3100		BEN			340.88	0	22.55	0	.00	0						
	194001	02	01	1-41702-3100		BEN			340.91	0	128.68	0	.00	0						
	192001	02	01	1-41720-1320		LBR			7568.04	0	500.73	0	.00	0	180.00	0	.00	0	.00	0
	192001	02	01	1-41720-3100		BEN			584.25	0	38.66	0	.00	0						
				LABOR TOTALS					26,739.64		2,459.66		.00		540.00		24.00		.00	
				BENEFIT TOTALS					2,064.27		189.89		.00							
RESPICIO, MANUEL R				4SS-4DSS1																
551-91-9583	430395	00	01	1-44358-2170		LBR			19708.55	0	1674.34	0	.00	0	839.64	0	77.85	0	.00	0
	430395	00	01	1-44358-2360		LBR			5510.35	0	385.83	0	.00	0	125.76	0	9.54	0	.00	0
	430395	00	01	1-44358-3100		BEN			9425.50	0	790.76	0	.00	0						
	430395	00	01	1-44358-3200		BEN			422.89	0	29.05	0	.00	0						
	430395	00	01	1-51911-2360		LBR			178.94	0	.00	0	.00	0	4.75	0	.00	0	.00	0
	430395	00	01	1-51911-3200		BEN			13.50	0	.00	0	.00	0						
	430395	00	01	1-52225-2360		LBR			150.69	0	.00	0	.00	0	4.00	0	.00	0	.00	0
	430395	00	01	1-52225-3200		BEN			11.34	0	.00	0	.00	0						
	430395	00	01	2-54370-2170		LBR			35038.08	0	2976.67	0	.00	0	1335.36	0	110.40	0	.00	0
	430395	00	01	2-54370-2360		LBR			8933.70	0	685.93	0	.00	0	202.24	0	16.96	0	.00	0
	430395	00	01	2-54370-3100		BEN			16756.46	0	1405.81	0	.00	0						
	430395	00	01	2-54370-3200		BEN			686.83	0	51.65	0	.00	0						
				LABOR TOTALS					69,520.31		5,722.77		.00		2,511.75		214.75		.00	
				BENEFIT TOTALS					27,316.52		2,277.27		.00							
RESTREPO, EDGAR ALBERTO				1SM-1EOPS																

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC		
	194001	02	01	1-41806-3100	BEN		68.95	0	59.91-	0	.00	0						
	150241	00	01	1-44043-1160	LBR		.00	0	.00	0	1350.00-	1350-	.00	0	.00	0		
				LABOR TOTALS			62,820.95		1,704.75		.00		1,424.40		120.40			
				BENEFIT TOTALS			9,200.73		362.03		.00							
ROBINSON, LINDA A				1LB-1MDIA														
558-74-0377	130028	00	01	1-41306-2170	LBR		60575.47	0	5529.96	0	.00	0	1929.82	0	174.00	0		
	130028	00	01	1-41306-3100	BEN		26889.42	0	2343.00	0	.00	0						
				LABOR TOTALS			60,575.47		5,529.96		.00		1,929.82		174.00			
				BENEFIT TOTALS			26,889.42		2,343.00		.00							
ROBINSON, RANDOLPH K				1IT-1NASA														
569-75-6808	280001	00	01	2-14516-2310	LBR		5490.00	0	1150.00	0	.00	0	549.00	0	115.00	0		
	280001	00	01	2-14516-3200	BEN		102.68	0	21.51	0	.00	0						
				LABOR TOTALS			5,490.00		1,150.00		.00		549.00		115.00			
				BENEFIT TOTALS			102.68		21.51		.00							
ROBLEDO, CAROLINA				-														
554-94-2324	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	292001	02	01	1-42656-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42656-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42656-1320	LBR		3129.69	0	1181.27	0	.00	0	36.00	0	12.00	0	.00	0
	294002	02	01	1-42656-1320	LBR		3129.69	0	1181.27	0	.00	0	36.00	0	12.00	0	.00	0
	294003	02	01	1-42656-1320	LBR		4692.21	0	1771.03	0	.00	0	48.00	0	16.00	0	.00	0
	272001	03	01	1-42656-1445	LBR		457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42656-3100	BEN		55.87	0	.00	0	.00	0						
	292001	02	01	1-42656-3100	BEN		688.92	0	45.58	0	.00	0						
	293001	02	01	1-42656-3100	BEN		688.95	0	45.58	0	.00	0						
	294001	02	01	1-42656-3100	BEN		382.45	0	144.35	0	.00	0						
	294002	02	01	1-42656-3100	BEN		382.45	0	144.35	0	.00	0						
	294003	02	01	1-42656-3100	BEN		573.38	0	216.42	0	.00	0						
				LABOR TOTALS			22,783.94		4,879.56		.00		254.00		40.00		.00	
				BENEFIT TOTALS			2,784.24		596.28		.00							
ROBLES, GEORGE				2ST-2EOPS														
556-02-4439	220185	00	01	1-42378-2170	LBR		22000.70	0	1860.82	0	.00	0	522.00	0	43.50	0	.00	0
	220185	00	01	1-42378-3100	BEN		7942.53	0	670.85	0	.00	0						
	220185	00	01	2-12664-2170	LBR		66000.63	0	5582.32	0	.00	0	1566.00	0	130.50	0	.00	0
	220185	00	01	2-12664-3100	BEN		23826.85	0	2012.49	0	.00	0						
				LABOR TOTALS			88,001.33		7,443.14		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			31,769.38		2,683.34		.00							
ROCHA, FRANCISCO R				4SS-4DSS1														

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC		
	430472	00	01	2-84110-3200	BEN			11.94	0	5.97	0	.00	0						
				LABOR TOTALS				56,355.08		4,853.78		.00		2,127.50		180.00			
				BENEFIT TOTALS				25,897.30		2,175.83		.00							
RODRIGUEZ, JAMES J																			
564-64-1491	293001	02	01	1-42504-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0		
	294001	02	01	1-42504-1320	LBR			4009.41	0	1513.31	0	.00	0	48.00	0	16.00	0		
	274001	03	01	1-42504-1445	LBR			573.00	0	191.00	0	.00	0	12.00	0	4.00	0		
	274001	03	01	1-42504-3100	BEN			70.02	0	23.34	0	.00	0						
	293001	02	01	1-42504-3100	BEN			489.94	0	32.42	0	.00	0						
	294001	02	01	1-42504-3100	BEN			489.93	0	184.92	0	.00	0						
				LABOR TOTALS				8,591.82		1,969.57		.00		108.00		20.00		.00	
				BENEFIT TOTALS				1,049.89		240.68		.00							
RODRIGUEZ, JORGE A				1SM-1EOPS															
609-20-6769	132215	00	01	2-11668-2170	LBR			54510.69	0	4542.56	0	.00	0	2100.00	0	174.00	0	.00	0
	132215	00	01	2-11668-3100	BEN			25685.80	0	2140.48	0	.00	0						
				LABOR TOTALS				54,510.69		4,542.56		.00		2,100.00		174.00		.00	
				BENEFIT TOTALS				25,685.80		2,140.48		.00							
RODRIGUEZ, LUCY LYNNETTE				1IT-1IIRS															
535-11-1024	130149	00	01	1-41403-2170	LBR			45156.46	0	4323.85	0	.00	0	1866.45	0	174.00	0	.00	0
	130149	00	01	1-41403-3100	BEN			17215.90	0	1692.11	0	.00	0						
				LABOR TOTALS				45,156.46		4,323.85		.00		1,866.45		174.00		.00	
				BENEFIT TOTALS				17,215.90		1,692.11		.00							
RODRIGUEZ, MATTHEW STEVEN				2CE-2SHOR															
557-83-9161	230344	00	01	1-52360-2170	LBR			60041.01	0	5003.42	0	.00	0	2088.00	0	174.00	0	.00	0
	230344	00	01	1-52360-3100	BEN			26788.03	0	2232.33	0	.00	0						
				LABOR TOTALS				60,041.01		5,003.42		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS				26,788.03		2,232.33		.00							
RODRIGUEZ, ROZELLA FELIPA				1IT-1NASA															
608-42-5610	280001	00	01	2-14520-2310	LBR			11106.50	0	1319.00	0	.00	0	1110.25	0	131.50	0	.00	0
	280001	00	01	2-14520-3200	BEN			399.53	0	24.67	0	.00	0						
				LABOR TOTALS				11,106.50		1,319.00		.00		1,110.25		131.50		.00	
				BENEFIT TOTALS				399.53		24.67		.00							
RODRIGUEZ-MONTANA, MAGDA				1LA-1SPAN															
522-77-7980	180001	00	01	1-41652-2310	LBR			310.00	90	.00	0	.00	0	22.00	0	.00	0	.00	0
	180002	00	01	1-41652-2410	LBR			560.00	0	.00	0	.00	0	56.00	0	.00	0	.00	0
	180001	00	01	1-41652-3200	BEN			4.11	0	.00	0	.00	0						
	180002	00	01	1-41652-3200	BEN			10.49	0	.00	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
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	294003	03	01	2-12681-1430		LBR	440.27	0	.00	0	.00	0	10.50	0	
	294005	03	01	2-12681-1430		LBR	419.30	0	.00	0	.00	0	10.00	0	
	293006	03	01	2-12681-3100		BEN	84.64	0	.00	0	.00	0			
	291002	03	01	2-12681-3200		BEN	156.71	0	.00	0	.00	0			
	291003	03	01	2-12681-3200		BEN	3.57	3	.00	0	.00	0			
	291005	03	01	2-12681-3200		BEN	63.57	0	.00	0	.00	0			
	292001	03	01	2-12681-3200		BEN	150.89	0	.00	0	.00	0			
	292003	03	01	2-12681-3200		BEN	92.85	0	.00	0	.00	0			
	292004	03	01	2-12681-3200		BEN	105.90	0	.00	0	.00	0			
	293005	03	01	2-12681-3200		BEN	51.48	0	.00	0	.00	0			
	293007	03	01	2-12681-3200		BEN	62.57	0	.00	0	.00	0			
	294001	03	01	2-12681-3200		BEN	108.37	0	.00	0	.00	0			
	294003	03	01	2-12681-3200		BEN	79.77	0	.00	0	.00	0			
	294005	03	01	2-12681-3200		BEN	75.98	0	.00	0	.00	0			
	291003	03	01	2-12684-1430		LBR	782.40	18-	.00	0	.00	0	20.00	0	
	291003	03	01	2-12684-3200		BEN	140.48	3-	.00	0	.00	0			
				LABOR TOTALS			86,965.50		8,506.62		.00		2,384.76		
				BENEFIT TOTALS			26,632.86		2,363.16		.00				
SILBERSTEIN, LAURA HARRIE -															
552-74-9751	192099	03	01	1-41263-1430		LBR	100.00	0	.00	0	.00	0	2.00	0	
	192099	03	01	1-41263-3200		BEN	19.62	0	.00	0	.00	0			
	192001	02	01	1-41503-1320		LBR	3962.00	0	262.13	0	.00	0	48.00	0	
	172001	03	01	1-41503-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	
	172001	03	01	1-41503-3100		BEN	123.43	0	.00	0	.00	0			
	192001	02	01	1-41503-3100		BEN	780.78	0	42.28	0	.00	0			
	192002	02	01	1-41540-1320		LBR	540.27	0	35.74	0	.00	0	6.00	0	
	192003	02	01	1-41540-1320		LBR	1080.53	0	71.48	0	.00	0	12.00	0	
	192004	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	192005	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	192006	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	192007	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	192008	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	193001	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	193002	02	01	1-41540-1320		LBR	.00	0	.01-	0	.00	0	.00	0	
	193003	02	01	1-41540-1320		LBR	1080.56	0	71.50	0	.00	0	12.00	0	
	193004	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	194001	02	01	1-41540-1320		LBR	540.28	0	35.75	0	.00	0	6.00	0	
	194002	02	01	1-41540-1320		LBR	540.28	0	35.75	0	.00	0	6.00	0	
	194003	02	01	1-41540-1320		LBR	1080.56	0	71.50	0	.00	0	12.00	0	
	194004	02	01	1-41540-1320		LBR	540.27	0	540.27	0	.00	0	6.00	0	
	194005	02	01	1-41540-1320		LBR	2065.86	0	1080.55	0	.00	0	24.00	0	
	192002	02	01	1-41540-3100		BEN	104.85	0	5.78	0	.00	0			
	192003	02	01	1-41540-3100		BEN	214.57	0	11.53	0	.00	0			
	192004	02	01	1-41540-3100		BEN	214.57	0	11.52	0	.00	0			
	192005	02	01	1-41540-3100		BEN	214.59	0	11.54	0	.00	0			
	192006	02	01	1-41540-3100		BEN	35.76	0	1.92	0	.00	0			
	192007	02	01	1-41540-3100		BEN	35.75	0	1.92	0	.00	0			

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE, DIRECT	MO-TO-DATE, RLOC		
	294001	02	01	1-42682-3100	BEN			440.57	0	166.29	0	.00	0						
				LABOR TOTALS				30,536.28		2,940.39		.00		374.00		20.00			
				BENEFIT TOTALS				3,105.52		299.04		.00							
SAMUELSSON, OLOV CARL				2LA-2LART															
606-47-4573	280001	00	01	1-48410-2310	LBR			910.00	266	.00	0	.00	0	80.50	0	.00	0		
	280001	00	01	1-48410-3100	BEN			4.97	0	.00	0	.00	0						
	280001	00	01	1-48410-3200	BEN			12.04	0	.00	0	.00	0						
				LABOR TOTALS				910.00		.00		.00		80.50		.00		.00	
				BENEFIT TOTALS				17.01		.00		.00							
SAN ROMAN, JULIO MIGUEL				2AC-2BOOK															
612-51-2133	280001	00	01	1-48226-2310	LBR			163.69	0	163.69	0	.00	0	24.25	0	24.25	0	.00	0
	280001	00	01	1-48226-3200	BEN			15.58	0	15.58	0	.00	0						
				LABOR TOTALS				163.69		163.69		.00		24.25		24.25		.00	
				BENEFIT TOTALS				15.58		15.58		.00							
SANCHEZ CASTILLO, CESAR				2ST-2ADMI															
611-70-5750	240001	00	01	1-44036-3100	BEN			88.21	88	2.24	2	.00	0						
	280001	00	01	2-12681-2310	LBR			915.00	0	412.50	0	.00	0	132.00	0	55.00	0	.00	0
	280001	00	01	2-12681-3200	BEN			17.11	0	7.71	0	.00	0						
	240001	00	01	2-32111-2700	LBR			4717.50	0	.00	0	.00	0	629.00	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN			.00	88-	2.24-	2-	.00	0						
				LABOR TOTALS				5,632.50		412.50		.00		751.00		55.00		.00	
				BENEFIT TOTALS				105.32		7.71		.00							
SANCHEZ, AMELIA P				2CO-2COUN															
560-08-3778	230490	00	01	1-42300-2170	LBR			51387.76	0	4206.92	0	.00	0	2088.00	0	174.00	0	.00	0
	230490	00	01	1-42300-3100	BEN			20542.65	0	1695.88	0	.00	0						
				LABOR TOTALS				51,387.76		4,206.92		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS				20,542.65		1,695.88		.00							
SANCHEZ, LOUIS EDWARD				-															
571-48-1624	292099	03	01	1-42023-1430	LBR			100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN			7.72	0	.00	0	.00	0						
	291001	02	01	1-42506-1320	LBR			2109.52	0	.00	0	.00	0	28.80	0	.00	0	.00	0
	292001	02	01	1-42506-1320	LBR			1380.48	0	91.34	0	.00	0	21.60	0	.00	0	.00	0
	292002	02	01	1-42506-1320	LBR			3071.87	0	203.24	0	.00	0	48.00	0	.00	0	.00	0
	292004	02	01	1-42506-1320	LBR			306.79	0	20.31	0	.00	0	4.80	0	.00	0	.00	0
	293001	02	01	1-42506-1320	LBR			3453.27	0	228.48	0	.00	0	54.00	0	.00	0	.00	0
	294001	02	01	1-42506-1320	LBR			5458.38	0	2060.22	0	.00	0	81.60	0	27.20	0	.00	0
	292003	02	01	1-42506-1330	LBR			230.30	0	15.24	0	.00	0	3.50	0	.00	0	.00	0
	293002	02	01	1-42506-1330	LBR			240.66	0	15.92	0	.00	0	3.50	0	.00	0	.00	0
	294002	02	01	1-42506-1330	LBR			378.18	0	378.18	0	.00	0	5.50	0	5.50	0	.00	0

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				LABOR TOTALS				4,353.76		475.88		.00		645.00		70.50		.00	
				BENEFIT TOTALS				81.41		8.90		.00							
SCHIERON, SARA M			-																
621-03-6389	293002	03	01	1-42021-1430		LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293002	03	01	1-42021-3200		BEN		7.72	0	.00	0	.00	0						
	293001	02	01	1-42620-1320		LBR		3199.47	0	211.68	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42620-1320		LBR		3199.47	0	1207.61	0	.00	0	48.00	0	16.00	0	.00	0
	273001	03	01	1-42620-1445		LBR		457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42620-1445		LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42620-3100		BEN		35.28	0	.00	0	.00	0						
	274001	03	01	1-42620-3100		BEN		35.29	0	11.77	0	.00	0						
	293001	02	01	1-42620-3100		BEN		246.98	0	16.34	0	.00	0						
	294001	02	01	1-42620-3100		BEN		246.99	0	93.23	0	.00	0						
				LABOR TOTALS				7,413.34		1,571.69		.00		122.00		20.00		.00	
				BENEFIT TOTALS				572.26		121.34		.00							
SCHMIDT, BENJAMIN JAN			-																
562-81-9564	191001	02	01	1-41461-1320		LBR		2807.82	0	.00	0	.00	0	84.36	0	.00	0	.00	0
	191002	02	01	1-41461-1320		LBR		2807.82	0	.00	0	.00	0	84.36	0	.00	0	.00	0
	192001	02	01	1-41461-1320		LBR		2322.21	0	153.65	0	.00	0	38.00	0	.00	0	.00	0
	172001	03	01	1-41461-1445		LBR		293.57	0	.00	0	.00	0	7.00	0	.00	0	.00	0
	172001	03	01	1-41461-3100		BEN		22.63	0	.00	0	.00	0						
	191001	02	01	1-41461-3100		BEN		216.74	0	.00	0	.00	0						
	191002	02	01	1-41461-3100		BEN		216.77	0	.00	0	.00	0						
	192001	02	01	1-41461-3100		BEN		179.30	0	11.86	0	.00	0						
				LABOR TOTALS				8,231.42		153.65		.00		213.72		.00		.00	
				BENEFIT TOTALS				635.44		11.86		.00							
SCHMIDT, CYNTHIA LYNN			-																
552-33-3949	193001	02	01	1-41814-1320		LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00	0
	193001	02	01	1-41814-3100		BEN		123.34	0	8.16	0	.00	0						
				LABOR TOTALS				1,597.95		105.72		.00		24.00		.00		.00	
				BENEFIT TOTALS				123.34		8.16		.00							
SCHMIDT, ERIC A			2CA-2F/TV																
545-55-7025	280001	00	01	2-12902-2310		LBR		450.00	0	182.00	0	.00	0	56.25	0	22.75	0	.00	0
	280001	00	01	2-12902-3200		BEN		8.41	0	3.40	0	.00	0						
				LABOR TOTALS				450.00		182.00		.00		56.25		22.75		.00	
				BENEFIT TOTALS				8.41		3.40		.00							
SCHMIDT, JANET S			2ST-2FNAI																
546-66-8035	230390	00	01	1-42272-2170		LBR		44077.35	0	3657.72	0	.00	0	1868.75	0	153.12	0	.00	0
	230390	00	01	1-42272-3100		BEN		21672.28	0	1764.04	0	.00	0						

FA Acct.

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC	C DI
	230390	00	01	2-12681-2170	LBR		4525.24	0	498.79	0	.00	0	187.92	0	20.88	0	
	230390	00	01	2-12681-3100	BEN		2190.04	0	240.56	0	.00	0					
	230390	00	01	2-12684-2170	LBR		695.45	0	.00	0	.00	0	31.33	0	.00	0	
	230390	00	01	2-12684-3100	BEN		358.31	0	.00	0	.00	0					
				LABOR TOTALS			49,298.04		4,156.51		.00		2,088.00		174.00		
				BENEFIT TOTALS			24,220.63		2,004.60		.00						
SCHMIDT, KARL R																	
169-38-1512	191001	02	01	1-41622-1320	LBR		1633.70	0	.00	0	.00	0	36.00	0	.00	0	
	192001	02	01	1-41622-1320	LBR		1668.71	0	110.41	0	.00	0	36.00	0	.00	0	
	192002	02	01	1-41622-1320	LBR		1668.70	0	110.41	0	.00	0	36.00	0	.00	0	.00 0
	192003	02	01	1-41622-1320	LBR		1610.06	0	106.52	0	.00	0	36.00	0	.00	0	.00 0
	193001	02	01	1-41622-1320	LBR		1668.69	0	110.40	0	.00	0	36.00	0	.00	0	.00 0
	193002	02	01	1-41622-1320	LBR		1668.69	0	110.40	0	.00	0	36.00	0	.00	0	.00 0
	193003	02	01	1-41622-1320	LBR		1610.07	0	106.53	0	.00	0	36.00	0	.00	0	.00 0
	194001	02	01	1-41622-1320	LBR		1668.69	0	629.83	0	.00	0	36.00	0	12.00	0	.00 0
	194002	02	01	1-41622-1320	LBR		1668.69	0	629.83	0	.00	0	36.00	0	12.00	0	.00 0
	194003	02	01	1-41622-1320	LBR		1610.07	0	607.71	0	.00	0	36.00	0	12.00	0	.00 0
	172001	03	01	1-41622-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	173001	03	01	1-41622-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	174001	00	01	1-41622-1445	LBR		191.00	191	.00	0	.00	0	.00	0	.00	0	.00 0
	174001	03	01	1-41622-1445	LBR		382.00	0	191.00	0	.00	0	8.00	0	4.00	0	.00 0
	172001	03	01	1-41622-3100	BEN		61.72	0	.00	0	.00	0					
	173001	03	01	1-41622-3100	BEN		61.71	0	.00	0	.00	0					
	174001	00	01	1-41622-3100	BEN		20.57	20	.00	0	.00	0					
	174001	03	01	1-41622-3100	BEN		41.14	0	20.57	0	.00	0					
	191001	02	01	1-41622-3100	BEN		175.94	0	.00	0	.00	0					
	192001	02	01	1-41622-3100	BEN		179.71	0	11.90	0	.00	0					
	192002	02	01	1-41622-3100	BEN		179.75	0	11.89	0	.00	0					
	192003	02	01	1-41622-3100	BEN		173.37	0	11.46	0	.00	0					
	193001	02	01	1-41622-3100	BEN		179.72	0	11.90	0	.00	0					
	193002	02	01	1-41622-3100	BEN		179.70	0	11.88	0	.00	0					
	193003	02	01	1-41622-3100	BEN		173.42	0	11.48	0	.00	0					
	194001	02	01	1-41622-3100	BEN		179.71	0	67.83	0	.00	0					
	194002	02	01	1-41622-3100	BEN		179.71	0	67.83	0	.00	0					
	194003	02	01	1-41622-3100	BEN		173.41	0	65.45	0	.00	0					
				LABOR TOTALS			18,195.11		2,713.04		.00		392.00		40.00		.00
				BENEFIT TOTALS			1,959.58		292.19		.00						
SCHMIDT, STEVEN DALE				40R-40PER													
544-54-7646	430037	00	01	1-44128-2180	LBR		86402.78	0	7200.23	0	.00	0	2100.00	0	174.00	0	.00 0
	430037	00	01	1-44128-3100	BEN		32379.84	0	2698.32	0	.00	0					
				LABOR TOTALS			86,402.78		7,200.23		.00		2,100.00		174.00		.00
				BENEFIT TOTALS			32,379.84		2,698.32		.00						
SCHMIEDT, JAMES B																	

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73,518•67 ÷
1,800• =
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21,635.90 +
77,606.60 *

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	292003	02	01	1-42654-3100		BEN		588.15	0	38.91	0	.00	0					
	293001	02	01	1-42654-3100		BEN		588.12	0	38.90	0	.00	0					
	294001	02	01	1-42654-3100		BEN		588.15	0	222.00	0	.00	0					
	294002	02	01	1-42654-3100		BEN		294.06	0	110.99	0	.00	0					
				LABOR TOTALS				22,758.87		3,863.62		.00		301.50		34.00		.00
				BENEFIT TOTALS				2,781.11		472.14		.00						
SCHOLAR, DEIRDRE CLAIRE																		
131-60-9445	172001	03	01	1-41764-1445		LBR		480.74	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	172001	03	01	1-41764-3100		BEN		38.33	0	.00	0	.00	0					
	192001	02	01	1-41767-1320		LBR		3125.58	0	206.79	0	.00	0	48.00	0	.00	0	.00 0
	192001	02	01	1-41767-3100		BEN		249.08	0	16.48	0	.00	0					
				LABOR TOTALS				3,606.32		206.79		.00		60.00		.00		.00
				BENEFIT TOTALS				287.41		16.48		.00						
SCHOOLER, SHIRLEY A				2SE-2DSS														
573-57-2058	230136	00	01	2-22224-2170		LBR		56070.70	0	4672.56	0	.00	0	2088.00	0	174.00	0	.00 0
	230136	00	01	2-22224-3100		BEN		21535.90	0	1794.66	0	.00	0					
				LABOR TOTALS				56,070.70		4,672.56		.00		2,088.00		174.00		.00
				BENEFIT TOTALS				21,535.90		1,794.66		.00						
SCHOTT, THOMAS				2CA-2F/TV														
294-80-1025	230325	00	01	1-42620-2220		LBR		60071.77	0	5029.93	0	.00	0	2088.00	0	174.00	0	.00 0
	230325	00	01	1-42620-3100		BEN		26865.31	0	2243.85	0	.00	0					
				LABOR TOTALS				60,071.77		5,029.93		.00		2,088.00		174.00		.00
				BENEFIT TOTALS				26,865.31		2,243.85		.00						
SCHRECKENGOST, JOSHUA LEE				1BH-1BHDV														
566-67-0420	160001	00	01	1-41091-2350		LBR		226.26	0	.00	0	.00	0	9.00	0	.00	0	.00 0
	160001	00	01	1-41091-3200		BEN		23.01	0	.00	0	.00	0					
				LABOR TOTALS				226.26		.00		.00		9.00		.00		.00
				BENEFIT TOTALS				23.01		.00		.00						
SCHREIBER, SHELLEY A				1AP-1PR														
213-46-8277	130106	00	01	1-41048-2170		LBR		87672.82	0	7306.07	0	.00	0	2091.38	0	174.00	0	.00 0
	130106	00	01	1-41048-3100		BEN		32072.03	0	2672.67	0	.00	0					
				LABOR TOTALS				87,672.82		7,306.07		.00		2,091.38		174.00		.00
				BENEFIT TOTALS				32,072.03		2,672.67		.00						
SCHROCK, RODERICK STEPHEN																		
587-41-2277	292099	03	01	1-42023-1430		LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00 0
	292099	03	01	1-42023-3200		BEN		7.72	0	.00	0	.00	0					
	292001	02	01	1-42622-1320		LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00 0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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	155504	00	01	2-11268	1260	LBR	429.97	0	.00	0	.00	0	7.02-	0	.00	0	.00	0
	150052	00	01	2-11268	3100	BEN	906.11	0	84.36	0	.00	0						
	155504	00	01	2-11268	3100	BEN	85.11	0	.00	0	.00	0						
				LABOR TOTALS			125,816.48		9,443.04		.00		3,139.58		285.14		.00	
				BENEFIT TOTALS			23,620.44		1,852.64		.00							
SIERRA, ANNMARIE J.				1IT-1NASA														
569-39-3023	280001	00	01	2-14516	2310	LBR	2711.50	0	.00	0	.00	0	246.50	0	.00	0	.00	0
	280001	00	01	2-14516	3200	BEN	275.76	0	.00	0	.00	0						
				LABOR TOTALS			2,711.50		.00		.00		246.50		.00		.00	
				BENEFIT TOTALS			275.76		.00		.00							
SIGALA-AGUILAR, GRISELDA																		
562-02-1906	291004	03	01	1-42248	1430	LBR	500.78	0	.00	0	.00	0	12.50	0	.00	0	.00	0
	292002	03	01	1-42248	1430	LBR	480.75	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	293003	00	01	1-42248	1430	LBR	701.05-	701-	.00	0	.00	0	.00	0	.00	0	.00	0
	293003	03	01	1-42248	1430	LBR	701.05	0	.00	0	.00	0	17.50	0	.00	0	.00	0
	293004	03	01	1-42248	1430	LBR	801.60	0	.00	0	.00	0	20.01	0	.00	0	.00	0
	291004	03	01	1-42248	3200	BEN	93.48	0	.00	0	.00	0						
	292002	03	01	1-42248	3200	BEN	89.16	0	.00	0	.00	0						
	293003	00	01	1-42248	3200	BEN	143.63-	143-	.00	0	.00	0						
	293003	03	01	1-42248	3200	BEN	128.71	0	.00	0	.00	0						
	293004	03	01	1-42248	3200	BEN	152.89	0	.00	0	.00	0						
	291001	02	01	1-42250	1320	LBR	635.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	294002	02	01	1-42250	1320	LBR	58.18	0	759.89-	0	.00	0	.00	0	12.00-	0	.00	0
	294004	02	01	1-42250	1320	LBR	29.09	0	381.45-	0	.00	0	.00	0	6.00-	0	.00	0
	294005	02	01	1-42250	1320	LBR	1680.92	0	1680.92	0	.00	0	24.00	0	24.00	0	.00	0
	294006	02	01	1-42250	1320	LBR	1700.31	0	1700.31	0	.00	0	24.00	0	24.00	0	.00	0
	291001	02	01	1-42250	3100	BEN	114.15	0	.00	0	.00	0						
	294002	02	01	1-42250	3100	BEN	16.52	0	131.03-	0	.00	0						
	294004	02	01	1-42250	3100	BEN	8.61	0	65.78-	0	.00	0						
	294005	02	01	1-42250	3100	BEN	289.86	0	289.86	0	.00	0						
	294006	02	01	1-42250	3100	BEN	293.21	0	293.21	0	.00	0						
	230240	00	01	1-42378	2170	LBR	18672.65	3038	4605.12	3038	.00	0	464.54	0	47.99	0	.00	0
	230240	00	01	1-42378	3100	BEN	6103.27	996	1490.51	996	.00	0						
	230240	00	01	2-12664	2170	LBR	56018.09	3038-	1661.61	3038-	.00	0	1651.21	0	130.51	0	.00	0
	230240	00	01	2-12664	3100	BEN	18309.85	996-	486.39	996-	.00	0						
	291002	03	01	2-12681	1430	LBR	841.32	0	.00	0	.00	0	21.00	0	.00	0	.00	0
	291003	03	01	2-12681	1430	LBR	18.86	18	.00	0	.00	0	.00	0	.00	0	.00	0
	291005	03	01	2-12681	1430	LBR	340.54	0	.00	0	.00	0	8.50	0	.00	0	.00	0
	292001	03	01	2-12681	1430	LBR	801.26	0	.00	0	.00	0	20.00	0	.00	0	.00	0
	292003	03	01	2-12681	1430	LBR	500.78	0	.00	0	.00	0	12.50	0	.00	0	.00	0
	292004	03	01	2-12681	1430	LBR	560.84	0	.00	0	.00	0	14.00	0	.00	0	.00	0
	293005	03	01	2-12681	1430	LBR	280.42	0	.00	0	.00	0	7.00	0	.00	0	.00	0
	293006	03	01	2-12681	1430	LBR	460.69	460	.00	0	.00	0	.00	0	.00	0	.00	0
	293007	03	01	2-12681	1430	LBR	340.51	0	.00	0	.00	0	8.50	0	.00	0	.00	0
	294001	03	01	2-12681	1430	LBR	600.90	0	.00	0	.00	0	15.00	0	.00	0	.00	0

CARE Coordinator

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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				LABOR TOTALS			6,963.27		2,599.89		.00		72.00		24.00			
				BENEFIT TOTALS			850.92		317.71		.00							
SLATER, BERNADETTA E				4AN-4BUSV														
609-24-4425	410040	00	01	1-44032-2110	LBR		87930.19	0	7327.52	0	.00	0	1943.82	0	161.99	0		
	410040	00	01	1-44032-3100	BEN		33298.09	0	2640.58	0	.00	0						
	410040	00	01	2-14610-2110	LBR		6517.01	0	543.08	0	.00	0	144.18	0	12.01	0		
	410040	00	01	2-14610-3100	BEN		2319.72	0	195.71	0	.00	0						
				LABOR TOTALS			94,447.20		7,870.60		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			33,617.81		2,836.29		.00							
SLAYTON, VIRGINIA E				1GU-1ADMR														
566-82-0406	130146	00	01	1-41287-2170	LBR		49935.50	0	4161.29	0	.00	0	2091.00	0	174.00	0	.00	0
	130146	00	01	1-41287-3100	BEN		24644.43	0	2053.71	0	.00	0						
				LABOR TOTALS			49,935.50		4,161.29		.00		2,091.00		174.00		.00	
				BENEFIT TOTALS			24,644.43		2,053.71		.00							
SLOAN, CYNTHIA JEAN																		
385-50-9668	294001	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	294003	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	274001	03	01	1-42662-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	274001	03	01	1-42662-3100	BEN		35.29	0	11.76	0	.00	0						
	294001	02	01	1-42662-3100	BEN		347.30	0	131.09	0	.00	0						
	294002	02	01	1-42662-3100	BEN		347.31	0	131.08	0	.00	0						
	294003	02	01	1-42662-3100	BEN		347.30	0	131.09	0	.00	0						
				LABOR TOTALS			13,953.42		5,246.46		.00		192.00		64.00		.00	
				BENEFIT TOTALS			1,077.20		405.02		.00							
SLOTHOWER, ARIEL D				2CO-2TSTG														
573-48-3325	260051	00	01	1-42226-2350	LBR		308.14	0	.00	0	.00	0	6.50	0	.00	0	.00	0
	260051	00	01	1-42226-3200	BEN		21.16	0	.00	0	.00	0						
	291001	02	01	1-42662-1320	LBR		6514.76	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42662-1320	LBR		6514.76	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42662-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42662-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	272001	03	01	1-42662-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42662-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42662-3100	BEN		61.44	0	.00	0	.00	0						
	273001	03	01	1-42662-3100	BEN		61.71	0	.00	0	.00	0						
	291001	02	01	1-42662-3100	BEN		697.63	0	.00	0	.00	0						
	291002	02	01	1-42662-3100	BEN		697.64	0	.00	0	.00	0						
	292001	02	01	1-42662-3100	BEN		604.61	0	40.18	0	.00	0						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PROGRAM FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS DI
	260001	00	01	2-22224-3200	BEN		516.22	0	.00	0	.00	0					
				LABOR TOTALS			5,076.00		.00		.00		141.00		.00		
				BENEFIT TOTALS			516.22		.00		.00						
SNIDER, CATHERINE DANA																	
552-02-8808	191001	02	01	1-41616-1320	LBR		439.38	0	.00	0	.00	0	7.20	0	.00	0	
	191002	02	01	1-41616-1320	LBR		4575.77	0	.00	0	.00	0	108.00	0	.00	0	
	191001	02	01	1-41616-3100	BEN		35.01	0	.00	0	.00	0					
	191002	02	01	1-41616-3100	BEN		364.69	0	.00	0	.00	0					
				LABOR TOTALS			5,015.15		.00		.00		115.20		.00		.00
				BENEFIT TOTALS			399.70		.00		.00						
SNOW, FRANKLIN DELANO																	
557-56-2158	292001	02	01	1-42760-1320	LBR		4400.16	0	291.12	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4400.16	0	291.12	0	.00	0	60.00	0	.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		503.22	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		503.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		40.09	0	.00	0	.00	0					
	273001	03	01	1-42760-3100	BEN		40.11	0	.00	0	.00	0					
	292001	02	01	1-42760-3100	BEN		350.69	0	23.19	0	.00	0					
	293001	02	01	1-42760-3100	BEN		350.69	0	23.20	0	.00	0					
				LABOR TOTALS			9,806.70		582.24		.00		144.00		.00		.00
				BENEFIT TOTALS			781.58		46.39		.00						
SNOWDEN, BETTY J				2ST-2ADMI													
530-38-2030	230055	00	01	1-42287-2170	LBR		66627.14	0	5552.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230055	00	01	1-42287-3100	BEN		27896.54	0	2300.66	0	.00	0					
				LABOR TOTALS			66,627.14		5,552.26		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			27,896.54		2,300.66		.00						
SNYDER, JERROLD T																	
547-50-2154	292001	02	01	1-42622-1320	LBR		1668.70	0	110.41	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42622-1320	LBR		1668.69	0	110.40	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42622-1320	LBR		1668.69	0	629.83	0	.00	0	24.00	0	8.00	0	.00	0
	294002	02	01	1-42622-1320	LBR		2507.58	0	946.46	0	.00	0	36.00	0	12.00	0	.00	0
	292001	02	01	1-42622-3100	BEN		66.24	0	4.38	0	.00	0					
	293001	02	01	1-42622-3100	BEN		66.26	0	4.39	0	.00	0					
	294001	02	01	1-42622-3100	BEN		66.25	0	25.01	0	.00	0					
	294002	02	01	1-42622-3100	BEN		99.54	0	37.57	0	.00	0					
				LABOR TOTALS			7,513.66		1,797.10		.00		108.00		20.00		.00
				BENEFIT TOTALS			298.29		71.35		.00						
SNYDER, NICOLE E				1PE-1PEDV													
556-83-2430	180001	00	01	1-41745-2310	LBR		470.00	0	.00	0	.00	0	47.00	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/31/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC
	240001	00	01	2-32111-3100	BEN		.00	19-	6.31-	9-	.00	0				
				LABOR TOTALS			2,517.78		145.13		.00		373.00		21.50	
				BENEFIT TOTALS			47.08		2.71		.00					
TEPLITXKY, ALEXANDER P				2LS-2OML												
607-18-0659	280001	00	01	2-12919-2310	LBR		223.13	146	.00	0	.00	0	10.25	0	.00	0
	280001	00	01	2-12919-3200	BEN		4.17	2	.00	0	.00	0				
				LABOR TOTALS			223.13		.00		.00		10.25		.00	
				BENEFIT TOTALS			4.17		.00		.00					
TERRANOVA, CHERYL A				1GU-1ADMR												
547-66-8420	130013	00	01	1-41287-2170	LBR		41390.65	0	3891.29	0	.00	0	1897.70	0	174.00	0
	130013	00	01	1-41287-3100	BEN		21805.56	0	2002.33	0	.00	0				
	136606	00	01	6-10570-2185	LBR		2938.08	0	.00	0	.00	0	131.37	0	.00	0
	136606	00	01	6-10570-3100	BEN		1720.30	0	.00	0	.00	0				
				LABOR TOTALS			44,328.73		3,891.29		.00		2,029.07		174.00	
				BENEFIT TOTALS			23,525.86		2,002.33		.00					
TERRY, SUSAN L				2PE-2PE												
545-93-9262	260001	00	01	1-48412-2350	LBR		1500.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48412-3200	BEN		152.55	0	.00	0	.00	0				
				LABOR TOTALS			1,500.00		.00		.00		.00		.00	
				BENEFIT TOTALS			152.55		.00		.00					
THAGGERT, HENRY L				-												
435-64-6608	291001	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0
	291002	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0
	292001	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0
	293002	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0
	291001	02	01	1-42760-3100	BEN		747.76	0	.00	0	.00	0				
	291002	02	01	1-42760-3100	BEN		747.74	0	.00	0	.00	0				
	292001	02	01	1-42760-3100	BEN		1297.72	0	85.65	0	.00	0				
	292002	02	01	1-42760-3100	BEN		1297.75	0	85.66	0	.00	0				
	293001	02	01	1-42760-3100	BEN		1313.88	0	85.65	0	.00	0				
	293002	02	01	1-42760-3100	BEN		1313.96	0	85.67	0	.00	0				
	294001	02	01	1-42760-3100	BEN		1729.70	0	488.65	0	.00	0				
				LABOR TOTALS			38,038.46		3,347.24		.00		420.00		20.00	
				BENEFIT TOTALS			8,448.51		831.28		.00					
THAI, BINH N				2ST-2ADMI												
556-69-5289	230188	00	01	1-42287-2170	LBR		56775.49	0	4731.29	0	.00	0	2088.00	0	174.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO - OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC		
	230188	00	01	1-42287-3100	BEN	25598.06	0	2111.26	0	.00	0						
				LABOR TOTALS		56,775.49		4,731.29		.00		2,088.00		174.00			
				BENEFIT TOTALS		25,598.06		2,111.26		.00							
THAI, JANNY				2CO-2COUN													
558-59-5168	230305	00	01	1-42300-2170	LBR	77378.75	0	6490.73	0	.00	0	2088.00	0	174.00	0		
	230305	00	01	1-42300-3100	BEN	30450.48	0	2547.83	0	.00	0						
				LABOR TOTALS		77,378.75		6,490.73		.00		2,088.00		174.00			
				BENEFIT TOTALS		30,450.48		2,547.83		.00							
THAI, LISA NGUYEN				1IT-1NASA													
557-83-0483	280001	00	01	2-14520-2310	LBR	11566.00	0	990.00	0	.00	0	1107.00	0	90.00	0		
	280001	00	01	2-14520-3200	BEN	395.30	0	18.51	0	.00	0						
				LABOR TOTALS		11,566.00		990.00		.00		1,107.00		90.00			
				BENEFIT TOTALS		395.30		18.51		.00							
THAI, MAY				2AB-2CASH													
556-69-8806	230351	00	01	1-42149-2170	LBR	49022.20	0	4161.71	0	.00	0	2136.75	0	189.00	0		
	230351	00	01	1-42149-2360	LBR	1748.43	138-	960.35	138-	.00	0	77.75	0	44.00	0		
	230351	00	01	1-42149-3100	BEN	24125.18	0	1939.46	0	.00	0						
	230351	00	01	1-42149-3200	BEN	235.21	10-	174.51	10-	.00	0						
	230351	00	01	1-52239-2360	LBR	138.50	138	138.50	138	.00	0	.00	0	.00	0		
	230351	00	01	1-52239-3200	BEN	10.66	10	10.66	10	.00	0						
				LABOR TOTALS		50,909.13		5,260.56		.00		2,214.50		233.00			
				BENEFIT TOTALS		24,371.05		2,124.63		.00							
THAI, SON				2BH-2OTI													
580-18-3432	180002	00	01	2-12480-2310	LBR	448.00	0	98.00	0	.00	0	56.00	0	12.25	0		
	180002	00	01	2-12480-3200	BEN	15.90	0	9.34	0	.00	0						
	180002	00	01	2-12640-2310	LBR	448.00	0	98.00	0	.00	0	56.00	0	12.25	0		
	180002	00	01	2-12640-3200	BEN	15.85	0	9.32	0	.00	0						
				LABOR TOTALS		896.00		196.00		.00		112.00		24.50			
				BENEFIT TOTALS		31.75		18.66		.00							
THAI, TRUNG THANH				4AN-4ACC													
589-02-3118	430048	00	01	1-44040-2170	LBR	5093.55	0	3864.08	0	.00	0	213.50	0	161.97	0	.00	0
	430048	00	01	1-44040-3100	BEN	2458.51	0	1865.07	0	.00	0						
	230051	00	01	1-52362-2170	LBR	43864.00	0	.00	0	.00	0	1867.64	0	.00	0	.00	0
	230051	00	01	1-52362-3100	BEN	21581.75	0	.00	0	.00	0						
	430048	00	01	2-14610-2170	LBR	377.55	0	286.41	0	.00	0	15.86	0	12.03	0	.00	0
	430048	00	01	2-14610-3100	BEN	182.23	0	138.25	0	.00	0						
				LABOR TOTALS		49,335.10		4,150.49		.00		2,097.00		174.00		.00	
				BENEFIT TOTALS		24,222.49		2,003.32		.00							

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CORPORATION 001

FOOTHILL DE ANZA COM. ITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPOR. AGE 1027
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
THAM, JANICE YAT MANN				1LB-1TUTR														
548-81-7566	180001	00	01	1-41095-2310		LBR	278.00	278	278.00	278	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-41095-3200		BEN	5.20	5	5.20	5	.00	0						
	180001	00	01	1-41303-2310		LBR	272.00	278-	278.00-	278-	.00	0	68.75	0	.00	0	.00	0
	180001	00	01	1-41303-3200		BEN	5.09	5-	5.20-	5-	.00	0						
	180001	00	01	1-48302-2310		LBR	278.00	0	.00	0	.00	0	34.75	0	.00	0	.00	0
	180001	00	01	1-48302-3200		BEN	5.20	0	.00	0	.00	0						
				LABOR TOTALS			828.00		.00		.00		103.50		.00		.00	
				BENEFIT TOTALS			15.49		.00		.00							
THANG, JU				4SS-4DSS2														
558-61-0439	460002	00	01	1-44358-2320		LBR	60.75	0	.00	0	.00	0	2.00				--	0
	460002	00	01	1-44358-2350		LBR	7290.00	0	648.00	0	.00	0	360.00					
	460002	00	01	1-44358-2360		LBR	1458.00	0	60.75	0	.00	0	48.00				0.	C
	460002	00	01	1-44358-3200		BEN	895.83	0	72.08	0	.00	0						
				LABOR TOTALS			8,808.75		708.75		.00		410.00				60,163.09	+
				BENEFIT TOTALS			895.83		72.08		.00						26,884.93	+
																	87,048.92	*
THANH, QUANG X				2LS-2LIB														
586-40-2421	230002	00	01	1-42306-2170		LBR	60163.99	0	5073.42	0	.00	0	2088.00					
	230002	00	01	1-42306-3100		BEN	26884.93	0	2253.10	0	.00	0						
																	87,048.92	÷
				LABOR TOTALS			60,163.99		5,073.42		.00		2,088.00				1,800.	=
				BENEFIT TOTALS			26,884.93		2,253.10		.00						48.36051111	*
THAO, CHANTAL																		
559-91-1586	292099	03	01	1-42023-1430		LBR	100.00	0	.00	0	.00	0	2.00					
	292099	03	01	1-42023-3200		BEN	7.97	0	.00	0	.00	0					0.	C
	291001	02	01	1-42654-1320		LBR	1997.62	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	291002	02	01	1-42654-1320		LBR	3991.66	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42654-1320		LBR	4400.17	0	291.13	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42654-1320		LBR	4400.17	0	291.13	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	294003	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42654-1445		LBR	503.22	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42654-1445		LBR	503.16	0	167.72	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42654-3100		BEN	40.10	0	.00	0	.00	0						
	274001	03	01	1-42654-3100		BEN	40.11	0	13.37	0	.00	0						
	291001	02	01	1-42654-3100		BEN	159.22	0	.00	0	.00	0						
	291002	02	01	1-42654-3100		BEN	318.12	0	.00	0	.00	0						
	292001	02	01	1-42654-3100		BEN	350.69	0	23.19	0	.00	0						
	292002	02	01	1-42654-3100		BEN	350.71	0	23.21	0	.00	0						
	294001	02	01	1-42654-3100		BEN	350.69	0	132.37	0	.00	0						
	302	02	01	1-42654-3100		BEN	350.74	0	132.3	0	.00	0						
	.003	02	01	1-42654-3100		BEN	350.69	0	132.3	0	.00	0						

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	I
	173001	03	01	1-41502-1445	LBR		503.16	0	.00	0	.00	0	12.00	0	.00	0	
	172001	03	01	1-41502-3100	BEN		36.76	0	.00	0	.00	0					
	173001	03	01	1-41502-3100	BEN		40.11	0	.00	0	.00	0					
	191001	02	01	1-41502-3100	BEN		190.99	0	.00	0	.00	0					
	191002	02	01	1-41502-3100	BEN		191.00	0	.00	0	.00	0					
	192001	02	01	1-41502-3100	BEN		210.56	0	13.93	0	.00	0					
	192002	02	01	1-41502-3100	BEN		210.54	0	13.93	0	.00	0					
	193001	02	01	1-41502-3100	BEN		210.53	0	13.92	0	.00	0					
	194001	02	01	1-41502-3100	BEN		210.53	0	79.47	0	.00	0					
				LABOR TOTALS			16,324.01		1,521.42		.00		240.00		12.00		
				BENEFIT TOTALS			1,301.02		121.25		.00						
TIEN, SANITH				2LS-2LIB													
615-04-8477	240001	00	01	1-44036-3100	BEN		8.30	8	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		443.82	0	.00	0	.00	0	65.75	0	.00	0	.00	0
				LABOR TOTALS			443.82		.00		.00		65.75		.00		.00	
				BENEFIT TOTALS			8.30		.00		.00							
TILLES, DANIEL DAVID				2CE-2SHOR													
566-24-3716	260013	00	01	1-52360-2350	LBR		238.00	0	.00	0	.00	0	2.50	0	.00	0	.00	0
	260013	00	01	1-52360-3200	BEN		24.21	0	.00	0	.00	0						
				LABOR TOTALS			238.00		.00		.00		2.50		.00		.00	
				BENEFIT TOTALS			24.21		.00		.00							
TIN, TSZ TO				1LB-1TUTR													
613-43-6786	180001	00	01	1-48302-2410	LBR		592.00	0	80.00	0	.00	0	74.00	0	10.00	0	.00	0
	180001	00	01	1-48302-3200	BEN		11.08	0	1.50	0	.00	0						
				LABOR TOTALS			592.00		80.00		.00		74.00		10.00		.00	
				BENEFIT TOTALS			11.08		1.50		.00							
TING, JUDY LEE				2ST-2ADMI													
113-34-3329	230360	00	01	1-42287-2170	LBR		54807.50	0	4567.29	0	.00	0	2088.00	0	174.00	0	.00	0
	230360	00	01	1-42287-3100	BEN		21268.06	0	1772.33	0	.00	0						
				LABOR TOTALS			54,807.50		4,567.29		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,268.06		1,772.33		.00							
TINSLEY, BARBARA H																		
396-34-3326	191001	02	01	1-41806-1320	LBR		5739.23	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	194001	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	194002	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	194003	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	174001	03	01	1-41806-1445	LBR		615.71	0	187.39	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41806-3100	BEN		62.62	0	19.06	0	.00	0						
	191001	02	01	1-41806-3100	BEN		583.69	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
LABOR TOTALS								811.70		21.94		.00		120.25		3.25		.00	
BENEFIT TOTALS								15.19		.41		.00							
TODD JR, MYRON DELIN	1PE-1PEDV																		
613-36-2613	180001	00	01	1-41745-2310	LBR			4030.00	0	.00	0	.00	0	403.00	0	.00	0	.00	0
	180001	00	01	1-41745-3200	BEN			75.37	0	.00	0	.00	0						
LABOR TOTALS								4,030.00		.00		.00		403.00		.00		.00	
BENEFIT TOTALS								75.37		.00		.00							
TOEWS, MICHAEL LEE	2WF-2OTI																		
626-30-6164	280002	00	01	2-12249-2310	LBR			296.00	0	.00	0	.00	0	37.00	0	.00	0	.00	0
	280002	00	01	2-12249-3200	BEN			17.78	0	.00	0	.00	0						
	280002	00	01	2-12640-2310	LBR			296.00	0	.00	0	.00	0	37.00	0	.00	0	.00	0
	280002	00	01	2-12640-3200	BEN			17.77	0	.00	0	.00	0						
LABOR TOTALS								592.00		.00		.00		74.00		.00		.00	
BENEFIT TOTALS								35.55		.00		.00							
TOFFT, IRENE LIDA	2SE-2DSS																		
566-77-3129	260001	00	01	2-22224-2350	LBR			1692.36	0	.00	0	.00	0	54.00	0	.00	0	.00	0
	260002	00	01	2-22224-2350	LBR			108.00	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	260001	00	01	2-22224-3200	BEN			172.13	0	.00	0	.00	0						
	260002	00	01	2-22224-3200	BEN			10.98	0	.00	0	.00	0						
LABOR TOTALS								1,800.36		.00		.00		57.00		.00		.00	
BENEFIT TOTALS								183.11		.00		.00							
TOIVIO, JOHANNA ARJA	1SA-1BOOK																		
609-15-7391	180001	00	01	1-48126-2310	LBR			475.88	0	.00	0	.00	0	70.50	0	.00	0	.00	0
	180001	00	01	1-48126-3200	BEN			45.30	0	.00	0	.00	0						
LABOR TOTALS								475.88		.00		.00		70.50		.00		.00	
BENEFIT TOTALS								45.30		.00		.00							
TOLEDO, RICHARD J	1BH-1EMT																		
570-63-6667	160003	00	01	1-51142-2350	LBR			587.26	0	202.50	0	.00	0	29.00	0	10.00	0	.00	0
	160003	00	01	1-51142-3200	BEN			59.75	0	20.61	0	.00	0						
LABOR TOTALS								587.26		202.50		.00		29.00		10.00		.00	
BENEFIT TOTALS								59.75		20.61		.00							
TOMALINAS, ROBERT T	2ST-2ADMI																		
571-95-2785	260001	00	01	1-42287-2350	LBR			1804.59	0	1804.59	0	.00	0	116.50	0	116.50	0	.00	0
	260003	00	01	1-42287-2350	LBR			983.62	0	.00	0	.00	0	63.50	0	.00	0	.00	0
	260004	00	01	1-42287-2350	LBR			380.88	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	260001	00	01	1-42287-3200	BEN			183.54	0	183.54	0	.00	0						
	260003	00	01	1-42287-3200	BEN			100.02	0	.00	0	.00	0						
	260004	00	01	1-42287-3200	BEN			38.74	0	.00	0	.00	0						

A&R Evaluation Specialist

2350 Hourly Non-Instr.

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DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DAT DIRECT	RLO
LABOR TOTALS							3,169.09		1,804.59		.00		204.00		116.50	
BENEFIT TOTALS							322.30		183.54		.00					
TOMANENG, ROWENA MAGDALEN			2LA-2ENGL													
560-73-5790	250358	00	01	1-42662-1160	LBR		52402.44	3053-	5789.25	0	.00	0	1154.92	0	123.04	0
	250358	00	01	1-42662-1260	LBR		17467.51	3053	1929.75	0	.00	0	301.45	0	41.02	0
	294003	02	01	1-42662-1330	LBR		429.52	0	429.52	0	.00	0	5.00	0	5.00	0
	250358	00	01	1-42662-3100	BEN		19438.97	0	2060.78	0	.00	0				
	294003	02	01	1-42662-3100	BEN		17.05	0	17.05	0	.00	0				
	293001	02	01	1-42682-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0
	294001	02	01	1-42682-1320	LBR		2255.01	0	851.13	0	.00	0	24.00	0	8.00	0
	294002	02	01	1-42682-1320	LBR		4692.20	0	1771.03	0	.00	0	48.00	0	16.00	0
	293001	02	01	1-42682-3100	BEN		179.07	0	11.85	0	.00	0				
	294001	02	01	1-42682-3100	BEN		89.52	0	33.80	0	.00	0				
	294002	02	01	1-42682-3100	BEN		186.29	0	70.31	0	.00	0				
LABOR TOTALS							81,756.70		11,069.06		.00		1,581.37		193.06	
BENEFIT TOTALS							19,910.90		2,193.79		.00					
TOMITA, IKUKO																
622-28-2735	194001	03	01	1-41412-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	194001	03	01	1-41412-3200	BEN		22.84	10	.00	0	.00	0				
	150116	00	01	1-41654-1160	LBR		81942.10	0	8194.21	0	.00	0	1400.00	0	140.00	0
	191001	02	01	1-41654-1320	LBR		6190.56	0	.00	0	.00	0	56.00	0	.00	0
	150116	00	01	1-41654-3100	BEN		24400.02	0	2203.09	0	.00	0				
	191001	02	01	1-41654-3100	BEN		754.71	10	.00	0	.00	0				
LABOR TOTALS							88,232.66		8,194.21		.00		1,458.00		140.00	
BENEFIT TOTALS							25,177.57		2,203.09		.00					
TON, AMY HIEU			2ST-2FNAI													
603-68-3190	240001	00	01	1-44036-3100	BEN		28.71	28	.00	0	.00	0				
	240001	00	01	2-32111-2700	LBR		1535.00	0	.00	0	.00	0	153.50	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	28-	.00	0	.00	0				
LABOR TOTALS							1,535.00		.00		.00		153.50		.00	
BENEFIT TOTALS							28.71		.00		.00					
TONPACK, FOYET ELISA			1AA-1BOOK													
614-47-4462	180001	00	01	1-48126-2310	LBR		3614.19	0	194.00	0	.00	0	514.00	0	24.25	0
	180002	00	01	1-48126-2310	LBR		160.00	0	160.00	0	.00	0	20.00	0	20.00	0
	180001	00	01	1-48126-3200	BEN		67.58	0	3.63	0	.00	0				
	180002	00	01	1-48126-3200	BEN		2.99	0	2.99	0	.00	0				
LABOR TOTALS							3,774.19		354.00		.00		534.00		44.25	
BENEFIT TOTALS							70.57		6.62		.00					
TONPACK, LARISSA NONGNI-			1AA-1BOOK													

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	192001	02	01	1-51502-3100	BEN		431.66	0	19.69	0	.00	0						
LABOR TOTALS							5,415.90		247.02		.00		108.06		.00		.00	
BENEFIT TOTALS							431.66		19.69		.00							
TRIEU, NGOC THANH				2LA-2TUTR														
623-41-6146	280001	00	01	1-48407-2410	LBR		188.00	0	.00	0	.00	0	23.50	0	.00	0	.00	0
	280001	00	01	1-48407-3200	BEN		3.51	0	.00	0	.00	0						
LABOR TOTALS							188.00		.00		.00		23.50		.00		.00	
BENEFIT TOTALS							3.51		.00		.00							
TRIGILIO, MICHAEL J			-															
466-33-8500	292001	02	01	1-42622-1320	LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00	0
	292002	02	01	1-42622-1320	LBR		1331.62	0	88.11	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42622-1320	LBR		1464.78	0	96.90	0	.00	0	24.00	0	.00	0	.00	0
	293002	02	01	1-42622-1320	LBR		1464.78	0	96.90	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42622-1320	LBR		1597.95	0	603.13	0	.00	0	24.00	0	8.00	0	.00	0
	294002	02	01	1-42622-1320	LBR		1331.64	0	502.62	0	.00	0	24.00	0	8.00	0	.00	0
	292001	02	01	1-42622-3100	BEN		127.37	0	8.43	0	.00	0						
	292002	02	01	1-42622-3100	BEN		106.13	0	7.02	0	.00	0						
	293001	02	01	1-42622-3100	BEN		116.76	0	7.73	0	.00	0						
	293002	02	01	1-42622-3100	BEN		116.73	0	7.71	0	.00	0						
	294001	02	01	1-42622-3100	BEN		127.36	0	48.08	0	.00	0						
	294002	02	01	1-42622-3100	BEN		106.15	0	40.07	0	.00	0						
	273001	03	01	1-42631-1445	LBR		457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42631-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42631-3100	BEN		36.45	0	.00	0	.00	0						
	274001	03	01	1-42631-3100	BEN		36.45	0	12.15	0	.00	0						
LABOR TOTALS							9,703.12		1,645.78		.00		168.00		20.00		.00	
BENEFIT TOTALS							773.40		131.19		.00							
TRIGO, YOVANIA DILIA				2CO-2COUN														
605-11-0639	280001	00	01	1-48403-2310	LBR		3929.26	0	345.63	0	.00	0	462.00	0	39.50	0	.00	0
	280001	00	01	1-48403-3200	BEN		73.48	0	6.46	0	.00	0						
LABOR TOTALS							3,929.26		345.63		.00		462.00		39.50		.00	
BENEFIT TOTALS							73.48		6.46		.00							
TRINH, CUONG PHUE				2BH-2ENVS														
554-89-7569	280001	00	01	1-48700-2310	LBR		113.75	0	.00	0	.00	0	13.00	0	.00	0	.00	0
	280001	00	01	1-48700-3200	BEN		2.12	0	.00	0	.00	0						
LABOR TOTALS							113.75		.00		.00		13.00		.00		.00	
BENEFIT TOTALS							2.12		.00		.00							
TRINH, LAN NGUYET				2ST-2FNAI														
586-18-1154	232218	00	01	2-12681-2170	LBR		31724.75	0	3649.96	0	.00	0	1566.00	0	174.00	0	.00	0

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DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPO
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLO		
	232218	00	01	2-12681-3100	BEN		13961.17	0	1577.74	0	.00	0						
	232218	00	01	2-12684-2170	LBR		10190.37	0	.00	0	.00	0	522.00	0	.00	(		
	232218	00	01	2-12684-3100	BEN		4572.16	0	.00	0	.00	0						
				LABOR TOTALS			41,915.12		3,649.96		.00		2,088.00		174.00			
				BENEFIT TOTALS			18,533.33		1,577.74		.00							
TRINH, MUOI				2PE-2PE														
548-55-1591	230142	00	01	1-42702-2180	LBR		54914.17	0	4576.18	0	.00	0	2088.00	0	174.00	0	.00	
	230142	00	01	1-42702-3100	BEN		25123.29	0	2093.61	0	.00	0						
				LABOR TOTALS			54,914.17		4,576.18		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			25,123.29		2,093.61		.00							
TRINH, NGUYEN PHUONG H				2CO-2COUN														
613-35-4045	280002	00	01	1-42763-2410	LBR		472.00	0	.00	0	.00	0	59.00	0	.00	0	.00	0
	280002	00	01	1-42763-3200	BEN		8.83	0	.00	0	.00	0						
				LABOR TOTALS			472.00		.00		.00		59.00		.00		.00	
				BENEFIT TOTALS			8.83		.00		.00							
TRIPP CALDWELL, KRISTIN R				1FA-1F TV														
456-73-9604	150070	00	01	1-41635-1160	LBR		64933.00	0	6493.30	0	.00	0	1400.00	0	140.00	0	.00	0
	191001	02	01	1-41635-1320	LBR		4578.82	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	150070	00	01	1-41635-3100	BEN		22172.87	0	1974.36	0	.00	0						
	191001	02	01	1-41635-3100	BEN		565.81	15	.00	0	.00	0						
				LABOR TOTALS			69,511.82		6,493.30		.00		1,430.00		140.00		.00	
				BENEFIT TOTALS			22,738.68		1,974.36		.00							
TRIVEDI, CAROL L.				-														
372-56-4574	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42503-1320	LBR		3925.34	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42503-1320	LBR		4009.42	0	265.26	0	.00	0	48.00	0	.00	0	.00	0
	291001	02	01	1-42503-3100	BEN		479.69	0	.00	0	.00	0						
	292001	02	01	1-42503-3100	BEN		489.93	0	32.41	0	.00	0						
				LABOR TOTALS			8,034.76		265.26		.00		98.00		.00		.00	
				BENEFIT TOTALS			981.84		32.41		.00							
TROGEN, ANNA JENNI				1SP-11SAD														
621-29-2326	180004	00	01	1-41300-2310	LBR		1110.00	1110	.00	0	.00	0	.00	0	.00	0	.00	0
	180004	00	01	1-41300-3200	BEN		20.76	20	.00	0	.00	0						
	180004	00	01	1-51939-2310	LBR		1127.50	1110-	.00	0	.00	0	223.75	0	.00	0	.00	0
	180004	00	01	1-51939-3200	BEN		21.08	20-	.00	0	.00	0						
	180005	00	01	2-21231-2310	LBR		2420.00	0	992.50	0	.00	0	242.00	0	99.25	0	.00	0
	180005	00	01	2-21231-3200	BEN		45.26	0	18.56	0	.00	0						

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41,915.12 +
18,533.33 +
60,449.45 *

60,449.45 ÷
1,800. =
33.58 *

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40,935.46 +
18,218.38 +
59,153.84 *

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1,800. =
32.86 *

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DA DIRECT	RL		
624-23-5663	240001	00	01	1-44036-3100	BEN		65.03	65	8.83	8	.00	0						
	240001	00	01	2-32111-2700	LBR		3477.94	0	166.25	0	.00	0	422.25	0	19.00			
	240001	00	01	2-32111-3100	BEN		.00	65-	5.72-	8-	.00	0						
				LABOR TOTALS			3,477.94		166.25		.00		422.25		19.00			
				BENEFIT TOTALS			65.03		3.11		.00							
VAN, HOANG DINH				4ET-4TSC2														
610-28-0830	430238	00	01	1-42200-2170	LBR		78015.45	0	6628.76	0	.00	0	2088.00	0	174.00	0	.00	0
	430238	00	01	1-42200-3100	BEN		30023.58	0	2529.02	0	.00	0						
				LABOR TOTALS			78,015.45		6,628.76		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			30,023.58		2,529.02		.00							
VAN, NINA NGUYEN				2ST-2FNAI														
008-78-1136	232216	00	01	2-12681-2170	LBR		30171.03	0	3478.65	0	.00	0	1566.00	0	174.00	0	.00	0
	232216	00	01	2-12681-2360	LBR		1075.84	0	134.95	0	.00	0	37.50	0	4.50	0	.00	0
	232216	00	01	2-12681-3100	BEN		13670.21	0	1546.29	0	.00	0						
	232216	00	01	2-12681-3200	BEN		82.50	0	10.33	0	.00	0						
	232216	00	01	2-12684-2170	LBR		9688.59	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	232216	00	01	2-12684-3100	BEN		4465.67	0	.00	0	.00	0						
				LABOR TOTALS			40,935.46		3,613.60		.00		2,125.50		178.50		.00	
				BENEFIT TOTALS			18,218.38		1,556.62		.00							
VAN, QUYNH NGOC				2LA-2LART														
607-06-7850	240001	00	01	1-44036-3100	BEN		63.16	63	15.33	15	.00	0						
	240001	00	01	2-32111-2700	LBR		3377.00	0	160.00	0	.00	0	362.50	0	16.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	63-	12.34-	15-	.00	0						
				LABOR TOTALS			3,377.00		160.00		.00		362.50		16.00		.00	
				BENEFIT TOTALS			63.16		2.99		.00							
VAN, THAI CONG				1IT-1NASA														
637-18-5403	280002	00	01	2-14520-2310	LBR		8297.00	0	.00	0	.00	0	813.00	0	.00	0	.00	0
	280002	00	01	2-14520-3200	BEN		295.69	0	.00	0	.00	0						
				LABOR TOTALS			8,297.00		.00		.00		813.00		.00		.00	
				BENEFIT TOTALS			295.69		.00		.00							
VANBUUREN, M LAMBERT																		
213-62-0521	291001	02	01	1-42618-1320	LBR		1574.92	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	291002	02	01	1-42618-1320	LBR		1574.92	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42618-1320	LBR		1602.87	0	604.99	0	.00	0	24.00	0	8.00	0	.00	0
	274001	03	01	1-42618-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	274001	03	01	1-42618-3100	BEN		42.48	0	14.16	0	.00	0						
	291001	02	01	1-42618-3100	BEN		121.57	0	.00	0	.00	0						
	291002	02	01	1-42618-3100	BEN		121.61	0	.00	0	.00	0						
	294001	02	01	1-42618-3100	BEN		123.76	0	46.71	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	172001	03	01	1-41654-1445	LBR		526.70	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		53.58	0	.00	0	.00	0						
	191001	02	01	1-41654-3100	BEN		258.19	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		468.37	0	30.99	0	.00	0						
	260001	00	01	1-52064-2350	LBR		900.00	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	260001	00	01	1-52064-3200	BEN		91.53	0	.00	0	.00	0						
				LABOR TOTALS			8,570.96		304.74		.00		144.00		.00		.00	
				BENEFIT TOTALS			871.67		30.99		.00							
WANG, MAXWELL HUNG				1SS-1POLI														
602-76-7345	180001	00	01	1-41046-2310	LBR		750.00	0	.00	0	.00	0	75.00	0	.00	0	.00	0
	180001	00	01	1-41046-3200	BEN		14.03	0	.00	0	.00	0						
				LABOR TOTALS			750.00		.00		.00		75.00		.00		.00	
				BENEFIT TOTALS			14.03		.00		.00							
WANG, MENG				2AC-2CMPS														
616-39-0919	280001	00	01	1-42224-2310	LBR		933.19	0	.00	0	.00	0	138.25	0	.00	0	.00	0
	280001	00	01	1-42224-3200	BEN		17.45	0	.00	0	.00	0						
				LABOR TOTALS			933.19		.00		.00		138.25		.00		.00	
				BENEFIT TOTALS			17.45		.00		.00							
WANG, MINGLE				2AC-2BOOK														
604-17-8675	280001	00	01	1-48226-2310	LBR		109.69	0	.00	0	.00	0	16.25	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.05	0	.00	0	.00	0						
				LABOR TOTALS			109.69		.00		.00		16.25		.00		.00	
				BENEFIT TOTALS			2.05		.00		.00							
WANG, PATRICK ZONG HO				2LA-2TUTR														
573-83-5246	280002	00	01	1-42221-2410	LBR		528.39	0	69.88	0	.00	0	51.00	0	6.50	0	.00	0
	280002	00	01	1-42221-3200	BEN		9.89	0	1.31	0	.00	0						
	280001	00	01	2-14520-2310	LBR		8565.00	0	.00	0	.00	0	856.50	0	.00	0	.00	0
	280001	00	01	2-14520-3200	BEN		398.82	0	.00	0	.00	0						
				LABOR TOTALS			9,093.39		69.88		.00		907.50		6.50		.00	
				BENEFIT TOTALS			408.71		1.31		.00							
WANG, QIAN				2LS-2LIB														
620-39-8901	240001	00	01	1-44036-3100	BEN		30.51	30	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		1631.81	0	.00	0	.00	0	241.75	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	30-	.00	0	.00	0						
				LABOR TOTALS			1,631.81		.00		.00		241.75		.00		.00	
				BENEFIT TOTALS			30.51		.00		.00							
WANG, RHODA				2AB-2BGTP														

Director's Budget Reviewed

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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134-56-3380	210016	00	01	1-42150-2110	LBR		52514.52	0	8752.42	0	.00	0	1044.00	0	174.00	0		
	210016	00	01	1-42150-3100	BEN		17723.39	0	2975.19	0	.00	0						
	420010	00	01	1-44046-2170	LBR		44341.09	0	.00	0	.00	0	947.08	0	.00	0		
	420010	00	01	1-44046-2360	LBR		1782.56	0	.00	0	.00	0	37.24	0	.00	0		
	420010	00	01	1-44046-3100	BEN		15170.20	0	.00	0	.00	0						
	420010	00	01	1-44046-3200	BEN		325.48	0	.00	0	.00	0						
	420010	00	01	2-14610-2170	LBR		3286.48	0	.00	0	.00	0	68.81	0	.00	0		
	420010	00	01	2-14610-2360	LBR		132.12	0	.00	0	.00	0	2.76	0	.00	0		
	420010	00	01	2-14610-3100	BEN		1124.35	0	.00	0	.00	0						
	420010	00	01	2-14610-3200	BEN		24.12	0	.00	0	.00	0						
				LABOR TOTALS			102,056.77		8,752.42		.00		2,099.89		174.00		.00	
				BENEFIT TOTALS			34,367.54		2,975.19		.00							
WANG, XIAO																		
519-45-4695	191001	02	01	1-41754-1320	LBR		8013.76	0	.00	0	.00	0	108.00	0	.00	0	.00	0
	193001	02	01	1-41754-1320	LBR		4678.59	0	309.54	0	.00	0	72.00	0	.00	0	.00	0
	192001	02	01	1-41754-1330	LBR		371.31	0	24.57	0	.00	0	4.50	0	.00	0	.00	0
	191001	02	01	1-41754-3100	BEN		618.67	0	.00	0	.00	0						
	192001	02	01	1-41754-3100	BEN		28.67	0	1.90	0	.00	0						
	193001	02	01	1-41754-3100	BEN		361.22	0	23.91	0	.00	0						
	293010	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293011	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	294005	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293010	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	293011	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294005	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	292001	02	01	1-42754-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00	0
	292002	02	01	1-42754-1320	LBR		1373.27	0	90.86	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42754-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00	0
	293002	02	01	1-42754-1320	LBR		1373.27	0	90.87	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42754-1320	LBR		961.71	0	362.99	0	.00	0	12.00	0	4.00	0	.00	0
	294002	02	01	1-42754-1320	LBR		1373.28	0	518.34	0	.00	0	24.00	0	8.00	0	.00	0
	292001	02	01	1-42754-3100	BEN		74.26	0	4.91	0	.00	0						
	292002	02	01	1-42754-3100	BEN		105.98	0	7.01	0	.00	0						
	293001	02	01	1-42754-3100	BEN		74.23	0	4.91	0	.00	0						
	293002	02	01	1-42754-3100	BEN		106.03	0	7.02	0	.00	0						
	294001	02	01	1-42754-3100	BEN		74.24	0	28.02	0	.00	0						
	294002	02	01	1-42754-3100	BEN		106.01	0	40.01	0	.00	0						
				LABOR TOTALS			20,368.61		1,524.43		.00		298.50		12.00		.00	
				BENEFIT TOTALS			1,572.47		117.69		.00							
WANG, XIUJUAN																		
277-84-7986	194004	03	01	1-41412-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	194004	03	01	1-41412-3200	BEN		12.56	0	.00	0	.00	0						
	150013	00	01	1-41757-1105	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150013	00	01	1-41757-1160	LBR		84400.40	0	8440.04	0	.00	0	1400.00	0	140.00	0	.00	0
	150013	00	01	1-41757-3100	BEN		21319.41	0	1862.28	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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				LABOR TOTALS			22,000.00		2,200.00		.00		1,740.00		174.00			
				BENEFIT TOTALS			745.80		246.84		.00							
WIRTH, NATHAN L			-															
572-65-2131	194050	03	01	1-41411-1430	LBR		22.50	0	.00	0	.00	0	1.50	0	.00	0		
	194050	03	01	1-41411-3200	BEN		1.80	0	.00	0	.00	0						
	194001	02	01	1-41662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0		
	194001	02	01	1-41662-3100	BEN		358.54	0	135.33	0	.00	0						
				LABOR TOTALS			4,521.24		1,698.02		.00		61.50		20.00		.00	
				BENEFIT TOTALS			360.34		135.33		.00							
WISHART JR, WILLIAM H			-															
605-05-3613	292001	02	01	1-42568-1320	LBR		2803.94	0	185.51	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42568-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42568-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42568-1320	LBR		2803.95	0	1058.33	0	.00	0	48.00	0	16.00	0	.00	0
	292001	02	01	1-42568-3100	BEN		342.64	0	22.67	0	.00	0						
	293001	02	01	1-42568-3100	BEN		342.59	0	22.67	0	.00	0						
	293002	02	01	1-42568-3100	BEN		342.69	0	22.68	0	.00	0						
	294001	02	01	1-42568-3100	BEN		342.64	0	129.32	0	.00	0						
				LABOR TOTALS			11,215.79		1,614.88		.00		192.00		16.00		.00	
				BENEFIT TOTALS			1,370.56		197.34		.00							
WISINSKI, ANABEL			2CD-2C D															
617-04-2449	280001	00	01	2-12310-2310	LBR		170.00	0	.00	0	.00	0	17.00	0	.00	0	.00	0
	280001	00	01	2-12310-3200	BEN		3.18	0	.00	0	.00	0						
				LABOR TOTALS			170.00		.00		.00		17.00		.00		.00	
				BENEFIT TOTALS			3.18		.00		.00							
WITKOP, INNA			1SM-1FAID															
605-94-5931	132212	00	01	2-11683-2170	LBR		9688.59	0	.00	0	.00	0	553.13	0	.00	0	.00	0
	132212	00	01	2-11683-3100	BEN		4465.67	0	.00	0	.00	0						
	132212	00	01	2-11684-2170	LBR		29999.74	0	3307.36	0	.00	0	1566.00	0	174.00	0	.00	0
	132212	00	01	2-11684-2360	LBR		684.29	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	132212	00	01	2-11684-3100	BEN		13619.32	0	1505.09	0	.00	0						
	132212	00	01	2-11684-3200	BEN		53.00	0	.00	0	.00	0						
				LABOR TOTALS			40,372.62		3,307.36		.00		2,143.13		174.00		.00	
				BENEFIT TOTALS			18,137.99		1,505.09		.00							
WOJNO, LAEL L			2CE-2OLDA															
074-38-4058	260001	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
				LABOR TOTALS			1,660.00		.00		.00		41.50		.00		.00	
				BENEFIT TOTALS			168.82		.00		.00							

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-D DIRECT	F
				LABOR TOTALS				615.00		.00		.00		61.50		.00	
				BENEFIT TOTALS				11.49		.00		.00					
WOO, PUI KUEN WALTER				2PS-2CHEM													
605-45-2694	280001	00	01	1-42754-2310	LBR			435.00	0	198.75	0	.00	0	58.00	0	26.50	
	280001	00	01	1-42754-3200	BEN			8.14	0	3.72	0	.00	0				
				LABOR TOTALS				435.00		198.75		.00		58.00		26.50	
				BENEFIT TOTALS				8.14		3.72		.00					
WOO, SHIREEN LUNA				2CO-2STAR													
549-69-0214	258879	00	01	1-42248-1260	LBR			46327.81	0	4211.62	0	.00	0	1091.86	0	99.26	0	.00	0
	258879	00	01	1-42248-3100	BEN			14876.36	0	1352.05	0	.00	0						
	258879	00	01	1-42250-1160	LBR			13236.48	0	1203.32	0	.00	0	311.96	0	28.36	0	.00	0
	258879	00	01	1-42250-3100	BEN			5427.22	0	386.29	0	.00	0						
	258879	00	01	2-12264-1260	LBR			6618.42	0	601.67	0	.00	0	156.09	0	14.19	0	.00	0
	258879	00	01	2-12264-3100	BEN			2125.21	0	193.15	0	.00	0						
				LABOR TOTALS				66,182.71		6,016.61		.00		1,559.91		141.81		.00	
				BENEFIT TOTALS				22,428.79		1,931.49		.00							
WOOD, GABRIEL THOMAS				1LB-1MDIA													
569-93-2328	180001	00	01	1-41311-2310	LBR			1888.70	0	307.50	0	.00	0	275.25	0	41.00	0	.00	0
	180001	00	01	1-41311-3200	BEN			35.31	0	5.75	0	.00	0						
				LABOR TOTALS				1,888.70		307.50		.00		275.25		41.00		.00	
				BENEFIT TOTALS				35.31		5.75		.00							
WOOD, MARY M																	
527-38-6235	192099	03	01	1-41263-1430	LBR			100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192099	03	01	1-41263-3200	BEN			10.77	0	.00	0	.00	0						
	191001	02	01	2-21291-1320	LBR			1113.20	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	191002	02	01	2-21291-1320	LBR			1113.20	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	2-21291-1320	LBR			897.02	0	59.36	0	.00	0	18.00	0	.00	0	.00	0
	191001	02	01	2-21291-3100	BEN			119.88	0	.00	0	.00	0						
	191002	02	01	2-21291-3100	BEN			119.92	0	.00	0	.00	0						
	192001	02	01	2-21291-3100	BEN			96.62	0	6.40	0	.00	0						
				LABOR TOTALS				3,223.42		59.36		.00		68.00		.00		.00	
				BENEFIT TOTALS				347.19		6.40		.00							
WOOD, PATRICIA MAY				1GU-1ADMR													
565-84-2447	130117	00	01	1-41287-2170	LBR			45589.36	0	4086.51	0	.00	0	2096.64	0	175.88	0	.00	0
	130117	00	01	1-41287-3100	BEN			19418.22	0	1670.36	0	.00	0						
				LABOR TOTALS				45,589.36		4,086.51		.00		2,096.64		175.88		.00	
				BENEFIT TOTALS				19,418.22		1,670.36		.00							

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	180001	00	01	2-11016-3200	BEN		3.55	0	.00	0	.00	0						
				LABOR TOTALS			190.00		.00		.00		19.00		.00		.00	
				BENEFIT TOTALS			3.55		.00		.00							
WU, BALDWIN S				4AN-4ACC														
365-82-3714	460001	00	01	1-44040-2350	LBR		5803.80	0	2987.25	0	.00	0	340.00	0	175.00	0	.00	0
	460001	00	01	1-44040-3200	BEN		1167.84	0	601.09	0	.00	0						
	280004	00	01	1-48226-2310	LBR		8440.51	0	.00	0	.00	0	662.00	0	.00	0	.00	0
	280004	00	01	1-48226-3200	BEN		504.09	0	.00	0	.00	0						
				LABOR TOTALS			14,244.31		2,987.25		.00		1,002.00		175.00		.00	
				BENEFIT TOTALS			1,671.93		601.09		.00							
WU, CHRISTINE TREFONG				2CD-2C D														
561-59-9334	280001	00	01	2-62352-2410	LBR		1083.75	0	.00	0	.00	0	85.00	0	.00	0	.00	0
	280001	00	01	2-62352-3200	BEN		20.27	0	.00	0	.00	0						
				LABOR TOTALS			1,083.75		.00		.00		85.00		.00		.00	
				BENEFIT TOTALS			20.27		.00		.00							
WU, ERIC W				1FA-1DRAM														
609-09-5702	160003	00	01	1-51643-2350	LBR		2249.28	0	.00	0	.00	0	176.00	0	.00	0	.00	0
	160003	00	01	1-51643-3200	BEN		228.75	0	.00	0	.00	0						
				LABOR TOTALS			2,249.28		.00		.00		176.00		.00		.00	
				BENEFIT TOTALS			228.75		.00		.00							
WU, HUNG YIP				2LA-2TUTR														
608-35-0092	280001	00	01	1-42220-2410	LBR		155.31	0	.00	0	.00	0	17.75	0	.00	0	.00	0
	280001	00	01	1-42220-3200	BEN		2.91	0	.00	0	.00	0						
	280001	00	01	1-48407-2410	LBR		250.00	0	.00	0	.00	0	31.25	0	.00	0	.00	0
	280001	00	01	1-48407-3200	BEN		4.67	0	.00	0	.00	0						
				LABOR TOTALS			405.31		.00		.00		49.00		.00		.00	
				BENEFIT TOTALS			7.58		.00		.00							
WU, MICHELLE FANG WEI				2AC-2BOOK														
216-31-0602	280001	00	01	1-48226-2310	LBR		440.44	0	286.88	0	.00	0	65.25	0	42.50	0	.00	0
	280001	00	01	1-48226-3200	BEN		8.23	0	5.36	0	.00	0						
				LABOR TOTALS			440.44		286.88		.00		65.25		42.50		.00	
				BENEFIT TOTALS			8.23		5.36		.00							
WU, TILLY LIU				-														
586-14-9358	191001	02	01	1-41250-1320	LBR		2728.90	0	.00	0	.00	0	18.00	0	.00	0	.00	0
	191002	02	01	1-41250-1320	LBR		1301.03	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	191001	02	01	1-41250-3100	BEN		412.55	11	.00	0	.00	0						
	191002	02	01	1-41250-3100	BEN		135.31	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC		
	191003	02	01	1-41250-3100	BEN		56.15-	0	.00	0	.00	0						
	150007	00	01	2-11668-1260	LBR		67140.69	4565	6103.70	0	.00	0	1364.20	0	133.30	0		
	150007	00	01	2-11668-3100	BEN		26874.87	1692	2348.75	0	.00	0						
	150007	00	01	2-11679-1260	LBR		4285.60	4565-	389.60	0	.00	0	195.71	0	8.51	0		
	150007	00	01	2-11679-3100	BEN		1715.35	1692-	149.91	0	.00	0						
				LABOR TOTALS			75,456.22		6,493.30		.00		1,589.91		141.81			
				BENEFIT TOTALS			29,081.93		2,498.66		.00							
WU, XUEMEI				1IT-1NASA														
615-92-5871	180001	00	01	2-14516-2310	LBR		2640.00	0	920.00	0	.00	0	264.00	0	92.00	0		
	180001	00	01	2-14516-3200	BEN		49.37	0	17.20	0	.00	0						
				LABOR TOTALS			2,640.00		920.00		.00		264.00		92.00			
				BENEFIT TOTALS			49.37		17.20		.00							
WU, YING-KUANG G				4AN-4ACC														
587-15-4735	420314	00	01	1-44040-2170	LBR		94019.61	0	7834.96	0	.00	0	1956.10	0	163.10	0		
	420314	00	01	1-44040-3100	BEN		31831.98	0	2701.20	0	.00	0						
	420314	00	01	2-14610-2170	LBR		6968.62	0	580.73	0	.00	0	144.28	0	12.03	0		
	420314	00	01	2-14610-3100	BEN		2359.40	0	200.24	0	.00	0						
				LABOR TOTALS			100,988.23		8,415.69		.00		2,100.38		175.13		.00	
				BENEFIT TOTALS			34,191.38		2,901.44		.00							
WULCZYNSKI, SHERI L				1BH-1RSPT														
566-69-8981	180001	00	01	1-41091-2310	LBR		48.00	0	.00	0	.00	0	4.00	0	.00	0	.00	0
	160001	00	01	1-41091-2350	LBR		716.49	0	289.11	0	.00	0	28.50	0	11.50	0	.00	0
	160001	00	01	1-41091-3200	BEN		72.87	0	29.40	0	.00	0						
	180001	00	01	1-41091-3200	BEN		.90	0	.00	0	.00	0						
				LABOR TOTALS			764.49		289.11		.00		32.50		11.50		.00	
				BENEFIT TOTALS			73.77		29.40		.00							
WYATT JR, JAMES BASCOMB																		
556-27-0569	191001	02	01	1-41461-1320	LBR		4356.81	0	.00	0	.00	0	63.96	0	.00	0	.00	0
	191001	02	01	1-41461-3100	BEN		532.42	0	.00	0	.00	0						
	192001	02	01	1-41470-1320	LBR		1403.59	0	92.88	0	.00	0	24.00	0	.00	0	.00	0
	192002	02	01	1-41470-1320	LBR		2573.21	0	170.24	0	.00	0	42.00	0	.00	0	.00	0
	193001	02	01	1-41470-1320	LBR		2027.40	0	134.13	0	.00	0	42.00	0	.00	0	.00	0
	193002	02	01	1-41470-1320	LBR		1403.61	0	92.88	0	.00	0	21.00	0	.00	0	.00	0
	194001	02	01	1-41470-1320	LBR		1403.61	0	529.79	0	.00	0	24.00	0	8.00	0	.00	0
	194002	02	01	1-41470-1320	LBR		2807.16	0	1059.54	0	.00	0	42.00	0	14.00	0	.00	0
	192001	02	01	1-41470-3100	BEN		171.52	0	11.35	0	.00	0						
	192002	02	01	1-41470-3100	BEN		314.42	0	20.80	0	.00	0						
	193001	02	01	1-41470-3100	BEN		247.72	0	16.39	0	.00	0						
	193002	02	01	1-41470-3100	BEN		171.56	0	11.37	0	.00	0						
	194001	02	01	1-41470-3100	BEN		171.50	0	64.73	0	.00	0						
	194002	02	01	1-41470-3100	BEN		343.04	0	129.48	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DA DIRECT	RL		
				LABOR TOTALS			3,103.75		477.50		.00		65.00		10.00			
				BENEFIT TOTALS			247.34		38.05		.00							
ZAMORA RODRIGUEZ, JOSE			2AC-2CUST															
721-09-6574	260001	00	01	1-41118-2350	LBR		9789.12	0	.00	0	.00	0	864.00	0	.00			
	260001	00	01	1-41118-3200	BEN		1717.61	0	.00	0	.00	0						
	260003	00	01	1-48224-2350	LBR		1706.38	3456-	.00	0	.00	0	355.25	0	.00	0	.00	0
	260003	00	01	1-48224-2360	LBR		136.75	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	260003	00	01	1-48224-3200	BEN		312.69	608-	.00	0	.00	0						
	260001	00	01	1-48228-2350	LBR		2685.31	0	.00	0	.00	0	262.75	0	.00	0	.00	0
	260003	00	01	1-48228-2350	LBR		3456.92	3456	.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48228-2360	LBR		350.03	0	.00	0	.00	0	22.50	0	.00	0	.00	0
	260001	00	01	1-48228-3200	BEN		499.44	0	.00	0	.00	0						
	260003	00	01	1-48228-3200	BEN		608.48	608	.00	0	.00	0						
				LABOR TOTALS			18,124.51		.00		.00		1,507.50		.00		.00	
				BENEFIT TOTALS			3,138.22		.00		.00							
ZAMORA, LILLIAN DOROTHY			2CO-2TSTG															
559-15-8464	230128	00	01	1-42226-2170	LBR		.00	3617-	3617.96-	3617-	.00	0	182.54	0	.00	0	.00	0
	230128	00	01	1-42226-3100	BEN		.00	1610-	1610.37-	1610-	.00	0						
	230128	00	01	2-12650-2170	LBR		28942.58	3617	3617.96	3617	.00	0	1295.55	0	.00	0	.00	0
	230128	00	01	2-12650-3100	BEN		12881.89	1610	1610.37	1610	.00	0						
	230128	00	01	2-12664-2170	LBR		2099.46	0	.00	0	.00	0	105.91	0	.00	0	.00	0
	230191	00	01	2-12664-2170	LBR		10347.36	0	3449.12	0	.00	0	522.00	0	174.00	0	.00	0
	230128	00	01	2-12664-3100	BEN		934.44	0	.00	0	.00	0						
	230191	00	01	2-12664-3100	BEN		4605.47	0	1535.16	0	.00	0						
				LABOR TOTALS			41,389.40		3,449.12		.00		2,106.00		174.00		.00	
				BENEFIT TOTALS			18,421.80		1,535.16		.00							
ZANARDI, RICHARD M			-															
560-62-9341	292001	02	01	1-42620-1320	LBR		3257.07	0	215.49	0	.00	0	54.00	0	.00	0	.00	0
	292002	02	01	1-42620-1320	LBR		856.55	0	56.68	0	.00	0	18.00	0	.00	0	.00	0
	292001	02	01	1-42620-3100	BEN		129.30	0	8.56	0	.00	0						
	292002	02	01	1-42620-3100	BEN		34.01	0	2.25	0	.00	0						
				LABOR TOTALS			4,113.62		272.17		.00		72.00		.00		.00	
				BENEFIT TOTALS			163.31		10.81		.00							
ZARANTONELLO, MARY W			-															
244-54-9919	292001	02	01	1-42760-1320	LBR		5010.62	0	331.51	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4927.14	0	326.00	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5010.65	0	1891.23	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		549.13	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		45.66	0	.00	0	.00	0						

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Foothill-De Anza Com nity College District
308/95 Enrollment Fee ollection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. (See documentation in the 05-06 claim only.)
Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,790
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,296
	Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.							
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,399
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee					
1.8-4 line 5	Summer							
	Fall							
	Winter/Interssion							
	Spring							
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,318
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298						
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**

CALIFORNIA COMMUNITY COLLEGES Exhibit B-2A
CATEGORICAL APPORTIONMENTS - PART 1
2004-2005 SECOND PRINCIPAL APPORTIONMENT

16:14 Thursday, June 23, 2005

COUNTY	DISTRICT	FEE WAIVER ADMIN (2%)	STUDENT FINANCIAL AID ADMIN	E.O.P.S.	C.A.R.E.	D.S.P.S.	STATE HOSPITALS	TANF (GAIN)	CALWORKS
San Francisco	San Francisco	96,645	945,498	1,533,782	60,230	2,300,811	0	171,557	750,600
San Joaquin	San Joaquin Delta	106,922	688,229	1,563,049	277,122	1,182,570	0	175,855	753,857
San Luis Obispo	San Luis Obispo	40,063	328,028	407,953	112,559	727,175	0	25,789	136,418
San Mateo	San Mateo	75,866	745,553	1,494,501	109,773	1,487,620	0	38,871	171,573
Santa Barbara	Allan Hancock	41,991	287,055	603,711	241,653	757,330	0	68,238	392,912
	Santa Barbara	61,800	400,019	987,387	90,200	881,572	0	40,894	215,942
Santa Barbara		103,791	687,074	1,591,098	331,853	1,638,902	0	109,132	608,854
Santa Clara	Foothill-DeAnza	84,495	943,126	1,595,477	136,516	3,970,772	0	67,731	308,737
	Gavilan	19,536	204,998	447,027	114,505	649,574	0	19,045	84,318
	San Jose-Evergreen	89,284	644,991	1,575,910	132,353	815,789	0	110,155	693,877
	West Valley-Mission	37,881	526,901	1,133,306	126,494	1,225,301	292,468	48,780	246,380
Santa Clara		231,196	2,320,016	4,751,720	509,868	6,661,436	292,468	245,711	1,333,312
Santa Cruz	Cabrillo	47,338	389,682	452,871	144,996	1,535,036	0	40,554	199,960
Shasta	Shasta-Tehama-Trinity	33,756	399,069	941,623	161,985	635,163	0	89,222	402,676
Siskiyou	Siskiyou	15,562	160,229	337,409	61,076	358,044	0	25,027	109,569
Solano	Solano	34,275	294,515	457,526	88,486	604,549	0	43,544	190,506
Sonoma	Sonoma	67,983	592,118	594,788	62,724	1,951,708	0	69,359	282,968
Stanislaus	Yosemite	82,891	640,818	1,455,256	155,897	1,660,851	0	151,913	678,226
Tulare	Sequoias	64,550	435,620	915,995	176,568	693,405	0	89,859	364,415
Ventura	Ventura	118,378	1,048,011	1,920,704	276,544	2,388,571	0	96,539	358,883
Yuba	Yuba	52,706	387,121	954,628	215,274	641,664	0	111,000	389,319
		5,461,100	44,538,000	86,068,993	12,720,279	83,313,363	1,638,637	8,000,000	34,580,000

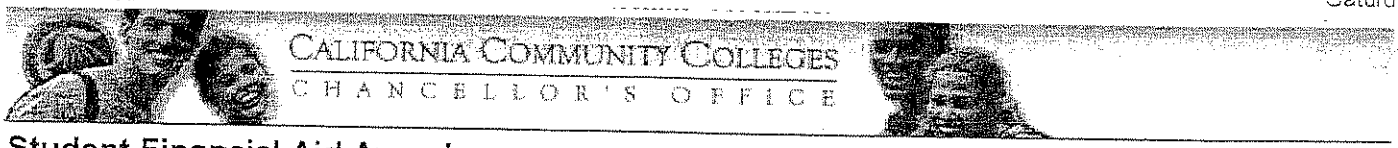
Schedule 5A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Initial year claim 98-99 through 05-06.
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,875.05
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 143,144.78
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$155,700.00	$163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$(105,724.20)	$(166,880.97)	$(176,159.90)	$(163,502.22)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 143,144.78**

California Home

Saturd



Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 24, 2006 03:16:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	20	7,565
BOGW - Part A-2 based on SSI recipient status	25	5,888
BOGW - Part A-3 based on general assistance recipient status	7	2,450
BOGW - Part A-4 based on Veteran's or National Guard dependent status	18	3,292
BOGW - Part B based on income standards	1,126	365,031
BOGW - Part C based on financial need	1,744	736,070

Total Unduplicated Count = 2,939
Total Amount = $ 1,120,296

Back to Top of Page

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2,939.00 ÷

6,978.00 ÷

3,917.00 *

waivers approved

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 24, 2006 03:14:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	203	75,446
BOGW - Part A-2 based on SSI recipient status	442	166,689
BOGW - Part A-3 based on general assistance recipient status	6	1,724
BOGW - Part A-4 based on Veteran's or National Guard dependent status	21	5,697
BOGW - Part B based on income standards	1,908	622,295
BOGW - Part C based on financial need	4,409	2,013,984

Total Unduplicated Count = 6,978
Total Amount = $ 2,885,835

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 11, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2006-2007
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Bramwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 43045
(02) Claimant Name: Foothill-De Anza Community College District
County of Location: Santa Clara
Street Address or P.O. Box: 12345 El Monte Road
City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,691,674
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,681,674
Due from State	(08)	(17) $ 1,681,674
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,862
(23) EFCW-1, (04)(A)(1)(b)(f)	6,118
(24) EFCW-1, (04)(A)(2)(a)(f)	1,333,627
(25) EFCW-1, (04)(B)(1)(a)(f)	3,615
(26) EFCW-1, (04)(B)(1)(b)(f)	2,363
(27) EFCW-1, (04)(B)(2)(a)(f)	20,875
(28) EFCW-1, (04)(B)(2)(b)(f)	105,073
(29) EFCW-1, (04)(B)(2)(c)(f)	11,218
(30) EFCW-1, (06)	29
(31) EFCW-1, (07)	429,382
(32) EFCW-1, (09)	80,315
(33) EFCW-1, (10)	143,145
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

BW

Andrew Dunn
Type or Print Name

Date: 12/20/07

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

›gram 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Foothill-De Anza Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,862.48	$ -	$ -	$ -	$ -	$ 2,862.48
b. Staff training (One time per employee)	$ 6,117.61	$ -	$ -	$ -	$ -	$ 6,117.61
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment ›es	$ 1,333,626.78	$ -	$ -	$ -	$ -	$ 1,333,626.78
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,615.30	$ -	$ -	$ -	$ -	$ 3,615.30
b. Staff training (One time per employee)	$ 2,363.45	$ -	$ -	$ -	$ -	$ 2,363.45
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 20,875.05	$ -	$ -	$ -	$ -	$ 20,875.05
b. Waiving student fees	$ 105,072.91	$ -	$ -	$ -	$ -	$ 105,072.91
c. Reporting BOG fee waiver data to CCC	$ 11,218.07	$ -	$ -	$ -	$ -	$ 11,218.07
(05) Total Direct Costs	$ 1,485,751.65	$ -	$ -	$ -	$ -	$ 1,485,751.65

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	28.90%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 429,382.23
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,915,133.88
Cost Reduction		
(09) ‹ess: Enrollment Fee Revenue offset		$ 80,315.00
(10) ‹ Enrollment Fee Waiver offsets		$ 143,144.78
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,691,674.10

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chao, Nancy	Cashiering Supervisor	$52.55	40.0	$ 2,102.00				
Thai, May	Senior Cashier	$43.07	8.0	$ 344.56				
Thanh, Henry	Senior Cashier	$51.99	8.0	$ 415.92				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 2,862.48	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Castillo, Cindy	Manager, Financial Aid	$71.07	3.0	$ 213.21				
Chao, Nancy	Cashiering Supervisor	$52.55	40.0	$ 2,102.00				
Thai, May	Senior Cashier	$43.07	40.0	$ 1,722.80				
Thanh, Henry	Senior Cashier	$51.99	40.0	$ 2,079.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,117.61	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$43.80	7,599.3	$ 332,849.34				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$43.80	6,318.2	$ 276,737.16				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$43.80	9,987.7	$ 437,461.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$43.80	5,212.5	$ 228,307.50				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$43.80	1,330.4	$ 58,271.52				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,333,626.78	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Manager, Financial Aid	$71.07	10.0	$ 710.70				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	10.0	$ 417.30				
Collings, Earl - Foothill	Web Coordinator	$75.50	30.0	$ 2,265.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,615.30	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	5.0	$ 249.65				
Feldman, Joyce K	Financial Aid Assistant	$44.46	10.0	$ 444.60				
Harrai, Kevin	Financial Aid Outreach Coordinator	$41.73	40.0	$ 1,669.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,363.45	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	5.0	$ 249.65				
Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	100.0	$ 7,321.00				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	40.0	$ 1,669.20				
Chao, Nancy	Cashiering Supervisor	$52.55	8.0	$ 420.40				
Pabros, Angelita	Division Assistant	$42.64	125.0	$ 5,330.00				
Collings, Earl - Foothill	Web Coordinator	$75.50	35.0	$ 2,642.50				
Collings, Earl - DeAnza	Web Coordinator	$75.50	40.0	$ 3,020.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 20,875.05	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	609.1	$ 28,956.61				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	400.3	$ 19,030.26				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	469.9	$ 22,339.05				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	730.9	$ 34,746.99				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 105,072.91	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	40.0	$ 1,997.20				
Castillo, Cindy	Manager, Financial Aid	$71.07	20.0	$ 1,421.40				
Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	40.0	$ 2,928.40				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Gusman, Frances	Dean, Student Outreach	$76.33	2.0	$ 152.66				
Renteria, Matilda	Financial Aid Coordinator	$54.17	83.0	$ 4,496.11				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,218.07	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District

308/95 ENROLLMENT FEE EXCEPTIONS/WAIVERS

2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$249.65	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$249.65	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	40.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$1,997.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.00	**Bloom, Susan Lynn Total**			$2,496.50		
05-06	10.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$710.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	3.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$213.21	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	20.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$1,421.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	33.00	**Castillo, Cindy Total**			$2,345.31		
05-06	40.00	Chao, Nancy	Cashiering Supervisor	$52.55	$2,102.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Chao, Nancy	Cashiering Supervisor	$52.55	$2,102.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	8.00	Chao, Nancy	Cashiering Supervisor	$52.55	$420.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	88.00	**Chao, Nancy Total**			$4,624.40		
05-06	40.00	Collings, Earl - DeAnza	Web Coordinator	$75.50	$3,020.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	40.00	**Collings, Earl - DeAnza Total**			$3,020.00		
05-06	30.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$2,265.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	30.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$2,265.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	5.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$377.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	65.00	**Collings, Earl - Foothill Total**			$4,907.50		
05-06	100.00	Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	$7,321.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	40.00	Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	$2,928.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	140.00	**Coyne, Sheila Nora Total**			$10,249.40		
05-06	7,599.30	Enrollment Office Staff	Collecting Fees	$43.80	$332,849.34	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,318.20	Enrollment Office Staff	Collecting Fees	$43.80	$276,737.16	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	9,987.70	Enrollment Office Staff	Collecting Fees	$43.80	$437,461.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,212.50	Enrollment Office Staff	Collecting Fees	$43.80	$228,307.50	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	1,330.40	Enrollment Office Staff	Collecting Fees	$43.80	$58,271.52	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	30,448.10	**Enrollment Office Staff Total**			$1,333,626.78		
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	10.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$444.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining re
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	25.00	**Feldman, Joyce K Total**			$1,111.50		
05-06	609.10	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$28,956.61	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	400.30	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$19,030.26	Receiving waiver applications	Waiving student fees
05-06	469.90	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$22,339.05	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	730.90	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$34,746.99	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,210.20	**Financial Aid Office Staff Total**			$105,072.91		
05-06	2.00	Gusman, Frances	Dean, Student Outreach	$76.33	$152.66	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	2.00	**Gusman, Frances Total**			$152.66		
05-06	10.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$417.30	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$1,669.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver

Foothill-De Anza Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$1,669.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	90.00	**Harral, Kevin Total**			$3,755.70		
05-06	125.00	Pabros, Angelita	Division Assistant	$42.64	$5,330.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$5,330.00		
05-06	83.00	Renteria, Matilda	Financial Aid Coordinator	$54.17	$4,496.11	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	83.00	**Renteria, Matilda Total**			$4,496.11		
05-06	8.00	Thai, May	Senior Cashier	$43.07	$344.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Thai, May	Senior Cashier	$43.07	$1,722.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thai, May Total**			$2,067.36		
05-06	8.00	Thanh, Henry	Senior Cashier	$51.99	$415.92	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Thanh, Henry	Senior Cashier	$51.99	$2,079.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thanh, Henry Total**			$2,495.52		
	33,495.30	**Grand Total**			$1,485,751.65		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$88,722,888		$88,722,888	$352,089	$88,370,799
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,478,992		9,478,992	135,170	9,343,822
Course and Curriculum Development	6020	244,060		244,060	37,778	206,282
Academic/Faculty Senate	6030	226,850		226,850	1,795	225,055
Other Instructional Administration & Instructional Governance	6090	359,913		359,913		359,913
Instructional Support Services	6100					
Learning Center	6110	193,283		193,283	6,792	186,491
Library	6120	3,298,907		3,298,907	460	3,298,447
Media	6130	597,079		597,079	13,631	583,448
Museums and Galleries	6140	83,125		83,125		83,125
Academic Information Systems and Technology	6150	1,199,267		1,199,267	50,969	1,148,298
Other Instructional Support Services	6190	333,774		333,774	88,005	245,769
Admissions and Records	6200	3,373,585		3,373,585	1,700	3,371,885
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,693,765		3,693,765		3,693,765
Matriculation and Student Assessment	6320	1,294,824		1,294,824		1,294,824
Transfer Programs	6330	317,250		317,250	3,431	313,819
Career Guidance	6340	424,480		424,480		424,480
Other Student Counseling and Guidance	6390	318,421		318,421		318,421
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,033,410		1,033,410	63,046	970,364
Subtotal		$115,193,873	$0	$115,193,873	$754,866	$114,439,007

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,803,659		$1,803,659	$1,396	$1,802,263
Health Services	6440	1,331,812		1,331,812	2,914	1,328,898
Student Personnel Admin.	6450	229,437		229,437	2,287	227,150
Financial Aid Administration	6460	2,009,828		2,009,828	33,351	1,976,477
Job Placement Services	6470	599,465		599,465	8,084	591,381
Veterans Services	6480					
Miscellaneous Student Services	6490	855,469		855,469		855,469
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,911,513		3,911,513	3,911,513	0
Custodial Services	6530	3,416,808		3,416,808	3,416,808	0
Grounds Maintenance and Repairs	6550	1,534,999		1,534,999	1,534,999	0
Utilities	6570	1,820,425		1,820,425	1,820,425	0
Other	6590	836,976		836,976	836,976	0
Planning, Policy Making, and Coordination	6600	4,841,314		4,841,314	4,841,314	0
General Inst. Support Services	6700					
Community Relations	6710	1,507,635		1,507,635	1,507,635	0
Fiscal Operations	6720	1,709,662		1,709,662	1,709,662	0
Human Resources Management	6730	2,393,172		2,393,172	2,393,172	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	418,224		418,224	418,224	0
Staff Diversity	6760	181,655		181,655	181,655	0
Logistical Services	6770	6,541,677		6,541,677	6,541,677	0
Management Information Systems	6780	7,093,748		7,093,748	7,093,748	0
Subtotal		$158,231,351	$0	$158,231,351	$37,010,706	$121,220,645

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,104,264		1,104,264	1,104,264	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,754,490		1,754,490	32,721	1,721,769
Community Service Classes	6820	1,619,868		1,619,868	13,439	1,606,429
Community Use of Facilities	6830	511,647		511,647		511,647
Economic Development	6840	385,916		385,916	2,010	383,906
Other Community Services & Economic Development	6890	38,212		38,212		38,212
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,123,070		1,123,070		1,123,070
Student and Co-curricular Activities	6960	606,735		606,735	11,543	595,192
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	700,365		700,365		700,365
Other Auxiliary Operations	7090	4,522,477		4,522,477	75,541	4,446,936
Physical Property Acquisitions	7100					
(05) Total		$170,598,395	$0	$170,598,395	$38,250,224	$132,348,171
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				28.90%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	516,291	60,094	9,860	1,292		587,537
Architecture and Environmental Design	0200						
Biological Sciences	0400	2,820,668	105,223	151,046			3,076,937
Business and Management	0500	3,806,517	129,044	17,598	5,319		3,958,478
Communications	0600	1,319,433	44,581	57,075	7,459		1,428,548
Computer and Information Science	0700	4,028,443	513,721	99,645	68,247		4,710,056
Education	0800	5,930,611	719,959	289,418	28,623		6,968,611
Engineering and Related Industrial Tech.	0900	4,337,423	208,247	189,988	29,015		4,764,673
Fine and Applied Arts	1000	6,492,239	355,641	984,247	5,683		7,837,810
Foreign Language	1100	2,558,981	76,133	11,201			2,646,315
Health	1200	3,656,696	462,527	336,870	33,839		4,489,932
Consumer Education and Home Economics	1300	726,598	240,011	28,082			994,691
Law	1400	202,389	20,613	5,627			228,629
Humanities (Letters)	1500	10,169,131	409,362	97,342	3,588		10,679,423
Library Science	1600	51,962					51,962
Mathematics	1700	6,933,140	253,642	12,151	926		7,199,859
Military Studies	1800						
Physical Sciences	1900	3,227,616	170,963	110,394	2,772		3,511,745
Psychology	2000	1,547,512	17,768	7,818			1,573,098
Public Affairs and Services	2100	573,108	50,592	10,347			634,047
Social Sciences	2200	7,070,292	272,416	60,550			7,403,258
Commercial Services	3000	316,759	4,918	14,649			336,326
Interdisciplinary Studies	4900	10,855,134	4,204,058	416,435	165,326		15,640,953
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	5999	77,140,943	8,310,513	2,610,343	352,089		88,723,888

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 16:10 FAX 6509411638 FOOTHILL-DE ANZA

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,035,147	1,308,675	135,170		9,478,992
Course and Curriculum Development	6020		194,714	11,568	37,778		244,060
Academic/Faculty Senate	6030		213,985	11,070	1,795		226,850
Other Instruct. Admin. & Instruct. Governance	6090		260,270	99,643			359,913
Subtotal - Instructional Administration	**6000**		8,704,116	1,430,956	174,743		10,309,815
Instructional Support Services (6100)							
Learning Center	6110	116,554	69,024	913	6,792		193,283
Library	6120		2,871,613	426,834	460		3,298,907
Media	6130		509,597	73,851	13,631		597,079
Museums and Galleries	6140		80,866	2,259			83,125
Academic Information Systems and Tech.	6150		626,706	521,592	50,969		1,199,267
Other Instructional Support Services	6190		185,617	60,152	88,005		333,774
Subtotal - Instructional Support Services	**6100**	116,554	4,343,423	1,085,601	159,857		5,705,435
Admissions and Records	**6200**		3,063,813	308,072	1,700		3,373,585
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,629,937	63,828			3,693,765
Matriculation and Student Assessment	6320		1,229,893	64,931			1,294,824
Transfer Programs	6330		288,545	25,274	3,431		317,250
Career Guidance	6340		407,281	17,199			424,480
Other Student Counseling and Guidance	6390		279,734	38,687			318,421
Subtotal - Student Counseling and Guidance	**6300**		5,835,390	209,919	3,431		6,048,740

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 10:10 FAX 6509411638 FOOTHILL-DE ANZA

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		643,892	326,472	63,046		1,033,410
Extended Opportunity Prgms. & Services (EOPS)	6430		1,528,431	273,832	1,396		1,803,659
Health Services	6440		1,055,365	273,533	2,914		1,331,812
Student Personnel Administration	6450		215,640	11,510	2,287		229,437
Financial Aid Administration	6460		1,591,410	385,067	33,351		2,009,828
Job Placement Services	6470		122,478	468,903	8,084		599,465
Veterans Services	6480						
Miscellaneous Student Services	6490		766,379	89,090			855,469
Subtotal - Other Student Services	**6400**		5,923,595	1,828,407	111,078		7,863,080
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,297,041	422,724	191,748		3,911,513
Custodial Services	6530		2,216,129	1,200,679			3,416,808
Grounds Maintenance and Repairs	6550		1,404,686	126,565	3,748		1,534,999
Utilities	6570			1,820,425			1,820,425
Other Operation and Maintenance of Plant	6590		537,116	299,860			836,976
Subtotal - Operation and Maintenance of Plant	**6500**		7,454,972	3,870,253	195,496		11,520,721
Planning, Policymaking, and Coordination	**6600**		1,988,717	2,736,875	115,722		4,841,314

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,136,772	353,500	17,363		1,507,635
Fiscal Operations	6720		1,666,429	(132)	43,365		1,709,662
Human Resources Management	6730		2,150,044	243,128			2,393,172
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		199,894	216,964	1,366		418,224
Staff Diversity	6760		168,310	13,345			181,655
Logistical Services	6770		3,148,465	3,303,591	89,621		6,541,677
Management Information Systems	6780		5,707,563	1,023,715	362,470		7,093,748
Other General Institutional Support Services	6790		255,390	848,874			1,104,264
Subtotal - General Institutional Support Services	**6700**		14,432,867	6,002,985	514,185		20,950,037
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		79,230	1,642,539	32,721		1,754,490
Community Service Classes	6820		956,431	649,998	13,439		1,619,868
Community Use Facilities	6830		379,610	132,037			511,647
Economic Development	6840		226,220	157,686	2,010		385,916
Other Community Svcs. & Economic Development	6890		5,074	33,138			38,212
Subtotal - Community Services	**6800**		1,646,565	2,615,398	48,170		4,310,133

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,076,268	46,802			1,123,070
Student and Co-curricular Activities	6960		553,916	41,276	11,543		606,735
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,630,184	88,078	11,543		1,729,805
Auxiliary Operations (7000)							
Contract Education	7010		468,086	232,279			700,365
Other Auxiliary Operations	7090		3,725,164	721,772	75,541		4,522,477
Subtotal - Auxiliary Operations	**7000**		4,193,250	954,051	75,541		5,222,842
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					15,506,885	15,506,885
Student Aid	7320						
Other Outgo	7330					491,107	491,107
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					15,997,992	15,997,992
TOTAL EXPENDITURES and OTHER OUTGO	**391**	77,257,497	67,530,405	24,040,038	1,765,559	15,997,992	186,590,387

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 16:12 FAX 6509411638 FOOTHILL-DE ANZA

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	
Avg. time p/account	130,274
Total Time (in minutes)	3.5
Per Hour	455959
Hours Worked (** **11**)	60
	7599.3
***EFC 2**	
Avg. time p/student	94,773
Total Time (in minutes)	4.0
Per Hour	379092
Hours Worked (** **12**)	60
	6318.2
***EFC 1**	
Avg. time p/question	130,274
Total Time (in minutes)	4.6
Per Hour	599260
Hours Worked (** **13**)	60
	9987.7
***EFC 2**	
Avg. time p/file	94,773
Total Time (in minutes)	3.3
Per Hour	312751
Hours Worked (** **14**)	60
	5212.5
***EFC 4**	
Avg. time p/account	13,763
Total Time (in minutes)	5.8
Per Hour	79825
Hours Worked (** **15**)	60
	1330.4
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/question	3.5
Total Time (in minutes)	36547
Per Hour	60
Hours Worked (** **21**)	**609.1**
***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/application	2.3
Total Time (in minutes)	24017
Per Hour	60
Hours Worked (** **22**)	**400.3**
***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/evaluation	2.7
Total Time (in minutes)	28193
Per Hour	60
Hours Worked (** **23**)	**469.9**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	10,442
Avg. time p/application	4.2
Total Time (in minutes)	43856
Per Hour	60
Hours Worked (** **25**)	**730.9**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
.6 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Aced, Shawna	Associate Registrar	A&R - Foothill - A	3	2	3	2	3	4
Alexander, Irma	A&R Assistant	A&R - Foothill - F	2	3	1	3	3	3
Almendarez, Susan	A&R Assistant	A&R - Foothill - A	5	3	3	2	2	3
Avancena, Jeoffrey	A&R PT Student Worker	A&R - Foothill - S	1	2	1	3	5	1
Bergstedt, Stacy	A&R Senior Cashier	A&R - Foothill - F	5	1	1	5	7	8
Bhan, Vanessa	A&R Cashier	A&R - Foothill - F	1	9	3	5	10	
Bookvich, Patricia	A&R Assistant	A&R - De Anza	5	5	8	5		
Borelli, Dennis	Cashiering Supervisor	Cashiering - De Anza	1	1	1	1	1	1
Bowers, Shelly	A&R Clerk	A&R - Foothill - A	10	10	10	10		
Brewer, Pam	A&R Assistant	A&R - Foothill - A	5	2	5			3
Burfine, Mary Alice	A&R Assistant	A&R - De Anza	3	3	5	3		
Carpenter, Susan	A&R Assistant	A&R - Foothill - F	2	3	1	3	2	2
Chang, Ching (Tiffany)	A&R PT Student Worker	A&R - Foothill - S	3	3	4	4	5	5
Chao, Nancy Tu-Ning	Cashiering Supervisor	Cashiering - De Anza	5	1	15	1	20	3
Cheney, Melodie	A&R Assistant	A&R - De Anza	7	7	4	6		
Cheng, Mei	A&R PT Student Worker	A&R - Foothill - S	1	5	3	5	10	7
Cole, Sheri	A&R Assistant	A&R - De Anza	3	3	4	3		
Comanda, Deborah	A&R Cashier	A&R - Foothill - F	5	15	5	3	15	10
Comanda, Deborah	Senior Cashier	Cashiering - De Anza	5	1		1		
Crumpton, Dena	A&R Assistant	A&R - De Anza	3	3	5	3		
Deshpande,Mrinmaie	A&R Assistant	A&R - Foothill - A	7	9	5	4	10	10
Elwell, Jean	A&R Coordinator	A&R - De Anza	3	1	1	3		
Fifield, Patricia	Assoc. Registrar	A&R - De Anza	3	3	5	3		
Fowler, Cindy	A&R Supervisor	A&R - Foothill - F	2	3	1	3	2	3
Frische, Allen	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
Furuhata, Eri	A&R PT Student Worker	A&R - Foothill - S	4	4	5	4	4	2
Furukawa, Nami	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Henderson, April	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	4
Hochstraser, Alex	A&R Assistant	A&R - De Anza	4	5	4	4		
Ichimura, Sachie	A&R PT Student Worker	A&R - Foothill - S	5	4	5	3	5	4
Ingalls, Melissa	Division A&R Assistant	A&R - De Anza	5	5	8	5		
Jeffries, Portia	A&R Assistant	A&R - Foothill - F	2	3	1	2	2	3
Johnson, Barry	A&R Supervisor	A&R - De Anza	4	5	3	3		
Jung, Henry	A&R Day Supervisor	A&R - Foothill - A	2	3	3	5	2	3
Kaliangara, Araceli	A&R Assistant	A&R - De Anza	8	7	6	4		
Kawr, Jasmeet	A&R PT Student Worker	A&R - Foothill - S	5	5	2	5	5	5
Khaolaor, Orawan	A&R Senior Cashier	A&R - Foothill - A	3	3	2	1	7	5
Lai, Su Kei	A&R PT Student Worker	A&R - Foothill - S	1	2	1	1	2	1
Lindke, William	A&R Supervisor	A&R - Foothill - F	2	3	1	2	2	3
McLaughlin, Annette	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nakayama, Cindy	A&R Assistant	A&R - De Anza	4	3	2	3		
Nguyen, Henry Cong	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nguyen, Hien	A&R Cashier	A&R - Foothill - F	1	10	3	1		
Nguyen, Khanh	A&R Assistant	A&R - De Anza	3	3	5	3		
Okyneel, Yelena	A&R PT Student Worker	A&R - Foothill - S	2	2	4	5	3	1
Olsen, Lynn	A&R Supervisor	A&R - Foothill - F	3	4	2	1	3	4
Pabros, Angelita	Division A&R Assistant	A&R - De Anza	4	3	2	3		

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Pena-Ferrick, Joan	A&R Assistant	A&R - De Anza	3	6	4	3		
Perez, Denise	A&R Technician	A&R - Foothill - A	2	3	5	3	7	2
Phan, Vy	A&R Assistant	A&R - De Anza	5	5	8	5		
Ranii, Lindsay	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Roberts, Brian	A&R Assistant	A&R - De Anza	3	3	5	3		
Sanchez, Amelia	A&R Assistant	A&R - De Anza	3	3	5	3		
Schooler, Shirley	Cashier	Cashiering - De Anza	5	1	15	1	5	1
Slayton, Virginia	A&R Specialist	A&R - Foothill - A	5	7	3	7	7	3
Snowden, Betty	A&R Coordinator	A&R - De Anza	3	3	5	3		
Starratt, Elaine	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Sung, See Wan	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Terranova, Cheryl	A&R Clerk	A&R - Foothill - A	2	2	3	1		
Thai, Binh	A&R Assistant	A&R - De Anza	3	5	5	3		
Thai, May	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Ting, Judy	A&R Assistant	A&R - De Anza	5	10	10	3		
Tomalinas, Robert	A&R Evaluation Specialist	A&R - De Anza	4	4	4	4		
Wang, Rhoda	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
White, Essie	A&R Assistant	A&R - De Anza	4	4	7	3		
Wood, Patricia	Cashiering Services Coord.	A&R - Foothill - A	5	3	5	2	12	3
Ye, Yunzei	A&R Cashier	A&R - Foothill - F	2	3	7		10	
Zimmerman, Brian	A&R Assistant	A&R - Foothill - A	1	3	2	2	3	2
Average			**3.5**	**4.0**	**4.6**	**3.3**	**5.8**	**3.3**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

*****Department**
A&R - Foothill - A = Active Employees
A&R - Foothill - F = Former Cashiers and Employees
A&R - Foothill - S = Partime Student Workers

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and Foothill De Anza payroll run.
Findings:

		Productive Hourly Rates							
Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Aced, Shawna	Associate Registrar		10.07	22.75	30.73	34.98	39.69	41.51	49.76
Alexander, Irma	A&R Assistant		29.18	31.20					
Almendarez, Susan	A&R Assistant			11.11	11.11		26.62	31.70	36.15
Avancena, Jeoffrey	A&R PT Student Worker								
Bergstedt, Stacy	A&R Senior Cashier	20.86	26.68	29.78					
Bhan, Vanessa	A&R Cashier				23.09	24.78	29.75		
Bookvich, Patricia	A&R Assistant	23.59	32.00						
Borelli, Dennis	Cashiering Supervisor	38.22	41.29	44.98	47.86	51.27	56.23	53.91	
Bowers, Shelly	A&R Clerk	27.96	29.05	30.78	33.81	36.41	38.56	39.65	44.00
Brewer, Pam	A&R Assistant			25.05	28.07	31.10	35.13	40.79	43.25
Burfine, Mary Alice	A&R Assistant	26.34	28.20	30.75	33.08	35.15	37.74	38.98	39.38
Carpenter, Susan	A&R Assistant	19.32	18.92						
Chang, Ching (Tiffany)	A&R PT Student Worker								
Chao, Nancy Tu-Ning	Cashiering Supervisor	30.07	32.41	35.91	39.89	42.41	47.76	49.53	52.55
Cheney, Melodie	A&R Assistant		26.44	25.57	28.62	31.59	34.38	36.40	40.39
Cheng, Mei	A&R PT Student Worker								
Cole, Sheri	A&R Assistant	13.48	12.66	13.60	16.56	23.94	30.85	32.51	41.65
Comanda, Deborah	Senior Cashier	28.50	56.93	35.17		39.39	37.78	38.97	39.50
Crumpton, Dena	A&R Assistant	10.26	14.25	23.21	26.39	29.13	32.62	34.65	36.51
Deshpande,Mrinmaie	A&R Assistant				11.18	28.50	34.43	32.07	38.19
Elwell, Jean	A&R Coordinator	34.34	35.20	39.10	40.98	43.08	46.21	47.95	50.18
Fifield, Patricia	Assoc. Registrar	31.21	34.94	38.58	42.42	46.70	51.55	53.80	56.39
Fowler, Cindy	A&R Supervisor								
Frische, Allen	Director of Budget & Personnel	43.21	45.25	51.36	56.50	61.58	64.37	66.23	
Furuhata, Erl	A&R PT Student Worker								
Furukawa, Nami	A&R PT Student Worker								
Henderson, April	A&R Assistant	18.91	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hochstraser, Alex	A&R Assistant	35.60	36.46	37.43	41.41	39.77	42.25	46.68	
Ichimura, Sachie	A&R PT Student Worker								
Ingalls, Melissa	Division A&R Assistant							48.46	
Jeffries, Portia	A&R Assistant	8.37	14.29	20.56					
Johnson, Barry	A&R Supervisor	29.56	33.00	36.34	39.71	42.03	46.55	46.70	47.93
Jung, Henry	A&R Day Supervisor		8.72	11.91	26.03	28.51	31.91	34.44	40.73
Kaliangara, Araceli	A&R Assistant	27.71	30.26	36.59	39.84	40.94	40.82	43.15	44.63
Kawr, Jasmeet	A&R PT Student Worker								
Khaolaor, Orawan	A&R Senior Cashier								
Lai, Su Kei	A&R PT Student Worker								
Lindke, William	A&R Supervisor	34.49	39.33	43.37	48.09	51.39	56.73	57.66	
McLaughlin, Annette	Senior Cashier								
Nakayama, Cindy	A&R Assistant	27.69	27.50	32.04	35.37	39.32	43.83	46.02	48.52
Nguyen, Henry Cong	Senior Cashier	13.65	15.59	24.35	29.14	33.24	37.51	40.94	42.99
Nguyen, Hien	A&R Cashier			9.03	8.18	12.52	25.63	32.52	
Nguyen, Khanh	A&R Assistant	26.99	32.21						
Okyneel, Yelena	A&R PT Student Worker								
Olsen, Lynn	A&R Supervisor	37.63	38.65	41.89	43.54	47.07	37.59	31.31	
Pabros, Angelita	Division A&R Assistant			21.26	28.63	32.39	38.07	41.03	42.64
Pena-Ferrick, Joan	A&R Assistant	27.33	30.19	32.84	34.40	36.26	38.89	41.17	44.64
Perez, Denise	A&R Technician	29.57	34.04	35.59	43.20	45.48	44.76	52.92	55.67

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Phan, Vy	A&R Assistant	11.61	10.39	18.10	23.67	29.60	33.89	36.12	39.12
Ranii, Lindsay	A&R Assistant			22.08	24.93	33.51	21.76		
Roberts, Brian	A&R Assistant								31.66
Sanchez, Amelia	A&R Assistant	22.75	25.72	29.81	30.80	34.07	39.08	39.96	41.23
Schooler, Shirley	Cashier	24.56	25.87	30.91	34.25	37.71	41.75	43.11	46.98
Slayton, Virginia	A&R Specialist	27.61	29.43	32.12	35.10	36.88	40.00	41.43	43.46
Snowden, Betty	A&R Coordinator							52.51	
Starratt, Elaine	A&R Assistant	24.03	27.39	30.36					
Sung, See Wan	A&R PT Student Worker								
Terranova, Cheryl	A&R Clerk	22.79	30.21	27.43	29.92	30.72	36.64	37.70	41.31
Thai, Binh	A&R Assistant	31.03	33.06	35.49	37.80	40.94	44.50	45.76	49.75
Thai, May	Senior Cashier	12.87	15.44	23.24	28.44	32.88	37.15	41.82	43.07
Ting, Judy	A&R Assistant	28.13	30.28	32.78	34.77	37.52	41.03	42.26	45.71
Tomalinas, Robert	A&R Evaluation Specialist			16.84	16.87	22.06	17.24	17.11	27.58
Wang, Rhoda	Director of Budget & Personnel	46.77	50.01	56.28	60.18	65.29	71.39	75.79	75.96
White, Essie	A&R Assistant	27.88	29.53	31.22					
Wood, Patricia	Cashiering Services Coord.	16.68	20.49	25.13	28.22	30.52	34.18	36.12	40.40
Ye, Yunzei	A&R Cashier			21.76	23.24				
Zimmerman, Brian	A&R Assistant								30.18
Average		**25.99**	**28.43**	**29.65**	**32.38**	**36.88**	**39.61**	**42.71**	**43.80**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

			*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
Staff	Title	Department	21	22	23	24	25	26
Billan, Ryan	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Brown, Susan	Assistant Director of Financial Aid	Financial Aid - De Anza	2	1	2	4	6	2
Bostic, John		EOPS - Foothill	5	5	2	1	1	1
Castillo, Cindy	Director of Financial Aid	Financial Aid - De Anza	1	1				
Castro, Richard James	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Chacon, Beatriz		EOPS - Foothill	2	1	2			1
Chavez, Antoinette	Financial Aid Outreach Assistant	EOPS - Foothill	4	2	1	3	3	2
Chen, I	Financial Aid Outreach Coordinator	EOPS - Foothill	2	1	2	2	5	3
Christensen, Josephine	Financial Aid Outreach Assistant	EOPS - Foothill	2	1	2	2.5	4	3
Claros, Randy	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	2	2	5	5	3
Cross, Lindsey		EOPS - Foothill	3	2	1	2	1	1
Duong, Tung	Financial Aid Assistant	EOPS - Foothill	2	1	2	2	3	2
Feldman, Joyce	Financial Aid Assistant	Financial Aid - De Anza	3	5	3	10	7	4
Garcia, Alma	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Godinez, Christy	Financial Aid Assistant	EOPS - Foothill	2	1	2	3	3	1
Gonzalez, Ismael	EOPS Counselor	EOPS - Foothill	10					
Guevara, Erika	Administrative Assistant I	EOPS - De Anza	5	5	2	5	2	5
Hamilton-Kilili, Asher		EOPS - Foothill	3	3	1	1	1	1
Harral, Kevin	Financial Aid Outreach Coordinator	Financial Aid - De Anza	5	1	2	4	3	2
Henderson, April	EOPS Specialist	EOPS - Foothill	3		1			
Hunter, Karen	Financial Aid Assistant	Financial Aid - De Anza	1					
Kaliangara, Araceli		EOPS - Foothill	1	1	1	1	1	1
Lambrecht, Donna	Sr. Admin. Asst. II	EOPS - Foothill	3	1				
Le, Chuong Huy	EOPS Services Coordinator	EOPS - De Anza	5	5	5	2		
Nava, Tobias	EOPS Counselor	EOPS - Foothill	2	1	3	4	1	
Ngo, Fei	Financial Aid Assistant	Financial Aid - De Anza	5	2	5	10	5	5
Nguyen, Leslie	Office Assistant	EOPS - De Anza	2	2	3			
Nguyen, Thao	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
O'Malley, Dawna	Financial Aid Assistant	Financial Aid - De Anza	10	1	10	20	20	10
Pardo, Ines	EOPS Program Serv. Coordinator	EOPS - Foothill	5	2	3	3		
Ramirez-Moya, Francisca	Office Assistant	EOPS - De Anza	2	2	3			
Renteria, Matilda	Financial Aid Coordinator	EOPS - Foothill	3	1	3	1	3	2

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Robles, George	EOPS Supervisor	EOPS - De Anza	2	2	5	5	10	10
Rodriguez, Jorge	Sr. EOPS Specialist	EOPS - Foothill	4		1			
Schmidt, Janet	Financial Aid Assistant	Financial Aid - De Anza	1	1	1	1	2	1
Sigala-Aguilar, Griselda	CARE Coordinator	EOPS - De Anza	5	5	5	2	10	10
Trejo, Adrian	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Trinh, Lan	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
Van, Nina	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	5	1	2	1	2
Witkop, Inna	Financial Aid Outreach Assistant	EOPS - Foothill	3	1	7	5	8	5
Wu, Tilly	EOPS Counselor	EOPS - Foothill	1	1	2	3	1	
Zamora, Lillian	Office Clerk	EOPS - De Anza	2	2	3			
Average			**3.5**	**2.3**	**2.7**	**3.7**	**4.2**	**3.5**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and Foothill De Anza payroll run.
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Billan, Ryan	Financial Aid Outreach Assistant							
Brown, Susan	Assistant Director of Financial Aid							
Bostic, John		48.64	51.35	55.97	71.84			
Castillo, Cindy	Director of Financial Aid	51.19	52.92	55.66	63.57	68.01	70.02	71.07
Castro, Richard James	EOPS Specialist	25.28	29.68			21.96		
Chacon, Beatriz							58.17	62.49
Chavez, Antoinette	Financial Aid Outreach Assistant	12.03	25.17	26.87				31.99
Chen, I	Financial Aid Outreach Coordinator						37.42	39.58
Christensen, Josephine	Financial Aid Outreach Assistant					29.56	31.38	35.32
Claros, Randy	Financial Aid Outreach Assistant							
Cross, Lindsey		10.39	17.18	26.89	31.64			
Duong, Tung	Financial Aid Assistant	24.15	26.22	28.94	33.95	38.30	40.27	42.73
Feldman, Joyce	Financial Aid Assistant	29.01	32.04	33.64	38.16	40.91	42.20	44.46
Garcia, Alma	Financial Aid Outreach Assistant					31.03	32.60	35.18
Godinez, Christy	Financial Aid Assistant	29.91	32.39	33.94	37.94	40.68	43.18	44.32
Gonzalez, Ismael	EOPS Counselor	69.07	73.60	77.95	82.00	88.73	64.70	75.70
Guevara, Erika	Administrative Assistant I	33.08	36.38	37.28	40.89	44.98	46.29	47.66
Hamilton-Kilili, Asher						35.89	36.66	
Harral, Kevin	Financial Aid Outreach Coordinator			25.05	29.44	34.90	38.46	41.73
Henderson, April	EOPS Specialist	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hunter, Karen	Financial Aid Assistant					11.62	11.84	29.10
Kaliangara, Araceli		30.26	36.59	39.84	40.94	40.82	43.15	44.63
Lambrecht, Donna	Sr. Admin. Asst. II	43.50	47.63	50.50	55.36	60.14		57.22
Le, Chuong Huy	EOPS Services Coordinator			16.87	33.78	38.79	41.85	41.81
Nava, Tobias	EOPS Counselor							69.39
Ngo, Fei	Financial Aid Assistant							
Nguyen, Leslie	Office Assistant	22.34	26.46	29.83	33.38	36.86	38.38	41.68
Nguyen, Thao	Financial Aid Outreach Assistant				7.99	11.88	11.84	
O'Malley, Dawna	Financial Aid Assistant	10.88	16.42	23.87	30.42	34.25		39.95
Pardo, Ines	EOPS Program Serv. Coordinator	37.16	42.77	45.00	47.46	51.14	52.97	54.52
Ramirez-Moya, Francisca	Office Assistant	8.69		23.58	26.55	29.98	31.51	33.51
Renteria, Matilda	Financial Aid Coordinator	38.03	40.91	43.32	47.17	55.03	56.75	54.17

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Robles, George	EOPS Supervisor	45.73	50.85	52.98	58.69	64.55	66.54	68.29
Rodriguez, Jorge	Sr. EOPS Specialist	26.64	30.56	33.73	37.25	42.10	44.55	46.95
Schmidt, Janet	Financial Aid Assistant	23.38	25.79	28.14	33.30	37.67	40.84	41.13
Sigala-Aguilar, Griselda	CARE Coordinator	47.52	51.96	56.50	57.25	61.78	63.11	62.50
Trejo, Adrian	EOPS Specialist		28.19	31.83				
Trinh, Lan	Financial Aid Outreach Assistant	8.52	11.71	16.91	30.34	30.87	33.58	36.17
Van, Nina	Financial Aid Outreach Assistant					29.68	32.86	35.09
Witkop, Inna	Financial Aid Outreach Assistant						32.51	37.59
Wu, Tilly	EOPS Counselor	46.16	50.62	55.55	61.17	67.55	76.47	80.64
Zamora, Lillian	Office Clerk	21.98	23.60	25.96	28.86	30.94	33.23	33.76
Average		**30.70**	**35.59**	**37.34**	**42.07**	**41.60**	**43.10**	**47.54**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
EFC 2	1.8-1	2. Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012
EFC 4	1.8-2	1. Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763
EFC 5	1.8-2	2. Refunds								
EFW 6	1.8-3	1. Waivers Requested	X							
EFW 7	1.8-3	2. Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442
EFW 8	1.8-3 (1-2)	Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

EFC/EFW Workload Multiplier
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Deanza For 2005-2006
Data Current As Of May 18, 2012 12:25:54

Download The Result In Comma Delimited Format

Headcount
40,135

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Foothill For 2005-2006

Data Current As Of May 18, 2012 12:25:39

Download The Result In Comma Delimited Format

Headcount
31,618

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05 06

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

408-864-8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A (2B) 3 4		
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan K. Bloom Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: PHDA

Fiscal Year: 05-06

Cindy Carrillo
Employee Name

Dir Fin Aid
Exact Position Title

Fin Aid
Department/Location

408-864-8403
Telephone #

12mo/11mo/10mo/hriv
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
/ /	1A 1B (2A) 2B 3 4		10
/ /	1A 1B 2A 2B 3 (4)		3
/ /	1A 1B 2A 2B 3 4		20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Carrillo Date 5/31/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Nancy Chao — Employee Name

Cashiering Supervisor — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408.864-5308 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	8	8	8	8	8	8	8	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	88	88	88	88	88	88	88	88

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill De Anza

EARL COLLINGS — Employee Name

WEB MASTER — Exact Position Title

MARKETING — College/Department/Location

6509497647 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						5	40	30
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						5	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Collings Date 04-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 2006

EARL COLLINGS
Employee Name

Web Coordinator
Exact Position Title

Marketing
Department/Location

650 942-7647
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03/03	1A 1B 2A 2B (3) 4	Web updates for BOG Waiver	20
03/04	1A 1B 2A 2B (3) 4	Design Online Webforms for BOG	80
03/05	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	60
04/06	1A 1B 2A 2B (3) 4	Update Online forms for BOG	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

02-03-8HA
03-04-8HA
04-05-8HA
05-06-8HA

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-3-2006

"you have any questions, please contact Bee Chacon, at 949 7223

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FOOTHILL-DE ANZA Fiscal Year: 2005-2006

SHEILA COYNE
Employee Name

PROGRAMMER ANALYST, SENIOR
Exact Position Title

ETS-District
Department/Location

408-864-8740
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/1/05	1A 1B 2A 2B (3) 4	ADD NEW STUDENT ID TO RECORDS	100
11/1/05	1A 1B 2A 2B 3 (4)	GENERATE STATE MIS REPORT(S)	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila Coyne Date 5-23-06

If you have any questions, please contact JOE LAMPO, at 408-864-8626

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05-06

Joyce Feldman
Employee Name

Fin Aid Asst
Exact Position Title

Fin Aid
Department/Location

408-864-8377
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		
/ /	1A 1B 2A (2B) 3 4		5
/ /	1A 1B 2A 2B (3) 4		10
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce K. Feldman Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: ~~03~~ 04-05

FRANCES GUSMAN
Employee Name

Dean Student Outreach & Retention
Exact Position Title

Foothill/Dean 650-949-7524
Department/Location Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/1/05	1A 1B 2A 2B 3 (4)	Final Report	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Frances Gusman Date 5/17/06

If you have any questions, please contact Bee Chacon, at 949-7223

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05-06

Kevin Harral
Employee Name

Fin Aid Outreach Coordinator
Exact Position Title

Fin Aid
Department/Location

408 864-8334
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		10
/ /	1A 1B 2A (2B) 3 4		40
/ /	1A 1B 2A 2B (3) 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Harral Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 00 - 06

Angelita Pabros
Employee Name

Division Assistant
Exact Position Title

Admissions / De Anza
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	(3 minutes @ 10% of students)	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6 yrs @ 125 = 750 ttl	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-12-07

If you have any questions, please contact 408-864-8292, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill / De Anza Fiscal Year: 04-05

Matilda Benton — Financial Aid Coordinator
Employee Name — Exact Position Title

Foothill / Fin Aid — 650-949-7247 — (12mo/11mo/10mo/hrly)
Department/Location — Telephone # — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/ 05	1A 1B 2A 2B 3 (4)	Find BTAP Report	3
9/ 05	1A 1B 2A 2B 3 4	MIS	80
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	83

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Benton Date 5/17/06

If you have any questions, please contact Bee Chacon, at 949-7223

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

May Thai — Employee Name

Sr. Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-8290 — Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature May Thai Date 4/20/07

You have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Henry Thanh — Employee Name

Senior Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-5699 — Telephone #

~~Work~~ 12mo/11mo/10mo/hrly year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records Footh. 11
Department/Location

Shawna Aced
Employee Name

Associate Registrar
Exact Position Title

7771
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shawna Aced Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Irma ALCALA ALEXANDER
Employee Name

Admission & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Susan Almendarez
Employee Name

Admission & Records Assistant
Exact Position Title

650 949-7518
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	5					
C 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almendarez Date 4-13-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

ADMISSIONS + RECORDS.
Department/Location

JEFFREY AVANCENA
Employee Name

PART-TIME STUDENT WORKER.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	1 min					
C 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

LEA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Deanza
District

A & R
Department/Location

STACY L. Bernstedt
Employee Name

Sr. Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and w eligibility, and printing out a list of enrolled courses.	5					
Cc 2 Calculating the enrollment fee, collect the pay...ent or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible or waivers (not just course changes), explain the process, and update student account/record.	8					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

iployee Signature _____ Date 4-20-07

ol ve any questions, please contact _____, at _____

EAS UBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Ahn, Vanessa A
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions / De Anza
Department/Location

Patricia Bookvich
Employee Name

A & R Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hriy
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Borrelli, Dennis
Employee Name

Cashiering Supervisor
Exact Position Title

864-5308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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Employee Signature Margaret A Michaels Date 5-1-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

ADMISSIONS / FOOTHILL
Department/Location

SHELLY BOWERS
Employee Name

ADMISSIONS CLERK
Exact Position Title

0 949-7643
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ~~n~~ lists student courses, status of payments, and ~~w~~ver eligibility, ~~and printing out a list of enrolled courses.~~	~~5~~ 10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, ~~and providing a copy to the student.~~	~~5~~ 10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

m[illegible]ee Signature [signature] Date 4/20/07

you have any questions, please contact SHELLY, at #7643

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions - F.H.
Department/Location

Pam Brewer
Employee Name

Admissions Asst.
Exact Position Title

x 7003
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela J. Brewer Date 4-18-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Mary Alice Burfine
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Alice Burfine Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Susan A Carpenter
Employee Name

A+R Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the ment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza
District

Admissions & Records
Department/Location

Ching (Tiffany) Chang
Employee Name

Part time student worker
Exact Position Title

650 - >15 8786 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	3			✓		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD — District

Cashiering Services — Department/Location

Nancy Tu-Ning Chao — Employee Name

Cashiering Supervisor — Exact Position Title

408864-6308 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06) 5/~~06~~ 05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Melodie Cheney
Employee Name

Admissions Assistant
Exact Position Title

342
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De-Anza
District

Admissions & Record
Department/Location

NEI CHENG
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...h lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	1 Min					
C... **12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Neil Cheng Date 4/13/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Ag P 1 De Anza
Department/Location

Sheri Cole
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A & R — Department/Location

Deborah Comandon — Employee Name

Cashier — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Comanda, Deborah
Employee Name

Senior Cashier
Exact Position Title 5/00 – 6/01 @ 50%

NA
Telephone #

~~50%~~ (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Comanda Date 4/28/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R | De Anza
Department/Location

Dena Crumpton
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza District
District

A&R - Foothill Campus
Department/Location

Mrinmaie Deshpande
Employee Name

A&R Assistant
Exact Position Title

650-949-7644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and iver eligibility, and printing out a list of enrolled courses.	7 min					
e **12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mrinmaie Deshpande Date 04/13/07

I have any questions, please contact Mrinmaie Deshpande, at 949-7604

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Jean Elwell
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Adr I De Anza
Department/Location

Patricia Fifield
Employee Name

Associate Registrar
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A Fifield Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Cindy Maria Fowler
Employee Name

Supervisor
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Finance / De Anza College
Department/Location

Allen Frische
Employee Name

Director of Budget & Personnel
Exact Position Title

(408) 864-8857 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Corinne Hawk Date 4/30/07

If I have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

A & R
Department/Location

ERI FURUHATA
Employee Name

part time student worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eri Furuhata Date 4/13/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admission and record
Department/Location

Nami Furukawa
Employee Name

Part-time student worker
Exact Position Title

~~Tel~~
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min.					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature 古川奈実 Date 4/13/2007

If you have any questions, please contact _____, at _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

April Colonna Henderson
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Alex Hochstraser
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DEANZA
District

Admissions & Records
Department/Location

SACHIE ICHIMURA
Employee Name

Part-time Student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

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Employee Signature [signature] Date 4/03/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Melissa Ingalls
Employee Name

Dursion Admin Asst
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Portia Denice Jaffries
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Barry Johnson
Employee Name

Admissions Supervisor
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barry Johnson Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza
District

A&R
Department/Location

Henry Ling
Employee Name

Day Supervisor
Exact Position Title

(650)949-7024
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Araceli Kalaingara
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Araceli Kalaingara Date 4/17/06

If you have any questions, please contact EXT 8230 at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Jasmeet Kaur
Employee Name

Department/Location

Part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

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Employee Signature Jasmeet Kaur Date 4/20/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A&R — Department/Location

ORANAN KHAOLAOR — Employee Name

Senior Cashier — Exact Position Title

7189 — Telephone

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and iver eligibility, and printing out a list of enrolled courses.	3					
le 12 Calculating the enrollment fee, collect the ment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

I have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

Su Kai Lai
Employee Name

Part-Time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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Employee Signature _____ Date 4-18-2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

William John Lindke
Employee Name

Admissions + Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact Shawna Aced, at 7771

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Cashiering Svcs
Department/Location

McLaughlin, Annette
Employee Name

Senior Cashier
Exact Position Title

408-864-8590 Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

1/14/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
ode 11 Referencing the student account or record hich lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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ployee Signature Annette McLaughlin Date 4/28/07

If have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Cindy Nakayama
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Cindy Nakayama Date 4/7/01

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Svcs
Department/Location

Nguyen, Henry Cong
Employee Name

Senior Cashier
Exact Position Title

408-864-5689 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
8/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
ode 11 Referencing the student account or record ich lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
e 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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loyee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill – De Anza
District

A S R
Department/Location

Hien M. Nguyen
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Khanh Nguyen
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Khanh Nguyen Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

AR
Department/Location

Yelena Okunev
Employee Name

part time student worker
Exact Position Title

408 701 0037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Okunev Date 04 20 2007

If have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lynn G Olsen
Employee Name

Admissions + Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...n lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
C... 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

...e Signature _____ Date 4-20-07

you have any questions, please contact _____, at _____

...EA ...UBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

AFKL/DE ANZA
Department/Location

Angelita Pabros
Employee Name

Division Admin Asst
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Joan Pena-Fenicle
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Pena Fenicle Date 04/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza Comm. Coll. Dist — District

A & R — Department/Location

Denise Perez — Employee Name

A & R Technician — Exact Position Title

7856 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Vy Pham
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vy Pham Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lindsay Knodel Ranii
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...n lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	3					
C... **12** Calculating the enrollment fee, collect the pa...ent or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nf... e Signature _____ Date 4-20-07

You have any questions, please contact _____, at _____

EA... UBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R / De Anza
Department/Location

Brian Roberts
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Amelia Sanchez
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Srcs
Department/Location

Schooler, Shirley
Employee Name

Cashier
Exact Position Title

NA
Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
5/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Shirley A. Schooler Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Lost Hills — District

Admissions & Records — Department/Location

Yvonne Slayton — Employee Name

Admissions Specialist — Exact Position Title

7772 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvonne Slayton Date 4/13/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Foothill - De Anza
Department/Location: A&R / De Anza
Employee Name: Betty Snowden
Exact Position Title: Admissions Coordinator
Telephone #
12mo/11mo/10mo/hrly Work year length(circle) — 12mo circled
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: **ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS**	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 7-18-07

If you have any questions, please contact ____________________, at __________

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________________.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Elaine Hilda Starratt
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature _____ PLEASE USE BLUE INK

Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL - DE ANZA
District

ADMISSION & RECORDS
Department/Location

SEE WAN SUNG
Employee Name

PART TIME STUDENT WORKER
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 MIN					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 MIN					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 MIN					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 MIN					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 MIN					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 MIN					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SEE WAN SUNG Date 6/13/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill College
District

Admissions + Records
Department/Location

Cheryl Terrazas
Employee Name

Clerk
Exact Position Title

949-7773
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl A. Terrazas Date 4/18/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Bunh Thai
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature _____ Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering SVCS
Department/Location

Thai, May
Employee Name

Senior Cashier
Exact Position Title

408-864-8290
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature _____ Date 9/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Judy Ting
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R / De Anza
Department/Location

Robert Tomalunas
Employee Name

Admissions Evaluation Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Finance
Department/Location

RHODA WANG
Employee Name

Director of Budget & Personnel
Exact Position Title

864-8857
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhoda Wang Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Geeri White
Employee Name

Admissions Assistant
Exact Position Title

(12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Geeri White Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT
District

CASHIERS DEPT / ADMISSION & RECORDS
Department/Location

PATRICIA WOOD
Employee Name

CASHIERING SERVICES COORDINATOR
Exact Position Title

(650) 949-7331
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Wood Date 4-19-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Yuntei Ye
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	2					
Co... 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Brian Zimmerman
Employee Name

Admissions + Records Assistant
Exact Position Title

(510)949-7674
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...h lists student courses, status of payments, and w...er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

...ee Signature _____ Date 4/13/07

...ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Ryan Bellow
Employee Name

FA Outreach ASST
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Susan Bloom
Employee Name

Asst FA Div
Exact Position Title

8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Co[illegible]21 Answering Questions regarding fee waivers or referring the[illegible] the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Bloom Date 4/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

John Bostic — Employee Name

Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature _____ Date 4-19-07

If have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Cindy Cossio
Employee Name

Dir of Fin Aid
Exact Position Title

8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or mation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

e Signature Cindy Cossio (Cindy Cossio) Date 4/13/07

any questions, please contact _____, at _____

MIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

RICHARD JAMES CASTRO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenya Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Beatriz Chacon
Employee Name

Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Beatriz Chacon Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid / Foothill
Department/Location

Antoinette Chavez
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
de 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Antoinette Chavez Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
de 21 Answering Questions regarding fee waivers or referring m to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 4/10/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza C.C. District
District

Foothill College - Middlefield Campus
Department/Location

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-6987
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/10/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Claros
Employee Name

FA Outreach Asst
Exact Position Title

8x10
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Lindsey Cross
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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loyee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PL[illegible]SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill Campus
Department/Location

Tung Duong
Employee Name

Financial Aid Assistant
Exact Position Title

916-725-1
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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loyee Signature Tung Duong Date 4/13/07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA ASST
Exact Position Title

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
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Employee Signature Joyce Feldman Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at list of Keyla Bellin Back to 03/04

EFCW 1.7-3

ee AVERAGE Time Record for Mandated Costs
ENROLLMENT FEE COLLECTION AND WAIVERS
LLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Alma Garcia
Employee Name

FA Outreach Asst
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
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n, ee Signature Alma Garcia Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

Christy Godinez
Employee Name

Financial Aid Assistant
Exact Position Title

(650) 949-7246
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
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loyee Signature Christy Godinez Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS - Campus/Foothill
Department/Location

Ismael Gonzalez
Employee Name

EOPS Counselor
Exact Position Title

650 949-7224
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
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ployee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

EOPS - DE ANZA
Department/Location

ERIKA GUEVARA
Employee Name

ADMINISTRATIVE ASSISTANT I
Exact Position Title

408 864-5619
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
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n, ee Signature Erika Guevara Date 5-1-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Asher Hamilton-Kilili — Employee Name

Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
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de 21 Answering Questions regarding fee waivers or referring ..em to the appropriate person for an answer.	3				
e 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
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...loyee Signature A. Hamilton-Johnson Date 4-20-07

If you have any questions, please contact _____, at _____

PL...SE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

FA

Department/Location

Kevin Harral

Employee Name

FA Outreach Coor.

Exact Position Title

5334

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
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Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
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n yee Signature Kevin C Harral Date 4/6-07

you have any questions, please contact _____, at _____

LEA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

EOPS / Foothill Campus — Department/Location

April Henderson — Employee Name

EOPS Specialist II — Exact Position Title

650-949-7207 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

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Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Karen Hunter
Employee Name

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06) 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
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Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Karen Hunter Karen Hunter Date 4/13/07 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Araceli Kaliangara — Employee Name

Exact Position Title

Telephone # — part-time 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
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Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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ode 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	/				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	/				
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Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza Comm. College District — District

EOPS/Foothill College — Department/Location

Donna Cambrecht — Employee Name

Sr. Admin. Asst. II — Exact Position Title

650 949 7037 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 ~~Daily~~				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Donna Cambrecht Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

CHUONG HUY LE
Employee Name

EOPS SERVICES COORDINATOR
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

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m, ee Signature Chuong Le Date 4/23/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS - Foothill Campus
Department/Location

Tobias Nava
Employee Name

EOPS Counselor
Exact Position Title

949-7034
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
ode 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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ployee Signature Tobias Nava Date 4-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Fred Ngo
Employee Name

FA ASST
Exact Position Title

8228
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS - DE ANZA
Department/Location

LESLIE NGUYEN
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and ing the information. Entering information into district records. roviding student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation ovided when denial is appealed. Providing written notification to udent of final eligibility status.	—				

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty erjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ple Signature Nancy Kubba, EOPS SUPERVISOR Date 4-23-07

u have any questions, please contact _____, at _____

ASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

FA

Department/Location

Donna O'Malley

Employee Name

FT ASST

Exact Position Title

8

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

n ee Signature _____ Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

EOPS - Foothill Campus
Department/Location

Ines Pardo
Employee Name

EOPS Program Serv. Coordinator
Exact Position Title

) 949-7206
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Ines Pardo Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS-DE ANZA
Department/Location

FRANCISCA RAMIREZ-MOYA
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and ing the information. Entering information into district records. roviding student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation ovided when denial is appealed. Providing written notification to udent of final eligibility status.					

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Please Signature Francisca Ramirez, EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill College
Department/Location

Matilda Renteria
Employee Name

Financial Aid Coordinator
Exact Position Title

650-949-7247
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Matilda Renteria Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA — District

EOPS - DE ANZA — Department/Location

GEORGE ROBLES — Employee Name

EOPS SUPERVISOR — Exact Position Title

X8452 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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m ee Signature George Robles Date 4-20-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY 4-20-07; TO BRET X6272.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS (FH)
Department/Location

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature [signature] Date 9/13/07

If you have any questions, please contact Same, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Janet Schmidt
Employee Name

FA Asst
Exact Position Title

8719
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Janet Schmidt Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS DeAnza College
Department/Location

Griselda Sigala-Aguilar
Employee Name

CARE Coordinator
Exact Position Title

864-8830
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

m, ee Signature Griselda Sigala Aguilar Date 7-18-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

ADRIAN TREJO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

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Employee Signature George Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

EACH SUBMIT THIS INFORMATION BY _____; TO _____.

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03-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

~~Dan Nguyen~~ Lan Trinh
Employee Name

FA
Department/Location

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Lan Trinh by Cindy Cuyan Date 4/13/07

If I have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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m ee Signature Nancy Nina Van Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza — District

Fin. Aid - Foothill Campus — Department/Location

Inna Witkop — Employee Name

Fin. Aid Outreach Assist — Exact Position Title

650.949.7710 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/10/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

EOPS / Foothill
Department/Location

Tillie L. Wu
Employee Name

EOPS Counselor
Exact Position Title

(650) 949-7180
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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loyee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

LILIAN ZAMORA
Employee Name

OFFICE CLERK
Exact Position Title

(408) 864-8950
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Morgan Hobbs - EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

Enrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
Total Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958
(#1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834
	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
Enroll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232
	Fall	34,278	35,368	33,587	34,399	36,315	35,508	32,775	34,357
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785
Enr[illegible] Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500
Wa[illegible]ers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500
#3 form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038
	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**
	Total	**13,372**	13,806	12,937	13,478	12,098	19,773	21,734	**22,012**
let Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732
Charged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857
#2 form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658
	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**

Source: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06

FHDA IR&P - RBB - 5/19/06

5/22/06

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
De Anza								
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961
Fall	2,144	1,435	601	632	681	912	1,231	3,017
Wtr	1,483	799	634	508	524	550	2,251	2,431
Spr	1,215	987	546	476	662	615	2,101	2,374
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783
Foothill								
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608
Fall	1,139	970	382	738	435	507	812	1,655
Wtr	742	566	346	326	418	340	1,430	1,342
Spr	768	688	546	307	344	409	1,332	1,375
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980

The following for #1 on form EFCW 1.8-2

District Totals								
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672
Wtr	2,225	1,365	980	834	942	890	3,681	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06

5/22/06

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:31:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	22	6,469
BOGW - Part A-2 based on SSI recipient status	26	7,326
BOGW - Part A-3 based on general assistance recipient status	4	851
BOGW - Part A-4 based on Veteran's or National Guard dependent status	27	6,504
BOGW - Part B based on income standards	1,301	413,485
BOGW - Part C based on financial need	1,943	772,612

Total Amount = $ 1,207,247

Back to Top of Page

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05-06

22.00
25.00
4.00
27.00
1,301.00
1,943.00
161.00
412.00
12.00
2,173.00
4,551.00
10,442.00

waivers approved

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:30:20

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	161	63,560
BOGW - Part A-2 based on SSI recipient status	412	180,071
BOGW - Part A-4 based on Veteran's or National Guard dependent status	12	3,677
BOGW - Part B based on income standards	2,003	656,259
BOGW - Part C based on financial need	4,531	2,020,570

Total Amount = $ 2,924,137

Back to Top of Page

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Note: INFORMATION NOT AVAILABLE

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: FOOTHILL-DE ANZA COMMUNITY COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

2005-2006 PHRs
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El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
141287	2170	ACED, SHAWNA D	1ADMR	ASSOC REG *Classified Contracted Non Inst*	120098	2112	61,147.69				
141287	3100	ACED, SHAWNA D	1ADMR	ASSOCIATE REGISTRAR	120098	0	28,427.88	2112	1800	$ 89,575.57	**$49.76**
141287	2170	ALMENDAREZ, SUSAN ELLEN	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130067	2106	44,928.63				
141287	3100	ALMENDAREZ, SUSAN ELLEN	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130067	0	20,147.36	2106	1800	$ 65,075.99	**$36.15**
141287	2310	AVANCENA, JEOFFREY	1ADMR	*Student Salary Non Instructional*	180002	182	1,174.7				
251285	2310	AVANCENA, JEOFFREY	1ADMR	*Student Salary Non Instructional*	180002	0	420.				
141287	3200	AVANCENA, JEOFFREY	1ADMR		180002	0	17.86				
251285	3200	AVANCENA, JEOFFREY	1ADMR		180002	0	6.38	182	157	$ 1,618.94	**$10.34**
142272	2170	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	2088	61,000.58				
141068	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**18**	**805.65**				
142272	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**12**	**550.69**				
212681	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**71**	**3,085.12**				
142272	3100	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	28,538.5				
141068	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	60.61				
142272	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	45.63				
212681	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	232.05	2088	1800	$ 89,877.37	**$49.93**
141287	2170	BOWERS, SHELLY L	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130103	2088	52,498.98				
141287	3100	BOWERS, SHELLY L	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130103	0	26,706.8	2088	1800	$ 79,205.78	**$44.00**
141287	2170	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	178	4,379.48				
211423	2170	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	1909	46,906.45				
141287	3100	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	0	2,268.				
211423	3100	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	0	24,290.67	2087	1800	$ 77,844.60	**$43.25**
610585	2150	BURFINE, MARYALICE S	2ADMI	A&R Asst. *Classified Vacation Payoff*	230316	248	6,347.7				
142287	2170	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	696	17,679.74				
142287	**2360**	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	**0**	**3.83**				
142[illegible]	3100	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	6,483.75				
61[illegible]	3100	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	1,457.41				
14228[illegible]	3200	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	0.54	944	812	$ 31,969.14	**$39.38**
14227[illegible]	2105	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	0	2,500.				
1422[illegible]	110	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	2088	95,234.28				
142272	3100	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	0	30,193.48	2088	1800	$ 127,927.76	**$71.07**
141272	1210	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	1044	40,063.19				
141378	1210	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	1044	40,063.32				
141272	3100	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	0	16,179.79				
141378	3100	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	0	16,180.58	2088	1800	$ 112,486.88	**$62.49**
142149	2170	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	2106	69,918.35				
142149	**2360**	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	**2**	**125.53**				
142149	3100	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	0	24,659.23				
142149	3200	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	0	9.2	2106	1800	$ 94,586.78	**$52.55**
211684	2170	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	1807	33,645.56				
211684	**2360**	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	**24**	**684.05**				
211684	3100	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	0	16,021.29				
211684	3200	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	0	53.24	1807	1554	$ 49,720.09	**$31.99**
211684	2170	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	2153	48,552.17				
211684	**2360**	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	**65**	**2,262.83**				
211684	3100	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	0	22,516.96				
211684	3200	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	0	176.76	2153	1800	$ 71,245.89	**$39.58**
142287	2170	CHENEY, MELODIE DAWN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230077	2100	51,283.03				
142287	3100	CHENEY, MELODIE DAWN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230077	0	21,411.7	2100	1800	$ 72,694.73	**$40.39**
211684	2170	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	2094	42,229.25				
211684	**2360**	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	**37**	**1,154.7**				
211684	3100	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	0	21,261.41				
211684	3200	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	0	89.49	2094	1800	$ 63,580.15	**$35.32**
142287	2170	COLE, SHERI L	2ADMI	ADMISSIONS & RECORDS ASSISTANT	234512	1566	33,217.52				
142287	3100	COLE, SHERI L	2ADMI	ADMISSIONS & RECORDS ASSISTANT	234512	0	22,870.35	1566	1347	$ 56,087.87	**$41.65**
141047	2170	COLLINGS, EARL	1PR	COLLEGE WEB COORDINATOR, SR	130265	2091	103,164.69				
141047	3100	COLLINGS, EARL	1PR	COLLEGE WEB COORDINATOR, SR	130265	0	32,727.93	2091	1800	$ 135,892.62	**$75.50**
610585	2150	COMANDA, DEBORAH	1ADMR	CASHIER *Classified Vacation Payoff*	130220	96	2,346.99				
14[illegible]	2170	COMANDA, DEBORAH	1ADMR	CASHIER *Classified Contracted Non Instructi*	130220	1876	45,131.78				
14[illegible]	3100	COMANDA, DEBORAH	1ADMR	CASHIER	130220	0	18,713.38				
610585	3100	COMANDA, DEBORAH	1ADMR	CASHIER	130220	0	794.23	1972	1696	$ 66,986.38	**$39.50**
1447[illegible]	2170	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	2144	96,450.7				
1447[illegible]	**2360**	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	**11**	**790.23**				

EL Object
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2005-2006 PHRs
Foothill DeAnza CCD

El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
144754	3100	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	0	35,272.39				
144754	3200	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	0	48.26	2144	1800	$ 131,771.35	**$73.21**
142287	2170	CRUMPTON, DINA D	2ADMI	A&R Asst. *Classified Contracted Non Instr*	230103	1988	45,022.88				
610570	2185	CRUMPTON, DINA D	2ADMI	A&R Asst. *Classified Extended Sick Leave*	236604	18	437.31				
142287	3100	CRUMPTON, DINA D	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230103	0	20,054.48				
610570	3100	CRUMPTON, DINA D	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236604	0	199.02	2006	1800	$ 65,713.69	**$36.51**
141287	2170	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130168	1344	27,307.22				
610570	2185	DESHPANDE, MRINMAIE HEMANT	1ADMR	A&R Asst. *Extended Sick Leave*	136601	216	4,727.7				
141287	3100	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130168	0	16.264.				
610570	3100	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136601	0	2,934.05	1560	1342	$ 51,232.97	**$38.19**
141272	2170	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	1943	47,047.25				
211684	2170	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	144	3,495.79				
141272	**2360**	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	**11**	**410.19**				
211684	**2360**	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	**0**	**30.5**				
141272	3100	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	24,510.39				
211684	3100	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	1,821.25				
141272	3200	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	31.28				
211684	3200	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	2.33	2087	1800	$ 76,908.29	**$42.73**
142287	2170	ELWELL, JEAN	2ADMI	ADMISSIONS & RECORDS COORD	230149	2088	65,982.94				
142287	3100	ELWELL, JEAN	2ADMI	ADMISSIONS & RECORDS COORD	230149	0	24,337.04	2088	1800	$ 90,319.98	**$50.18**
212681	2170	FELDMAN, JOYCE K	2FNAI	FINANCIAL AID ASSISTANT	230372	2088	57,392.5				
212681	3100	FELDMAN, JOYCE K	2FNAI	FINANCIAL AID ASSISTANT	230372	0	22,627.62	2088	1800	$ 80,020.12	**$44.46**
142287	2170	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	261	9,414.27				
212650	2170	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	1827	65,898.2				
142287	3100	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	0	3,274.42				
212[illegible]	3100	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	0	22,919.03	2088	1800	$ 101,505.92	**$56.39**
212[illegible]	2350	FRISCHE, ALLEN R	2ACAD	*Classified Hourly Non Instructional*	260008	144	2,458.08				
21258[illegible]	3200	FRISCHE, ALLEN R	2ACAD		260008	0	462.02	144	144	$ 2,920.10	**$20.28**
1412[illegible]	310	FURUHATA, ERI	1ADMR	*Student Salary Non Instructional*	180001	117	940.				
14128[illegible]	3200	FURUHATA, ERI	1ADMR		180001	0	14.29	117	101	$ 954.29	**$9.48**
141287	2310	FURUKAWA, NAMI	1ADMR	*Student Salary Non Instructional*	180001	199	1,592.				
141287	3200	FURUKAWA, NAMI	1ADMR		180001	0	24.2	199	171	$ 1,616.20	**$9.44**
610585	2150	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	78	1,624.87				
212681	2170	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	1696	35,277.71				
212681	**2360**	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	**75**	**2,336.67**				
212681	3100	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	15,973.16				
610585	3100	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	622.55				
212681	3200	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	180.81	1774	1526	$ 53,679.10	**$35.18**
141272	2170	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	1960	53,581.5				
211684	2170	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	131	3,595.02				
141272	**2360**	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	**3**	**153.97**				
211684	**2360**	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	**0**	**10.33**				
141272	3100	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	21,169.57				
211684	3100	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	1,420.39				
141272	3200	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	11.78				
211684	3200	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	0.79	2091	1800	$ 79,779.05	**$44.32**
141250	1320	GONZALEZ, ISMAEL		*Certificated Salary Hourly Instr*	192001	12	1,606.2				
141250	1320	GONZALEZ, ISMAEL		*Certificated Salary Hourly Instr*	192002	12	1,606.2				
141248	1430	GONZALEZ, ISMAEL		*Certificated Salary Non Instr*	191001	73	3,908.42				
141248	1430	GONZALEZ, ISMAEL		*Certificated Salary Non Instr*	194010	120	6,530.4				
141250	3100	GONZALEZ, ISMAEL			192001	0	55.88				
141250	3100	GONZALEZ, ISMAEL			192002	0	55.9				
141248	3200	GONZALEZ, ISMAEL			191001	0	136.02				
141248	3200	GONZALEZ, ISMAEL			194010	0	227.26	217	187	$ 14,126.28	**$75.70**
610585	2150	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	201	5,622.82				
212664	2170	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	1027	28,715.59				
610570	2185	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	236601	332	9,232.69				
21[illegible]	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	13,070.24				
61	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	1,625.05				
610570	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	236601	0	5,676.24	1560	1342	$ 63,942.63	**$47.66**
1410[illegible]	1210	GUSMAN, FRANCES ANN	1SM	DEAN, STUDENT OUTREACH & RETEN	110100	2088	107,267.77				
1410[illegible]	3100	GUSMAN, FRANCES ANN	1SM	DEAN, STUDENT OUTREACH & RETEN	110100	0	30,118.42	2088	1800	$ 137,386.19	**$76.33**

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2005-2006 PHRs
Foothill DeAnza CCD

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142272	2170	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	1914	48,822.54				
212681	2170	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	174	4,249.27				
142272	**2360**	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	**20**	**764.16**				
212681	**2360**	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	**46**	**1,747.48**				
142272	3100	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	20,053.56				
212681	3100	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	1,789.44				
142272	3200	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	61.95				
212681	3200	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	133.69	2088	1800	$ 75,110.45	**$41.73**
211668	2170	HENDERSON, APRIL COLONNA	1EOPS	EOPS SPECIALIST	130011	1950	48,055.21				
211668	3100	HENDERSON, APRIL COLONNA	1EOPS	EOPS SPECIALIST	130011	0	20,768.72	1950	1677	$ 68,823.93	**$41.04**
212681	2170	HUNTER, KAREN KAY	2FNAI	FINANCIAL AID ASSISTANT	230113	1524	27,719.5				
212681	2310	HUNTER, KAREN KAY	2FNAI		280001	141	1,417.5				
232111	2700	HUNTER, KAREN KAY	2FNAI		240001	37	377.5				
212681	3100	HUNTER, KAREN KAY	2FNAI	FINANCIAL AID ASSISTANT	230113	0	12,949.8				
144036	3100	HUNTER, KAREN KAY	2FNAI		240001	0	5.74				
212681	3200	HUNTER, KAREN KAY	2FNAI		280001	0	129.99	1702	1464	$ 42,600.03	**$29.10**
142287	2170	JOHNSON, BARRY W	2ADMI	ADMISSIONS & RECORDS SUPV	220156	2094	62,611.74				
142287	3100	JOHNSON, BARRY W	2ADMI	ADMISSIONS & RECORDS SUPV	220156	0	23,666.3	2094	1800	$ 86,278.04	**$47.93**
141287	2170	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS SUPV	120094	1169	30,410.86				
141287	2170	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	925	21,386.45				
141287	3100	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS SUPV	120094	0	12,223.35				
141287	3100	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	0	9,290.39	2094	1800	$ 73,311.05	**$40.73**
141287	2170	KALIANGARA, ARACELI	1ADMR	EVALUATION SPECIALIST, SENIOR	130072	92	2,709.69				
141272	2170	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	221	2,073.32				
211684	2170	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	6	142.05				
142[illegible]	2170	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	348	9,621.44				
14[illegible]	2170	KALIANGARA, ARACELI	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230107	695	19,644.25				
142[illegible]	**2360**	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	**16**	**655.82**				
141287	3100	KALIANGARA, ARACELI	1ADMR	EVALUATION SPECIALIST, SENIOR	130072	0	1,236.75				
141[illegible]	3100	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	0	-31,246.71				
2116[illegible]	3100	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	0	-2,143.54				
142294	3100	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	0	4,612.98				
142287	3100	KALIANGARA, ARACELI	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230107	0	45,572.7				
142294	3200	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	0	50.17	1362	1171	$ 52,273.10	**$44.63**
141378	2170	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	1984	67,826.57				
141378	**2360**	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	**5**	**292.28**				
141378	3100	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	0	29,789.03				
141378	3200	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	0	22.66	1984	1706	$ 97,638.26	**$57.22**
142306	2170	LE, CHUONG HUY	2LIB	LIBRARY TECHNICIAN, SENIOR	230034	2088	49,133.96				
142306	3100	LE, CHUONG HUY	2LIB	LIBRARY TECHNICIAN, SENIOR	230034	0	26,130.85	2088	1800	$ 75,264.81	**$41.81**
142287	2170	NAKAYAMA, CINDY J	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230048	1044	25,641.6				
142287	3100	NAKAYAMA, CINDY J	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230048	0	17,925.96	1044	898	$ 43,567.56	**$48.52**
141250	1160	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	389	17,554.56				
141378	1260	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	1169	52,663.9				
141250	3100	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	0	5,688.87				
141378	3100	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	0	17,066.92	1558	1340	$ 92,974.25	**$69.39**
142149	2170	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	2103	50,882.78				
142149	**2360**	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	**4**	**164.49**				
142149	3100	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	0	26,484.05				
142149	3200	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	0	12.59	2103	1800	$ 77,379.42	**$42.99**
232111	2700	NGUYEN, KHANH BAO	2FNAI	*C.W.S.P.*	240001	305	3,666.				
144036	3100	NGUYEN, KHANH BAO	2FNAI		240001	0	55.72				
232111	3100	NGUYEN, KHANH BAO	2FNAI		240001	0	0.	305	262	$ 3,721.72	**$14.19**
212892	2310	NGUYEN, KHANH TRUC	2OML	*Student Salary Non Instructional*	280001	23	176.25				
212892	3200	NGUYEN, KHANH TRUC	2OML		280001	0	16.17	23	20	$ 192.42	**$9.73**
148226	2310	NGUYEN, KHANH TUONG	2BOOK	*Student Salary Non Instructional*	280002	60	408.38				
148226	3200	NGUYEN, KHANH TUONG	2BOOK		280002	0	6.2	60	52	$ 414.58	**$8.03**
142245	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	730	18,070.18				
14[illegible]	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	136	3,387.94				
21[illegible]	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	958	23,717.75				
142245	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	8,079.06				
14224[illegible]	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	1,514.67				
2126[illegible]	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	10,603.81	1824	1569	$ 65,373.41	**$41.68**

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142272	2170	O'MALLEY, DAWNA LEE	2FNAI	FINANCIAL AID ASSISTANT	230026	2088	50,632.07				
142272	3100	O'MALLEY, DAWNA LEE	2FNAI	FINANCIAL AID ASSISTANT	230026	0	21,282.56	2088	1800	$ 71,914.63	**$39.95**
141287	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180001	621	3,674.				
251285	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180001	0	1,294.				
141287	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180002	140	1,405.				
141287	3200	OR, ORAWAN KHAOLA	1ADMR		180001	0	75.51				
251285	3200	OR, ORAWAN KHAOLA	1ADMR		180001	0	6.14				
141287	3200	OR, ORAWAN KHAOLA	1ADMR		180002	0	21.35				
141287	3200	OR, ORAWAN KHAOLA			180003	0	-6.14	761	654	$ 6,469.86	**$9.89**
142287	2170	PABROS, ANGELITA M	2ADMI	DIVISION ADMINISTRATIVE ASST	230219	2088	53,323.41				
142287	3100	PABROS, ANGELITA M	2ADMI	DIVISION ADMINISTRATIVE ASST	230219	0	23,433.85	2088	1800	$ 76,757.26	**$42.64**
141067	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	141	4,637.51				
141378	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	902	29,464.44				
211668	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	1044	34,101.64				
141067	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	2,035.35				
141378	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	12,927.79				
211668	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	14,962.21	2087	1800	$ 98,128.94	**$54.52**
142287	2170	PENA-FERRICK, JOAN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230242	2088	57,905.43				
142287	3100	PENA-FERRICK, JOAN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230242	0	22,438.7	2088	1800	$ 80,344.13	**$44.64**
141150	2170	PEREZ, DENISE M KORN	1IEDR	ACADEMIC SCHEDULING COORD	130177	2090	72,881.7				
141150	3100	PEREZ, DENISE M KORN	1IEDR	ACADEMIC SCHEDULING COORD	130177	0	27,325.49	2090	1800	$ 100,207.19	**$55.67**
142287	2170	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230054	2066	45,373.08				
610570	2185	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236606	-8	-210.97				
142287	3100	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230054	0	25,363.96				
610570	3100	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236606	0	-116.87	2058	1800	$ 70,409.20	**$39.12**
142[illegible]	2170	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	254	4,952.67				
21[illegible]	2170	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	1833	34,667.07				
142[illegible]	3100	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	0	2,588.5				
212[illegible]	3100	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	0	18,118.64	2087	1800	$ 60,326.88	**$33.51**
141[illegible]	170	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	2002	64,923.59				
211684	2170	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	85	2,775.99				
141272	**2360**	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	**9**	**466.32**				
211684	**2360**	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	**0**	**19.95**				
141272	3100	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	28,548.73				
211684	3100	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	1,220.59				
141272	3200	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	35.76				
211684	3200	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	1.53	2087	1800	$ 97,506.19	**$54.17**
142287	2170	ROBERTS, BRIAN R	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	559	10,359.77				
142287	3100	ROBERTS, BRIAN R	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	4,862.18	559	481	$ 15,221.95	**$31.66**
142378	2170	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	522	22,364.24				
212664	2170	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	1566	67,091.33				
142378	3100	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	0	8,365.83				
212664	3100	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	0	25,096.12	2088	1800	$ 122,917.52	**$68.29**
211668	2170	RODRIGUEZ, JORGE A	1EOPS	EOPS SPECIALIST, SENIOR	132215	2123	56,842.96				
211668	3100	RODRIGUEZ, JORGE A	1EOPS	EOPS SPECIALIST, SENIOR	132215	0	27,664.76	2123	1800	$ 84,507.72	**$46.95**
142300	2170	SANCHEZ, AMELIA P	2COUN	SECRETARY, SENIOR	230490	2088	52,556.06				
142300	3100	SANCHEZ, AMELIA P	2COUN	SECRETARY, SENIOR	230490	0	21,665.44	2088	1800	$ 74,221.50	**$41.23**
142272	2170	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	2067	50,556.33				
212681	2170	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	20	498.8				
142272	3100	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	0	22,754.6				
212681	3100	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	0	228.14	2087	1800	$ 74,037.87	**$41.13**
222224	2170	SCHOOLER, SHIRLEY A	2DSS	ADMINISTRATIVE ASSISTANT II	230136	2088	61,176.61				
222224	3100	SCHOOLER, SHIRLEY A	2DSS	ADMINISTRATIVE ASSISTANT II	230136	0	23,380.19	2088	1800	$ 84,556.80	**$46.98**
142250	1320	SIGALA-AGUILAR, GRISELDA T			291001	12	684.23				
142250	1320	SIGALA-AGUILAR, GRISELDA T			292001	12	878.25				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291002	17	733.78				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291003	14	587.02				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291004	15	649.92				
21[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			292002	16	670.88				
21[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			292003	21	880.53				
212681	1430	SIGALA-AGUILAR, GRISELDA T			293001	21	880.53				
212[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			294001	14	641.19				
212[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			294002	23	1,039.17				

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212681	1430	SIGALA-AGUILAR, GRISELDA T			294010	25	1,048.25				
142378	2170	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	513	19,128.01				
212664	2170	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	1612	57,384.75				
142378	3100	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	0	6,444.95				
212664	3100	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	0	19,335.12				
142250	3100	SIGALA-AGUILAR, GRISELDA T			291001	0	115.74				
142250	3100	SIGALA-AGUILAR, GRISELDA T			292001	0	152.64				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291002	0	130.25				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291003	0	105.22				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291004	0	116.35				
212681	3200	SIGALA-AGUILAR, GRISELDA T			292002	0	113.11				
212681	3200	SIGALA-AGUILAR, GRISELDA T			292003	0	154.84				
212681	3200	SIGALA-AGUILAR, GRISELDA T			293001	0	154.81				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294001	0	114.61				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294002	0	180.55				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294010	0	177.15	2315	1800	$ 112,501.85	**$62.50**
141287	2170	SLAYTON, VIRGINIA E	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130146	2088	54,557.43				
141287	3100	SLAYTON, VIRGINIA E	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130146	0	23,679.26	2088	1800	$ 78,236.69	**$43.46**
141287	2170	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	1705	34,547.36				
610570	2185	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136608	254	6,237.01				
610575	2600	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	0	4,207.72				
141287	3100	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	0	20,977.19				
610570	3100	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136608	0	3,624.48	1959	1685	$ 69,593.76	**$41.31**
142287	2170	THAI, BINH N	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230188	2088	61,237.42				
142287	3100	THAI, BINH N	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230188	0	28,306.25	2088	1800	$ 89,543.67	**$49.75**
142[illegible]	2170	THAI, MAY	2CASH	CASHIER, SENIOR	230351	2118	50,982.09				
14[illegible]	**2360**	THAI, MAY	2CASH	CASHIER, SENIOR	230351	**11**	**421.83**				
142149	3100	THAI, MAY	2CASH	CASHIER, SENIOR	230351	0	26,511.48				
142149	3200	THAI, MAY	2CASH	CASHIER, SENIOR	230351	0	32.62	2118	1800	$ 77,526.19	**$43.07**
1423[illegible]	170	THANH, QUANG X	2LIB	COMPUTER LAB OPERATIONS COORD	230002	2088	64,404.88				
14230[illegible]	3100	THANH, QUANG X	2LIB	COMPUTER LAB OPERATIONS COORD	230002	0	29,169.19	2088	1800	$ 93,574.07	**$51.99**
142287	2170	TING, JUDY LEE	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230360	2088	59,269.4				
142287	3100	TING, JUDY LEE	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230360	0	23,000.77	2088	1800	$ 82,270.17	**$45.71**
142287	2170	TOMALINAS, ROBERT T	2ADMI	EVAL. SPEC. *Class. Contracted Non Instr.*	230340	108	2,270.48				
212650	2170	TOMALINAS, ROBERT T	2ADMI	EVAL. SPEC. Class. Contracted Non Instr.	230340	761	15,893.12				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260001	487	7,543.64				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260005	0	946.				
148700	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260005	88	0.				
142164	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260009	0	1,239.2				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260009	80	0.				
142287	3100	TOMALINAS, ROBERT T	2ADMI	EVALUATION SPECIALIST	230340	0	913.61				
212650	3100	TOMALINAS, ROBERT T	2ADMI	EVALUATION SPECIALIST	230340	0	6,394.9				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260001	0	730.21				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260005	0	91.57				
148700	3200	TOMALINAS, ROBERT T	2ADMI		260005	0	0.				
142164	3200	TOMALINAS, ROBERT T	2ADMI		260009	0	119.96				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260009	0	0.	1524	1311	$ 36,142.69	**$27.58**
212664	2170	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	150	3,452.41				
212681	2170	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	1937	41,484.32				
212664	**2360**	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	**2**	**68.92**				
212681	**2360**	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	**1**	**56.17**				
212664	3100	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	1,497.75				
212681	3100	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	0	18,655.5				
212664	3200	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	5.27				
212681	3200	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	0	4.29	2087	1800	$ 65,099.54	**$36.17**
212681	2170	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	1823	37,212.7				
610570	2185	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	236608	176	3,629.25				
212681	**2360**	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	**43**	**1,315.3**				
2[illegible]	3100	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	0	17,325.21				
6[illegible]	3100	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	236608	0	2,049.				
212681	3200	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	0	102.28	1999	1719	$ 60,318.44	**$35.09**
1421[illegible]	2110	WANG, RHODA	2BGTP	DIRECTOR, BUDGET & PERSONNEL	210016	1044	53,302.23				
1440[illegible]	170	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	983	47,397.				

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El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
214610	2170	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	72	3,512.94				
142150	3100	WANG, RHODA	2BGTP	DIRECTOR, BUDGET & PERSONNEL	210016	0	16,113.26				
144046	3100	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	0	15,267.83				
214610	3100	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	0	1,131.67	2099	1800	$ 136,724.93	**$75.96**
211684	2170	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	2100	42,718.69				
211684	**2360**	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	**46**	**1,422.35**				
211684	3100	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	0	24,828.41				
211684	3200	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	0	109.47	2100	1800	$ 67,656.57	**$37.59**
141287	2170	WOOD, PATRICIA MAY	1ADMR	CASHIERING SERVICES COORD	130117	1884	47,892.62				
610570	2185	WOOD, PATRICIA MAY	1ADMR	CASHIER, SENIOR	136604	144	3,415.06				
141287	3100	WOOD, PATRICIA MAY	1ADMR	CASHIERING SERVICES COORD	130117	0	19,734.61				
610570	3100	WOOD, PATRICIA MAY	1ADMR	CASHIER, SENIOR	136604	0	1,682.23	2028	1800	$ 72,724.52	**$40.40**
211668	1260	WU, TILLY LIU	1EOPS	COUNSELOR	150007	1466	71,136.92				
211679	1260	WU, TILLY LIU	1EOPS	COUNSELOR	150007	93	4,540.73				
141250	1320	WU, TILLY LIU			191001	12	1,501.62				
141250	1320	WU, TILLY LIU			191002	36	3,149.62				
141248	1430	WU, TILLY LIU			192001	7	358.13				
211668	3100	WU, TILLY LIU	1EOPS	COUNSELOR	150007	0	28,846.95				
211679	3100	WU, TILLY LIU	1EOPS	COUNSELOR	150007	0	1,754.33				
141250	3100	WU, TILLY LIU			191001	0	157.54				
141250	3100	WU, TILLY LIU			191002	0	423.25				
141248	3200	WU, TILLY LIU			192001	0	66.93	1614	1388	$ 111,936.02	**$80.64**
212664	2170	ZAMORA, LILLIAN DOROTHY	2EOPS	OFFICE ASSISTANT	230191	2088	41,334.41				
212664	3100	ZAMORA, LILLIAN DOROTHY	2EOPS	OFFICE ASSISTANT	230191	0	19,432.74	2088	1800	$ 60,767.15	**$33.76**
141287	2170	ZIMMERMAN, BRIAN M	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	478	8,854.81				
141[illegible]	3100	ZIMMERMAN, BRIAN M	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	0	3,553.54	478	411	$ 12,408.35	**$30.18**

EL Object
2360 = Overtime, not used in PHR calculation.
Print Date 5/18/2012
SIX_TEN_PHR 98-99 thru 05-06 efcw

Columns A-H by FDCCD
(italicized titles input by sea of SixTen)
Colmuns I-L by SixTen and Associates
sea 6/25/07

Foothill-De Anza C... ...nity College District
308/95 Enrollm... ...ee ...ection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. (See documentation in the 05-06 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,79
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,29
		Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.						
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,39
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,40
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee					
1.8-4 line 5	Summer							
	Fall							
	Winter/Interssion							
	Spring							
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,31
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,2
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298						
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Foothill-DeAnza
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$56,513,652	$50,137,336	$1,866,336	$52,003,672
EQUALIZATION	1,276,441	1,174,325	102,116	1,276,441
ENROLL FEE ADMIN (2%)	80,315	73,889	6,426	80,315
APPRENTICE ALLOWANCE	1,969,874	1,841,899	127,975	1,969,874
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	972,422	894,629	77,793	972,422
S.F.A.A.	928,789	853,412	75,377	928,789
E.O.P.S.	1,749,642	1,605,414	144,228	1,749,642
C.A.R.E.	135,699	124,843	10,856	135,699
D.S.P.S.	4,119,151	3,789,619	329,532	4,119,151
STATE HOSPITALS	0	0	0	0
CALWORKS	296,337	272,630	23,707	296,337
MATRICULATION (CREDIT)	1,442,844	1,327,418	115,426	1,442,844
MATRIC. (NONCREDIT)	71,637	65,906	5,731	71,637
FAC.& STAFF DIVERSITY	31,824	26,908	4,916	31,824
PART-TIME FAC. INS.	68,356	0	68,356	68,356
PART-TIME FAC. OFF. HRS	279,306	0	279,306	279,306
PART-TIME FAC. ALLO.	1,475,772	1,357,711	118,061	1,475,772
TELECOMMUNICATIONS	104,664	67,524	37,140	104,664
PLANT & INSTRUCTIONAL	744,593	685,024	59,569	744,593
ECON. DEVELOPMENT	610,280	512,634	1	512,635
TANF	67,731	62,311	5,420	67,731
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	37,625	31,605	0	31,605
VTEA TITLE I C	340,605	107,027	179,081	286,108
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	883,011	883,010	1	883,011
TOTAL	$74,200,570	$65,895,074	$3,637,354	$69,532,428

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,875.05
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 143,144.78
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$155,700.00	$163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$(105,724.20)	$(166,880.97)	$(176,159.90)	$(163,502.22)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 143,144.78**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:31:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	22	6,469
BOGW - Part A-2 based on SSI recipient status	26	7,326
BOGW - Part A-3 based on general assistance recipient status	4	851
BOGW - Part A-4 based on Veteran's or National Guard dependent status	27	6,504
BOGW - Part B based on income standards	1,301	413,485
BOGW - Part C based on financial need	1,943	772,612

Total Amount = $ 1,207,247

Back to Top of Page

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12.00 +
2,103.00 +
4,531.00 +
10,442.00

 waivers approved

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:30:20

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	161	63,560
BOGW - Part A-2 based on SSI recipient status	412	180,071
BOGW - Part A-4 based on Veteran's or National Guard dependent status	12	3,677
BOGW - Part B based on income standards	2,003	656,259
BOGW - Part C based on financial need	4,531	2,020,570

Total Amount = $ 2,924,137

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 18, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8697

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D.T Brownell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43045

(02) Claimant Name: Foothill-De Anza Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 12345 El Monte Road

City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 1,351,000	(13) $ 1,228,251
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,228,251
Due from State	(08) $ 1,351,000	(17) $ 1,228,251
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	465
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	967,742
(25) EFCW-1, (04)(B)(1)(a)(f)	3,482
(26) EFCW-1, (04)(B)(1)(b)(f)	1,131
(27) EFCW-1, (04)(B)(2)(a)(f)	11,793
(28) EFCW-1, (04)(B)(2)(b)(f)	169,798
(29) EFCW-1, (04)(B)(2)(c)(f)	4,202
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	343,992
(32) EFCW-1, (09)	83,949
(33) EFCW-1, (10)	190,406
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date**

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 1 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **Foothill-De Anza Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2006-2007**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 465.12	$ -	$ -	$ -	$ -	$ 465.12
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 967,742.10	$ -	$ -	$ -	$ -	$ 967,742.10
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,482.25	$ -	$ -	$ -	$ -	$ 3,482.25
b. Staff training (One time per employee)	$ 1,131.06	$ -	$ -	$ -	$ -	$ 1,131.06
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 11,792.87	$ -	$ -	$ -	$ -	$ 11,792.87
b. Waiving student fees	$ 169,797.83	$ -	$ -	$ -	$ -	$ 169,797.83
c. Reporting BOG fee waiver data to CCC	$ 4,202.32	$ -	$ -	$ -	$ -	$ 4,202.32
(05) Total Direct Costs	$ 1,158,613.55	$ -	$ -	$ -	$ -	$ 1,158,613.55

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.69%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 343,992.36
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,502,605.91
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 83,949.00
(10) Enrollment Fee Waiver offsets		$ 190,406.33
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,228,250.58

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Moberg, Kathleen Dean, Admissions & Outreach	$77.52	6.0	$ 465.12				
(05) Total [X] Subtotal [ ] Page 1 of 1			$ 465.12	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
'hill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$35.10	8,047.3	$ 282,460.23				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$35.10	5,120.9	$ 179,743.59				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$35.10	8,699.7	$ 305,359.47				
ing written and computer records for enrollment fee information Enrollment Office Staff Various	$35.10	4,567.3	$ 160,312.23				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$35.10	1,135.8	$ 39,866.58				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 967,742.10	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: 'hill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Director, Financial Aid	$75.10	30.0	$ 2,253.00				
Chacon, Beatriz	Director, Financial Aid	$77.82	12.0	$ 933.84				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,482.25	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Castillo, Cindy	Director, Financial Aid	$75.10	3.0	$ 225.30				
Feldman, Joyce	Financial Aid Assistant	$47.38	10.0	$ 473.80				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,131.06	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: hill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Chacon, Beatriz	Director, Financial Aid	$77.82	40.0	$ 3,112.80				
Collings, Lee	Webmaster	$78.17	10.0	$ 781.70				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	8.0	$ 886.96				
Pabros, Angelita	Division Assistant	$48.40	125.0	$ 6,050.00				
Renteria, Matilda	Financial Aid Coordinator	$58.51	6.0	$ 351.06				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,792.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: othill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$41.66	1,164.0	$ 48,492.24				
Receiving waiver applications							
Financial Aid Office Staff Various	$41.66	748.3	$ 31,174.18				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$41.66	873.0	$ 36,369.18				
lying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$41.66	94.1	$ 3,920.21				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$41.66	1,117.5	$ 46,555.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$41.66	78.9	$ 3,286.97				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 169,797.83	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan	Financial Aid Coordinator	$53.35	35.0	$ 1,867.25				
Chacon, Beatriz	Director, Financial Aid	$77.82	16.0	$ 1,245.12				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	4.0	$ 443.48				
Renteria, Matilda	Financial Aid Coordinator	$58.51	7.0	$ 409.57				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,202.32	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$1,867.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	49.00	**Bloom, Susan Total**			$2,614.15		
06-07	30.00	Castillo, Cindy	Director, Financial Aid	$75.10	$2,253.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Castillo, Cindy	Director, Financial Aid	$75.10	$225.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	33.00	**Castillo, Cindy Total**			$2,478.30		
06-07	40.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$3,112.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	16.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$1,245.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	12.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$933.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	68.00	**Chacon, Beatriz Total**			$5,291.76		
2/10/2007	10.00	Collings, Lee	Webmaster	$78.17	$781.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin, rds
	10.00	**Collings, Lee Total**			$781.70		
06-07	1,135.80	Enrollment Office Staff	Various	$35.10	$39,866.58	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	8,047.30	Enrollment Office Staff	Various	$35.10	$282,460.23	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	5,120.90	Enrollment Office Staff	Various	$35.10	$179,743.59	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	8,699.70	Enrollment Office Staff	Various	$35.10	$305,359.47	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	4,567.30	Enrollment Office Staff	Various	$35.10	$160,312.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,571.00	**Enrollment Office Staff Total**			$967,742.10		
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	10.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$473.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	25.00	**Feldman, Joyce Total**			$1,184.50		
06-07	1,164.00	Financial Aid Office Staf	Various	$41.66	$48,492.24	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	748.30	Financial Aid Office Staf	Various	$41.66	$31,174.18	Receiving waiver applications	Waiving student fees
06-07	78.90	Financial Aid Office Staf	Various	$41.66	$3,286.97	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
06-07	873.00	Financial Aid Office Staf	Various	$41.66	$36,369.18	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	94.10	Financial Aid Office Staf	Various	$41.66	$3,920.21	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,117.50	Financial Aid Office Staf	Various	$41.66	$46,555.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,075.80	**Financial Aid Office Staff Total**			$169,797.83		
06-07	8.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$886.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin, ords
06-07	4.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$443.48	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	12.00	**Johnson, Penelope Total**			$1,330.44		
06-07	6.00	Moberg, Kathleen	Dean, Admissions & Outreach	$77.52	$465.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	6.00	**Moberg, Kathleen Total**			$465.12		
06-07	125.00	Pabros, Angelita	Division Assistant	$48.40	$6,050.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$6,050.00		
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$351.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$409.57	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	15.00	**Renteria, Matilda Total**			$877.65		
	31,989.80	**Grand Total**			$1,158,613.55		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$96,325,678		$96,325,678	$612,260	$95,713,418
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,739,842		9,739,842	124,585	9,615,257
Course and Curriculum Development	6020	292,951		292,951	45,482	247,469
Academic/Faculty Senate	6030	122,350		122,350		122,350
Other Instructional Administration & Instructional Governance	6090	372,931		372,931		372,931
Instructional Support Services	6100					
Learning Center	6110	213,665		213,665	18,454	195,211
Library	6120	3,393,072		3,393,072	36,864	3,356,208
Media	6130	923,299		923,299	25,808	897,491
Museums and Galleries	6140	40,873		40,873		40,873
Academic Information Systems and Technology	6150	690,037		690,037	11,654	678,383
Other Instructional Support Services	6190	237,871		237,871	18,984	218,887
Admissions and Records	6200	3,801,176		3,801,176	12,044	3,789,132
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,840,617		3,840,617		3,840,617
Matriculation and Student Assessment	6320	1,461,425		1,461,425		1,461,425
Transfer Programs	6330	310,872		310,872		310,872
Career Guidance	6340	303,294		303,294	5,786	297,508
Other Student Counseling and Guidance	6390	364,712		364,712		364,712
Other Student Services	6400					
Disabled Students Programs & Services	6420	890,827		890,827	33,263	857,564
Subtotal		$123,325,492	$0	$123,325,492	$945,184	$122,380,308

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,594,784		$1,594,784	$1,852	$1,592,932
Health Services	6440	1,267,671		1,267,671	10,140	1,257,531
Student Personnel Admin.	6450	232,295		232,295		232,295
Financial Aid Administration	6460	1,779,978		1,779,978	15,833	1,764,145
Job Placement Services	6470	902,251		902,251		902,251
Veterans Services	6480					
Miscellaneous Student Services	6490	825,959		825,959	7,262	818,697
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,943,368		3,943,368	3,943,368	0
Custodial Services	6530	3,424,388		3,424,388	3,424,388	0
Grounds Maintenance and Repairs	6550	1,673,547		1,673,547	1,673,547	0
Utilities	6570	2,488,389		2,488,389	2,488,389	0
Other	6590	720,593		720,593	720,593	0
Planning, Policy Making, and Coordination	6600	4,919,265		4,919,265	4,919,265	0
General Inst. Support Services	6700					
Community Relations	6710	1,597,315		1,597,315	1,597,315	0
Fiscal Operations	6720	2,096,060		2,096,060	2,096,060	0
Human Resources Management	6730	2,141,131		2,141,131	2,141,131	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	492,407		492,407	492,407	0
Staff Diversity	6760	222,285		222,285	222,285	0
Logistical Services	6770	6,963,386		6,963,386	6,963,386	0
Management Information Systems	6780	7,620,569		7,620,569	7,620,569	0
Subtotal		$168,231,133	$0	$168,231,133	$39,282,974	$128,948,159

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,137,945		2,137,945	2,137,945	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,598,688		1,598,688	-11,654	1,610,342
Community Service Classes	6820	1,446,393		1,446,393	20,246	1,426,147
Community Use of Facilities	6830	643,078		643,078	53,795	589,283
Economic Development	6840	787,589		787,589	17,235	770,354
Other Community Services & Economic Development	6890	3,273		3,273		3,273
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,132,223		1,132,223		1,132,223
Student and Co-curricular Activities	6960	739,200		739,200		739,200
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	585,789		585,789		585,789
Other Auxiliary Operations	7090	4,135,371		4,135,371	34,704	4,100,667
Physical Property Acquisitions	7100					
(05) Total		$181,440,682	$0	$181,440,682	$41,535,245	$139,905,437
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				29.69%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	581,115	72,364	27,707	27,852		709,038
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300	359,135	32,219	9,659			401,013
Biological Sciences	0400	3,269,817	110,056	148,518	55,466		3,583,857
Business and Management	0500	3,973,396	119,250	20,801	518		4,113,965
Communications	0600	1,447,776	85,597	49,301	7,129		1,589,803
Information Technology	0700	3,735,934	544,219	122,250	44,848		4,447,251
Education	0800	6,203,367	694,000	336,483	120,885		7,354,735
Engineering and Industrial Tech.	0900	4,835,041	205,839	2,826,021	34,573		7,901,474
Fine and Applied Arts	1000	6,860,551	421,122	1,135,055	31,024		8,447,752
Foreign Language	1100	2,548,885	81,069	15,821			2,645,775
Health	1200	3,664,468	532,054	456,025	57,981		4,710,528
Family and Consumer Sciences	1300	929,274	163,069	25,753			1,118,096
Law	1400	249,654	13,470	10,081	12,954		286,159
Humanities (Letters)	1500	10,568,881	369,063	88,559	17,372		11,043,875
Library Science	1600	54,459					54,459
Mathematics	1700	7,142,717	157,779	22,536	8,148		7,331,180
Military Studies	1800						
Physical Sciences	1900	3,671,447	166,734	142,703	20,440		4,001,324
Psychology	2000	1,663,679	30,450	7,436			1,701,565
Public and Protective Services	2100	309,226	9,849	108,203			427,278
Social Sciences	2200	7,376,579	236,910	72,766	45,909		7,732,164
Commercial Services	3000	312,504	5,078	31,811	5,072		354,465
Interdisciplinary Studies	4900	11,619,644	4,207,801	420,388	122,089		16,369,922
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	81,377,549	8,257,992	6,077,877	612,260		96,325,678

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFO[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper[illegible]tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,118,314	1,496,943	124,585		9,739,842
Course and Curriculum Development	6020		243,175	4,294	45,482		292,951
Academic/Faculty Senate	6030		111,081	11,269			122,350
Other Instruct. Admin. & Instruct. Governance	6090		277,214	95,717			372,931
Subtotal - Instructional Administration	**6000**		8,749,784	1,608,223	170,067		10,528,074
Instructional Support Services (6100)							
Learning Center	6110	121,034	73,595	582	18,454		213,665
Library	6120		2,917,750	438,458	36,864		3,393,072
Media	6130		789,087	108,404	25,808		923,299
Museums and Galleries	6140		38,211	2,662			40,873
Academic Information Systems and Tech.	6150		464,307	214,076	11,654		690,037
Other Instructional Support Services	6190		171,521	47,366	18,984		237,871
Subtotal - Instructional Support Services	**6100**	121,034	4,454,471	811,548	111,764		5,498,817
Admissions and Records	**6200**		3,437,473	351,659	12,044		3,801,176
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,760,129	80,488			3,840,617
Matriculation and Student Assessment	6320		1,413,285	48,140			1,461,425
Transfer Programs	6330		295,941	14,931			310,872
Career Guidance	6340		265,121	32,387	5,786		303,294
Other Student Counseling and Guidance	6390		333,516	31,196			364,712
Subtotal - Student Counseling and Guidance	**6300**		6,067,992	207,142	5,786		6,280,920

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		589,525	268,039	33,263		890,827
Extended Opportunity Prgms. & Services (EOPS)	6430		1,516,371	76,561	1,852		1,594,784
Health Services	6440		906,845	350,686	10,140		1,267,671
Student Personnel Administration	6450		222,927	9,368			232,295
Financial Aid Administration	6460		1,630,022	134,123	15,833		1,779,978
Job Placement Services	6470		238,689	663,562			902,251
Veterans Services	6480						
Miscellaneous Student Services	6490		730,978	87,719	7,262		825,959
Subtotal - Other Student Services	**6400**		5,835,357	1,590,058	68,350		7,493,765
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,334,730	421,440	187,198		3,943,368
Custodial Services	6530		2,331,300	1,093,088			3,424,388
Grounds Maintenance and Repairs	6550		1,527,439	144,589	1,519		1,673,547
Utilities	6570			2,488,389			2,488,389
Other Operation and Maintenance of Plant	6590		449,360	260,206	11,027		720,593
Subtotal - Operation and Maintenance of Plant	**6500**		7,642,829	4,407,712	199,744		12,250,285
Planning, Policymaking, and Coordination	**6600**		2,191,644	2,127,107	600,514		4,919,265

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,187,155	340,235	69,925		1,597,315
Fiscal Operations	6720		2,062,060	7,767	26,233		2,096,060
Human Resources Management	6730		1,898,904	237,722	4,505		2,141,131
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		256,491	234,500	1,416		492,407
Staff Diversity	6760		212,801	5,963	3,521		222,285
Logistical Services	6770		3,107,699	3,739,027	116,660		6,963,386
Management Information Systems	6780		6,040,836	1,211,683	368,050		7,620,569
Other General Institutional Support Services	6790		566,613	1,571,332			2,137,945
Subtotal - General Institutional Support Services	**6700**		15,332,559	7,348,229	590,310		23,271,098
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		91,103	1,519,239	(11,654)		1,598,688
Community Service Classes	6820		882,891	543,256	20,246		1,446,393
Community Use Facilities	6830		436,501	152,782	53,795		643,078
Economic Development	6840		308,051	462,303	17,235		787,589
Other Community Svcs. & Economic Development	6890			3,273			3,273
Subtotal - Community Services	**6800**		1,718,546	2,680,853	79,622		4,479,021

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper[illegible]tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,134,836	(2,613)			1,132,223
Student and Co-curricular Activities	6960		697,562	41,638			739,200
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,832,398	39,025			1,871,423
Auxiliary Operations (7000)							
Contract Education	7010	7,050	357,609	221,130			585,789
Other Auxiliary Operations	7090		3,402,241	698,426	34,704		4,135,371
Subtotal - Auxiliary Operations	**7000**	7,050	3,759,850	919,556	34,704		4,721,160
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					12,748,416	12,748,416
Student Aid	7320						
Other Outgo	7330					822,209	822,209
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					13,570,625	13,570,625
TOTAL EXPENDITURES and OTHER OUTGO	**391**	81,505,633	69,280,895	28,168,989	2,485,165	13,570,625	195,011,307

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	130,496
Avg. time p/account	3.7
Total Time (in minutes)	482835
Per Hour	60
Hours Worked (** **11**)	**8047.3**
***EFC 2**	83,041
Avg. time p/student	3.7
Total Time (in minutes)	307252
Per Hour	60
Hours Worked (** **12**)	**5120.9**
***EFC 1**	130,496
Avg. time p/question	4.0
Total Time (in minutes)	521984
Per Hour	60
Hours Worked (** **13**)	**8699.7**
***EFC 2**	83,041
Avg. time p/file	3.3
Total Time (in minutes)	274035
Per Hour	60
Hours Worked (** **14**)	**4567.3**
***EFC 4**	13,908
Avg. time p/account	4.9
Total Time (in minutes)	68149
Per Hour	60
Hours Worked (** **15**)	**1135.8**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	24,942
Avg. time p/question	2.8
Total Time (in minutes)	69838
Per Hour	60
Hours Worked **(** 21)**	**1164.0**
***EFW 6**	24,942
Avg. time p/application	1.8
Total Time (in minutes)	44896
Per Hour	60
Hours Worked **(** 22)**	**748.3**
***EFW 6**	24,942
Avg. time p/evaluation	2.1
Total Time (in minutes)	52378
Per Hour	60
Hours Worked **(** 23)**	**873.0**
***EFW 8**	1,821
Avg. time p/application	3.1
Total Time (in minutes)	5645
Per Hour	60
Hours Worked **(** 24)**	**94.1**
***EFW 7**	23,121
Avg. time p/application	2.9
Total Time (in minutes)	67051
Per Hour	60
Hours Worked **(** 25)**	**1117.5**
***EFW 8**	1,821
Avg. time p/application	2.6
Total Time (in minutes)	4735
Per Hour	60
Hours Worked **(** 26)**	**78.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Aced, Shawna	Associate Registrar	3	2	3	2	3	4
Almendarez, Susan	A&R Assistant	5	3	3	2	2	3
Amit Jr., Roland	A&R Supervisor	5	3	5	3	3	3
Bowers, Shelly	A&R Assistant	2		2			
Brewer, Pam	Admissions Assistant	5	2	5			3
Cheney, Melodie	Admissions Assistant	7	7	4	6		
Cole, Sheri	Admissions Assistant	3	3	4	3		
Crumpton, Dina	Administrative Assistant	3	3	5	3		
Deshpande, Mrinmate Hemant	A&R Assistant	7	9	5	4	10	10
Dickard, Jeff	Admissions Assistant	2	1	3	2		
Elwell, Jean	Admissions Coordinator	3	1	1	3		
Fifield, Patricia	Associate Registrar	3	3	5	3		
Furuhata, Eri	Part-time Student Worker	4	4	5	4	4	2
Furukawa, Nami	Part-time Student Worker	1	5	3	10	10	5
Ichimura, Sachie	Part-time Student Worker	5	4	5	3	5	4
uchi, Mineko	General Assistant	2	2	2	3.5	2.5	2
Jamello, Catrina	Admissions Assistant	4	3	4	3		
Johnson, Barry	Admissions Supervisor	4	5	3	3		
Jung, Henry	Day Supervisor	2	3	3	5	2	3
Kaliangara, Araceli	Admissions Assistant	8	7	6	4		
Kaur, Jasmeet	Part-time Student Worker	5	5	2	5	5	5
Khaola Or, Orawan	Senior Cashier	3	3	5	1	5	7
Lam, Phong	Outreach Assistant			3			
Mathis Dawson, Oudia	A&R Transcript	3	3	3	1	3	
Nakayama, Cindy	Admissions Assistant	4	3	2	3		
Neumann, Irmgard	Admissions Assistant	4	3	4	3		
Okuneva, Yelena	Part-time Student Worker	2	2	4	5	3	1
Pabros, Angelita	Division Administrative Assistant	4	3	2	3		
Pena-Ferrick, Joan	Admissions Assistant	3	6	4	3		
Pojhan, Atousa	A&R Assistant	5	1	5	2		
Roberts, Brian	Admissions Assistant	3	3	5	3		
Santa Cruz, Andrea	Admissions Assistant	4	3	4	3		
Slayton, Virginia	A&R Assistant	5	7	6	6	6	4
Snowden, Betty	Admissions Coordinator	3	3	5	3		
Terranova, Cheryl	Clerk	2	2	3	1		
Thai, Binh	Admissions Assistant	3	5	5	3		
Ting, Judy	Admissions Assistant	5	10	10	3		
Tomalinas, Robert	Admissions Evaluation Specialist	4	4	4	4		
Wood, Patricia	Cashiering Services Coordinator	5	3	5	2	12	3
Zimmerman, Brian	A&R Assistant	1	3	2	2	3	2
Average		3.7	3.7	4.0	3.3	4.9	3.8

Conclusion: Findings go forward to Schedule 1A.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16

*EFC Workload Multiplier (Default)
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

**Activity Codes
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and Foothill PHR list.
Findings:

Staff	Title	PHR 06-07
Aced, Shawna	Associate Registrar	55.19
Almendarez, Susan	A&R Assistant	39.72
Amit Jr., Roland	A&R Supervisor	40.25
Bowers, Shelly	A&R Assistant	45.75
Brewer, Pam	Admissions Assistant	45.98
Cheney, Melodie	Admissions Assistant	43.66
Cole, Sheri	Admissions Assistant	32.62
Crumpton, Dina	Administrative Assistant	36.29
Deshpande, Mrinmate Hemant	A&R Assistant	39.63
Dickard, Jeff	Admissions Assistant	32.78
Elwell, Jean	Admissions Coordinator	53.31
Fifield, Patricia	Associate Registrar	60.62
Furuhata, Eri	Part-time Student Worker	8.21
Furukawa, Nami	Part-time Student Worker	9.96
Ichimura, Sachie	Part-time Student Worker	10.15
Iguchi, Mineko	General Assistant	10.15
Jamello, Catrina	Admissions Assistant	33.73
Johnson, Barry	Admissions Supervisor	50.72
Jung, Henry	Day Supervisor	46.23
Kaliangara, Araceli	Admissions Assistant	29.16
Kaur, Jasmeet	Part-time Student Worker	8.27
Khaola Or, Orawan	Senior Cashier	27.35
Lam, Phong	Outreach Assistant	13.23
Mathis Dawson, Oudia	A&R Transcript	42.17
Nakayama, Cindy	Admissions Assistant	27.49
Neumann, Irmgard	Admissions Assistant	16.93
Okuneva, Yelena	Part-time Student Worker	9.04
Pabros, Angelita	Division Administrative Assistant	48.40
Pena-Ferrick, Joan	Admissions Assistant	47.08
Pojhan, Atousa	A&R Assistant	31.01
Roberts, Brian	Admissions Assistant	34.83
Santa Cruz, Andrea	Admissions Assistant	10.80
Slayton, Virginia	A&R Assistant	46.83
Snowden, Betty	Admissions Coordinator	50.01
Terranova, Cheryl	Clerk	45.07
Thai, Binh	Admissions Assistant	53.60
Ting, Judy	Admissions Assistant	48.60
Tomalinas, Robert	Admissions Evaluation Specialist	40.47
Wood, Patricia	Cashiering Services Coordinator	45.04
Zimmerman, Brian	A&R Assistant	33.49
Average		**35.10**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Aneja, Bhrigu	Clerical Assistant	2	1		1		
Appell, Bradley	Student Employee	2	1				
Bellon, Ryan	FA Outreach Assistant	5	2	1	2	2	5
Castillo, Cindy	Director, Financial Aid	1	1				
Chacon, Beatriz	Director, Financial Aid	2	1	2			1
Chavez, Antoinette	FA Outreach Assistant	3	1	1	4	2	2
Chen, I	FA Outreach Coordinator	2	2	3	3	1	1
Christensen, Josephine	FA Outreach Assistant	5	2	3	5	5	5
Claros, Randy	FA Outreach Assistant	2	2	2	5	5	3
Duong, Tung	Financial Aid Assistant	3	2	3	3	2	2
Feldman, Joyce	Financial Aid Assistant	3	5	3	10	7	4
Godinez, Christy	Financial Aid Assistant	2	2	1			
Henderson, April	EOPS Specialist	3		1		5	
Hunter, Karen	Financial Aid Assistant	1					
Joyner, Lindsey	Student Employee	2	1				
Lam, Phong	Outreach Assistant	3					
Lambrecht, Donna	Sr. Administrative Assistant	4	1				
McCarty, Camilie	Admissions Assistant	1	1	1	2		
Mieso, Rob	Program Coordinator	5					
Mondik, Patricia	Financial Aid Assistant	6	3	2			
Nava, Tobias	EOPS Counselor	3	1	3			
Nguyen, Thao	FA Outreach Assistant	2	1	2	1	1	
O'Malley, Dawna	Financial Aid Assistant	2	1	1	2	2	1
Pardo, Ines	EOPS Program Sewrvices Coordinator	6	3	4	4		
Renteria, Matilda	Financial Aid Coordinator	3	2	5	3	5	3
Rodriguez, Jorge	Sr. EOPS Specialist	4		1			
Tun, Yamin	Clerical Assistant	2	1		1	2	
Van, Nina	FA Outreach Assistant	2	5	1	2	1	2
Witkop, Inna	FA Outreach Assistant	3	1	2	2	2	2
Wu, Tilly	EOPS Counselor	1	1	2	3	1	
Average		**2.8**	**1.8**	**2.1**	**3.1**	**2.9**	**2.6**

Conclusion: Findings go forward to Schedule 1B.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26

***EFW Workload Multiplier (Default)**

EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answ
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibi
24 - Incomplete Applications: Notifying the student of the additional required information. Holding th in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering informati Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Pr notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and Foothill PHR list.
Findings:

Staff	Title	PHR 06-07
Aneja, Bhrigu	Clerical Assistant	10.15
Appell, Bradley	Student Employee	14.52
Bellon, Ryan	FA Outreach Assistant	33.09
Castillo, Cindy	Director, Financial Aid	75.10
Chacon, Beatriz	Director, Financial Aid	77.82
Chavez, Antoinette	FA Outreach Assistant	35.66
Chen, I	FA Outreach Coordinator	44.47
Christensen, Josephine	FA Outreach Assistant	38.89
Claros, Randy	FA Outreach Assistant	35.70
Duong, Tung	Financial Aid Assistant	46.79
Feldman, Joyce	Financial Aid Assistant	47.38
Godinez, Christy	Financial Aid Assistant	46.68
Henderson, April	EOPS Specialist	36.78
Hunter, Karen	Financial Aid Assistant	35.58
Joyner, Lindsey	Student Employee	15.07
Lam, Phong	Outreach Assistant	13.23
Lambrecht, Donna	Sr. Administrative Assistant	57.57
McCarty, Camille	Admissions Assistant	15.97
Mieso, Rob	Program Coordinator	57.92
Mondik, Patricia	Financial Aid Assistant	42.94
Nava, Tobias	EOPS Counselor	58.90
Nguyen, Thao	FA Outreach Assistant	31.29
O'Malley, Dawna	Financial Aid Assistant	42.97
Pardo, Ines	EOPS Program Sewrvices Coordinator	57.82
Renteria, Matilda	Financial Aid Coordinator	58.51
Rodriguez, Jorge	Sr. EOPS Specialist	51.85
Tun, Yamin	Clerical Assistant	12.17
Van, Nina	FA Outreach Assistant	38.57
Witkop, Inna	FA Outreach Assistant	44.03
Wu, Tilly	EOPS Counselor	72.37
Average		**41.66**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274	130,496
EFC 2	1.8-1	2.	Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773	83,041
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012	23,121
EFC 4	1.8-2	1.	Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763	13,908
EFC 5	1.8-2	2.	Refunds									
EFW 6	1.8-3	1.	Waivers Requested	X								24,942
EFW 7	1.8-3	2.	Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442	23,121
EFW 8	1.8-3 (1-2)		Waivers Denied	X								1,821

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Friday, May 18, 2012

Student Demographics By Academic Year

Student Headcount
For Deanza For 2006-2007
Data Current As Of May 18, 2012 01:50:40

Download The Result in Comma Delimited Format

Headcount
40,529

Back to Top of Page

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California Home Friday, May 18, 2012

Student Demographics By Academic Year

Student Headcount
For Foothill For 2006-2007
Data Current As Of May 18, 2012 01:50:29

Download The Result In Comma Delimited Format

Headcount
32,668

Back to Top of Page

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 06 07

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4		7
/ /	1A 1B 2A 2B (3) 4		7
/ /	1A 1B 2A 2B 3 (4)		35
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Bloom Date 9/24/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Cindy Castillo — Employee Name

Dir Fin Aid — Exact Position Title

Fin Aid — Department/Location

8403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		30
/ /	1A 1B (2A) 2B 3 4		3
/ /	1A 1B 2A 2B 3 (4)		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature Cindy Castillo Date 9/19/07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Beatriz Chacon
Employee Name

Director, Financial Aid & EOPS
Exact Position Title

Fin Aid/EOPS
Department/Location

650 949-7223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		12
/ /	1A 1B 2A 2B (3) 4		40
/ /	1A 1B 2A 2B 3 (4)		16
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hansel for Beatriz Date 10-5-07

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Lee Collings — Employee Name

Webmaster — Exact Position Title

Marketing — Department/Location

650 949-2647 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
6/1/06	1A 1B 2A 2B 3 4	Prep for 8007 listing	5
2/10/07	1A 1B 2A 2B 3 4	Code Updates	10
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

05-06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lee Collings Date 10-8-07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 06-07

Joyce Feldman
Employee Name

FA A552
Exact Position Title

Fin Aid
Department/Location

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		5
/ /	1A 1B 2A (2B) 3 4		10
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Penelope Johnson
Employee Name

Dean, Counseling & St. Support
Exact Position Title

Counseling & St. Support
Department/Location

650 949-7163
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4		8
/ /	1A 1B 2A 2B 3 (4)		4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Penelope Johnson for Penelope Date 10-5-07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 06-07

Kathleen Moberg — Employee Name

Dean, Admissions and Outreach — Exact Position Title

DA / Admissions — Department/Location

408 864-8292 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	(1A) 1B 2A 2B 3 4	Updates/review of catalog/sched.	4
/ /	(1A) 1B 2A 2B 3 4	Updates/review of Outreach mtls	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

6 months

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Moberg Date 9-17-07

If you have any questions, please contact Kathleen Moberg, at 408-864-8292

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 06-07

Angelita Pabros — Employee Name

Division Assistant — Exact Position Title

Admissions/Deanza — Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	13minutes @ 10% of Students	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6yrs@125 = 750hr	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrig for Angelita Pabros Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Matilda Renteria
Employee Name

Fin Aid Coordinator
Exact Position Title

Financial Aid - Foothill 650-949-7247 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/ 06	1A (1B) 2A 2B 3 4	review app & new income standards	1
5/ 106	1A 1B 2A (2B) 3 4	update staff of new procedures	1
8/ 107	1A 1B 2A 2B (3) 4	Verify BOG Waiver pool	2
8/ 107	1A 1B 2A 2B 3 (4)	review new units & update screen	3.5
9/ 107	1A 1B 2A 2B 3 (4)	update new accounts w/ MIS code	2
9/ 107	1A 1B 2A 2B (3) 4	review report & correct	2
10/ 107	1A 1B 2A 2B (3) 4	review Cm's total submitted	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

* 3.5 total
** 2 total

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Renteria Date 10/5/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA Department/Location Foothill Admissions and Records

Employee Name Shawna Acad Exact Position Title Associate Registrar

Telephone # 7771 Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA Department/Location Admission + Records-FT

Employee Name Susan Almendarez Exact Position Title Admission + Records Assistant

Telephone # 650-949-7518 Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: ~~05-06~~ ~~06-07~~ ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almendarez Date 10-30-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FOOTHILL DE ANZA

Department/Location FH A+R

Employee Name ROLAND AMIT

Exact Position Title A+R SUPERVISOR

Telephone # 7112

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 ~~06-07~~ 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ARA Date 10/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

SHELLY BOWERS
Employee Name

Department/Location ADMISSIONS/FOOTHILL

ADMISSIONS & RECORDS ASSISTANT
Exact Position Title

(650) 941-7643
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 MIN					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 MIN					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shelly Bowers Date 10/30/07

If you have any questions, please contact HENRY JUNG, at 949-7004

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA

District

Department/Location ADMISSIONS - FIN.

PAM BREWER

Employee Name

ADMISSIONS ASST.

Exact Position Title

x7003

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature NOT AVAILABLE TO SIGN Date 10.30.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R / De Anza

District — Department/Location

Melodie Cheney — Admissions Asst.

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney — Date 9.14.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — A&R De Anza

District — Department/Location

Sheri Cole — admissions assistant

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza

District

Dina Crumpton

Employee Name

A & R / De Anza Admin asst.

Department/Location

Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen McKeag for Dina Crumpton Date 9-17-07

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza District — A&R Foothill Campus.
District — Department/Location

Manmale Deshpande — A & R Assistant
Employee Name — Exact Position Title

650-949-7644 — (12mo/11mo/10mo/hrly) Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~
Telephone # — Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MDeshpande — Date 10/29/07

If you have any questions, please contact Manmale Deshpande at 949-7644.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

A=R De Anza
Department/Location

Jeff Dickard
Employee Name

ADMISSIONS Asst
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeff Dickard Date 9/19/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza

District

A&R | De Anza

Department/Location

Jean Elwell

Employee Name

Admissions Coordinator

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrig for Jean Elwell Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — A2R | De Anza

District — Department/Location

Patricia Fifield — Associate Registrar

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith Mohr for Pat Fifield Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location A-1R - FH

Employee Name ERI FURUKATA

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7004

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA — District

A+HR - FTI — Department/Location

NAMI FURUKAWA — Employee Name

PART TIME STUDENT WORKER — Exact Position Title

7221004 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08 — **Circle the years for which you are responding.**

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location Admissions and Records - FH

Employee Name SACHIE ICHIMURA

Exact Position Title Part Time Student Worker

Telephone # 7XXX

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ : TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Admissions & Records - FH

District

Mineko Iguchi
Employee Name

Department/Location

General Assistant
Exact Position Title

650-996-3215
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	~2 mins					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	~2 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	~2 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~3.4 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	~2.3 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~2 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mineko Iguchi Date 10/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Catrina Jamello
Employee Name

Admissions Asst.
Exact Position Title

Telephone # Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohney for Catrina Jamello Date 9-17-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

Barry Johnson

Employee Name

A & R / De Anza

Department/Location

Admissions Supervisor

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Barry Johnson Date 9/18/07

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District Foothill De Anza Department/Location Foothill Admissions and Record

Employee Name Henry Jinn Exact Position Title Dean Supervisor

Telephone # 7054 Work year ~~length~~(circle) 12mo/11mo/10mo/hrly Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29OCT2007

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R | De Anza
District — Department/Location

Araceli Kaliangara — admissions asst
Employee Name — Exact Position Title

Telephone # — Work year length(circle): (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload *multiplier* from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mor for Araceli Kaliangara Date 9-17-07

If you have any questions, please contact A. Kaliangara, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location ADM - FH

Employee Name JASMEET KAUR

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7-704

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza

District

ORAWAN KHDELA CK

Employee Name

Department/Location

A & R - FH

Exact Position Title

718-9

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3				✓	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					✓
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					✓
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1			✓		
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature

Date 10.29.2

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location

Phong Lam
Employee Name

Outreach Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	NA					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	NA					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	NA					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 9/18/07

If you have any questions, please contact _____, at _____

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NAME : OLIDIA MATHIS

EFCW 1.7-2

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

MATHIS
OLIVIA DAWSON

Employee Name

Department/Location

A+R Transcripts -- FH

Exact Position Title

USD 949 7517

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: ~~05-06~~ 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivia Dawson Date 10/29/07

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill- De Anza — A&R | DE ANZA
District — Department/Location

Cindy Nakeshima — ADMISSIONS ASST.
Employee Name — Exact Position Title

Telephone # — Work year length(circle): (12mo/11mo/10mo/hrly) — Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligibie for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Nakashima — Date 9-18-07

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Planter

District

A & R Planter

Department/Location

Irmgard Neumann

Employee Name

Admissions asst

Exact Position Title

Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mothersead Date 9-07-07

If you have any questions, please contact Irmgard Neumann, at

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Employee Name Helena Okuneva

Department/Location AHR - FH

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7004

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — A≥R De Anza
District — Department/Location

Angelita Pabros — Division Admin Asst.
Employee Name — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle) — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros for Angelita Pabros — Date 9-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R | De Anza
District — Department/Location

Joan Penn-Ferrick — Admissions Asst
Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Penn-Ferrick Date 09/18/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location

Atousa Pojhan
Employee Name

A&R Assistant
Exact Position Title

408-864-8503
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a *good faith estimate* which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Atousa PJ Date 9/18/07

If you have any questions, ~~please contact~~ _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

Brian Roberts

Employee Name

A&R / De Anza

Department/Location

Admissions Assistant

Exact Position Title

Telephone # Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

A & R De Anza

Department/Location

Andrea Santa Cruz

Employee Name

Admissions Asst.

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle) Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrington Date 9-17-07

If you have any questions, please contact Andrea Santa Cruz, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill
District

Virginia Slayton
Employee Name

Admissions & Records - FH
Department/Location

Exact Position Title

7772
Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Virginia Slayton Date 10/29/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — A:R De-Anza

District — Department/Location

Betty Snowden — Admissions Coordinator

Employee Name — Exact Position Title

Telephone # — Work year length(circle): 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Betty Snowden — Date 9-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill College — District

Admissions & Records - FH — Department/Location

Cheryl Terranova — Employee Name

Clerk — Exact Position Title

949-7773 — Telephone #

Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Cheryl A. Terranova Date 10-29-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL - De Anza

District

A&R | De Anza

Department/Location

Binh Thai

Employee Name

ADMISSIONS Assistant

Exact Position Title

Telephone #

Work year length(circle) (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — District

AIR | De Anza — Department/Location

Judy Ting — Employee Name

Admissions assistant — Exact Position Title

Telephone # — Work year-length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 9-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill- De Anza

District

A & R | De Anza

Department/Location

Robert Tomalinas

Employee Name

Admissions Evaluation & Specialist

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District EHDA

Department/Location CASHIERS DEPT. / A+R

Employee Name PATRICIA WOOD

Exact Position Title CASHIERING SERVICES COORD

Telephone # 7331

Work year length (circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FOOTHILL DE ANZA

Department/Location A + R - FH

Employee Name BRIAN ZIMMERMAN

Exact Position Title ADMISSIONS AND RECORDS ASST

Telephone # 7674

Work year length(circle) (12mo/11mo/10mo/hrly

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature NOT AVAILABLE TO SIGN Date 10/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Bhrigu Aneja
Employee Name

Department/Location Fin Aid

Clerical Assistant III
Exact Position Title

12mo/11mo/10mo/hrly
Work year length(circle)

Telephone #

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mathila Kanter for Bhrigu Aneja Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Department/Location Fin Aid

Bradley Appell

Employee Name

Student Employee

Exact Position Title

650-298-5098

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9.26.07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location FA

Employee Name Ryan Bellon

Exact Position Title FA Outreach Asst

5370

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding. 12

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/3/07 10/3/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

~~FHDA~~

District

Department/Location ~~FA~~ Dir of Fin Aid

Cindy Castillo

Employee Name

Exact Position Title

8403

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Castillo Date 9/19/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Fin Aid

Department/Location

Beatriz Chavez

Employee Name

Director, Financial Aid & EOPS

Exact Position Title

650 949-7223

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hammond for Beatriz Date 10-5-07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Antoinette Chavez
Employee Name

Department/Location Fin Aid, FH

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Antoinette Chavez Date 10/5/07

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid, FH

I Chen
Employee Name

FA Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 10/5/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650.949.6987
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Josephine Date 10/2/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Claros
Employee Name

FA Outreach Asst
Exact Position Title

8266
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/21/07

If you have any questions, please contact Randy Claros, at (408) 864-8266

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EFCW 1.7-3

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Department/Location Fin Aid

Tung Duong

Employee Name

Financial Aid Assistant

Exact Position Title

650-949-7051

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10/5/07

ou have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA Asst
Exact Position Title

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 9/21/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Christy Godinez
Employee Name

Financial Aid Asst I
Exact Position Title

650-949-7246
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Godinez Date 10/5/07

ou have any questions, please contact _____, at

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EFCW 1.7-3

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza — District

EOPS/Foothill College — Department/Location

April C. Henderson — Employee Name

EOPS Specialist — Exact Position Title

(650) 949-7207 x 7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. Henderson Date 10/3/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Karen Hunter
Employee Name

FA
Department/Location

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Hunter Karen Hunter Date 9/20/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EHOA

District

Lindsey Joyner
Employee Name

Department/Location Fin Aid

Temp FA Employee
Exact Position Title

_____

12mo/11mo/10mo/hrly (hrly)

Fiscal Year: 05-06 06-07 (06-07) 07-08

Telephone # Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hamad for Lindsey Joyner Date 9-26-07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location Outreach Assistant

Phong Lam
Employee Name

Exact Position Title

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Telephone #

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	NA			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	NA			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	NA			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Date 9/18/07

If you have any questions, please contact , at

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foot Hill - De Anza
District

Donna Lambrecht
Employee Name

Sr. Admin. Asst. II
Department/Location
Exact Position Title

650/949-7037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/3/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Heathhill - De Anza — District

Air De Anza — Department/Location

Camille McCarty — Employee Name

Admissions asst. — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	WNBA 1 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	WNBA min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1-3 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0 min			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0 min			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Camille McCarty Date 9-19-07

If you have any questions, please contact _____, at _____

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Phong Ro — Outreach

EFCW 1.7-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Department/Location

Rob Meisel
Employee Name

Program Coordinator
Exact Position Title

864-8835
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data ~~or have~~ provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-17-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Patricia Mondik
Employee Name

Department/Location Fin Aid
Financial Aid Assn
Exact Position Title

650.949.7470 (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 06-07 07-08

Telephone # Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9.26.07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza — District

EOPS - Foothill — Department/Location

Idonis Nava — Employee Name

EOPS Counselor — Exact Position Title

(650) 949-7036 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06, 06-07, 07-08 (06-07 circled)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Idonis Nava — Date 10-2-07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location FA

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Caprio for Thao Nguyen Date — out on maternity

If you have any questions, please contact _____ at 9/19/07 leave until mid-late October.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PHDA
District

FA
Department/Location

Dawna O'Malley
Employee Name

FA Asst
Exact Position Title

8368
Telephone #

12mø/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

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Employee Signature D O'Malley Date 9/21/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

~~Foothill – De Anza~~

District

Department/Location

Chris Pardo

Employee Name

EOPS Program Serv. Coordinator

Exact Position Title

650/ 949-7200

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~0~~			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	~~0~~			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10/3/07

If you have any questions, please contact x 6143, at

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Matilda Renteria
Employee Name

Department/Location Fin Aid

Fin Aid Coordinator
Exact Position Title

650-949-7247
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Renteria Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location EOPS - FH

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/25/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Yamin Tun
Employee Name

Clerical Assistant IV
Exact Position Title

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Telephone #

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Mohlda Santos for Yamin Tun Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

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Employee Signature N Nguyen Van Date 9/19/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Inna Witkop
Employee Name

Exact Position Title

650.949.7710
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Witkop Date 10/05/07

If you have any questions, please contact _____ at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Department/Location

Tally L. Wu
Employee Name

EOPS / Foothill EOPS Counselor
Exact Position Title

(650) 949-7182
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tally L. Wu Date 10/3/07

If you have any questions, please contact _____, at _____

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

Enrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
Total Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958	25,169
(#1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834	38,605
	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082	34,516
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**	32,206
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274	130,496
Enroll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232	19,805
	Fall	34,278	35,368	33,567	34,399	36,315	35,508	32,775	34,357	31,295
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696	27,781
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**	27,281
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785	106,162
Enroll Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500	4,012
Waivers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500	6,715
#3 form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038	6,219
	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**	6,175
	Total	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012	23,121
Net Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732	15,793
Charged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857	24,580
#2 form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658	21,562
	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**	21,106
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**	83,041

Note: This table has been updated with 2006-07 data; figures for 2005-06 have not been revised and hence still include estimated figures.

Source: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06; 12/7/07

HDA IR&P - RBB - 5/19/06; Updated with 2006-07 figures 12/11/07

12/11/07

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
De Anza									
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961	998
Fall	2,144	1,435	601	632	681	912	1,231	3,017	3,095
Wtr	1,483	799	634	508	524	550	2,251	2,431	2,592
Spr	1,215	987	546	476	662	615	2,101	2,374	2,438
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783	9,123
Foothill									
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608	698
Fall	1,139	970	382	738	435	507	812	1,655	1,757
Wtr	742	566	346	326	418	340	1,430	1,342	1,181
Spr	768	688	546	307	344	409	1,332	1,375	1,149
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980	4,785

The following for #1 on form EFCW 1.8-2

District Totals									
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569	1,696
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672	4,852
Wtr	2,225	1,365	980	634	942	890	3,681	3,773	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749	3,587
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763	13,908

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06; updated with 06-07 figures 12/11/07

[server\Projects\Enrollment Fee Reimbursement\Hdcnt requiring collection.xls]

12/11/07

BOGG Enrollment Fee Waiver Counts by Term

1.8-3

	2006M	2006F	2007W	2007S	
Net Enroll Waiver	4,012	6,715	6,219	6,175	23,121
No Net Enroll Waiver	444	501	456	420	
Total	4,456	7,216	6,675	6,595	24,942

Source: Query of RMS Billing Table 12/11/07; See Brio "BOGG Enrollment Fee Waiver Counts.bqy"

DA IR&P - RBB - 12/11/07

1.8-4

Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

06/07 Enrollment Fee Collection/Waiver- Productive Hourly Rate

Name	Title	Employment term	Productive Hours	Labor	Benefits	Total Salary	PHR
ACED, SHAWNA D	ASSOCIATE REGISTRAR	12-months	1800	67,912	31,429	99,341	55.19
ALMENDAREZ, SUSAN ELLEN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	49,725	21,768	71,492	39.72
AMIT JR, ASTER ROLAND	ADMISSIONS & RECORDS SUPV	12-months	1800	50,554	21,894	72,447	40.25
ANEJA, BHRIGU	STUDENT EMPLOYEE		315	3,150	48	3,198	10.15
APPELL, BRADLEY TOBIN	STUDENT EMPLOYEE		390	5,580	84	5,664	14.52
BELLON, RYAN S	FINANCIAL AID OUTREACH ASST	12-months	1800	40,603	18,954	59,557	33.09
BLOOM, SUSAN LYNN	FINANCIAL AID COORDINATOR	12-months	1800	65,118	30,907	96,025	53.35
BOWERS, SHELLY L	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,692	28,654	82,345	45.75
BREWER, PAMELA S	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,968	28,799	82,767	45.98
CASTILLO, CINDY	DIR, FINANCIAL AID & SCHOLARSH	12-months	1800	103,317	31,869	135,186	75.10
CHACON, BEATRIZ CORONADO	DIRECTOR, FINANCIAL AID	9-months	1350	75,829	29,227	105,056	77.82
CHAVEZ, ANTOINETTE	FINANCIAL AID OUTREACH ASST	12-months	1800	43,619	20,567	64,186	35.66
CHEN, I	FINANCIAL AID OUTREACH COORD	12-months	1800	55,568	24,480	80,048	44.47
CHENEY, MELODIE DAWN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	55,715	22,881	78,596	43.66
CHRISTENSEN, JOSEPHINE THROWER	FINANCIAL AID OUTREACH ASST	12-months	1800	47,230	22,779	70,010	38.89
CLAROS, RANDY L	FINANCIAL AID OUTREACH ASST	12-months	1800	42,317	21,935	64,251	35.70
COLE, SHERI L	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	37,796	20,924	58,720	32.62
COLLINGS, EARL	COLLEGE WEB COORDINATOR, SR	12-months	1800	106,910	33,797	140,707	78.17
CRUMPTON, DINA D	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	44,560	20,760	65,320	36.29
DESHPANDE, MRINMAIE HEMANT	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	44,476	26,855	71,331	39.63
DICKARD, JEFFREY C	DEGREE AUDIT SPECIALIST	12-months	1800	39,304	19,694	58,998	32.78
DUONG, TUNG THI	FINANCIAL AID ASSISTANT	12-months	1800	55,255	28,963	84,218	46.79
ELWELL, JEAN	ADMISSIONS & RECORDS COORD	12-months	1800	70,176	25,782	95,958	53.31
FELDMAN, JOYCE K	FINANCIAL AID ASSISTANT	12-months	1800	61,259	24,019	85,278	47.38
FIFIELD, PATRICIA A	ASSOCIATE REGISTRAR	12-months	1800	81,201	27,911	109,112	60.62
FURUHATA, ERI	STUDENT EMPLOYEE		505	4,086	62	4,148	8.21
FURUKAWA, NAMI	STUDENT EMPLOYEE		306	3,001	45	3,047	9.96
GODINEZ, CHRISTY	FINANCIAL AID ASSISTANT	12-months	1800	60,203	23,813	84,016	46.68
HENDERSON, APRIL COLONNA	EOPS SPECIALIST	12-months	1800	45,298	20,904	66,202	36.78
HUNTER, KAREN KAY	FINANCIAL AID ASSISTANT	12-months	1800	43,529	20,523	64,052	35.58
ICHIMURA, SACHIE	STUDENT EMPLOYEE		200	2,000	30	2,030	10.15
IGUCHI, MINEKO	STUDENT EMPLOYEE		1041	10,405	157	10,562	10.15
JAMELLO, CATRINA MAREE	ADMISSIONS & RECORDS ASSISTANT	3-months	450	10,224	4,954	15,178	33.73
JOHNSON, BARRY W	ADMISSIONS & RECORDS SUPV	12-months	1800	66,289	25,000	91,290	50.72
JOHNSON, PENELOPE A	DEAN, COUNSEL & STUDENT SUPP	12-months	1800	162,657	36,909	199,566	110.87
JOYNER, LINDSEY WU	STUDENT EMPLOYEE		306	3,901	712	4,613	15.07
JUNG, HENRY	ADMISSIONS & RECORDS SUPV	12-months	1800	59,527	23,681	83,208	46.23
KALIANGARA, ARACELI	VETERANS PROGRAM COORDINATOR	12-months	1800	33,824	18,665	52,488	29.16
KAUR, JASMEET	STUDENT EMPLOYEE		742	6,118	15	6,133	8.27
KHAOLA OR, ORAWAN	CASHIER, SENIOR	12-months	1800	33,647	15,576	49,223	27.35
LAM, PHONG CAM	STUDENT EMPLOYEE		931	11,864	449	12,313	13.23
LAMBRECHT, DONNA WOLF	ADMINISTRATIVE ASSISTANT, SR	12-months	1800	71,466	32,156	103,622	57.57
MATHIS, OUDIA K	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,418	22,489	75,906	42.17
MCCARTY, CAMILLE BARBARA	STUDENT EMPLOYEE		420	6,506	202	6,707	15.97
MIESO, ROB ROBA	PROGRAM COORDINATOR II	12-months	1800	77,138	27,118	104,256	57.92
MOBERG, KATHLEEN S KIEHL	DEAN, ADMISSIONS & RECORDS	10-months	1500	87,927	28,358	116,285	77.52
MONDIK, PATRICIA	FINANCIAL AID ASSISTANT	12-months	1800	49,620	27,672	77,292	42.94
NAKAYAMA, CINDY J	ADMISSIONS & RECORDS ASSISTANT	11-months	1650	27,858	17,500	45,358	27.49

NEUMANN, IRMGARD G	STUDENT EMPLOYEE		445	6,893	641	7,534	16.93
NGUYEN, THAO PHUONG	FINANCIAL AID OUTREACH ASST	12-months	1800	37,881	18,440	56,321	31.29
OKUNEVA, YELENA IVANOVNA	STUDENT EMPLOYEE		305	2,682	74	2,756	9.04
O'MALLEY, DAWNA LEE	FINANCIAL AID ASSISTANT	12-months	1800	54,620	22,723	77,344	42.97
PABROS, ANGELITA M	DIVISION ADMINISTRATIVE ASST	12-months	1800	57,650	29,462	87,111	48.40
PARDO, INES C	EOPS SERVICES COORDINATOR	12-months	1800	71,792	32,278	104,070	57.82
PENA-FERRICK, JOAN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	61,043	23,698	84,741	47.08
POJHAN, ATOUSA	ADMISSIONS & RECORDS ASSISTANT	3-months	450	10,069	3,887	13,956	31.01
RENTERIA, MATILDA P	FINANCIAL AID COORDINATOR	12-months	1800	72,859	32,468	105,326	58.51
ROBERTS, BRIAN R	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	42,391	20,301	62,691	34.83
RODRIGUEZ, JORGE A	EOPS SPECIALIST, SENIOR	12-months	1800	62,808	30,528	93,336	51.85
SANTACRUZ, ANDREA R	STUDENT EMPLOYEE	12-months	1800	16,416	3,025	19,440	10.80
SLAYTON, VIRGINIA E	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	59,195	25,101	84,296	46.83
SNOWDEN, BETTY J	ADMISSIONS & RECORDS COORD	12-months	1800	63,980	26,034	90,014	50.01
TERRANOVA, CHERYL A	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,587	27,538	81,125	45.07
THAI, BINH N	ADMISSIONS & RECORDS COORD	12-months	1800	65,676	30,805	96,481	53.60
TING, JUDY LEE	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	63,107	24,380	87,487	48.60
TOMALINAS, ROBERT T	EVALUATION SPECIALIST	12-months	1800	51,114	21,740	72,854	40.47
TUN, YAMIN	STUDENT EMPLOYEE		538	6,450	98	6,548	12.17
VAN, NINA NGUYEN	FINANCIAL AID OUTREACH ASST	12-months	1800	47,966	21,458	69,425	38.57
WITKOP, INNA	FINANCIAL AID OUTREACH ASST	12-months	1800	51,296	27,951	79,247	44.03
WOOD, PATRICIA MAY	CASHIERING SERVICES COORD	12-months	1800	57,746	23,333	81,079	45.04
WU, TILLY LIU	COUNSELOR	12-months	1800	95,040	35,218	130,258	72.37
ZIMMERMAN, BRIAN M	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	40,377	19,908	60,284	33.49

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
San Diego, CA 92117

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E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
3 Page(s) attachment

FAX TRANSMITTAL

DATE: November 30, 2007

FAX TO: ~~Bret Watson~~ Brianne Bramwell
Foothill-De Anza Community College District
650-941-1638

FROM: ~~Keith Petersen~~ KBP Bret Watson

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection & Waivers
Fiscal Year: **2006-2007**

PLEASE RESPOND BY: December 13, 2007

In order to complete the above referenced claim we need the statistics for 06-07. Forms EFCW 1.8-1, 1.8-2, and 1.8-3 are attached for your convenience.

Also we need the following PHR:

Name	Title	2006-07 PHR
Nava, Tobias	EOPS Counselor	$ 58.20

Thank you

KBP:te

06/07 Enrollment Fee Collection/Waiver- Productive Hourly Rate

Name	Title	Employment term	Productive Hours	Labor	Benefits	Total Salary	PHR
NAVA, TOBIAS B.	COUNSELOR	12-months	1800	79,261.7	26,752.57	106,014	58.90

12-12-07 10:31am From-Foothill De Anza CCD 650 941 1638 T-585 P.002/007 F-073

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Foothill-DeAnza Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE DEAN	$ 85.15	$ 92.12
	AVERAGE DIRECTOR	$ 80.97	$ 84.19
	AVERAGE EXECUTIVE ASSISTANT	$ 48.01	$ 57.84
	AVERAGE PRESIDENT		$ 155.09
	AVERAGE VICE PRESIDENT	$ 86.74	$ 102.31
ACED, SHAWNA	ASSOCIATE REGISTRAR		$ 55.19
ALMENDAREZ, SUSAN ELLEN	ADMISSIONS & RECORDS ASSISTANT		$ 39.72
ALFSEN, KAREN	DEAN, LANGUAGE ARTS	$ 89.21	$ 96.76
AMIT JR., ASTER ROLAND	ADMISSIONS & RECORDS ASSISTANT		$ 40.25
ANEJA, BURIGU	STUDENT EMPLOYEE		$ 10.15
APPELL, BRADLEY TOBIN	STUDENT EMPLOYEE		$ 14.52
AWOSANYA, OLUFEMI	CAMPUS SECURITY		14.16
BALDWIN, WILLIAM	PROGRAMMER ANALYST I	$ 53.59	59.26
BARR, ROBERT B	EXEC DIR, INST RESEARCH & PLAN		$ 96.36
BARTCH, JOHN W.	WORKSTATION & SYSTEMS SUPPORT TECH	$ 54.19	$ 59.96

Foothill-De Anza Community College District
308/95 Enrollment F Collection and Waivers
Fiscal Years: 19 0 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,790	$ 14,531,035
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,296	$ 290,621
		Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.							
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,399	$ 3,577,143
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408	$ 71,543
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee						
1.8-4 line 5	Summer								
	Fall								
	Winter/Interssion								
	Spring								
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,318	210,421
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239	$ 191,483
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408	$ 71,543
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298							
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239	$ 191,483
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**	**$ 263,026**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Foothill-DeAnza
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$79,479,677	$75,465,494	$-999,045	$74,466,449
ENROLL FEE ADMIN (2%)	83,949	77,233	6,716	83,949
APPRENTICE ALLOWANCE	1,994,427	1,839,113	155,314	1,994,427
BASIC SKILLS	75,350	0	75,350	75,350
S.F.A.A.	932,829	858,202	74,627	932,829
E.O.P.S.	1,863,275	1,709,758	153,517	1,863,275
C.A.R.E.	184,817	170,031	14,786	184,817
D.S.P.S.	4,304,019	3,959,698	344,321	4,304,019
STATE HOSPITALS	0	0	0	0
CALWORKS	501,042	426,381	74,661	501,042
MATRICULATION (CREDIT)	2,290,322	2,107,097	183,225	2,290,322
MATRIC. (NONCREDIT)	96,100	88,412	7,688	96,100
FAC.& STAFF DIVERSITY	29,937	27,542	2,395	29,937
PART-TIME FAC. ALLO.	1,475,772	1,357,711	118,061	1,475,772
PART-TIME FAC. OFF. HRS	269,434	0	269,434	269,434
PART-TIME FAC. INS.	62,776	0	62,776	62,776
TELECOMMUNICATIONS	93,916	67,523	26,393	93,916
PLANT & INSTRUCTIONAL	370,294	340,672	29,622	370,294
SCHDL. MAINT. & REPAIR	370,328	340,701	29,627	370,328
TANF	82,945	76,310	6,635	82,945
ECON. DEVELOPMENT	655,000	550,200	0	550,200
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	791,639	791,639	0	791,639
PRIOR YEAR CORRECTION	2,854,879	2,854,879	0	2,854,879
ONE TIME FUNDS				
TRANSITION PAYMENT	4,254,804	4,254,804	0	4,254,804
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	657,378	657,378	0	657,378
BASIC SKILLS -REAPPROP	162,792	162,792	0	162,792
CAR. TECH. TRAILER BIL	1,170,713	1,170,713	0	1,170,713
GEN. PUR. TRAILER BILL	2,290,332	2,290,332	0	2,290,332
INST. MATERIAL TRAILER	1,382,039	1,382,039	0	1,382,039
SCHLD.MAINT. TRAILER B	1,382,039	1,382,039	0	1,382,039
FACULTY STAFF DEV	147,119	147,119	0	147,119
TOTAL	$110,319,943	$104,565,812	$636,103	$105,201,915

FISCAL SERVICES:06/22/07 44055.636 12:14 PM:EM
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Schedule 5A
Foothill-De Anza Com[illegible]nity College District
308/95 Enrollment Fe[illegible]ections and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30	$ 3,482.25
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45	$ 1,131.06
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,497.55	$ 11,792.87
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91	$ 169,797.83
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07	$ 4,202.32
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 142,767.28	$ 190,406.33
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$ 155,700.00	$ 163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00	$ 263,026.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$ (105,724.20)	$ (166,880.97)	$ (176,159.90)	$ (163,879.72)	$ (72,619.67)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 142,767.28**	**$ 190,406.33**

Print Date: 12/28/2007
FOOT EFCW 06-07array

SixTen and Associates
te 11/30/07

California Home Friday, May 18, 2012

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 18, 2012 01:51:39

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	98	30,693
BOGW - Part A-2 based on SSI recipient status	385	160,934
BOGW - Part A-3 based on general assistance recipient status	1	150
BOGW - Part B based on income standards	2,071	580,609
BOGW - Part C based on financial need	4,483	1,770,435
Fee Waiver – Dependent child of deceased or disabled Veteran	10	4,075

Total Amount = $ 2,546,896

Back to Top of Page

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California Home Friday, May 18, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 18, 2012 01:51:25

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	14	4,962
BOGW - Part A-2 based on SSI recipient status	16	3,440
BOGW - Part B based on income standards	1,361	358,957
BOGW - Part C based on financial need	1,831	642,725
Fee Waiver – Dependent child of deceased or disabled Veteran	16	3,817

Total Amount = $ 1,013,901

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 30, 2009

CERTIFIED MAIL #7006 3450 0000 3941 9007

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC43045
(02) Claimant Name: Foothill-De Anza Community College District
County of Location: Santa Clara
Street Address or P.O. Box: 12345 El Monte Road
City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,341,331
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 1,331,331
Due from State	(08)	(17) $ 1,331,331
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	465
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	967,742
(25) EFCW-1, (04)(B)(1)(a)(f)	3,482
(26) EFCW-1, (04)(B)(1)(b)(f)	1,131
(27) EFCW-1, (04)(B)(2)(a)(f)	11,793
(28) EFCW-1, (04)(B)(2)(b)(f)	169,798
(29) EFCW-1, (04)(B)(2)(c)(f)	4,202
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	457,073
(32) EFCW-1, (09)	83,949
(33) EFCW-1, (10)	190,406
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1-29-09

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 1 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Foothill-De Anza Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2006-2007

(03) Leave Blank

Direct Costs	**Object Accounts**					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 465.12	$ -	$ -	$ -	$ -	$ 465.12
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 967,742.10	$ -	$ -	$ -	$ -	$ 967,742.10
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,482.25	$ -	$ -	$ -	$ -	$ 3,482.25
b. Staff training (One time per employee)	$ 1,131.06	$ -	$ -	$ -	$ -	$ 1,131.06
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 11,792.87	$ -	$ -	$ -	$ -	$ 11,792.87
b. Waiving student fees	$ 169,797.83	$ -	$ -	$ -	$ -	$ 169,797.83
c. Reporting BOG fee waiver data to CCC	$ 4,202.32	$ -	$ -	$ -	$ -	$ 4,202.32
(05) Total Direct Costs	$ 1,158,613.55	$ -	$ -	$ -	$ -	$ 1,158,613.55

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.69%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 343,992.36
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,502,605.91
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 83,949.00
(10) Enrollment Fee Waiver offsets		$ 190,406.33
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,228,250.58

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F[illegible]l-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Moberg, Kathleen Dean, Admissions & Outreach	$77.52	6.0	$ 465.12				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 465.12	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

ill-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$35.10	8,047.3	$ 282,460.23				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$35.10	5,120.9	$ 179,743.59				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$35.10	8,699.7	$ 305,359.47				
Up written and computer records for enrollment fee information Enrollment Office Staff Various	$35.10	4,567.3	$ 160,312.23				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$35.10	1,135.8	$ 39,866.58				
05) Total ☒ Subtotal ☐		Page 1 of 1	$ 967,742.10	$ -	$ -	$ -	$ -

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

Foothill-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Director, Financial Aid	$75.10	30.0	$ 2,253.00				
Chacon, Beatriz	Director, Financial Aid	$77.82	12.0	$ 933.84				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐				$ 3,482.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F[illegible]l-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Castillo, Cindy	Director, Financial Aid	$75.10	3.0	$ 225.30				
Feldman, Joyce	Financial Aid Assistant	$47.38	10.0	$ 473.80				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,131.06	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Chacon, Beatriz	Director, Financial Aid	$77.82	40.0	$ 3,112.80				
Collings, Lee	Webmaster	$78.17	10.0	$ 781.70				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	8.0	$ 886.96				
Pabros, Angelita	Division Assistant	$48.40	125.0	$ 6,050.00				
Renteria, Matilda	Financial Aid Coordinator	$58.51	6.0	$ 351.06				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,792.87	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
hill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$41.66	1,164.0	$ 48,492.24				
Receiving waiver applications Financial Aid Office Staff Various	$41.66	748.3	$ 31,174.18				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$41.66	873.0	$ 36,369.18				
I g students of additional documentation requirements and how to obtain information Financial Aid Office Staff Various	$41.66	94.1	$ 3,920.21				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$41.66	1,117.5	$ 46,555.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Various	$41.66	78.9	$ 3,286.97				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 169,797.83	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

ll-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan	Financial Aid Coordinator	$53.35	35.0	$ 1,867.25				
Chacon, Beatriz	Director, Financial Aid	$77.82	16.0	$ 1,245.12				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	4.0	$ 443.48				
Renteria, Matilda	Financial Aid Coordinator	$58.51	7.0	$ 409.57				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,202.32	$ -	$ -	$ -	$ -

New 04/06

Foothill-De Anza Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2007

Su...y Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$1,867.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	49.00	**Bloom, Susan Total**			$2,614.15		
06-07	30.00	Castillo, Cindy	Director, Financial Aid	$75.10	$2,253.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Castillo, Cindy	Director, Financial Aid	$75.10	$225.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	33.00	**Castillo, Cindy Total**			$2,478.30		
06-07	40.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$3,112.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	16.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$1,245.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	12.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$933.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	68.00	**Chacon, Beatriz Total**			$5,291.76		
2/10/2007	10.00	Collings, Lee	Webmaster	$78.17	$781.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining ...rds
	10.00	**Collings, Lee Total**			$781.70		
06-07	1,135.80	Enrollment Office Staff	Various	$35.10	$39,866.58	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	8,047.30	Enrollment Office Staff	Various	$35.10	$282,460.23	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	5,120.90	Enrollment Office Staff	Various	$35.10	$179,743.59	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	8,699.70	Enrollment Office Staff	Various	$35.10	$305,359.47	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	4,567.30	Enrollment Office Staff	Various	$35.10	$160,312.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,571.00	**Enrollment Office Staff Total**			$967,742.10		
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	10.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$473.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	25.00	**Feldman, Joyce Total**			$1,164.50		
06-07	1,164.00	Financial Aid Office Staff	Various	$41.66	$48,492.24	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	748.30	Financial Aid Office Staff	Various	$41.66	$31,174.18	Receiving waiver applications	Waiving student fees
06-07	78.90	Financial Aid Office Staff	Various	$41.66	$3,286.97	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
06-07	873.00	Financial Aid Office Staff	Various	$41.66	$36,369.18	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	94.10	Financial Aid Office Staff	Various	$41.66	$3,920.21	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,117.50	Financial Aid Office Staff	Various	$41.66	$46,555.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,075.80	**Financial Aid Office Staff Total**			$169,797.83		
06-07	8.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$886.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining ...ds
06-07	4.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$443.48	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	12.00	**Johnson, Penelope Total**			$1,330.44		
06-07	6.00	Moberg, Kathleen	Dean, Admissions & Outreach	$77.52	$465.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	6.00	**Moberg, Kathleen Total**			$465.12		
06-07	125.00	Pabros, Angelita	Division Assistant	$48.40	$6,050.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$6,050.00		
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$351.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$409.57	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	15.00	**Renteria, Matilda Total**			$877.65		
	31,989.80	**Grand Total**			$1,158,613.55		

06/07

3. **ACCOUNTS RECEIVABLE** (Continued)

Contributions Receivable

Contributions receivable with the Foundation as of June 30, 2007 consist of the following:

Due within one year	$ 544,456
Due within one to five years	1,459,034
Discount	(213,086)
Contributions receivable, net	$ 1,790,404

4. **CAPITAL ASSETS**

Capital asset activity consists of the following:

	Balance July 1, 2006	Additions	Reductions	Balance June 30, 2007
Land	$ 2,489,776			$ 2,489,776
Land improvements	33,391,245	$ 1,856,230		35,247,475
Building improvements	96,090,093	21,262,130		117,352,223
Portable buildings	5,237,527	35,533		5,273,060
Buildings	138,343,518	3,243,621		141,587,139
Equipment	19,980,649	2,059,194		22,039,843
Software	1,484,707	265,724		1,750,431
Construction work in progress	77,901,049	61,827,497	$ (26,859,232)	112,869,314
Total	374,918,564	90,549,929	(26,859,232)	438,609,261
Less accumulated depreciation:				
Land improvements	8,492,855	3,145,410		11,638,265
Building improvements	45,521,799	9,663,232		55,185,031
Portable buildings	1,476,369	350,353		1,826,722
Buildings	35,934,581	2,799,307		38,733,888
Equipment	16,269,026	1,120,654		17,389,680
Software	1,296,388	142,090		1,438,478
Total	108,991,018	17,221,046		126,212,064
Capital assets, net	$ 265,927,546	$ 73,328,883	$ (26,859,232)	$ 312,397,197

9,663,232
350,353
2,799,307
(a) $12,812,892

1,120,654
142,090
(b) $1,262,744

CALIFORNIA COMMUNITY COLLEGES
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S10 General Fund - Combined
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SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	646,696	102,638	27,059	7,472		783,865
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300	469,206	42,831	12,900			524,937
Biological Sciences	0400	3,630,760	163,768	229,803	51,641		4,075,972
Business and Management	0500	4,204,336	159,242	26,692			4,390,270
Communications	0600	1,533,058	97,685	71,181	26,366		1,728,290
Information Technology	0700	3,924,858	596,415	108,052	3,109		4,632,434
Education	0800	6,593,345	897,448	466,154	57,620		8,014,567
Engineering and Industrial Tech.	0900	5,213,052	258,625	2,580,087	27,873		8,079,637
Fine and Applied Arts	1000	7,552,574	519,498	1,496,019	27,662		9,595,753
Foreign Language	1100	3,013,158	176,649	13,309			3,203,116
Health	1200	4,034,816	491,529	499,800	35,469		5,061,614
Family and Consumer Sciences	1300	801,537	213,032	29,379			1,043,948
Law	1400	313,013	22,973	13,831	9,315		359,132
Humanities (Letters)	1500	11,480,112	343,799	108,578	15,116		11,947,605
Library Science	1600	57,401					57,401
Mathematics	1700	7,807,746	350,981	12,157	65,891		8,236,775
Military Studies	1800						
sical Sciences	1900	3,966,736	194,450	165,688	18,215		4,345,089
Psychology	2000	1,641,186	37,696	7,723			1,686,605
Public and Protective Services	2100	297,832	10,282	128,018			436,132
Social Sciences	2200	7,802,338	330,727	150,891			8,283,956
Commercial Services	3000	345,682	6,781	15,896			368,359
Interdisciplinary Studies	4900	12,402,884	4,707,611	592,113	128,799		17,831,407
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	87,732,326	9,724,660	6,755,330	474,548		104686,864

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Foothill-DeAnza Community College District **420** District Code No.

CALIFORNIA COMMUNITY COLLEGES
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S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,289,340	1,507,936	79,780		9,877,056
Course and Curriculum Development	6020		233,119	4,006	20,106		257,231
Academic/Faculty Senate	6030		144,163	10,490			154,653
Other Instruct. Admin. & Instruct. Governance	6090		198,393	109,653	691		308,737
Subtotal - Instructional Administration	**6000**		8,865,015	1,632,085	100,577		10,597,677
Instructional Support Services (6100)							
Learning Center	6110	94,582	106,121	12,107	5,020		217,830
Library	6120		3,191,981	604,490	29,915		3,826,386
Media	6130		1,590,561	200,995	6,715		1,798,271
Museums and Galleries	6140		97,926	1,907			99,833
Academic Information Systems and Tech.	6150		556,773	121,567	17,011		695,351
Other Instructional Support Services	6190		247,554	23,592	55,407		326,553
Subtotal - Instructional Support Services	**6100**	94,582	5,790,916	964,658	114,068		6,964,224
Admissions and Records	**6200**		3,496,271	230,336	6,563		3,733,170
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		4,011,004	51,864	1,422		4,064,290
Matriculation and Student Assessment	6320		1,819,872	195,005	87,869		2,102,746
Transfer Programs	6330		283,032	5,000			288,032
Career Guidance	6340		293,528	15,201			308,729
Other Student Counseling and Guidance	6390		299,004	20,014	3,343		322,361
Subtotal - Student Counseling and Guidance	**6300**		6,706,440	287,084	92,634		7,086,158

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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SUPPLEMENTAL DATA
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S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		678,049	284,667	47,638		1,010,354
Extended Opportunity Prgms. & Services (EOPS)	6430		1,606,198	115,472	1,455		1,723,125
Health Services	6440		887,879	467,663	7,953		1,363,495
Student Personnel Administration	6450		270,305	11,567			281,872
Financial Aid Administration	6460		1,751,601	92,451			1,844,052
Job Placement Services	6470		215,924	748,401			964,325
Veterans Services	6480						
Miscellaneous Student Services	6490		758,721	126,021	3,745		888,487
Subtotal - Other Student Services	**6400**		6,168,677	1,846,242	60,791		8,075,710
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,789,818	553,882	407,333		4,751,033
Custodial Services	6530		2,695,173	1,426,660			4,121,833
Grounds Maintenance and Repairs	6550		1,723,073	170,426			1,893,499
Utilities	6570			2,207,939			2,207,939
Other Operation and Maintenance of Plant	6590		536,857	260,141	32,916		829,914
Subtotal - Operation and Maintenance of Plant	**6500**		8,744,921	4,619,048	440,249		13,804,218
Planning, Policymaking, and Coordination	**6600**		3,127,190	2,340,796	1,144,935		6,612,921

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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S10 General Fund - Combined
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SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,281,566	472,265	17,452		1,771,283
Fiscal Operations	6720		2,341,622	(60,509)	79,122		2,360,235
Human Resources Management	6730		1,754,845	291,635	4,387		2,050,867
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		286,145	326,981			613,126
Staff Diversity	6760		180,330	24,928			205,258
Logistical Services	6770		3,307,048	4,134,882	156,292		7,598,222
Management Information Systems	6780		6,682,608	1,261,398	576,882		8,520,888
Other General Institutional Support Services	6790		568,025	865,352			1,433,377
Subtotal - General Institutional Support Services	**6700**		16,402,189	7,316,932	834,135		24,553,256
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		90,105	1,736,996			1,827,101
Community Service Classes	6820		933,971	658,591	62,595		1,655,157
Community Use Facilities	6830		400,916	175,882	9,484		586,282
Economic Development	6840		441,640	225,367			667,007
Other Community Svcs. & Economic Development	6890			1,883			1,883
Subtotal - Community Services	**6800**		1,866,632	2,798,719	72,079		4,737,430

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,275,415	52,198			1,327,613
Student and Co-curricular Activities	6960		818,502	70,365			888,867
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		2,093,917	122,563			2,216,480
Auxiliary Operations (7000)							
Contract Education	7010		284,127	341,469	4,881		630,477
Other Auxiliary Operations	7090		3,537,489	846,157	63,460		4,447,106
Subtotal - Auxiliary Operations	**7000**		3,821,616	1,187,626	68,341		5,077,583
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
total - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					13,544,473	13,544,473
Student Aid	7320						
Other Outgo	7330					904,237	904,237
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					14,448,710	14,448,710
TOTAL EXPENDITURES and OTHER OUTGO	**391**	87,826,908	76,808,444	30,101,419	3,408,920	14,448,710	212,594,401

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Foothill-DeAnza Community College District **420** District Code No.

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$104,686,864		$104,686,864	$474,548	$104,212,316
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,877,056		9,877,056	79,780	9,797,276
Course and Curriculum Development	6020	257,231		257,231	20,106	237,125
Academic/Faculty Senate	6030	154,653		154,653		154,653
Other Instructional Administration & Instructional Governance	6090	308,737		308,737	691	308,046
Instructional Support Services	6100					
Learning Center	6110	217,830		217,830	5,020	212,810
Library	6120	3,826,386		3,826,386	29,915	3,796,471
Media	6130	1,798,271		1,798,271	6,715	1,791,556
Museums and Galleries	6140	99,833		99,833		99,833
Academic Information Systems and Technology	6150	695,351		695,351	17,011	678,340
Other Instructional Support Services	6190	326,553		326,553	55,407	271,146
Admissions and Records	6200	3,733,170		3,733,170	6,563	3,726,607
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	4,064,290		4,064,290	1,422	4,062,868
Matriculation and Student Assessment	6320	2,102,746		2,102,746	87,869	2,014,877
Transfer Programs	6330	288,032		288,032		288,032
Career Guidance	6340	308,729		308,729		308,729
Other Student Counseling and Guidance	6390	322,361		322,361	3,343	319,018
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,010,354		1,010,354	47,638	962,716
Subtotal		$134,078,447	$0	$134,078,447	$836,028	$133,242,419

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,723,125		$1,723,125	$1,455	$1,721,670
Health Services	6440	1,363,495		1,363,495	7,953	1,355,542
Student Personnel Admin.	6450	281,872		281,872		281,872
Financial Aid Administration	6460	1,844,052		1,844,052		1,844,052
Job Placement Services	6470	964,325		964,325		964,325
Veterans Services	6480					
Miscellaneous Student Services	6490	888,487		888,487	3,745	884,742
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	4,751,033		4,751,033	4,751,033	0
Custodial Services	6530	4,121,833		4,121,833	4,121,833	0
Grounds Maintenance and Repairs	6550	1,893,499		1,893,499	1,893,499	0
Utilities	6570	2,207,939		2,207,939	2,207,939	0
Other	6590	829,914		829,914	829,914	0
Planning, Policy Making, and Coordination	6600	6,612,921		6,612,921	6,612,921	0
General Inst. Support Services	6700					
Community Relations	6710	1,771,283		1,771,283	1,771,283	0
Fiscal Operations	6720	2,360,235		2,360,235	2,360,235	0
Human Resources Management	6730	2,050,867		2,050,867	2,050,867	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	613,126		613,126	613,126	0
Staff Diversity	6760	205,258		205,258	205,258	0
Logistical Services	6770	7,598,222		7,598,222	7,598,222	0
Management Information Systems	6780	8,520,888		8,520,888	8,520,888	0
Subtotal		$184,680,821	$0	$184,680,821	$44,386,199	$140,294,622

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,433,377		1,433,377	1,433,377	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,827,101		1,827,101		1,827,101
Community Service Classes	6820	1,655,157		1,655,157	62,595	1,592,562
Community Use of Facilities	6830	586,282		586,282	9,484	576,798
Economic Development	6840	667,007		667,007		667,007
Other Community Services & Economic Development	6890	1,883		1,883		1,883
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,327,613		1,327,613		1,327,613
Student and Co-curricular Activities	6960	888,867		888,867		888,867
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	630,477		630,477	4,881	625,596
Other Auxiliary Operations	7090	4,447,106		4,447,106	63,460	4,383,646
Depreciation or Use Allowance - Building				(a)	12,812,892	
Depreciation or Use Allowance - Equipment				(b)	1,262,744	
(05) Total		$198,145,691	$0	$198,145,691	$60,035,632	$152,185,695
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				39.45%		
(07) Notes						

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

July 25, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8567

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. J. Branwell

Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 43045

(02) Claimant Name: Foothill-De Anza Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 12345 El Monte Road

City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 1,608,218
Less: 10% Late Penalty		(14) $ 160,822
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,447,396
Due from State	(08)	(17) $ 1,447,396
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,703
(23) EFCW-1, (04)(A)(1)(b)(f)	5,798
(24) EFCW-1, (04)(A)(2)(a)(f)	1,264,310
(25) EFCW-1, (04)(B)(1)(a)(f)	4,026
(26) EFCW-1, (04)(B)(1)(b)(f)	2,431
(27) EFCW-1, (04)(B)(2)(a)(f)	34,719
(28) EFCW-1, (04)(B)(2)(b)(f)	90,476
(29) EFCW-1, (04)(B)(2)(c)(f)	11,256
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	419,902
(32) EFCW-1, (09)	84,495
(33) EFCW-1, (10)	142,907
(34)	
(35)	
(36)	

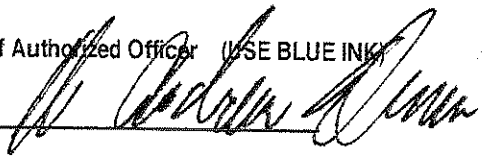
(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)



Date 7-16-07

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 67	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Foothill-De Anza Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,702.64	$ -	$ -	$ -	$ -	$ 2,702.64
b. Staff training (One time per employee)	$ 5,798.46	$ -	$ -	$ -	$ -	$ 5,798.46
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 1,264,309.97	$ -	$ -	$ -	$ -	$ 1,264,309.97
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 4,025.80	$ -	$ -	$ -	$ -	$ 4,025.80
b. Staff training (One time per employee)	$ 2,430.88	$ -	$ -	$ -	$ -	$ 2,430.88
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 34,719.36	$ -	$ -	$ -	$ -	$ 34,719.36
b. Waiving student fees	$ 90,475.52	$ -	$ -	$ -	$ -	$ 90,475.52
c. Reporting BOG fee waiver data to CCC	$ 11,255.54	$ -	$ -	$ -	$ -	$ 11,255.54
(05) Total Direct Costs	$ 1,415,718.17	$ -	$ -	$ -	$ -	$ 1,415,718.17

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.66%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 419,902.01
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,835,620.18
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 84,495.00
(10) Less: Enrollment Fee Waiver offsets		$ 142,907.10
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,608,218.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chao, Nancy	Cashiering Supervisor	$49.53	40.0	$ 1,981.20				
Thai, May	Senior Cashier	$41.82	8.0	$ 334.56				
Thanh, Henry	Senior Cashier	$48.36	8.0	$ 386.88				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,702.64	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Castillo, Cindy	Manager, Financial Aid	$70.02	3.0	$ 210.06				
Chao, Nancy	Cashiering Supervisor	$49.53	40.0	$ 1,981.20				
Thai, May	Senior Cashier	$41.82	40.0	$ 1,672.80				
Thanh, Henry	Senior Cashier	$48.36	40.0	$ 1,934.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,798.46	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$42.71	7,615.9	$ 325,275.09				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$42.71	6,056.0	$ 258,651.76				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$42.71	10,009.5	$ 427,505.75				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$42.71	4,996.2	$ 213,387.70				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$42.71	924.6	$ 39,489.67				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,264,309.97	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Manager, Financial Aid	$70.02	10.0	$ 700.20				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	10.0	$ 384.60				
Collings, Earl - Foothill	Web Coordinator	$68.25	40.0	$ 2,730.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,025.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	5.0	$ 226.65				
Feldman, Joyce K	Financial Aid Assistant	$42.20	10.0	$ 422.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	40.0	$ 1,538.40				
Witkop, Inna	Financial Aid Outreach Assistant	$32.51	7.5	$ 243.83				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,430.88	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	5.0	$ 226.65				
Chen, I	Financial Aid Outreach Coordinator	$37.42	16.0	$ 598.72				
Christensen, Josephine	Financial Aid Outreach Assistant	$31.38	500.0	$ 15,690.00				
Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	60.0	$ 4,104.60				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	40.0	$ 1,538.40				
Chao, Nancy	Cashiering Supervisor	$49.53	8.0	$ 396.24				
Collings, Earl - Foothill	Web Coordinator	$68.25	40.0	$ 2,730.00				
Collings, Earl - DeAnza	Web Coordinator	$68.25	60.0	$ 4,095.00				
Pabros, Angelita	Division Assistant	$41.03	125.0	$ 5,128.75				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 34,719.36	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Chabot-Las Positas Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	578.5	$ 24,933.35				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	380.2	$ 16,386.62				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	446.3	$ 19,235.53				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$43.10	694.2	$ 29,920.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 90,475.52	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	40.0	$ 1,813.20				
Castillo, Cindy	Manager, Financial Aid	$70.02	20.0	$ 1,400.40				
Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	40.0	$ 2,736.40				
Feldman, Joyce K	Financial Aid Assistant	$42.20	5.0	$ 211.00				
Gusman, Frances	Dean, Student Outreach	$76.67	3.0	$ 230.01				
Witkop, Inna	Financial Aid Outreach Assistant	$32.51	3.0	$ 97.53				
Renteria, Matilda	Financial Aid Coordinator	$56.75	84.0	$ 4,767.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,255.54	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$226.65	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$226.65	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Bloom, Susan Lynn	Financial Aid Coordinator	$45.33	$1,813.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.00	**Bloom, Susan Lynn Total**			$2,266.50		
04-05	10.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$700.20	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	3.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$210.06	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	20.00	Castillo, Cindy	Manager, Financial Aid	$70.02	$1,400.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	33.00	**Castillo, Cindy Total**			$2,310.66		
04-05	40.00	Chao, Nancy	Cashiering Supervisor	$49.53	$1,981.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Chao, Nancy	Cashiering Supervisor	$49.53	$1,981.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	8.00	Chao, Nancy	Cashiering Supervisor	$49.53	$396.24	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	88.00	**Chao, Nancy Total**			$4,358.64		
04-05	16.00	Chen, I	Financial Aid Outreach Coordinator	$37.42	$598.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	16.00	**Chen, I Total**			$598.72		
04-05	500.00	Christensen, Josephine	Financial Aid Outreach Assistant	$31.38	$15,690.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	500.00	**Christensen, Josephine Total**			$15,690.00		
04-05	60.00	Collings, Earl - DeAnza	Web Coordinator	$68.25	$4,095.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	60.00	**Collings, Earl - DeAnza Total**			$4,095.00		
04-05	40.00	Collings, Earl - Foothill	Web Coordinator	$68.25	$2,730.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Collings, Earl - Foothill	Web Coordinator	$68.25	$2,730.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	80.00	**Collings, Earl - Foothill Total**			$5,460.00		
04-05	60.00	Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	$4,104.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Coyne, Sheila Nora	Senior Programmer Analyst	$68.41	$2,736.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Coyne, Sheila Nora Total**			$6,841.00		
04-05	7,615.90	Enrollment Office Staff	Collecting Fees	$42.71	$325,275.09	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	6,056.00	Enrollment Office Staff	Collecting Fees	$42.71	$258,651.76	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	10,009.50	Enrollment Office Staff	Collecting Fees	$42.71	$427,505.75	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	4,996.20	Enrollment Office Staff	Collecting Fees	$42.71	$213,387.70	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	924.60	Enrollment Office Staff	Collecting Fees	$42.71	$39,489.67	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	29,602.20	**Enrollment Office Staff Total**			$1,264,309.97		
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	10.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$422.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	5.00	Feldman, Joyce K	Financial Aid Assistant	$42.20	$211.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	25.00	**Feldman, Joyce K Total**			$1,055.00		
04-05	578.50	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$24,933.35	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	380.20	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$16,386.62	Receiving waiver applications	Waiving student fees
04-05	446.30	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$19,235.53	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	694.20	Financial Aid Office Staff	Waiving Enrollment Fees	$43.10	$29,920.02	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,099.20	**Financial Aid Office Staff Total**			$90,475.52		
04-05	3.00	Gusman, Frances	Dean, Student Outreach	$76.67	$230.01	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	3.00	**Gusman, Frances Total**			$230.01		
04-05	10.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$384.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$1,538.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$38.46	$1,538.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	90.00	**Harral, Kevin Total**			$3,461.40		
04-05	125.00	Pabros, Angelita	Division Assistant	$41.03	$5,128.75	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$5,128.75		
04-05	84.00	Renteria, Matilda	Financial Aid Coordinator	$56.75	$4,767.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	84.00	**Renteria, Matilda Total**			$4,767.00		

Foothill-De Anza Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	8.00	Thai, May	Senior Cashier	$41.82	$334.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Thai, May	Senior Cashier	$41.82	$1,672.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thai, May Total**			$2,007.36		
04-05	8.00	Thanh, Henry	Senior Cashier	$48.36	$386.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Thanh, Henry	Senior Cashier	$48.36	$1,934.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thanh, Henry Total**			$2,321.28		
04-05	3.00	Witkop, Inna	Financial Aid Outreach Assistant	$32.51	$97.53	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
04-05	7.50	Witkop, Inna	Financial Aid Outreach Assistant	$32.51	$243.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	10.50	**Witkop, Inna Total**			$341.36		
	33,061.90	**Grand Total**			$1,415,718.17		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$90,382,943		$90,382,943	$192,798	$90,190,145
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,651,128		9,651,128	56,337	9,594,791
Course and Curriculum Development	6020	207,911		207,911		207,911
Academic/Faculty Senate	6030	153,132		153,132		153,132
Other Instructional Administration & Instructional Governance	6090	238,779		238,779		238,779
Instructional Support Services	6100					
Learning Center	6110	187,926		187,926	5,504	182,422
Library	6120	3,403,307		3,403,307	5,719	3,397,588
Media	6130	568,852		568,852	8,264	560,588
Museums and Galleries	6140	83,466		83,466		83,466
Academic Information Systems and Technology	6150	520,293		520,293	7,413	512,880
Other Instructional Support Services	6190	503,257		503,257	63,546	439,711
Admissions and Records	6200	3,351,361		3,351,361	71,952	3,279,409
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,388,753		2,388,753	3,844	2,384,909
Matriculation and Student Assessment	6320	1,252,453		1,252,453	3,550	1,248,903
Transfer Programs	6330	372,233		372,233	5,457	366,776
Career Guidance	6340	426,637		426,637	7,513	419,124
Other Student Counseling and Guidance	6390	260,759		260,759	5,341	255,418
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,025,106		1,025,106	49,443	975,663
Subtotal		$114,978,296	$0	$114,978,296	$486,681	$114,491,615

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,821,162		$1,821,162	$7,684	$1,813,478
Health Services	6440	1,134,091		1,134,091		1,134,091
Student Personnel Admin.	6450	231,224		231,224		231,224
Financial Aid Administration	6460	1,587,379		1,587,379	57,095	1,530,284
Job Placement Services	6470	11,293		11,293	5,457	5,836
Veterans Services	6480					
Miscellaneous Student Services	6490	863,960		863,960		863,960
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,726,114		3,726,114	3,726,114	0
Custodial Services	6530	3,509,415		3,509,415	3,509,415	0
Grounds Maintenance and Repairs	6550	1,475,263		1,475,263	1,475,263	0
Utilities	6570	1,771,199		1,771,199	1,771,199	0
Other	6590	1,178,669		1,178,669	1,178,669	0
Planning, Policy Making, and Coordination	6600	5,009,583		5,009,583	5,009,583	0
General Inst. Support Services	6700					
Community Relations	6710	455,703		455,703	455,703	0
Fiscal Operations	6720	1,914,599		1,914,599	1,914,599	0
Human Resources Management	6730	2,218,589		2,218,589	2,218,589	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	350,569		350,569	350,569	0
Staff Diversity	6760	183,357		183,357	183,357	0
Logistical Services	6770	7,075,896		7,075,896	7,075,896	0
Management Information Systems	6780	6,706,284		6,706,284	6,706,284	0
Subtotal		$156,202,645	$0	$156,202,645	$36,132,157	$120,070,488

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,804,870		2,804,870	2,804,870	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,185,602		1,185,602		1,185,602
Community Service Classes	6820	1,871,689		1,871,689	45,619	1,826,070
Community Use of Facilities	6830	590,973		590,973	18,493	572,480
Economic Development	6840	381,597		381,597		381,597
Other Community Services & Economic Development	6890	30,987		30,987		30,987
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,114,872		1,114,872	1,320	1,113,552
Student and Co-curricular Activities	6960	627,437		627,437	16,412	611,025
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	1,069,587		1,069,587	3,873	1,065,714
Other Auxiliary Operations	7090	4,887,042		4,887,042	35,896	4,851,146
Physical Property Acquisitions	7100					
(05) Total		$170,767,301	$0	$170,767,301	$39,058,640	$131,708,661
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				29.66%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	520,530	73,365	8,593			602,488
Architecture and Environmental Design	0200						
Biological Sciences	0400	3,013,181	118,740	115,010	5,127		3,252,058
Business and Management	0500	4,161,515	138,868	16,941			4,317,324
Communications	0600	1,208,235	58,616	45,374	3,424		1,315,649
Computer and Information Science	0700	4,618,463	532,678	98,980	7,001		5,257,122
Education	0800	6,093,390	809,664	249,209	2,317		7,154,580
Engineering and Related Industrial Tech.	0900	4,293,864	335,203	121,010	35,491		4,785,568
Fine and Applied Arts	1000	6,446,626	379,766	637,084	6,775		7,470,251
Foreign Language	1100	2,509,441	61,620	10,242			2,581,303
Health	1200	3,580,280	455,208	329,331	14,037		4,378,856
Consumer Education and Home Economics	1300	823,643	207,844	20,339			1,051,826
Law	1400	246,047	9,009	2,598			257,654
Humanities (Letters)	1500	9,735,807	465,957	81,764	99		10,283,627
Library Science	1600	66,730					66,730
Mathematics	1700	7,058,655	254,302	2,822	10,689		7,326,468
Military Studies	1800						
Physical Sciences	1900	3,197,104	190,056	38,984	14,154		3,440,298
Psychology	2000	1,684,538	39,191	8,398	523		1,732,650
Public Affairs and Services	2100	413,442	79,600	9,214			502,256
Social Sciences	2200	7,046,996	263,552	49,832	10,449		7,370,829
Commercial Services	3000	272,719	26,769	22,954			322,442
Interdisciplinary Studies	4900	10,857,316	5,657,295	315,641	82,712		16,912,964
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	77,848,522	10,157,303	2,184,320	192,798		90,382,943

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,263,260	1,331,531	56,337		9,651,128
Course and Curriculum Development	6020		189,380	18,531			207,911
Academic/Faculty Senate	6030		147,556	5,576			153,132
Other Instruct. Admin. & Instruct. Governance	6090		163,121	75,658			238,779
Subtotal - Instructional Administration	6000		8,763,317	1,431,296	56,337		10,250,950
Instructional Support Services (6100)							
Learning Center	6110	115,839	66,491	92	5,504		187,926
Library	6120		3,087,003	310,585	5,719		3,403,307
Media	6130		459,397	101,191	8,264		568,852
Museums and Galleries	6140		81,261	2,205			83,466
Academic Information Systems and Tech.	6150		331,242	181,638	7,413		520,293
Other Instructional Support Services	6190		330,157	109,554	63,546		503,257
Subtotal - Instructional Support Services	6100	115,839	4,355,551	705,265	90,446		5,267,101
Admissions and Records	6200		2,923,677	355,732	71,952		3,351,361
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,321,681	63,228	3,844		2,388,753
Matriculation and Student Assessment	6320		1,187,566	61,337	3,550		1,252,453
Transfer Programs	6330		334,227	32,549	5,457		372,233
Career Guidance	6340		388,553	30,571	7,513		426,637
Other Student Counseling and Guidance	6390		229,640	25,778	5,341		260,759
Subtotal - Student Counseling and Guidance	6300		4,461,667	213,463	25,705		4,700,835

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		660,376	315,287	49,443		1,025,106
Extended Opportunity Prgms. & Services (EOPS)	6430		1,497,123	316,355	7,684		1,821,162
Health Services	6440		970,453	163,638			1,134,091
Student Personnel Administration	6450		214,987	16,237			231,224
Financial Aid Administration	6460		1,337,425	192,859	57,095		1,587,379
Job Placement Services	6470			5,836	5,457		11,293
Veterans Services	6480						
Miscellaneous Student Services	6490		770,718	93,242			863,960
Subtotal - Other Student Services	**6400**		5,451,082	1,103,454	119,679		6,674,215
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,180,278	403,413	142,423		3,726,114
Custodial Services	6530		2,176,623	1,332,792			3,509,415
Grounds Maintenance and Repairs	6550		1,336,382	132,733	6,148		1,475,263
Utilities	6570			1,771,199			1,771,199
Other Operation and Maintenance of Plant	6590		602,777	470,916	104,976		1,178,669
Subtotal - Operation and Maintenance of Plant	**6500**		7,296,060	4,111,053	253,547		11,660,660
Planning, Policymaking, and Coordination	**6600**		2,117,652	2,792,502	99,429		5,009,583

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 G ral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		411,388	32,174	12,141		455,703
Fiscal Operations	6720		1,878,403	(39,566)	75,762		1,914,599
Human Resources Management	6730		2,024,087	192,668	1,834		2,218,589
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		153,983	193,387	3,199		350,569
Staff Diversity	6760		164,183	19,174			183,357
Logistical Services	6770		3,903,553	3,099,929	72,414		7,075,896
Management Information Systems	6780		5,520,450	829,083	356,751		6,706,284
Other General Institutional Support Services	6790		431,659	2,373,211			2,804,870
Subtotal - General Institutional Support Services	**6700**		14,487,706	6,700,060	522,101		21,709,867
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		85,001	1,100,601			1,185,602
Community Service Classes	6820		1,071,531	754,539	45,619		1,871,689
Community Use Facilities	6830		445,893	126,587	18,493		590,973
Economic Development	6840		327,215	54,382			381,597
Other Community Svcs. & Economic Development	6890		5,114	25,873			30,987
Subtotal - Community Services	**6800**		1,934,754	2,061,982	64,112		4,060,848

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 G ral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,087,221	26,331	1,320		1,114,872
Student and Co-curricular Activities	6960		563,843	47,182	16,412		627,437
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,651,064	73,513	17,732		1,742,309
Auxiliary Operations (7000)							
Contract Education	7010	3,126	496,727	565,861	3,873		1,069,587
Other Auxiliary Operations	7090		3,894,191	956,955	35,896		4,887,042
Subtotal - Auxiliary Operations	**7000**	3,126	4,390,918	1,522,816	39,769		5,956,629
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					9,309,189	9,309,189
Student Aid	7320						
Other Outgo	7330					474,066	474,066
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					9,783,255	9,783,255
TOTAL EXPENDITURES and OTHER OUTGO	**391**	77,967,487	67,990,751	23,255,456	1,553,607	9,783,255	180,550,556

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	130,559
Avg. time p/account	3.5
Total Time (in minutes)	456957
Per Hour	60
Hours Worked **(** 11)**	**7615.9**
***EFC 2**	90,840
Avg. time p/student	4.0
Total Time (in minutes)	363360
Per Hour	60
Hours Worked **(** 12)**	**6056.0**
***EFC 1**	130,559
Avg. time p/question	4.6
Total Time (in minutes)	600571
Per Hour	60
Hours Worked **(** 13)**	**10009.5**
***EFC 2**	90,840
Avg. time p/file	3.3
Total Time (in minutes)	299772
Per Hour	60
Hours Worked **(** 14)**	**4996.2**
***EFC 4**	9,565
Avg. time p/account	5.8
Total Time (in minutes)	55477
Per Hour	60
Hours Worked **(** 15)**	**924.6**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/question	3.5
Total Time (in minutes)	34710
Per Hour	60
Hours Worked **(** 21)**	**578.5**
***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/application	2.3
Total Time (in minutes)	22809
Per Hour	60
Hours Worked **(** 22)**	**380.2**
***EFW 6 (Not provided - Used *EFW 7)**	9,917
Avg. time p/evaluation	2.7
Total Time (in minutes)	26776
Per Hour	60
Hours Worked **(** 23)**	**446.3**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	9,917
Avg. time p/application	4.2
Total Time (in minutes)	41651
Per Hour	60
Hours Worked **(** 25)**	**694.2**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See documentation in the 05-06 claim only.)
Findings:

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Aced, Shawna	Associate Registrar	A&R - Foothill - A	3	2	3	2	3	4
Alexander, Irma	A&R Assistant	A&R - Foothill - F	2	3	1	3	3	3
Almendarez, Susan	A&R Assistant	A&R - Foothill - A	5	3	3	2	2	3
Avancena, Jeoffrey	A&R PT Student Worker	A&R - Foothill - S	1	2	1	3	5	1
Bergstedt, Stacy	A&R Senior Cashier	A&R - Foothill - F	5	1	1	5	7	8
Bhan, Vanessa	A&R Cashier	A&R - Foothill - F	1	9	3	5	10	
Bookvich, Patricia	A&R Assistant	A&R - De Anza	5	5	8	5		
Borelli, Dennis	Cashiering Supervisor	Cashiering - De Anza	1	1	1	1	1	1
Boyvers, Shelly	A&R Clerk	A&R - Foothill - A	10	10	10	10		
Brewer, Pam	A&R Assistant	A&R - Foothill - A	5	2	5			3
Burfine, Mary Alice	A&R Assistant	A&R - De Anza	3	3	5	3		
Carpenter, Susan	A&R Assistant	A&R - Foothill - F	2	3	1	3	2	2
Chang, Ching (Tiffany)	A&R PT Student Worker	A&R - Foothill - S	3	3	4	4	5	5
Chao, Nancy Tu-Ning	Cashiering Supervisor	Cashiering - De Anza	5	1	15	1	20	3
Cheney, Melodie	A&R Assistant	A&R - De Anza	7	7	4	6		
Cheng, Mei	A&R PT Student Worker	A&R - Foothill - S	1	5	3	5	10	7
Cole, Sheri	A&R Assistant	A&R - De Anza	3	3	4	3		
Comanda, Deborah	A&R Cashier	A&R - Foothill - F	5	15	5	3	15	10
Comanda, Deborah	Senior Cashier	Cashiering - De Anza	5	1		1		
Crumpton, Dena	A&R Assistant	A&R - De Anza	3	3	5	3		
Deshpande,Mvinmaie	A&R Assistant	A&R - Foothill - A	7	9	5	4	10	10
Elwell, Jean	A&R Coordinator	A&R - De Anza	3	1	1	3		
Fifield, Patricia	Assoc. Registrar	A&R - De Anza	3	3	5	3		
Fowler, Cindy	A&R Supervisor	A&R - Foothill - F	2	3	1	3	2	3
Frische, Allen	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
Furuhata, Erl	A&R PT Student Worker	A&R - Foothill - S	4	4	5	4	4	2
Furukawa, Nami	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Henderson, April	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	4
Hochstraser, Alex	A&R Assistant	A&R - De Anza	4	5	4	4		
Ichimura, Sachie	A&R PT Student Worker	A&R - Foothill - S	5	4	5	3	5	4
Ingalls, Melissa	Division A&R Assistant	A&R - De Anza	5	5	8	5		
Jeffries, Portia	A&R Assistant	A&R - Foothill - F	2	3	1	2	2	3
Johnson, Barry	A&R Supervisor	A&R - De Anza	4	5	3	3		
Jung, Henry	A&R Day Supervisor	A&R - Foothill - A	2	3	3	5	2	3
Kaliangara, Araceli	A&R Assistant	A&R - De Anza	8	7	6	4		
Kawr, Jasmeet	A&R PT Student Worker	A&R - Foothill - S	5	5	2	5	5	5
Khaolaor, Orawan	A&R Senior Cashier	A&R - Foothill - A	3	3	2	1	7	5
Lai, Su Kei	A&R PT Student Worker	A&R - Foothill - S	1	2	1	1	2	1
Lindke, William	A&R Supervisor	A&R - Foothill - F	2	3	1	2	2	3
McLaughlin, Annette	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nakayama, Cindy	A&R Assistant	A&R - De Anza	4	3	2	3		
Nguyen, Henry Cony	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nguyen, Hien	A&R Cashier	A&R - Foothill - F	1	10	3	1		
Nguyen, Khanh	A&R Assistant	A&R - De Anza	3	3	5	3		
Okyneel, Yelena	A&R PT Student Worker	A&R - Foothill - S	2	2	4	5	3	1
Olsen, Lynn	A&R Supervisor	A&R - Foothill - F	3	4	2	1	3	4
Pabros, Angelita	Division A&R Assistant	A&R - De Anza	4	3	2	3		
Yena-Ferrick, Joan	A&R Assistant	A&R - De Anza	3	6	4	3		

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Staff	Title	***Department	*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
			11	12	13	14	15	16
Perez, Denise	A&R Technician	A&R - Foothill - A	2	3	5	3	7	2
Phan, Vy	A&R Assistant	A&R - De Anza	5	5	8	5		
Ranii, Lindsay	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Roberts, Brian	A&R Assistant	A&R - De Anza	3	3	5	3		
Sanchez, Amelia	A&R Assistant	A&R - De Anza	3	3	5	3		
Schooler, Shirley	Cashier	Cashiering - De Anza	5	1	15	1	5	1
Slayton, Virginia	A&R Specialist	A&R - Foothill - A	5	7	3	7	7	3
Snowden, Betty	A&R Coordinator	A&R - De Anza	3	3	5	3		
Starratt, Elaine	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Sung, See Wan	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Terranova, Cheryl	A&R Clerk	A&R - Foothill - A	2	2	3	1		
Thai, Binh	A&R Assistant	A&R - De Anza	3	5	5	3		
Thai, May	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Ting, Judy	A&R Assistant	A&R - De Anza	5	10	10	3		
Tomaunas, Robert	A&R Evaluation Specialist	A&R - De Anza	4	4	4	4		
Wang, Rhoda	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
White, Essie	A&R Assistant	A&R - De Anza	4	4	7	3		
Wood, Patricia	Cashiering Services Coord.	A&R - Foothill - A	5	3	5	2	12	3
Ye, Yunzei	A&R Cashier	A&R - Foothill - F	2	3	7		10	
Zimmerman, Brian	A&R Assistant	A&R - Foothill - A	1	3	2	2	3	2
Average			**3.5**	**4.0**	**4.6**	**3.3**	**5.8**	**3.3**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

*****Department**
A&R - Foothill - A = Active Employees
A&R - Foothill - F = Former Cashiers and Employees
A&R - Foothill - S = Partime Student Workers

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Aced, Shawna	Associate Registrar		10.07	22.75	30.73	34.98	39.69	41.51	49.76
Alexander, Irma	A&R Assistant		29.18	31.20					
Almendarez, Susan	A&R Assistant			11.11	11.11		26.62	31.70	36.15
Avancena, Jeoffrey	A&R PT Student Worker								
Bergstedt, Stacy	A&R Senior Cashier	20.86	26.68	29.78					
Bhan, Vanessa	A&R Cashier				23.09	24.78	29.75		
Bookvich, Patricia	A&R Assistant	23.59	32.00						
Borelli, Dennis	Cashiering Supervisor	38.22	41.29	44.98	47.86	51.27	56.23	53.91	
Bowers, Shelly	A&R Clerk	27.96	29.05	30.78	33.81	36.41	38.56	39.65	44.00
Brewer, Pam	A&R Assistant			25.05	28.07	31.10	35.13	40.79	43.25
Burfine, Mary Alice	A&R Assistant	26.34	28.20	30.75	33.08	35.15	37.74	38.98	39.38
Carpenter, Susan	A&R Assistant	19.32	18.92						
Chang, Ching (Tiffany)	A&R PT Student Worker								
Chao, Nancy Tu-Ning	Cashiering Supervisor	30.07	32.41	35.91	39.89	42.41	47.76	49.53	52.55
Cheney, Melodie	A&R Assistant		26.44	25.57	28.62	31.59	34.38	36.40	40.39
Cheng, Mei	A&R PT Student Worker								
Cole, Sheri	A&R Assistant	13.48	12.66	13.60	16.56	23.94	30.85	32.51	41.65
nanda, Deborah	Senior Cashier	28.50	56.93	35.17		39.39	37.78	38.97	39.50
Crumpton, Dena	A&R Assistant	10.26	14.25	23.21	26.39	29.13	32.62	34.65	36.51
Deshpande,Mrinmaie	A&R Assistant				11.18	28.50	34.43	32.07	38.19
Elwell, Jean	A&R Coordinator	34.34	35.20	39.10	40.98	43.08	46.21	47.95	50.18
Fifield, Patricia	Assoc. Registrar	31.21	34.94	38.58	42.42	46.70	51.55	53.80	56.39
Fowler, Cindy	A&R Supervisor								
Frische, Allen	Director of Budget & Personnel	43.21	45.25	51.36	56.50	61.58	64.37	66.23	
Furuhata, Erl	A&R PT Student Worker								
Furukawa, Nami	A&R PT Student Worker								
Henderson, April	A&R Assistant	18.91	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hochstraser, Alex	A&R Assistant	35.60	36.46	37.43	41.41	39.77	42.25	46.68	
Ichimura, Sachie	A&R PT Student Worker								
Ingalis, Melissa	Division A&R Assistant							48.46	
Jeffries, Portia	A&R Assistant	8.37	14.29	20.56					
Johnson, Barry	A&R Supervisor	29.56	33.00	36.34	39.71	42.03	46.55	46.70	47.93
Jung, Henry	A&R Day Supervisor		8.72	11.91	26.03	28.51	31.91	34.44	40.73
Kaliangara, Araceli	A&R Assistant	27.71	30.26	36.59	39.84	40.94	40.82	43.15	44.63
Kawr, Jasmeet	A&R PT Student Worker								
Khaolaor, Orawan	A&R Senior Cashier								
Lai, Su Kei	A&R PT Student Worker								
Lindke, William	A&R Supervisor	34.49	39.33	43.37	48.09	51.39	56.73	57.66	
McLaughlin, Annette	Senior Cashier								
Nakayama, Cindy	A&R Assistant	27.69	27.50	32.04	35.37	39.32	43.83	46.02	48.52
Nguyen, Henry Cong	Senior Cashier	13.65	15.59	24.35	29.14	33.24	37.51	40.94	42.99
Nguyen, Hien	A&R Cashier			9.03	8.18	12.52	25.63	32.52	
Nguyen, Khanh	A&R Assistant	26.99	32.21						
Okyneel, Yelena	A&R PT Student Worker								
Olsen, Lynn	A&R Supervisor	37.63	38.65	41.89	43.54	47.07	37.59	31.31	
Pabros, Angelita	Division A&R Assistant			21.26	28.63	32.39	38.07	41.03	42.64
Pena-Ferrick, Joan	A&R Assistant	27.33	30.19	32.84	34.40	36.26	38.89	41.17	44.64
z, Denise	A&R Technician	29.57	34.04	35.59	43.20	45.48	44.76	52.92	55.67

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Phan, Vy	A&R Assistant	11.61	10.39	18.10	23.67	29.60	33.89	36.12	39.12
Ranii, Lindsay	A&R Assistant			22.08	24.93	33.51	21.76		
Roberts, Brian	A&R Assistant								31.66
Sanchez, Amelia	A&R Assistant	22.75	25.72	29.81	30.80	34.07	39.08	39.96	41.23
Schooler, Shirley	Cashier	24.56	25.87	30.91	34.25	37.71	41.75	43.11	46.98
Slayton, Virginia	A&R Specialist	27.61	29.43	32.12	35.10	36.88	40.00	41.43	43.46
Snowden, Betty	A&R Coordinator							52.51	
Starratt, Elaine	A&R Assistant	24.03	27.39	30.36					
Sung, See Wan	A&R PT Student Worker								
Terranova, Cheryl	A&R Clerk	22.79	30.21	27.43	29.92	30.72	36.64	37.70	41.31
Thai, Binh	A&R Assistant	31.03	33.06	35.49	37.80	40.94	44.50	45.76	49.75
Thai, May	Senior Cashier	12.87	15.44	23.24	28.44	32.88	37.15	41.82	43.07
Ting, Judy	A&R Assistant	28.13	30.28	32.78	34.77	37.52	41.03	42.26	45.71
Tomalinas, Robert	A&R Evaluation Specialist			16.84	16.87	22.06	17.24	17.11	27.58
Wang, Rhoda	Director of Budget & Personnel	46.77	50.01	56.28	60.18	65.29	71.39	75.79	75.96
White, Essie	A&R Assistant	27.88	29.53	31.22					
Wood, Patricia	Cashiering Services Coord.	16.68	20.49	25.13	28.22	30.52	34.18	36.12	40.40
Ye, Yunzei	A&R Cashier			21.76	23.24				
Zimmerman, Brian	A&R Assistant								30.18
Average		**25.99**	**28.43**	**29.65**	**32.38**	**36.88**	**39.61**	**42.71**	**43.80**

clusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (See documentation in the 05-06 claim only.)
Findings:

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Billan, Ryan	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Blinon, Susan	Assistant Director of Financial Aid	Financial Aid - De Anza	2	1	2	4	6	2
Bostic, John		EOPS - Foothill	5	5	2	1	1	1
Castillo, Cindy	Director of Financial Aid	Financial Aid - De Anza	1	1				
Castro, Richard James	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Chacon, Beatriz		EOPS - Foothill	2	1	2			1
Chavez, Antoinette	Financial Aid Outreach Assistant	EOPS - Foothill	4	2	1	3	3	2
Chen, I	Financial Aid Outreach Coordinator	EOPS - Foothill	2	1	2	2	5	3
Christensen, Josephine	Financial Aid Outreach Assistant	EOPS - Foothill	2	1	2	2.5	4	3
Ciaros, Randy	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	2	2	5	5	3
Cross, Lindsey		EOPS - Foothill	3	2	1	2	1	1
Duong, Tung	Financial Aid Assistant	EOPS - Foothill	2	1	2	2	3	2
Feldman, Joyce	Financial Aid Assistant	Financial Aid - De Anza	3	5	3	10	7	4
Garcia, Alma	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Godinez, Christy	Financial Aid Assistant	EOPS - Foothill	2	1	2	3	3	1
Gonzalez, Ismael	EOPS Counselor	EOPS - Foothill	10					
Guevara, Erika	Administrative Assistant I	EOPS - De Anza	5	5	2	5	2	5
Hamilton-Kilili, Asher		EOPS - Foothill	3	3	1	1	1	1
Harral, Kevin	Financial Aid Outreach Coordinator	Financial Aid - De Anza	5	1	2	4	3	2
Henderson, April	EOPS Specialist	EOPS - Foothill	3		1			
Hunter, Karen	Financial Aid Assistant	Financial Aid - De Anza	1					
Kaliangara, Araceli		EOPS - Foothill	1	1	1	1	1	1
Lambrecht, Donna	Sr. Admin. Asst. II	EOPS - Foothill	3	1				
Le, Chuong Huy	EOPS Services Coordinator	EOPS - De Anza	5	5	5	2		
Nava, Tobias	EOPS Counselor	EOPS - Foothill	2	1	3	4	1	
Ngo, Fei	Financial Aid Assistant	Financial Aid - De Anza	5	2	5	10	5	5
Nguyen, Leslie	Office Assistant	EOPS - De Anza	2	2	3			
Nguyen, Thao	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
O'Malley, Dawna	Financial Aid Assistant	Financial Aid - De Anza	10	1	10	20	20	10
Pardo, Ines	EOPS Program Serv. Coordinator	EOPS - Foothill	5	2	3	3		
Ramirez-Moya, Francisca	Office Assistant	EOPS - De Anza	2	2	3			
Renteria, Matilda	Financial Aid Coordinator	EOPS - Foothill	3	1	3	1	3	2

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Robles, George	EOPS Supervisor	EOPS - De Anza	2	2	5	5	10	10
Rodreguez, Jorge	Sr. EOPS Specialist	EOPS - Foothill	4		1			
Schmidt, Janet	Financial Aid Assistant	Financial Aid - De Anza	1	1	1	1	2	1
Sigala-Aquilan, Griselda	CARE Coordinator	EOPS - De Anza	5	5	5	2	10	10
Trejo, Adrian	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Trinh, Lan	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
Van, Nina	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	5	1	2	1	2
Witrop, Irna	Financial Aid Outreach Assistant	EOPS - Foothill	3	1	7	5	8	5
Wu, Tilly	EOPS Counselor	EOPS - Foothill	1	1	2	3	1	
Zamora, Lilian	Office Clerk	EOPS - De Anza	2	2	3			
Average			**3.5**	**2.3**	**2.7**	**3.7**	**4.2**	**3.5**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Billan, Ryan	Financial Aid Outreach Assistant							
Brown, Susan	Assistant Director of Financial Aid							
Bostic, John		48.64	51.35	55.97	71.84			
Castillo, Cindy	Director of Financial Aid	51.19	52.92	55.66	63.57	68.01	70.02	71.07
Castro, Richard James	EOPS Specialist	25.28	29.68			21.96		
Chacon, Beatriz							58.17	62.49
Chavez, Antoinette	Financial Aid Outreach Assistant	12.03	25.17	26.87				31.99
Chen, I	Financial Aid Outreach Coordinator						37.42	39.58
Christensen, Josephine	Financial Aid Outreach Assistant					29.56	31.38	35.32
Claros, Randy	Financial Aid Outreach Assistant							
Cross, Lindsey		10.39	17.18	26.89	31.64			
Duong, Tung	Financial Aid Assistant	24.15	26.22	28.94	33.95	38.30	40.27	42.73
Feldman, Joyce	Financial Aid Assistant	29.01	32.04	33.64	38.16	40.91	42.20	44.46
Garcia, Alma	Financial Aid Outreach Assistant					31.03	32.60	35.18
Godinez, Christy	Financial Aid Assistant	29.91	32.39	33.94	37.94	40.68	43.18	44.32
Gonzalez, Ismael	EOPS Counselor	69.07	73.60	77.95	82.00	88.73	64.70	75.70
Guevara, Erika	Administrative Assistant I	33.08	36.38	37.28	40.89	44.98	46.29	47.66
Hamilton-Kilili, Asher						35.89	36.66	
Harral, Kevin	Financial Aid Outreach Coordinator			25.05	29.44	34.90	38.46	41.73
Henderson, April	EOPS Specialist	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hunter, Karen	Financial Aid Assistant					11.62	11.84	29.10
Kaliangara, Araceli		30.26	36.59	39.84	40.94	40.82	43.15	44.63
Lambrecht, Donna	Sr. Admin. Asst. II	43.50	47.63	50.50	55.36	60.14		57.22
Le, Chuong Huy	EOPS Services Coordinator			16.87	33.78	38.79	41.85	41.81
Nava, Tobias	EOPS Counselor							69.39
Ngo, Fei	Financial Aid Assistant							
Nguyen, Leslie	Office Assistant	22.34	26.46	29.83	33.38	36.86	38.38	41.68
Nguyen, Thao	Financial Aid Outreach Assistant				7.99	11.88	11.84	
O'Malley, Dawna	Financial Aid Assistant	10.88	16.42	23.87	30.42	34.25		39.95
Pardo, Ines	EOPS Program Serv. Coordinator	37.16	42.77	45.00	47.46	51.14	52.97	54.52
Ramirez-Moya, Francisca	Office Assistant	8.69		23.58	26.55	29.98	31.51	33.51
Renteria, Matilda	Financial Aid Coordinator	38.03	40.91	43.32	47.17	55.03	56.75	54.17

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Robles, George	EOPS Supervisor	45.73	50.85	52.98	58.69	64.55	66.54	68.29
Rodriguez, Jorge	Sr. EOPS Specialist	26.64	30.56	33.73	37.25	42.10	44.55	46.95
Schmidt, Janet	Financial Aid Assistant	23.38	25.79	28.14	33.30	37.67	40.84	41.13
Sigala-Aguilar, Griselda	CARE Coordinator	47.52	51.96	56.50	57.25	61.78	63.11	62.50
Trejo, Adrian	EOPS Specialist		28.19	31.83				
Trinh, Lan	Financial Aid Outreach Assistant	8.52	11.71	16.91	30.34	30.87	33.58	36.17
Van, Nina	Financial Aid Outreach Assistant					29.68	32.86	35.09
Witkop, Inna	Financial Aid Outreach Assistant						32.51	37.59
Wu, Tilly	EOPS Counselor	46.16	50.62	55.55	61.17	67.55	76.47	80.64
Zamora, Lillian	Office Clerk	21.98	23.60	25.96	28.86	30.94	33.23	33.76
Average		**30.70**	**35.59**	**37.34**	**42.07**	**41.60**	**43.10**	**47.54**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
EFC 2	1.8-1	2. Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012
EFC 4	1.8-2	1. Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763
EFC 5	1.8-2	2. Refunds								
EFW 6	1.8-3	1. Waivers Requested	X							
EFW 7	1.8-3	2. Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442
EFW 8	1.8-3 (1-2)	Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2004 Summer Term

Data Current As Of June 24, 2006 03:09:36

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	29,014

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04-05

29,014.00 +
41,462.00 +
36,861.00 +
36,720.00 +
144,057.00 *

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2004 Fall Term

Data Current As Of June 24, 2006 03:12:11

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	41,462

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2005 Winter Intersession

Data Current As Of June 24, 2006 03:12:31

Download The Result With College Breakdown in Comma Delimited Format

Total Headcount	36,861

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Foothill CCD
For 2005 Spring Semester

Data Current As Of June 24, 2006 03:12:54

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	36,720

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FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee C[illegible]tion and Waiver Claim
(EFCW 1.6A)
Adminstrative Activiities
2004/2005

Actual time

Employee and Title	Code 1A	Code 1B	Code 2A	Code 2B	Code 3	Code 4	TOTAL
Bloom, Susan Lynn F[illegible]cial Aid Coordinator				5.0	5.0	40.0	50.0
Castillo, Cindy Manager, Financial Aid		10.0	3.0			20.0	33.0
Chen, I Financial Aid Outreach Coord					16.0		16.0
Christensen, Josephine Financial Aid Outreach Asst					500.0		500.0
Coyne, Sheila Nora Senior Programmer Analyst					60.0	40.0	100.0
Feldman, Joyce K Financial Aid Assistant		5.0		10.0	5.0	5.0	25.0
Gusman, Frances Dean, Student Outreach						2.0	2.0
Harral, Kevin Financial Aid Outreach Coord		10.0		40.0	40.0		90.0
Renteria, Matilda F[illegible]ncial Aid Coordinator						83.0	83.0
W[illegible]kop, Inna Financial Aid Outreach Asst				7.5		3.0	10.5
TOTAL	0.0	25.0	3.0	62.5	626.0	193.0	909.5

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

408-864-8227
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A (2B) 3 4		
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan L. Bloom Date 5/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Cindy Carrillo
Employee Name

Dir Fin Aid
Exact Position Title

Fin Aid
Department/Location

408-864-8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		
/ /	1A 1B (2A) 2B 3 4		10
/ /	1A 1B 2A 2B 3 (4)		3
/ /	1A 1B 2A 2B 3 4		20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Carrillo Date 5/31/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Nancy Chao — Employee Name

Cashiering Supervisor — Exact Position Title

De Anza - gma

DA / Cashiering Svcs — College/Department/Location

408-864-5308 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	8	8	8	8	8	8	8	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	88	88	88	88	88	88	88	88

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill -De Anza Fiscal Year: 2004 - 2005

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

Financial Aid / Foothill
Department/Location

650-949-7376
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10 10/4/04	1A 1B 2A 2B 3 4		
10/1/04	1A 1B 2A 2B (3) 4	BOGW online application debug and adds-on of New links and warning pages	8
12 10/1/04	1A 1B 2A 2B 3 4		
1 10/1/05	1A 1B 2A 2B 3 4		
2 10/1/05	1A 1B 2A 2B 3 4		
3 10/1/05	1A 1B 2A 2B 3 4		
4 10/1/05	1A 1B 2A 2B 3 4		
5 10/1/05	1A 1B 2A 2B (3) 4	Revised and launched 05-06 BOGW on line application	8
6 10/1/05	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	16

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 5/10/06

If you have any questions, please contact Bee Chean, at 5/17/06

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 2004-2005

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

Financial Aid / Middlefield Campus
Department/Location

650-949-6987
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/04	1A 1B 2A 2B(3) 4	Data Entry in SIS	50
11/04	1A 1B 2A 2B(3) 4		50
9/1/04	1A 1B 2A 2B(3) 4		50
10/1/04	1A 1B 2A 2B(3) 4		50
11/1/04	1A 1B 2A 2B(3) 4		50
12/1/04	1A 1B 2A 2B(3) 4		50
1/1/05	1A 1B 2A 2B(3) 4		50
2/1/05	1A 1B 2A 2B(3) 4		30
3/1/05	1A 1B 2A 2B(3) 4		30
4/1/05	1A 1B 2A 2B(3) 4		30
5/1/05	1A 1B 2A 2B(3) 4		30
6/1/05	1A 1B 2A 2B(3) 4		30

50 + 50 + 50 + 50 + 50 + 50 + 50 + 50 + 30 + 30 + 30 + 30 + 30 + 30 = 500 *

EMPLOYEE CERTIFICATION: The State of Californ
data for state mandates in order for the district to rec
you have reported actual data or have provided a go
of perjury under the laws of the State of California tc
information." This information is used for cost acco

I maintain a record of
this form certifies that
declare) under penalty
sonal knowledge or
SE BLUE INK

Employee Signature Josephine Christensen

1/9/06

If you have any questions, please contact Bee at 650-949-7223

PLEASE SUBMIT THIS INFORMATION BY _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6S

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza

EARL COLLINGS — Employee Name

WEB MASTER — Exact Position Title

MARKETING — College/Department/Location

6509497647 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						5	40	30
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						5	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Collings Date 04-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 2006

EARL COLLINGS
Employee Name

Web Coordinator
Exact Position Title

Marketing
Department/Location

650 947-7647
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03/03	1A 1B 2A 2B (3) 4	Web updates for BOG Waiver	20
03/04	1A 1B 2A 2B (3) 4	Design Online Web forms for BOG	80
03/05	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	60
04/06	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

02-03-Sent
03-04-Sent
04-05-Sent
05-06-Sent

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-3-2006

If you have any questions, please contact Bee Chan, at 9497223

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FOOTHILL - DE ANZA Fiscal Year: 2004-2005

Sheila Coyne
Employee Name

PROGRAMMY ANALYST, SENIOR
Exact Position Title

ETS - District 408-864-8740
Department/Location Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/1/04	1A 1B 2A 2B (3) 4	Fin. Aid File Conversions	60
11/1/04	1A 1B 2A 2B 3 (4)	Generate STATE MES REPORT (S)	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila Coyne Date 5-23-06

If you have any questions, please contact JOE LAMPO, at 408-864-8626

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Joyce Feldman
Employee Name

Fin aid asst
Exact Position Title

Fin aid
Department/Location

408-864-8377
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		5
/ /	1A 1B 2A (2B) 3 4		10
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce K Feldman Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 03-04

FRANCES GUSMAN
Employee Name

Dean Student Outreach & Retention
Exact Position Title

Foothill/Dean 650-949-7524 12mo/11mo/10mo/hrly
Department/Location Telephone # ~~Work~~ year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/ 104	1A 1B 2A 2B 3 (4)	Final BFAP Report	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Frances A. Gusman. Date 5/17/06.

If you have any questions, please contact Bee Chacon, at 949-7223

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 04-05

Kevin Harral
Employee Name

Fin Aid Outreach Coordinator
Exact Position Title

Fin Aid
Department/Location

408 864-8334
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		10
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Harral Date 5-4-06

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 00 – 06

Angelita Pabros
Employee Name

Division Assistant
Exact Position Title

Admissions / De Anza
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	(3 minutes @ 18% of students)	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6 yrs @ 125 = 750 ttl	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-12-07

If you have any questions, please contact 408-864-8292, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill - De Anza Fiscal Year: 03-04

Matilda Cuentas
Employee Name

Financial Aid Coordinator
Exact Position Title

Foothill/Fin Aid 650-949-7247 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/04	1A 1B 2A 2B 3 (4)	Fund BFAP Report	4
9/04	1A 1B 2A 2B 3 4	MIS	80
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	84

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Cuentas Date 5/17/06

If you have any questions, please contact Dee Macar, at 949-7223

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Fhda CCD

May Thai — Employee Name

Sr. Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-8290 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature May Thai Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Henry Thanh — Employee Name

Senior Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-5699 — Telephone #

~~12mo~~/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 2004-05

Irina Whitkop
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

Financial Aid
Department/Location

650/949-7710
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
07/01/04	1A 1B 2A 2B 3 4		
08/01/04	1A 1B 2A 2B 3 (4)	preparation for MAR report	3.0
09/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	1.0
10/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	4.0
11/01/04	1A 1B 2A (2B) 3 4	BOG online preparation	2.0
12/01/04	1A 1B 2A 2B 3 4		
01/01/05	1A 1B 2A 2B 3 4		
02/01/05	1A 1B 2A 2B 3 4		
03/01/05	1A 1B 2A 2B 3 4		
04/01/05	1A 1B 2A 2B 3 4		
05/01/05	1A 1B 2A 2B 3 4		
06/01/05	1A 1B 2A 2B 3 4	BOG new forms preparation	0.5
		Total	10.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Irina Whitkop Date 5/10/06

If you have any questions, please contact Bee Chan, at 949-7223

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records Foothill
Department/Location

Shawna Aced
Employee Name

Associate Registrar
Exact Position Title

7771
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Irma ALCALA ALEXANDER
Employee Name

Admission & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Susan Almandarez
Employee Name

Admission & Records Assistant
Exact Position Title

650 949-7518
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almandarez Date 4-13-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

ADMISSIONS + RECORDS.
Department/Location

JEFFREY AVANCENA
Employee Name

PART-TIME STUDENT WORKER.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

STACY L. Bergstedt
Employee Name

Sr. Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature _____ Date 4-20-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Reanza
District

A & R
Department/Location

Ahn, Vanessa A.
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions / De Anza
Department/Location

Patricia Bookwich
Employee Name

A & R Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Bookwich Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Borrelli, Dennis
Employee Name

Cashiering Supervisor
Exact Position Title

864-5308
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret A Michaels Date 5-1-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

ADMISSIONS / FOOTHILL
Department/Location

SHELLY BOWERS
Employee Name

ADMISSIONS CLERK
Exact Position Title

949-7643
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ~~and printing out a list of enrolled courses.~~	~~5~~ 10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, ~~and providing a copy to the student.~~	~~5~~ 10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SBowers Date 4/20/07

If you have any questions, please contact SHELLY, at #7643

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions - F.H.
Department/Location

Pam Brewer
Employee Name

Admissions Asst.
Exact Position Title

x 7003
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record w[illegible] lists student courses, status of payments, and w[illegible] eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mplo[illegible] Signature Pamela J. Brewer Date 4-18-07

/ou have any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Mary Alice Burfine
Employee Name

Admissions Assistants
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mahoney Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Susan A Carpenter
Employee Name

A+R Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan A Carpenter Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza
District

Admissions & Records
Department/Location

Ching (Tiffany) Chang
Employee Name

Part time student worker
Exact Position Title

650-2158786
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3			✓		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Services
Department/Location

Nancy Tu-Ning Chao
Employee Name

Cashiering Supervisor
Exact Position Title

408 864-5308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R / De Anza
Department/Location

Melodie Cheney
Employee Name

Admissions Assistant
Exact Position Title

342
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney Date 4-17-07

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De-Anza
District

Admissions & Record
Department/Location

MEI CHENG
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and y[illegible]er eligibility, and printing out a list of enrolled courses.	1 Min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mei Cheng Date 4/13/2007

If y[illegible]ave any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Acct'g / De Anza
Department/Location

Sheri Cole
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheri Cole Date 4-17-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Deborah Comarden
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Comanda, Deborah
Employee Name

Senior Cashier
Exact Position Title 5/00 – 6/01 @ 50%

NA
Telephone #

~~50%~~ 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Comanda Date 4/28/07

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R | De Anza
Department/Location

Dena Crumpton
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza District
District

A&R - Foothill Campus
Department/Location

Mrinmaie Deshpande
Employee Name

A&R Assistant
Exact Position Title

650-949-7644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mrinmaie Deshpande Date 04/13/07

If you have any questions, please contact Mrinmaie Deshpande, at 949-7644

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Jean Elwell
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R De Anza
Department/Location

Patricia Fifield
Employee Name

Associate Registrar
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A Fifield Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Cindy Maria Fowler
Employee Name

Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Finance / De Anza College
Department/Location

Allen Frische
Employee Name

Director of Budget & Personnel
Exact Position Title

(408) 864-8857 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Joanne Hawk Date 4/30/07

u have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

A & R
Department/Location

ERI FURUHATA
Employee Name

part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible]er eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eri Furuhata Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admission and record
Department/Location

Nami Furukawa
Employee Name

Part-time student worker
Exact Position Title

~~650~~
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature 古川奈美 Date 4/13/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

April Colonna Henderson
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Alex Hochstraser
Employee Name

Admissions Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DEANZA
District

Admissions & Records
Department/Location

SACHIE ICHIMURA
Employee Name

Part-time Student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...r eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sachie Ichimura Date 4/13/2007

If y...ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Melissa Ingalls
Employee Name

Dursion Admin Asst
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Portia Denice Jeffries
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Barry Johnson
Employee Name

Admissions Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza
District

A&R
Department/Location

Henry Leung
Employee Name

Day Supervisor
Exact Position Title

(650)949-7024
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Araceli Kaluangara
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Araceli Kaluangara Date 4/17/06

If you have any questions, please contact EXT. 8230 at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location

Jasmeet Kaur
Employee Name

Part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible] eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jasmeet Kaur Date 4/20/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A&R — Department/Location

ORAWAN KHAOLAOR — Employee Name

Senior Cashier — Exact Position Title

7189 — Telephone

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

Su Kai Lai
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Su Kai Lai Date 4-18-2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

William John Lindke
Employee Name

Admissions & Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact Shawna Aced, at 7771

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Cashiering Svcs
Department/Location

McLaughlin, Annette
Employee Name

Senior Cashier
Exact Position Title

408-864-8590
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-98~~ (99-00) 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

1/1/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annette McLaughlin Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Cindy Nakayama
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Cindy Nakayama Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Svcs
Department/Location

Nguyen, Henry Cong
Employee Name

Senior Cashier
Exact Position Title

408-864-5689 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (8/00)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...iver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

...u have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill – De Anza
District

A & R
Department/Location

Hien M. Nguyen
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

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Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Khanh Nguyen
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Khanh Nguyen Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

AR
Department/Location

Yelena Okuneva
Employee Name

part time student worker
Exact Position Title

408 701 0037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Okuneva Date 04 20 2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Lynn C Olsen
Employee Name

Admissions & Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

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Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza
District

AR/DEANZA
Department/Location

Angelita Pabros
Employee Name

Dvrsion Admin Asst
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Joan Pena-Fernicke
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Pena-Fernicke Date 04/17/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

De Anza Comm. Coll Dist — District

A&R — Department/Location

Debbie Perez — Employee Name

A&R Technician — Exact Position Title

7856 — Telephone #

12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

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Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza
District

A&R/DeAnza
Department/Location

Vy Pham
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vy Pham Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lindsay Knodel Ranii
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

f yo ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Brian Robents
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Amelia Sanchez
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Foothill-Mgmt Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Srcs
Department/Location

Schooler, Shirley
Employee Name

Cashier
Exact Position Title

NA
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (5/00)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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Employee Signature Shirley A Schooler Date 4/20/07

u have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Fort Bell

Department/Location: Admissions & Records

Employee Name: Virginia Slayton

Exact Position Title: Admissions Specialist

Telephone #: 7772

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature: Virginia Slayton Date: 4/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Betty Snowden
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen M May Date 4-15-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Elaine Hilda Starrath
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

See Wan Sung
Employee Name

Part Time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and er eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature See Wan Sung Date 6/13/2007

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FootHill College — District

Admissions + Records — Department/Location

Cheryl Terrazas — Employee Name

Clerk — Exact Position Title

949-7773 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ir eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

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Employee Signature Cheryl A. Terrazas Date 4/18/07

If yo ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Binh Thai
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering SVCS
Department/Logation

Thai, May
Employee Name

Senior Cashier
Exact Position Title

408-864-8290 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Judy Ting
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R De Anza
Department/Location

Robert Tomalunas
Employee Name

Admissions Evaluation Special.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Finance
Department/Location

RHODA WANG
Employee Name

Director of Budget & Personnel
Exact Position Title

884-8857
Telephone #

12mo/11mo/10mo/hrly (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhoda Wang Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Eesee White
Employee Name

Admissions Assistant
Exact Position Title

(12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (98-99)(99-00)(00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eesee White Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL- DE ANZA COMMUNITY COLLEGE DISTRICT
District

CASHIERS DEPT / ADMISSION & RECORDS
Department/Location

PATRICIA WOOD
Employee Name

CASHIERING SERVICES COORDINATOR
Exact Position Title

(650) 949-7331
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Wood Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Yuntei Ye
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Brian Zimmerman
Employee Name

Admissions + Records Assistant
Exact Position Title

(650)949-7674
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and [illegible]er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Ryan Bullow
Employee Name

FA Outreach ASST
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Susan Bloom
Employee Name

ASST FA DIR
Exact Position Title

8207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Bloom Date 4/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

John Bostic
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ...m to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Cindy Cos 82110
Employee Name

Dir of Fin Aid
Exact Position Title

8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. 06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or mation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

e Signature Cindy Cosentino Cindy Cosentino Date 4/12/07

any questions, please contact _____, at _____

MIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

RICHARD JAMES CASTRO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Beatriz Chacon — Employee Name

Exact Position Title

Telephone # — (12mo)/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid / Foothill
Department/Location

Antoinette Chavez
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Antoinette Chavez Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 4/10/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza C.C. District
District

Foothill College - Middlefield Campus
Department/Location

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-6987
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ~~m~~ to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/10/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Mares
Employee Name

FA Outreach Assist
Exact Position Title

[illegible]
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Lindsey Cross
Employee Name

Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lindsey Cross Date 4-20-07

ú have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill Campus
Department/Location

Tung Duong
Employee Name

Financial Aid Assistant
Exact Position Title

949-7051
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tung Duong Date 2/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA ASST
Exact Position Title

4377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at desk of Reyda Bolton back to 03/04

EFCW 1.7-3

ee AVERAGE Time Record for Mandated Costs
ENROLLMENT FEE COLLECTION AND WAIVERS
LLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA — District

FA — Department/Location

Alma Garcia — Employee Name

FA Outreach Asst — Exact Position Title

5270 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alma Garcia by Reyda Bolton Date 4/16/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid/Foothill Campus
Department/Location

Christy Godinez
Employee Name

Financial Aid Assistant
Exact Position Title

(650) 949-7246
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Godinez Date 4/13/07

I ( ) have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS - Campus/Foothill
Department/Location

Ismael Gonzalez
Employee Name

EOPS Counselor
Exact Position Title

650/949-7224 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	∅				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	∅				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	∅				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	∅				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	∅				

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Employee Signature _____ Date 4/12/7

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

EOPS - DE ANZA
Department/Location

ERIKA GUEVARA
Employee Name

ADMINISTRATIVE ASSISTANT I
Exact Position Title

408 864-5619
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erika Robles Date 5-1-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Asher Hamilton-Kilili
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. Hamilton-Kilili Date 4-20-07

If I have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KHDA — District

FA — Department/Location

Kevin Harral — Employee Name

FA Outreach Coor. — Exact Position Title

6334 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring t to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin C Harral Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

EOPS / Foothill Campus
Department/Location

April Henderson
Employee Name

EOPS Specialist
Exact Position Title

650-949-7207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Karen Hunter
Employee Name

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Hunter Karen Hunter Date 4/13/07 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Araceli Kaliangara — Employee Name

Exact Position Title

Telephone # — Part-time 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A Araceli Kaliangara — Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza Comm. College District — District

EOPS/Foothill College — Department/Location

Donna Cambrecht — Employee Name

Sr. Admin Asst. II — Exact Position Title

6089497037 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring m to the appropriate person for an answer.	3 ~~min~~				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Donna Cambrecht Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

CHUONG Huy LE
Employee Name

EOPS SERVICES COORDINATOR
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS - Foothill Campus
Department/Location

Tobias Nava
Employee Name

EOPS Counselor
Exact Position Title

949-7036
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring em to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tobias Nava Date 4-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Fred Ngo
Employee Name

FA ASST
Exact Position Title

8228
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS - DE ANZA
Department/Location

LESLIE NGUYEN
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring the to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenya Robles, EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

KA
Department/Location

Dawna O'Malley
Employee Name

FA ASST
Exact Position Title

8218
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible]o the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature [signature] Date 4/16/07

f yo[illegible]ave any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De ANZA
District

EOPS - Foothill Campus
Department/Location

Ines PARDO
Employee Name

EOPS Program Serv. Coordinator
Exact Position Title

(D) 949-7204
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ...m to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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PLEASE USE BLUE INK

Employee Signature Ines Pardo Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS-DE ANZA
Department/Location

FRANCISCA RAMIREZ-MOYA
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring the) the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nployee Signature George Robles, EOPS SUPERVISOR Date 4-23-07

you . e any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill College
Department/Location

Matilda Renteria
Employee Name

Financial Aid Coordinator
Exact Position Title

650-949-7247 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Matilda Renteria Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

EOPS - DE ANZA
Department/Location

GEORGE ROBLES
Employee Name

EOPS SUPERVISOR
Exact Position Title

X8952
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature George Robles Date 4-20-07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 4-20-07 ; TO RRET X6272

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS (FH)
Department/Location

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/13/07

If you have any questions, please contact Same, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Janet Schmidt
Employee Name

FA Asst
Exact Position Title

8719
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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Employee Signature Janet Schmidt Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS DeAnza College
Department/Location

Griselda Sigala-Aguilar
Employee Name

CARE Coordinator
Exact Position Title

864-8830
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible]o the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Griselda Sigala Aguilar Date 4-18-07

If yo[illegible]ve any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

ADRIAN TREJO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

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Employee Signature George Robles, EOPS Supervisor Date 4-23-07

If yo[illegible]ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at De Ark of Thao Nguyen Back to 03-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

~~Thao Nguyen~~ Lan Trinh
Employee Name

FA
Department/Location

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Lan Trinh by Cindy Cayanan Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring th[illegible] to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nina Van Date 4/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Fin. Aid - Foothill Campus
Department/Location

Inna Witkop-
Employee Name

Fin Aid Outreach Assist
Exact Position Title

650.949.7710 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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Employee Signature Inna Witkop- Date 4/10/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS / Foothill
Department/Location

Tilly L. Wu
Employee Name

EOPS Counselor
Exact Position Title

(650) 949-7180
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

LILIAN ZAMORA
Employee Name

OFFICE CLERK
Exact Position Title

(408)864-8950
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
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		6	7	8	
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Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
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Employee Signature [signature] - EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

nrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
otal Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958
1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834
EFC 1	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
DCCCD #'s =		139,986	136,628	136,344	148,145	154,578	153,963	144,057	
roll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232
	Fall	34,278	35,368	33,587	34,399	36,315	35,508	32,775	34,357
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785
roll Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500
aivers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500
form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038
EFC 3	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**
	Total	**13,372**	13,806	12,937	13,478	12,098	19,773	21,734	**22,012**
								9917	
Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732
arged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857
form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658
EFC 2	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**

rce: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06

)A IR&P - RBB - 5/19/06

29 014
4/1462
31861
36720

5/22/06

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
De Anza								
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961
Fall	2,144	1,435	601	632	681	912	1,231	3,017
Wtr	1,483	799	634	508	524	550	2,251	2,431
Spr	1,215	987	546	476	662	615	2,101	2,374
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783
Foothill								
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608
Fall	1,139	970	382	738	435	507	812	1,655
Wtr	742	566	346	326	418	340	1,430	1,342
Spr	768	688	546	307	344	409	1,332	1,375
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980

The following for #1 on form EFCW 1.8-2

District Totals								
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672
Wtr	2,225	1,365	980	834	942	890	3,681	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06

5/22/06

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee Collection and Waiver Claim
(EFCW 1.8-4)
Enrollment Fee Revenues Report
For FY 1999-2005

Employee and Title	FY 1999/2000	FY 2000/2001	FY 2001/2002	FY 2002/2003	FY 2003/2004	FY 2004/2005	TOTAL
1. Enrollment Fees Collected	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2. Enrollment Fee Refunded	0.0	0.0	0.0	0.0	0.0	0.0	0.0
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	7,010,023	6,889,391	7,428,945	7,486,552	12,177,874	16,564,290	57,557,075
4A. Total Enrollment Fees Waived (BOGG)	1,089,971	1,038,000	1,090,896	1,294,220	2,589,000	4,021,121	11,123,208
4B. 2% Enrollment Fees Waived (Line 4A X 2%)	21,799	20,760	21,818	25,884	51,780	80,422	222,464
5. Number of credit units for which enrollment fees were waived	148,632	148,286	155,842	184,889	250,548	262,247	1,150,444

Notes: Information for number 1 and 2 not available.
The figures for number 3 and 4 obtain from MAUI reports.
The Figures for number 5 obtain by dividing the total amount waived by the per credit unit cost or the average for the FY year (which was used in this calculation).

Prepared by: Martha De La Cerda

Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

1.8-4

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

1.8-4
Backup

Maui Report for FY 2004/2005

June 12, 2006

6/12/06 9:16 AMFinancial Status Report For Fund: 14
At: District Level
Summarized by: Object_Code For:All_Revenues

Object_Code	Orig.Budget	Rev.Budget	Curr-Month	Yr-to-Date	Encumb
0398VETERANS REPORT FEE	-2,236	-2,052	-802	-2,052	0
0499OTHER STATE REVENUE	-343,299	-372,924	-372,306	-372,924	0
0611APPORTN GENERAL	-20,231,833	-38,561,346	-2,612,691	-38,561,346	0
0612PR YR GEN APPORTN	0	27,538	0	27,538	0
0613APPORTIONMENT-B.O.G.	-33,000	-84,495	-11,829	-84,495	0
0617BASIC SKILLS	0	-170,542	0	-170,542	0
0619PFE	-5,822,729	-5,795,010	-811,301	-5,795,010	0
0620PT FACULTY EQUITY	-1,475,772	-1,475,772	-206,608	-1,475,772	0
0622EQUALIZATION	0	-3,360,794	0	-3,360,794	0
0678HOMNRS' PROP TX RELF	-445,814	-424,777	-63,717	-424,777	0
0680OTHER TAX RELIEF SUB	-1,446	0	0	0	0
0688TIMBER TAX	0	-17	-15	-17	0
0691STATE LOTTERY	-3,956,000	-4,280,647	-1,782,359	-4,280,647	0
0694STATE MANDATED COSTS	0	-154	0	-154	0
0811SECURED PROPERTY TAX	-42,715,292	-41,668,499	-4,342,090	-41,668,499	0
0812UNSECURED PROP.TAXES	-5,523,592	-4,170,594	0	-4,170,594	0
0814PROPERTY TAXES SB813	-2,578,800	-2,075,920	-518,328	-2,075,920	0
0816ERAF TAX	-40,854,450	-22,264,990	-4,394,248	-22,264,990	0
0818RDA-FCILITIES AMT	0	-125	-13	-125	0
0822LOCAL GRANT/CONTRACT	0	0	0	0	0
0846COMMISSIONS	-7,452	-3,595	0	-3,595	0
0860INTEREST INCOME	-750,000	-1,247,697	-548,549	-1,247,697	0
0861TRAN INTEREST INC	0	-124,963	0	-124,963	0
0865TRAN PREMIUM REVENUE	0	-63,850	0	-63,850	0
0886DEPT OF JUSTICE FEES	0	-19,196	-1,276	-19,196	0
0887FBI FEES	0	-8,484	-568	-8,484	0
0888LOCAL FINGERPRINTING	0	-19,629	-7,938	-19,629	0
0889MISC. ADMISSIONS REV	-500	-495	-115	-495	0
0892RETURN CHECK FEES	-4,793	-3,623	-300	-3,623	0
0893FEES, OTHER	-126,653	-96,837	-1,785	-96,837	0
0895OTHER LOCAL REVENUE	-165,273	-143,872	-24,612	-143,872	0
0896FACILITIES RENTAL	0	-32,521	0	-32,521	0
0897FH-UNCLAIM STUD REV	-21,088	-34,743	-9,153	-34,743	0
0899DA-UNCLAIM STUD REV	-38,000	-60,547	-15,921	-60,547	0
0940SALES-SURPLUS ITEMS	0	-6,390	0	-6,390	0
0941SALES-PRINTED MATRLS	0	0	0	0	0
0942SALES-CLASS SCHED.AD	-10,629	-6,780	-750	-6,780	0
0957ENROLLMENT VERIFS	0	-2,830	-558	-2,830	0
0961FH NON-RES TUITION	-5,269,000	-4,792,500	3,071	-4,792,500	0
0962DA NON-RES TUITION	-6,375,000	-6,125,195	11,603	-6,125,195	0
0965FH ENROLLMENT-REG	-5,346,952	-5,866,955	-8,593	-5,866,955	0
0966DA ENROLLMENT-REG	-11,229,734	-10,697,335	1,985	-10,697,335	-16,564,290
0967FH ENROLLMNT-DIF FEE	0	-33	0	-33	0
0971FH ENROLLMENT WAIVED	733,700	1,122,467	-9,051	1,122,467	0
0972DA ENROLLMENT WAIVED	1,872,200	2,898,655	0	2,898,655	4,021,121
0973PARKING FINES-FH	-310,000	-283,022	-40,568	-283,022	0
0974PARKING FINES-DA	-350,000	-332,588	-54,051	-332,588	0
0975FIELD TRIP REVENUE	-360	0	0	0	0
0976TRANSCRIPTS-RUSH	-242,233	-279,156	-26,846	-279,156	0
0977CLASS AUDITING	-8,565	-7,159	0	-7,159	0
0978PARKING FINES	0	0	0	0	0
0979TRANSCRIPTS-REG	-45,008	-53,848	-6,674	-53,848	0
0980LIBRARY FINES	-24,000	-17,443	-1,835	-17,443	0
0982REGIS SUPPORT FEE	-148,337	-161,478	225	-161,478	0
0986FINGERPRINTING FEES	0	0	6,810	0	0
0990MATERIALS FEES	-398,522	-388,863	532	-388,863	0
992LOST BOOK FINES	0	-4,067	-759	-4,067	0
TOTAL	-152,250,462	-151,545,690	-15,851,982	-151,545,690	0

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

June, 2006

Enrollment Fee Collection and Waiver Claim
(EFCW 1.8-4)
Enrollment Fee Information
For FY 1999-2005

	Enrollment Fee		Average Enrollment Fee for FY
Fall 1999	$8.00		
Winter 2000	$7.00		
Spring 2000	$7.00		$7.33
Fall 2000	$7.00		
Winter 2001	$7.00		
Spring 2001	$7.00		$7.00
Fall 2001	$7.00	ok	
Winter 2002	$7.00		
Spring 2002	$7.00		$7.00
Fall 2002	$7.00		
Winter 2003	$7.00		
Spring 2003	$7.00		$7.00
Fall 2003	$7.00		
Winter 2004	$12.00		
Spring 2004	$12.00	ok	$10.33
Fall 2004	$12.00		
Winter 2005	$17.00		
Sprint 2005	$17.00		$15.33

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

Assoc. Registrar

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
ACED, SHAWNA D				1GU-1ADMR														
555-13-9051	120094	00	01	1-41287-2170	LBR		41936.29	0	.00	0	.00	0	1701.48	0	.00	0	.00	0
	120098	00	01	1-41287-2170	LBR		11751.48	0	4935.62	0	.00	0	417.29	0	175.50	0	.00	0
	120094	00	01	1-41287-3100	BEN		16624.61	0	.00	0	.00	0						
	120098	00	01	1-41287-3100	BEN		4405.88	0	1850.47	0	.00	0						
				LABOR TOTALS			53,687.77		4,935.62		.00		2,118.77		175.50		.00	
				BENEFIT TOTALS			21,030.49		1,850.47		.00							
ACEVEDO AVILA, VERONICA G				2CO-2COUN														
550-37-3412	258874	00	01	1-42248-1260	LBR		31165.66	0	2833.23	0	.00	0	1279.05	0	116.27	0	.00	0
	258874	00	01	1-42248-3100	BEN		14202.92	0	1178.69	0	.00	0						
	258874	00	01	1-42250-1160	LBR		8904.69	0	809.53	0	.00	0	187.37	0	17.04	0	.00	0
	258874	00	01	1-42250-3100	BEN		3721.73	0	336.78	0	.00	0						
	292001	03	01	1-42801-1430	LBR		250.00	0	.00	0	.00	0	5.00	0	.00	0	.00	0
	294001	03	01	1-42801-1430	LBR		750.00	0	.00	0	.00	0	15.00	0	.00	0	.00	0
	292001	03	01	1-42801-3200	BEN		9.83	0	.00	0	.00	0						
	294001	03	01	1-42801-3200	BEN		29.54	0	.00	0	.00	0						
	258874	00	01	2-12264-1260	LBR		4452.16	0	404.74	0	.00	0	93.49	0	8.50	0	.00	0
	258874	00	01	2-12264-3100	BEN		1860.86	0	168.38	0	.00	0						
				LABOR TOTALS			45,522.51		4,047.50		.00		1,579.91		141.81		.00	
				BENEFIT TOTALS			19,824.88		1,683.85		.00							
ACEVEDO, JOSE J				4OR-4OPER														
565-84-2266	430432	00	01	1-41118-2180	LBR		55123.82	0	4593.47	0	.00	0	2088.00	0	174.00	0	.00	0
	430432	00	01	1-41118-2360	LBR		3276.25	0	316.79	0	.00	0	82.50	0	8.00	0	.00	0
	430432	00	01	1-41118-3100	BEN		21447.00	0	1789.32	0	.00	0						
	430432	00	01	1-41118-3200	BEN		257.02	0	24.23	0	.00	0						
				LABOR TOTALS			58,400.07		4,910.26		.00		2,170.50		182.00		.00	
				BENEFIT TOTALS			21,704.02		1,813.55		.00							
ACKER, MIKE J																		
556-15-5372	192001	02	01	1-51506-1320	LBR		2707.99	0	123.51	0	.00	0	54.18	0	.00	0	.00	0
	192002	02	01	1-51506-1320	LBR		2707.98	0	123.51	0	.00	0	54.00	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5535.10	0	366.20	0	.00	0	108.00	0	.00	0	.00	0
	192001	02	01	1-51506-3100	BEN		215.77	0	9.84	0	.00	0						
	192002	02	01	1-51506-3100	BEN		215.86	0	9.85	0	.00	0						
	193001	02	01	1-51506-3100	BEN		441.14	0	29.19	0	.00	0						
				LABOR TOTALS			10,951.07		613.22		.00		216.18		.00		.00	
				BENEFIT TOTALS			872.77		48.88		.00							
ADAMS, BRANDON DAVID																		
467-53-3883	193001	02	01	1-41616-1320	LBR		3520.92	0	232.95	0	.00	0	72.00	0	.00	0	.00	0
	193001	02	01	1-41616-3100	BEN		358.08	0	23.69	0	.00	0						

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	194002	02	01	1-41654-3100		BEN	17.44	0	1.17	0	.00	0						
	194003	02	01	1-41654-3100		BEN	17.41	0	1.14	0	.00	0						
	194010	02	01	1-41654-3100		BEN	17.44	0	1.15	0	.00	0						
	174001	03	01	1-41662-1445		LBR	457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41662-3100		BEN	46.50	0	15.50	0	.00	0						
				LABOR TOTALS			13,595.34		2,236.02		.00		214.00		24.00		.00	
				BENEFIT TOTALS			1,382.63		227.40		.00							
ALLEN, ALISHA MARIE				1IT-1NASA														
557-83-2698	280001	00	01	2-14520-2310		LBR	12159.25	0	1188.00	0	.00	0	1164.75	0	108.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	227.39	0	22.22	0	.00	0						
				LABOR TOTALS			12,159.25		1,188.00		.00		1,164.75		108.00		.00	
				BENEFIT TOTALS			227.39		22.22		.00							
ALLEN, DOROTHY JEAN				2AC-2BOOK														
551-44-9526	260001	00	01	1-48226-2350		LBR	134.00	0	134.00	0	.00	0	16.75	0	16.75	0	.00	0
	260001	00	01	1-48226-3200		BEN	13.63	0	13.63	0	.00	0						
				LABOR TOTALS			134.00		134.00		.00		16.75		16.75		.00	
				BENEFIT TOTALS			13.63		13.63		.00							
ALLIE, BARBARA JEAN				-														
571-58-1798	292001	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	292002	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	293001	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	293002	02	01	1-42606-1320		LBR	4605.78	0	304.74	0	.00	0	72.00	0	.00	0	.00	0
	294001	02	01	1-42606-1320		LBR	4812.88	0	1816.57	0	.00	0	72.00	0	24.00	0	.00	0
	292001	02	01	1-42606-3100		BEN	367.09	0	24.29	0	.00	0						
	292002	02	01	1-42606-3100		BEN	367.10	0	24.29	0	.00	0						
	293001	02	01	1-42606-3100		BEN	367.07	0	24.27	0	.00	0						
	293002	02	01	1-42606-3100		BEN	367.10	0	24.29	0	.00	0						
	294001	02	01	1-42606-3100		BEN	383.61	0	144.79	0	.00	0						
				LABOR TOTALS			23,236.00		3,035.53		.00		360.00		24.00		.00	
				BENEFIT TOTALS			1,851.97		241.93		.00							
ALMASI, MAZIAR MICHAEL				1CB-1CTIS														
625-84-3350	130041	00	01	1-41511-2170		LBR	59680.09	10624	5450.23	0	.00	0	1566.00	0	174.00	0	.00	0
	130041	00	01	1-41511-3100		BEN	22301.64	0	1959.63	0	.00	0						
				LABOR TOTALS			59,680.09		5,450.23		.00		1,566.00		174.00		.00	
				BENEFIT TOTALS			22,301.64		1,959.63		.00							
ALMENDAREZ, SUSAN ELLEN				1GU-1ADMR														
549-98-1198	130067	00	01	1-41287-2170		LBR	39123.52	0	3392.09	0	.00	0	2100.76	0	174.00	0	.00	0
	130067	00	01	1-41287-3100		BEN	17941.12	0	1523.05	0	.00	0						

ABR Assistant

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR.PER.
				LABOR TOTALS			39,123.52		3,392.09		.00		2,100.76		174.00		
				BENEFIT TOTALS			17,941.12		1,523.05		.00						
ALSOP, JOHN				2BH-2OTI													
561-08-2947	180001	00	01	2-12249-2310	LBR		323.00	0	323.00	0	.00	0	40.38	0	40.38	0	
	180001	00	01	2-12249-3200	BEN		6.04	0	6.04	0	.00	0					
	180001	00	01	2-12480-2310	LBR		323.00	0	323.00	0	.00	0	40.37	0	40.37	0	
	180001	00	01	2-12480-3200	BEN		6.04	0	6.04	0	.00	0					
				LABOR TOTALS			646.00		646.00		.00		80.75		80.75		
				BENEFIT TOTALS			12.08		12.08		.00						
ALSPAUGH, GAYLE R				4OR-4OPER													
370-46-1133	430080	00	01	1-41139-2180	LBR		34326.21	0	.00	0	.00	0	1305.00	0	.00	0	
	430080	00	01	1-41139-2360	LBR		153.98	0	.00	0	.00	0	3.00	0	.00	0	
	430080	00	01	1-41139-3100	BEN		12726.83	0	.00	0	.00	0					
	430080	00	01	1-41139-3200	BEN		12.13	0	.00	0	.00	0					
	436602	00	01	6-10570-2185	LBR		9923.98	0	.00	0	.00	0	290.02	0	.00	0	.00
	436602	00	01	6-10570-3100	BEN		5145.84	0	.00	0	.00	0					
	436602	00	01	6-10585-2150	LBR		566.32	0	.00	0	.00	0	16.55	0	.00	0	.00
	436602	00	01	6-10585-3100	BEN		373.41	0	.00	0	.00	0					
				LABOR TOTALS			44,970.49		.00		.00		1,614.57		.00		.00
				BENEFIT TOTALS			18,258.21		.00		.00						
ALVARADO, STEVEN FRANK				1BH-1EMTP													
557-15-5389	160001	00	01	1-51142-2350	LBR		192.38	0	.00	0	.00	0	9.50	0	.00	0	.00
	160001	00	01	1-51142-3200	BEN		19.56	0	.00	0	.00	0					
				LABOR TOTALS			192.38		.00		.00		9.50		.00		.00
				BENEFIT TOTALS			19.56		.00		.00						
ALVARADO, WALTER A				2LA-2LART													
572-79-4827	230248	00	01	1-42662-2220	LBR		30358.93	8777	3563.63	0	.00	0	1068.00	0	174.00	0	.00
	230248	00	01	1-42662-3100	BEN		15599.67	4406	1878.82	0	.00	0					
	434503	00	01	1-44358-2170	LBR		3724.32	3160-	.00	0	.00	0	337.41	0	.00	0	.00
	434503	00	01	1-44358-3100	BEN		2339.71	1640-	.00	0	.00	0					
	230246	00	01	1-52362-2170	LBR		336.92	0	.00	0	.00	0	15.82	0	.00	0	.00
	230246	00	01	1-52362-3100	BEN		214.32	0	.00	0	.00	0					
	434503	00	01	2-54370-2170	LBR		6620.82	5617-	.00	0	.00	0	599.81	0	.00	0	.00
	434503	00	01	2-54370-3100	BEN		4309.47	2765-	.00	0	.00	0					
				LABOR TOTALS			41,040.99		3,563.63		.00		2,021.04		174.00		.00
				BENEFIT TOTALS			22,463.17		1,878.82		.00						
ALVAREZ, AUDREY A				4OR-4OPER													
571-08-3719	430147	00	01	1-41120-2180	LBR		53941.13	0	3891.57	0	.00	0	2118.75	0	174.00	0	.00
	430147	00	01	1-41120-3100	BEN		21137.54	0	1682.39	0	.00	0					
	430147	00	01	1-51911-2360	LBR		817.16	0	817.16	0	.00	0	20.50	0	20.50	0	.00

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE / RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE / RLOC	HOURS MO-TO-DATE/ DIRECT	HOURS MO-TO-DATE/ RLOC	HOURS CURR PERIOD DIRECT	HOURS CURR PERIOD RLOC
	291001	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	.00	0
	293003	02	01	1-42760-1330	LBR		74.48	0	4.93	0	.00	0	1.00	0	.00	0	.00	0
	293004	02	01	1-42760-1330	LBR		223.43	0	14.78	0	.00	0	3.00	0	.00	0	.00	0
	294006	02	01	1-42760-1330	LBR		714.99	0	714.99	0	.00	0	8.00	0	8.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		596.16	0	198.72	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		143.47	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		200.73	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		135.09	0	38.49	0	.00	0						
	291001	02	01	1-42760-3100	BEN		746.89	0	.00	0	.00	0						
	291002	02	01	1-42760-3100	BEN		746.88	0	.00	0	.00	0						
	292001	02	01	1-42760-3100	BEN		1238.36	0	66.82	0	.00	0						
	292002	02	01	1-42760-3100	BEN		1238.33	0	66.81	0	.00	0						
	293001	02	01	1-42760-3100	BEN		1705.98	0	66.82	0	.00	0						
	293003	02	01	1-42760-3100	BEN		22.79	0	.95	0	.00	0						
	293004	02	01	1-42760-3100	BEN		68.41	0	2.86	0	.00	0						
	294001	02	01	1-42760-3100	BEN		1170.06	0	381.20	0	.00	0						
	294002	02	01	1-42760-3100	BEN		1170.03	0	381.16	0	.00	0						
	294006	02	01	1-42760-3100	BEN		138.52	0	138.52	0	.00	0						
				LABOR TOTALS			41,239.84		5,903.37		.00		476.00		52.00		.00	
				BENEFIT TOTALS			8,839.70		1,143.63		.00							
AVANCENA, JEOFFREY				1GU-1ADMR														
616-47-2158	180001	00	01	1-41287-2310	LBR		1696.00	1016-	.00	0	.00	0	339.00	0	.00	0	.00	0
	180001	00	01	1-41287-3200	BEN		31.72	19-	.00	0	.00	0						
	180001	00	01	2-51285-2310	LBR		1016.00	1016	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-51285-3200	BEN		19.00	19	.00	0	.00	0						
				LABOR TOTALS			2,712.00		.00		.00		339.00		.00		.00	
				BENEFIT TOTALS			50.72		.00		.00							
AVELLANEDA, SHERYL LAVERN				2AC-2BOOK														
529-64-1020	260001	00	01	1-48226-2350	LBR		412.00	0	.00	0	.00	0	51.50	0	.00	0	.00	0
	260001	00	01	1-48226-3200	BEN		41.89	0	.00	0	.00	0						
				LABOR TOTALS			412.00		.00		.00		51.50		.00		.00	
				BENEFIT TOTALS			41.89		.00		.00							
AVILA-CORTES, RENE				2AC-2CUST														
625-98-6282	230580	00	01	1-42112-2180	LBR		48080.74	0	4006.72	0	.00	0	2094.00	0	174.00	0	.00	0
	230580	00	01	1-42112-2360	LBR		463.65	0	.00	0	.00	0	12.00	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PROGRAM FY=05

FA Coordinator

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS DI
	280001	00	01	2-12684-3200	BEN		205.63	84-	.00	0	.00	0					
				LABOR TOTALS			3,924.00		.00		.00		327.00		.00		
				BENEFIT TOTALS			373.57		.00		.00						
BLOOM, SUSAN LYNN				2ST-2PNAI													
547-02-1768	230139	00	01	1-42272-2170	LBR		55998.72	0	4762.10	0	.00	0	2088.00	0	174.00	0	
	230139	00	01	1-42272-2360	LBR		.00	117-	117.23-	117-	.00	0	3.00	0	.00	0	
	230139	00	01	1-42272-3100	BEN		25555.74	0	2163.19	0	.00	0					
	230139	00	01	1-42272-3200	BEN		.00	9-	9.31-	9-	.00	0					
	230139	00	01	2-12681-2360	LBR		558.54	117	117.23	117	.00	0	10.75	0	.00	0	
	230139	00	01	2-12681-3200	BEN		41.40	9	9.31	9	.00	0					
				LABOR TOTALS			56,557.26		4,762.10		.00		2,101.75		174.00		
				BENEFIT TOTALS			25,597.14		2,163.19		.00						
BLUMENBERG, SUSAN FLORENC				1IT-1NASA													
555-66-0494	180001	00	01	2-14520-2310	LBR		11997.00	0	577.50	0	.00	0	1154.00	0	52.50	0	
	180001	00	01	2-14520-3200	BEN		224.35	0	10.80	0	.00	0					
				LABOR TOTALS			11,997.00		577.50		.00		1,154.00		52.50		
				BENEFIT TOTALS			224.35		10.80		.00						
BOARD LILJENSTOLPE, REBEC				2LA-2ENGL													
560-87-4273	250040	00	01	1-42652-1160	LBR		46336.16	0	4877.98	0	.00	0	1295.98	0	149.97	0	
	250040	00	01	1-42652-3100	BEN		18472.44	0	1735.60	0	.00	0					
	256639	00	01	6-10570-1185	LBR		4545.54	0	.00	0	.00	0	104.00	0	.00	0	.00 0
	256639	00	01	6-10570-3100	BEN		1709.42	0	.00	0	.00	0					
				LABOR TOTALS			50,881.70		4,877.98		.00		1,399.98		149.97		.00
				BENEFIT TOTALS			20,181.86		1,735.60		.00						
BOATMAN, RANDY ALAN																	
549-37-7380	192001	02	01	1-51502-1320	LBR		3911.47	0	178.39	0	.00	0	78.00	0	.00	0	.00 0
	193001	02	01	1-51502-1320	LBR		5535.10	0	366.20	0	.00	0	108.10	0	.00	0	.00 0
	192001	02	01	1-51502-3100	BEN		311.74	0	14.22	0	.00	0					
	193001	02	01	1-51502-3100	BEN		441.14	0	29.19	0	.00	0					
				LABOR TOTALS			9,446.57		544.59		.00		186.10		.00		.00
				BENEFIT TOTALS			752.88		43.41		.00						
BOBROVICH, MARINA VLADIMI				1GU-1CNSL													
605-08-1475	140001	00	01	1-44036-3100	BEN		39.68	39	14.25	14	.00	0					
	140001	00	01	2-31111-2700	LBR		2122.00	0	298.00	0	.00	0	265.25	0	37.25	0	.00 0
	140001	00	01	2-31111-3100	BEN		.00	39-	8.68-	14-	.00	0					
				LABOR TOTALS			2,122.00		298.00		.00		265.25		37.25		.00
				BENEFIT TOTALS			39.68		5.57		.00						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PROGRA
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	D
	200003	00	01	1-42223-3200	BEN		.00	60-	.00	0	.00	0					
	234844	00	01	1-42224-2350	LBR		.00	243-	.00	0	.00	0	13.75	0	.00	0	
	260001	00	01	1-42224-2350	LBR		.00	395-	.00	0	.00	0	25.50	0	.00	0	
	260002	00	01	1-42224-2350	LBR		.00	99-	.00	0	.00	0	2.75	0	.00	0	
	234844	00	01	1-42224-2355	LBR		.00	1158-	.00	0	.00	0	65.40	0	.00	0	
	234844	00	01	1-42224-3200	BEN		.00	89-	.00	0	.00	0					
	260001	00	01	1-42224-3200	BEN		.00	40-	.00	0	.00	0					
	260002	00	01	1-42224-3200	BEN		.00	7-	.00	0	.00	0					
				LABOR TOTALS			2,493.19		.00		.00		145.90		.00		
				BENEFIT TOTALS			253.56		.00		.00						
BOOYE, MARILYN				4HA-4HURS													
545-49-3016	430077	00	01	1-44062-2170	LBR		64350.91	0	5362.58	0	.00	0	2088.00	0	174.00	0	
	430077	00	01	1-44062-3100	BEN		27125.01	0	2260.41	0	.00	0					
				LABOR TOTALS			64,350.91		5,362.58		.00		2,088.00		174.00		
				BENEFIT TOTALS			27,125.01		2,260.41		.00						
BORELLA, DIANE JEANNE				2CO-2TSTG													
572-66-1420	260008	00	01	1-42226-2350	LBR		689.49	1205-	.00	0	.00	0	193.75	0	.00	0	
	260008	00	01	1-42226-3200	BEN		70.13	122-	.00	0	.00	0					
	260008	00	01	1-48410-2350	LBR		1205.39	1205	.00	0	.00	0	.00	0	.00	0	
	260008	00	01	1-48410-3200	BEN		122.62	122	.00	0	.00	0					
				LABOR TOTALS			1,894.88		.00		.00		193.75		.00		
				BENEFIT TOTALS			192.75		.00		.00						
BORELLI, DEBORAH LYNN				1SS-1BSDV													
381-70-3519	130129	00	01	1-41803-2170	LBR		1385.85	0	.00	0	.00	0	55.36	0	.00	0	
	130129	00	01	1-41803-3100	BEN		210.29	0	.00	0	.00	0					
	130129	00	01	6-10585-2150	LBR		2956.25	0	.00	0	.00	0	118.10	0	.00	0	
	130129	00	01	6-10585-3100	BEN		448.56	0	.00	0	.00	0					
				LABOR TOTALS			4,342.10		.00		.00		173.46		.00		
				BENEFIT TOTALS			658.85		.00		.00						
BORELLI, DENNIS				2AB-2CASH													
016-34-7897	220148	00	01	1-42149-2170	LBR		30437.00	0	.00	0	.00	0	882.75	0	.00	0	
	220148	00	01	1-42149-2360	LBR		109.50	0	.00	0	.00	0	3.13	0	.00	0	
	220148	00	01	1-42149-3100	BEN		11313.12	0	.00	0	.00	0					
	220148	00	01	6-10585-2150	LBR		8769.71	0	.00	0	.00	0	250.67	0	.00	0	.00 0
	220148	00	01	6-10585-3100	BEN		2038.46	0	.00	0	.00	0					
				LABOR TOTALS			39,316.21		.00		.00		1,136.55		.00		.00
				BENEFIT TOTALS			13,351.58		.00		.00						
BOSMANN, LIZALOU T				1BH-1EMT													
618-03-1541	160001	00	01	1-51820-2350	LBR		4327.50	0	1102.50	0	.00	0	144.25	0	36.75	0	.00 0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
BOWERS, SHELLY L				1GU-1ADMR														
557-23-9025	130103	00	01	1-41287-2170	LBR		47291.71	0	3881.50	0	.00	0	2088.00	0	174.00	0	.00	0
	130103	00	01	1-41287-3100	BEN		24071.71	0	1993.36	0	.00	0						
				LABOR TOTALS			47,291.71		3,881.50		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			24,071.71		1,993.36		.00							
BOWERSOX, VIRGINIA R				2CO-2TSTG														
104-22-3891	260008	00	01	1-42226-2350	LBR		1091.06	1287-	.00	0	.00	0	199.00	0	.00	0	.00	0
	260008	00	01	1-42226-3200	BEN		111.81	130-	.00	0	.00	0						
	260008	00	01	1-48410-2350	LBR		1287.00	1287	.00	0	.00	0	.00	0	.00	0	.00	0
	260008	00	01	1-48410-3200	BEN		130.00	130	.00	0	.00	0						
				LABOR TOTALS			2,378.06		.00		.00		199.00		.00		.00	
				BENEFIT TOTALS			241.81		.00		.00							
BOWMAN, RONALD E																		
500-40-0110	292001	02	01	1-42760-1320	LBR		4812.91	0	318.44	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		4812.91	0	318.44	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4812.87	0	318.42	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5010.66	0	1891.24	0	.00	0	60.00	0	20.00	0	.00	0
	292001	02	01	1-42760-3100	BEN		383.57	0	25.38	0	.00	0						
	292002	02	01	1-42760-3100	BEN		383.64	0	25.39	0	.00	0						
	293001	02	01	1-42760-3100	BEN		383.60	0	25.36	0	.00	0						
	294001	02	01	1-42760-3100	BEN		399.38	0	150.75	0	.00	0						
				LABOR TOTALS			19,449.35		2,846.54		.00		240.00		20.00		.00	
				BENEFIT TOTALS			1,550.19		226.88		.00							
BOYD, MICHELLE CHRISTINE				1FA-IF A														
572-99-0514	180001	00	01	1-48121-2310	LBR		1680.00	1680	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-48121-3200	BEN		31.41	31	.00	0	.00	0						
	180001	00	01	1-51618-2310	LBR		1207.50	1830-	295.00	0	.00	0	303.75	0	29.50	0	.00	0
	180001	00	01	1-51618-2320	LBR		187.50	0	7.50	0	.00	0	12.50	0	.50	0	.00	0
	180001	00	01	1-51618-2360	LBR		110.00	0	.00	0	.00	0	5.50	0	.00	0	.00	0
	180001	00	01	1-51618-3200	BEN		28.16	34-	5.66	0	.00	0						
	180001	00	01	1-51643-2310	LBR		.00	0	150.00-	150-	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-51643-3200	BEN		.00	0	2.81-	2-	.00	0						
	180001	00	01	2-11028-2310	LBR		150.00	150	150.00	150	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-11028-3200	BEN		2.81	2	2.81	2	.00	0						
	180001	00	01	6-18231-0000	LBR		960.00	960	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	51	6-18231-0000	LBR		960.00-	960-	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	6-18320-3100	BEN		17.95	17	.00	0	.00	0						
	180001	00	51	6-18320-3100	BEN		17.95-	17-	.00	0	.00	0						
				LABOR TOTALS			3,335.00		302.50		.00		321.75		30.00		.00	
				BENEFIT TOTALS			62.38		5.66		.00							
BOYETT, DOUGLAS A				1PE-1H P														

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	293001	02	01	1-42606-1320	LBR		4171.38	0	276.00	0	.00	0	48.00	0	.00	0	.00	0
	293003	03	01	1-42606-1320	LBR		333.70	0	22.07	0	.00	0	3.84	0	.00	0	.00	0
	291001	02	01	1-42606-3100	BEN		289.88	0	.00	0	.00	0						
	292001	02	01	1-42606-3100	BEN		332.45	0	21.99	0	.00	0						
	292004	03	01	1-42606-3100	BEN		56.52	0	3.75	0	.00	0						
	293001	02	01	1-42606-3100	BEN		332.46	0	22.01	0	.00	0						
	293003	03	01	1-42606-3100	BEN		26.60	0	1.75	0	.00	0						
	273001	03	01	1-42626-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42626-3100	BEN		47.52	0	.00	0	.00	0						
	291002	02	01	1-42804-1320	LBR		4545.42	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42804-1320	LBR		5213.03	0	344.90	0	.00	0	48.00	0	.00	0	.00	0
	292003	02	01	1-42804-1320	LBR		5213.03	0	344.90	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42804-1320	LBR		5213.04	0	344.91	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42804-3100	BEN		362.29	0	.00	0	.00	0						
	292002	02	01	1-42804-3100	BEN		415.47	0	27.49	0	.00	0						
	292003	02	01	1-42804-3100	BEN		415.49	0	27.49	0	.00	0						
	293002	02	01	1-42804-3100	BEN		415.46	0	27.49	0	.00	0						
				LABOR TOTALS			34,399.59		2,251.85		.00		386.04		12.00		.00	
				BENEFIT TOTALS			2,741.67		179.50		.00							
BRESNAN, PATRICK S				2SS-2HIST														
324-30-9111	250089	00	01	1-42806-1105	LBR		7500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250089	00	01	1-42806-1160	LBR		47312.53	0	4731.25	0	.00	0	840.00	0	84.00	0	.00	0
	291001	02	01	1-42806-1320	LBR		5354.34	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	250089	00	01	1-42806-3100	BEN		13298.55	0	1230.14	0	.00	0						
	291001	02	01	1-42806-3100	BEN		584.04	17	.00	0	.00	0						
	250089	00	01	1-42820-1105	LBR		5000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250089	00	01	1-42820-1160	LBR		31541.57	0	3154.16	0	.00	0	560.00	0	56.00	0	.00	0
	292001	02	01	1-42820-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42820-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0	.00	0
	250089	00	01	1-42820-3100	BEN		11111.49	0	820.10	0	.00	0						
	292001	02	01	1-42820-3100	BEN		113.67	0	7.52	0	.00	0						
	292002	02	01	1-42820-3100	BEN		113.63	0	7.52	0	.00	0						
				LABOR TOTALS			105,728.48		8,482.17		.00		1,544.00		140.00		.00	
				BENEFIT TOTALS			25,221.38		2,065.28		.00							
BREWER, PAMELA S				1GU-1ADMR														
570-94-1805	130195	00	01	1-41287-2170	LBR		3819.72	0	330.71	0	.00	0	182.94	0	14.85	0	.00	0
	130195	00	01	1-41287-3100	BEN		2011.77	0	170.65	0	.00	0						
	130195	00	01	2-11423-2170	LBR		37631.99	6271	3541.88	0	.00	0	1445.40	0	159.15	0	.00	0
	130195	00	01	2-11423-3100	BEN		19779.79	3372	1827.72	0	.00	0						
	130195	00	01	2-11651-2170	LBR		3277.80	3287-	.00	0	.00	0	318.32	0	.00	0	.00	0
	130195	00	01	2-11651-3100	BEN		1766.30	1768-	.00	0	.00	0						
	130195	00	01	6-51217-0000	LBR		3287.26	3287	.00	0	.00	0	.00	0	.00	0	.00	0
	130195	00	11	6-51217-0000	LBR		3287.26-	3287-	.00	0	.00	0	.00	0	.00	0	.00	0
	130195	00	01	6-51310-3100	BEN		1768.29	1768	.00	0	.00	0						
	130195	00	11	6-51310-3100	BEN		1768.29-	1768-	.00	0	.00	0						

A&R Assistant

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
				LABOR TOTALS			44,729.51		3,872.59		.00		1,946.66		174.00		.00	
				BENEFIT TOTALS			23,557.86		1,998.37		.00							
BREWSTER, MICHELLE S				2BH-2ENVS														
568-85-6477	280001	00	01	1-48700-2310	LBR		1041.25	0	280.00	0	.00	0	119.00	0	32.00	0		
	280001	00	01	1-48700-3200	BEN		19.47	0	5.24	0	.00	0						
				LABOR TOTALS			1,041.25		280.00		.00		119.00		32.00			
				BENEFIT TOTALS			19.47		5.24		.00							
BRIEN, RICHARD HERMAN				-														
454-58-6726	293002	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294002	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294003	03	01	1-42021-1430	LBR		100.00	0	100.00	0	.00	0	2.00	0	2.00	0		
	293002	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294002	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294003	03	01	1-42021-3200	BEN		7.72	0	7.72	0	.00	0						
	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		7.72	0	.00	0	.00	0						
	291001	02	01	1-42502-1320	LBR		5096.34	0	.00	0	.00	0	60.00	0	.00	0		
	292001	02	01	1-42502-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	293001	02	01	1-42502-1320	LBR		5407.62	0	357.78	0	.00	0	60.00	0	.00	0		
	294001	02	01	1-42502-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	272001	03	01	1-42502-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42502-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42502-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42502-3100	BEN		47.74	0	.00	0	.00	0						
	273001	03	01	1-42502-3100	BEN		47.73	0	.00	0	.00	0						
	274001	03	01	1-42502-3100	BEN		47.73	0	15.91	0	.00	0						
	291001	02	01	1-42502-3100	BEN		393.44	0	.00	0	.00	0						
	292001	02	01	1-42502-3100	BEN		417.48	0	27.63	0	.00	0						
	293001	02	01	1-42502-3100	BEN		417.44	0	27.60	0	.00	0						
	294001	02	01	1-42502-3100	BEN		417.47	0	157.58	0	.00	0						
				LABOR TOTALS			23,574.29		3,062.73		.00		284.00		26.00			
				BENEFIT TOTALS			1,819.91		236.44		.00							
BRIGGS, MARCIA E				-														
570-90-2899	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42606-1320	LBR		5812.27	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	291002	02	01	1-42606-1320	LBR		5812.26	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	292001	02	01	1-42606-1320	LBR		5213.03	0	344.90	0	.00	0	72.00	0	.00	0	.00	0
	292002	02	01	1-42606-1320	LBR		5213.03	0	344.90	0	.00	0	72.00	0	.00	0	.00	0
	293001	02	01	1-42606-1320	LBR		5213.04	0	344.91	0	.00	0	72.00	0	.00	0	.00	0
	293002	02	01	1-42606-1320	LBR		5213.04	0	344.91	0	.00	0	72.00	0	.00	0	.00	0
	294001	02	01	1-42606-1320	LBR		5213.04	0	1967.62	0	.00	0	72.00	0	24.00	0	.00	0
	272001	03	01	1-42606-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
				BENEFIT TOTALS			25,866.50		2,500.29		.00							
BUNCE, DANIEL J				-														
548-75-9928	293002	02	01	1-42808-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	294002	02	01	1-42808-1320	LBR		4867.32	0	1837.12	0	.00	0	48.00	0	16.00	0	.00	0
	293002	02	01	1-42808-3100	BEN		1213.98	0	65.52	0	.00	0						
	294002	02	01	1-42808-3100	BEN		1139.48	0	373.84	0	.00	0						
	291001	02	01	1-42820-1320	LBR		4587.16	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42820-1320	LBR		4587.16	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42820-1320	LBR		4867.34	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42820-1320	LBR		4867.33	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	292003	03	01	1-42820-1320	LBR		389.38	0	25.76	0	.00	0	3.84	0	.00	0	.00	0
	293001	02	01	1-42820-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42820-1320	LBR		4867.32	0	1837.12	0	.00	0	48.00	0	16.00	0	.00	0
	272001	03	01	1-42820-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42820-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42820-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42820-3100	BEN		152.32	0	.00	0	.00	0						
	273001	03	01	1-42820-3100	BEN		156.24	0	.00	0	.00	0						
	274001	03	01	1-42820-3100	BEN		146.10	0	41.94	0	.00	0						
	291001	02	01	1-42820-3100	BEN		572.02	0	.00	0	.00	0						
	291002	02	01	1-42820-3100	BEN		572.05	0	.00	0	.00	0						
	292001	02	01	1-42820-3100	BEN		1185.10	0	65.53	0	.00	0						
	292002	02	01	1-42820-3100	BEN		1185.14	0	65.54	0	.00	0						
	292003	03	01	1-42820-3100	BEN		88.36	0	5.24	0	.00	0						
	293001	02	01	1-42820-3100	BEN		1214.01	0	65.53	0	.00	0						
	294001	02	01	1-42820-3100	BEN		1139.48	0	373.83	0	.00	0						
				LABOR TOTALS			40,622.75		5,194.22		.00		423.84		36.00		.00	
				BENEFIT TOTALS			8,764.28		1,056.97		.00							
BURANEK, BEVERLY A				1AA-1IEDR														
327-40-7174	130033	00	01	1-41362-2170	LBR		59056.70	0	5314.27	0	.00	0	2111.32	0	179.25	0	.00	0
	130033	00	01	1-41362-2360	LBR		6455.35	0	160.34	0	.00	0	207.00	0	5.25	0	.00	0
	130033	00	01	1-41362-3100	BEN		26800.53	0	2304.25	0	.00	0						
	130033	00	01	1-41362-3200	BEN		498.61	0	12.09	0	.00	0						
				LABOR TOTALS			65,512.05		5,474.61		.00		2,318.32		184.50		.00	
				BENEFIT TOTALS			27,299.14		2,316.34		.00							
BURFINE, MARYALICE S				2ST-2ADMI														
562-58-1761	230316	00	01	1-42287-2170	LBR		49935.50	0	4161.29	0	.00	0	2088.00	0	174.00	0	.00	0
	230316	00	01	1-42287-3100	BEN		20234.55	0	1686.22	0	.00	0						
				LABOR TOTALS			49,935.50		4,161.29		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			20,234.55		1,686.22		.00							
BURGUNDER, JANE E				-														
206-44-1333	292001	02	01	1-42606-1320	LBR		4812.91	0	318.44	0	.00	0	72.00	0	.00	0	.00	0

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
	191004	02	01	1-41250-1320	LBR		1770.60	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	191005	02	01	1-41250-1320	LBR		1770.61	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	194001	02	01	1-41250-1320	LBR		1492.12	0	98.72	0	.00	0	12.00	0	.00	0	.00	0
	191002	02	01	1-41250-3100	BEN		212.93	0	.00	0	.00	0						
	191003	02	01	1-41250-3100	BEN		141.19	0	.00	0	.00	0						
	191004	02	01	1-41250-3100	BEN		141.18	0	.00	0	.00	0						
	191005	02	01	1-41250-3100	BEN		70.07	0	.00	0	.00	0						
	194001	02	01	1-41250-3100	BEN		59.00	0	3.90	0	.00	0						
	193001	02	01	2-21231-1320	LBR		3129.69	0	207.06	0	.00	0	36.00	0	.00	0	.00	0
	191008	03	01	2-21231-1430	LBR		4769.20	0	.00	0	.00	0	96.00	0	.00	0	.00	0
	193001	02	01	2-21231-3100	BEN		123.75	0	8.19	0	.00	0						
	191008	03	01	2-21231-3200	BEN		600.28	27	.00	0	.00	0						
	150015	00	01	2-21295-1205	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150015	00	01	2-21295-1260	LBR		77787.43	0	7778.74	0	.00	0	1330.00	0	133.00	0	.00	0
	150015	00	01	2-21295-3100	BEN		24594.29	0	2157.57	0	.00	0						
				LABOR TOTALS			96,260.86		8,084.52		.00		1,522.00		133.00		.00	
				BENEFIT TOTALS			25,942.69		2,169.66		.00							
CASTANO, WILFRED Q				2CA-2PHTG														
526-66-3868	250042	00	01	1-42636-1105	LBR		8750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250042	00	01	1-42636-1160	LBR		81881.50	0	8188.15	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291003	02	01	1-42636-1320	LBR		4949.90	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42636-1320	LBR		4316.82	0	285.60	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42636-1320	LBR		4171.39	0	275.99	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42636-1320	LBR		2233.50	0	147.78	0	.00	0	36.00	0	.00	0	.00	0
	250042	00	01	1-42636-3100	BEN		26126.52	0	2212.28	0	.00	0						
	291001	02	01	1-42636-3100	BEN		644.54	49	.00	0	.00	0						
	291002	02	01	1-42636-3100	BEN		595.28	0	.00	0	.00	0						
	291003	02	01	1-42636-3100	BEN		595.25	0	.00	0	.00	0						
	292001	02	01	1-42636-3100	BEN		170.90	0	11.35	0	.00	0						
	292002	02	01	1-42636-3100	BEN		165.14	0	10.95	0	.00	0						
	293001	02	01	1-42636-3100	BEN		88.54	0	5.86	0	.00	0						
				LABOR TOTALS			116,202.91		8,897.52		.00		1,688.00		140.00		.00	
				BENEFIT TOTALS			28,386.17		2,240.44		.00							
CASTILLO, CINDY				2ST-2FNAI														
547-76-4892	210024	00	01	1-42272-2105	LBR		2500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	210024	00	01	1-42272-2110	LBR		93840.44	0	7820.04	0	.00	0	2088.00	0	174.00	0	.00	0
	210024	00	01	1-42272-3100	BEN		29690.28	0	2462.30	0	.00	0						
				LABOR TOTALS			96,340.44		7,820.04		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			29,690.28		2,462.30		.00							
CASTILLO, CLAIRE LOPEZ				1IT-1NASA														
573-81-9714	280001	00	01	2-14520-2310	LBR		6585.00	0	.00	0	.00	0	658.50	0	.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 141
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	273001	03	01	1-42656-3100	BEN		64.35	0	.00	0	.00	0						
	274001	03	01	1-42656-3100	BEN		67.26	0	22.42	0	.00	0						
	292001	02	01	1-42656-3100	BEN		337.90	0	22.35	0	.00	0						
	292002	02	01	1-42656-3100	BEN		337.89	0	22.36	0	.00	0						
	292003	02	01	1-42656-3100	BEN		337.92	0	22.37	0	.00	0						
	293001	02	01	1-42656-3100	BEN		337.91	0	22.35	0	.00	0						
	293002	02	01	1-42656-3100	BEN		337.86	0	22.35	0	.00	0						
	294001	02	01	1-42656-3100	BEN		1220.75	0	460.76	0	.00	0						
				LABOR TOTALS			24,892.38		4,868.72		.00		324.00		44.00			
				BENEFIT TOTALS			3,041.84		594.96		.00							
CHACON, BEATRIZ CORONADO				1SM-1FAID														
558-06-5609	110010	00	01	1-41272-1210	LBR		8927.99	0	3289.26	0	.00	0	236.14	0	87.00	0		
	110010	00	01	1-41272-3100	BEN		2879.84	0	1281.14	0	.00	0						
	110010	00	01	1-41378-1210	LBR		8928.02	0	3289.27	0	.00	0	236.15	0	87.00	0		
	110010	00	01	1-41378-3100	BEN		2879.90	0	1281.15	0	.00	0						
				LABOR TOTALS			17,856.01		6,578.53		.00		472.29		174.00			
				BENEFIT TOTALS			5,759.74		2,562.29		.00							
CHADDA, AMARJIT S																		
565-84-1284	191001	02	01	1-41760-1320	LBR		6005.82	0	.00	0	.00	0	60.00	0	.00	0		
	192001	02	01	1-41760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0		
	194001	02	01	1-41760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0		
	194002	02	01	1-41760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0		
	172001	03	01	1-41760-1445	LBR		596.16	0	.00	0	.00	0	12.00	0	.00	0		
	174001	03	01	1-41760-1445	LBR		596.16	0	198.72	0	.00	0	12.00	0	4.00	0		
	172001	03	01	1-41760-3100	BEN		23.66	0	.00	0	.00	0						
	174001	03	01	1-41760-3100	BEN		23.67	0	7.89	0	.00	0						
	191001	02	01	1-41760-3100	BEN		238.43	0	.00	0	.00	0						
	192001	02	01	1-41760-3100	BEN		206.97	0	13.69	0	.00	0						
	194001	02	01	1-41760-3100	BEN		206.95	0	78.11	0	.00	0						
	194002	02	01	1-41760-3100	BEN		206.97	0	78.11	0	.00	0						
				LABOR TOTALS			22,837.25		4,478.86		.00		264.00		44.00			
				BENEFIT TOTALS			906.65		177.80		.00							
CHAE, JAE WOO				2AC-2BOOK														
625-49-0292	280001	00	01	1-48226-2310	LBR		168.75	0	168.75	0	.00	0	25.00	0	25.00	0		
	280001	00	01	1-48226-3200	BEN		3.16	0	3.16	0	.00	0						
				LABOR TOTALS			168.75		168.75		.00		25.00		25.00			
				BENEFIT TOTALS			3.16		3.16		.00							
CHAI, CHRISTINE SEUNG-EUN				2LA-2RDNS														
560-85-4795	260001	00	01	1-42211-2350	LBR		160.55	160	.00	0	.00	0	.00	0	.00	0		
	260001	00	01	1-42211-3200	BEN		6.37	6	.00	0	.00	0						
	260001	00	01	1-42224-2350	LBR		.00	160-	.00	0	.00	0	3.50	0	.00	0		

No title given - only need for averages - no actual hrs for this employee

1210 = CE MGR SAL NONINSTR

17,856•01 +
5,759•74 +
23,615•75 *
0• C
472•29 X
86• %
406•1694 *
0• C
23,615•75 ÷
406• =
58•16687192 *
58.17
0• C
50•00 *
0• C

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC	CURR-PERIOD HOURS DIRECT	CURR-PERIOD HOURS RLOC
				BENEFIT TOTALS			197.54		74.56		.00							
CHANG, SAMANTHA HEE				2PS-2CHEM														
626-32-4020	280002	00	01	1-42754-2310		LBR	1916.27	0	97.50	0	.00	0	255.50	0	13.00	0	.00	0
	280002	00	01	1-42754-3200		BEN	41.27	0	1.82	0	.00	0						
				LABOR TOTALS			1,916.27		97.50		.00		255.50		13.00		.00	
				BENEFIT TOTALS			41.27		1.82		.00							
CHANG, SANSAN				1CB-1CTIS														
274-88-3482	180001	00	01	2-11016-2310		LBR	1840.00	360-	.00	0	.00	0	220.00	0	.00	0	.00	0
	180001	00	01	2-11016-2200		BEN	34.41	6-	.00	0	.00	0						
				LABOR TOTALS			1,840.00		.00		.00		220.00		.00		.00	
				BENEFIT TOTALS			34.41		.00		.00							
CHANG, WEN-YEN EDDIE				2LA-2TUTR														
603-47-2570	280001	00	01	1-42220-2410		LBR	88.00	0	.00	0	.00	0	11.00	0	.00	0	.00	0
	280001	00	01	1-42220-3200		BEN	1.65	0	.00	0	.00	0						
				LABOR TOTALS			88.00		.00		.00		11.00		.00		.00	
				BENEFIT TOTALS			1.65		.00		.00							
CHAO, CAROL				1IT-1NASA														
044-72-2438	180001	00	01	2-14520-2310		LBR	2760.00	0	1040.00	0	.00	0	276.00	0	104.00	0	.00	0
	180001	00	01	2-14520-3200		BEN	51.62	0	19.45	0	.00	0						
				LABOR TOTALS			2,760.00		1,040.00		.00		276.00		104.00		.00	
				BENEFIT TOTALS			51.62		19.45		.00							
CHAO, CHOI TENG				1SS-1ACTG														
614-43-7705	180002	00	01	1-41046-2310		LBR	236.00	0	.00	0	.00	0	29.50	0	.00	0	.00	0
	180002	00	01	1-41046-3200		BEN	4.41	0	.00	0	.00	0						
	180001	00	01	1-41095-2410		LBR	1812.38	0	.00	0	.00	0	268.50	0	.00	0	.00	0
	180001	00	01	1-41095-3200		BEN	33.89	0	.00	0	.00	0						
	180003	00	01	1-41287-2310		LBR	1352.00	0	.00	0	.00	0	169.00	0	.00	0	.00	0
	180003	00	01	1-41287-3200		BEN	25.29	0	.00	0	.00	0						
				LABOR TOTALS			3,400.38		.00		.00		467.00		.00		.00	
				BENEFIT TOTALS			63.59		.00		.00							
CHAO, NANCY TU-NING				2AB-2CASH														
548-15-8976	220148	00	01	1-42149-2170		LBR	11429.66	0	5714.83	0	.00	0	353.63	0	179.63	0	.00	0
	220148	00	01	1-42149-2360		LBR	98.53	0	98.53	0	.00	0	2.00	0	2.00	0	.00	0
	220148	00	01	1-42149-3100		BEN	3955.90	0	1979.99	0	.00	0						
	220148	00	01	1-42149-3200		BEN	7.03	0	7.03	0	.00	0						
	430046	00	01	1-44046-2170		LBR	50841.21	0	.00	0	.00	0	1619.72	0	.00	0	.00	0
	430046	00	01	1-44046-3100		BEN	17832.77	0	.00	0	.00	0						
	430046	00	01	2-14610-2170		LBR	3768.41	0	.00	0	.00	0	120.28	0	.00	0	.00	0

Cashiering Supervisor

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC	
	430046	00	01	2-14610-3100	BEN		1321.79	0	.00	0	.00	0							
				LABOR TOTALS			66,137.81		5,813.36		.00		2,095.63		1				
				BENEFIT TOTALS			23,117.49		1,987.02		.00								0• C
CHAPMAN, CAROLE				2LS-2LIB															
571-25-2128	230198	00	01	1-42306-2170	LBR		61653.51	0	5137.79	0	.00	0	2088.00	0	1				66,137•81 +
	230198	00	01	1-42306-3100	BEN		27200.87	0	2266.74	0	.00	0							23,117•49 +
				LABOR TOTALS			61,653.51		5,137.79		.00		2,088.00		1				89,255•30 *
				BENEFIT TOTALS			27,200.87		2,266.74		.00								
CHAR, DORIS				2CO-2TSTG															
538-32-1785	260002	00	01	1-42226-2350	LBR		2174.91	0	513.85	0	.00	0	182.00	0					0• C
	260002	00	01	1-42226-3200	BEN		221.21	0	52.27	0	.00	0							
				LABOR TOTALS			2,174.91		513.85		.00		182.00						89,255•3 +
				BENEFIT TOTALS			221.21		52.27		.00								98•53 −
CHARUKESNANT, SARAH MEILY																			89,156•77 *
563-75-0249	294001	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0					
	274001	03	01	1-42662-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0					
	274001	03	01	1-42662-3100	BEN		55.86	0	18.62	0	.00	0							89,156•77 ÷
	294001	02	01	1-42662-3100	BEN		549.75	0	207.50	0	.00	0							1,800• =
				LABOR TOTALS			4,955.94		1,850.42		.00		72.00						49•53153 *
				BENEFIT TOTALS			605.61		226.12		.00								
CHATSIRICHAI, NATHEE				1FS-1CFI															0• C
510-13-5185	160001	00	01	1-48305-2350	LBR		1290.60	0	.00	0	.00	0	108.00	0	.00	0	.00	0	
	160001	00	01	1-48305-3200	BEN		131.26	0	.00	0	.00	0							
				LABOR TOTALS			1,290.60		.00		.00		108.00		.00		.00		
				BENEFIT TOTALS			131.26		.00		.00								
CHAU, BICH NGOC				2AC-2BOOK															
603-48-9803	280001	00	01	1-48226-2310	LBR		3315.95	0	335.81	0	.00	0	491.25	0	49.75	0	.00	0	
	280001	00	01	1-48226-3200	BEN		62.00	0	6.28	0	.00	0							
				LABOR TOTALS			3,315.95		335.81		.00		491.25		49.75		.00		
				BENEFIT TOTALS			62.00		6.28		.00								
CHAU, WAI				2AC-2BOOK															
621-47-5196	280001	00	01	1-48226-2310	LBR		175.50	0	.00	0	.00	0	26.00	0	.00	0	.00	0	
	280001	00	01	1-48226-3200	BEN		3.29	0	.00	0	.00	0							
	280002	00	01	1-48228-2310	LBR		887.63	0	.00	0	.00	0	131.50	0	.00	0	.00	0	
	280002	00	01	1-48228-3200	BEN		16.59	0	.00	0	.00	0							
				LABOR TOTALS			1,063.13		.00		.00		157.50		.00		.00		

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REP PRO F

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC
CHEN, HSIN TSUNG				2AC-2BOOK												
626-64-9410	280004	00	01	1-48226-2310	LBR		121.50	0	.00	0	.00	0	18.00	0	.00	0
	280004	00	01	1-48226-3200	BEN		11.56	0	.00	0	.00	0				
	280006	00	01	2-12919-2310	LBR		345.00	0	.00	0	.00	0	46.00	0	.00	0
	280006	00	01	2-12919-3200	BEN		32.84	0	.00	0	.00	0				
				LABOR TOTALS			466.50		.00		.00		64.00		.00	
				BENEFIT TOTALS			44.40		.00		.00					
CHEN, I				1SM-1FAID												
456-63-5850	132214	00	01	2-11684-2170	LBR		33987.72	0	3919.15	0	.00	0	1557.71	0	174.00	0
	132214	00	01	2-11684-2360	LBR		949.58	0	.00	0	.00	0	29.00	0	.00	0
	132214	00	01	2-11684-3100	BEN		16075.16	0	1951.05	0	.00	0				
	132214	00	01	2-11684-3200	BEN		73.77	0	.00	0	.00	0				
				LABOR TOTALS			34,937.30		3,919.15		.00		1,586.71		174.00	
				BENEFIT TOTALS			16,148.93		1,951.05		.00					
CHEN, JANE JAO RONG				-												
358-60-4657	194001	02	01	1-41654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0
	194001	02	01	1-41654-3100	BEN		355.57	0	134.20	0	.00	0				
	174001	03	01	1-41656-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.00	0
	174001	03	01	1-41656-3100	BEN		40.65	0	13.55	0	.00	0				
				LABOR TOTALS			5,132.46		1,913.98		.00		72.00		24.00	
				BENEFIT TOTALS			396.22		147.75		.00					
CHEN, LI-CHIH WANG				-												
613-28-1776	292001	02	01	2-62350-1440	LBR		356.27	0	.00	0	.00	0	20.50	0	.00	0
	293001	02	01	2-62350-1440	LBR		260.70	0	.00	0	.00	0	15.00	0	.00	0
	293002	02	01	2-62350-1440	LBR		82.56	0	.00	0	.00	0	4.75	0	.00	0
	293003	02	01	2-62350-1440	LBR		86.90	0	.00	0	.00	0	5.00	0	.00	0
	294001	02	01	2-62350-1440	LBR		260.70	0	.00	0	.00	0	15.00	0	.00	0
	294002	02	01	2-62350-1440	LBR		252.01	0	252.01	0	.00	0	14.50	0	14.50	0
	292001	02	01	2-62350-3200	BEN		27.49	0	.00	0	.00	0				
	293001	02	01	2-62350-3200	BEN		20.13	0	.00	0	.00	0				
	293002	02	01	2-62350-3200	BEN		6.38	0	.00	0	.00	0				
	293003	02	01	2-62350-3200	BEN		6.71	0	.00	0	.00	0				
	294001	02	01	2-62350-3200	BEN		20.13	0	.00	0	.00	0				
	294002	02	01	2-62350-3200	BEN		19.45	0	19.45	0	.00	0				
	292002	02	01	2-62352-1440	LBR		104.27	0	.00	0	.00	0	6.00	0	.00	0
	293004	02	01	2-62352-1440	LBR		104.28	0	.00	0	.00	0	6.00	0	.00	0
	292002	02	01	2-62352-3200	BEN		8.06	0	.00	0	.00	0				
	293004	02	01	2-62352-3200	BEN		8.05	0	.00	0	.00	0				
	260003	00	01	2-62404-2350	LBR		743.52	0	.00	0	.00	0	48.00	0	.00	0
	260003	00	01	2-62404-3200	BEN		75.61	0	.00	0	.00	0				
				LABOR TOTALS			2,251.21		252.01		.00		134.75		14.50	

FA Outreach Coordinator

0• C

34,937•3 +
16,148•93 +
51,086•23 *

51,086•23 +
949•58 −
50,136•65 *

0• C

1,586•71 +
29• −
1,557•71 *

1,557•71 %
86• %
1,339•6306 *
1,340
0• C

50,136•65 ÷
1,340• =
37•41541044 *
37.42
0• C

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
				LABOR TOTALS			3,940.14		330.88		.00		565.25		45.50		.00	
				BENEFIT TOTALS			73.68		6.19		.00							
CHEN, YUFEN				2AC-2CMPS														
605-51-6471	280001	00	01	1-48224-2310		LBR	177.19	0	70.88	0	.00	0	26.25	0	10.50	0	.00	0
	280001	00	01	1-48224-3200		BEN	3.32	0	1.33	0	.00	0						
				LABOR TOTALS			177.19		70.88		.00		26.25		10.50		.00	
				BENEFIT TOTALS			3.32		1.33		.00							
CHENEY, ERIN JOAN																		
568-35-8808	192001	02	01	1-41451-1320		LBR	942.62	0	62.37	0	.00	0	18.00	0	.00	0	.00	0
	192002	02	01	1-41451-1320		LBR	784.19	0	51.88	0	.00	0	15.00	0	.00	0	.00	0
	193001	02	01	1-41451-1320		LBR	1885.23	0	124.74	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	1-41451-1320		LBR	1885.23	0	124.74	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41451-1320		LBR	1885.23	0	711.57	0	.00	0	36.00	0	12.00	0	.00	0
	194002	02	01	1-41451-1320		LBR	1885.23	0	711.57	0	.00	0	36.00	0	12.00	0	.00	0
	192001	02	01	1-41451-3100		BEN	75.12	0	4.97	0	.00	0						
	192002	02	01	1-41451-3100		BEN	62.50	0	4.14	0	.00	0						
	193001	02	01	1-41451-3100		BEN	150.21	0	9.94	0	.00	0						
	193002	02	01	1-41451-3100		BEN	150.28	0	9.93	0	.00	0						
	194001	02	01	1-41451-3100		BEN	150.24	0	56.72	0	.00	0						
	194002	02	01	1-41451-3100		BEN	150.26	0	56.70	0	.00	0						
				LABOR TOTALS			9,267.73		1,786.87		.00		177.00		24.00			
				BENEFIT TOTALS			738.61		142.40		.00							
CHENEY, MELODIE DAWN				2ST-2ADMI														
573-06-4335	230077	00	01	1-42287-2170		LBR	46096.85	0	3891.30	0	.00	0	2106.00	0	174.00	0		
	230077	00	01	1-42287-3100		BEN	19420.26	0	1628.93	0	.00	0						
				LABOR TOTALS			46,096.85		3,891.30		.00		2,106.00		174.00			
				BENEFIT TOTALS			19,420.26		1,628.93		.00							
CHENG, ALEX				2AC-2BOOK														
621-64-2180	280001	00	01	1-48226-2310		LBR	172.13	0	.00	0	.00	0	25.50	0	.00	0		
	280001	00	01	1-48226-3200		BEN	3.22	0	.00	0	.00	0						
				LABOR TOTALS			172.13		.00		.00		25.50		.00			
				BENEFIT TOTALS			3.22		.00		.00							
CHENG, ALVEN																		
561-69-3905	194001	02	01	1-41477-1330		LBR	2001.03	0	755.27	0	.00	0	48.00	0	16.00	0	.00	0
	194001	02	01	1-41477-3100		BEN	154.48	0	58.30	0	.00	0						
				LABOR TOTALS			2,001.03		755.27		.00		48.00		16.00		.00	
				BENEFIT TOTALS			154.48		58.30		.00							

A&R Assistant

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
BENEFIT TOTALS							16.95		1.26		.00							
CHRESTENSON, KIM LEA			1IT-1NASA															
005-66-5788	280001	00	01	2-14520-2310	LBR		11754.00	0	1464.00	0	.00	0	1173.00	0	144.00	0	.00	0
	280001	00	01	2-14520-3200	BEN		450.09	0	27.38	0	.00	0						
LABOR TOTALS							11,754.00		1,464.00		.00		1,173.00		144.00		.00	
BENEFIT TOTALS							450.09		27.38		.00							
CHRISTENSEN, JESSICA THER			1LB-1TUTR															
619-29-3623	180001	00	01	1-41095-2310	LBR		644.63	0	209.25	0	.00	0	95.50	0	31.00	0	.00	0
	180001	00	01	1-41095-3200	BEN		12.05	0	3.91	0	.00	0						
LABOR TOTALS							644.63		209.25		.00		95.50		31.00			
BENEFIT TOTALS							12.05		3.91		.00							
CHRISTENSEN, JOSEPHINE TH			1IO-1MFLD															
549-96-0903	132230	00	01	2-11683-2170	LBR		9844.53	0	.00	0	.00	0	522.00	0	.00			
	132230	00	01	2-11683-3100	BEN		2487.16	0	.00	0	.00	0						
	132230	00	01	2-11684-2170	LBR		30442.66	0	3307.36	0	.00	0	1566.00	0	174.00			
	132230	00	01	2-11684-2360	LBR		1076.33	0	.00	0	.00	0	37.75	0	.00			
	132230	00	01	2-11684-3100	BEN		13630.48	0	1824.47	0	.00	0						
	132230	00	01	2-11684-3200	BEN		84.66	0	.00	0	.00	0						
LABOR TOTALS							41,363.52		3,307.36		.00		2,125.75		174.00			
BENEFIT TOTALS							16,202.30		1,824.47		.00							
CHRISTENSEN, LINDA ANN			1FA-1FADV															
619-05-4963	180001	00	01	1-48121-2310	LBR		720.00	720	.00	0	.00	0	.00	0	.00			
	180001	00	01	1-48121-3200	BEN		18.14	18	.00	0	.00	0						
	180001	00	01	1-51643-2310	LBR		.00	1326-	156.00-	606-	.00	0	110.50	0	37.50			
	180001	00	01	1-51643-2320	LBR		36.00	0	.00	0	.00	0	2.00	0	.00			
	180001	00	01	1-51643-3200	BEN		.00	34-	4.84-	16-	.00	0						
	180001	00	01	2-11028-2310	LBR		606.00	606	606.00	606	.00	0	.00	0	.00			
	180001	00	01	2-11028-3200	BEN		16.19	16	16.19	16	.00	0						
LABOR TOTALS							1,362.00		450.00		.00		112.50		37.50		.00	
BENEFIT TOTALS							34.33		11.35		.00							
CHRISTENSON, JOHN F			4ET-4TSC1															
101-44-3077	430176	00	01	1-41200-2170	LBR		54046.20	0	5005.34	0	.00	0	1929.81	0	174.00	0	.00	
	430176	00	01	1-41200-2360	LBR		164.29	0	.00	0	.00	0	4.00	0	.00	0	.00	
	430176	00	01	1-41200-3100	BEN		20673.02	0	1426.35	0	.00	0						
	430176	00	01	1-41200-3200	BEN		13.06	0	.00	0	.00	0						
	430176	00	01	6-10585-2150	LBR		2546.39	0	2546.39	0	.00	0	88.52	0	88.52	0	.00	
	430176	00	01	6-10585-3100	BEN		725.64	0	725.64	0	.00	0						
LABOR TOTALS							56,756.88		7,551.73		.00		2,022.33		262.52		.00	
BENEFIT TOTALS							21,411.72		2,151.99		.00							

FA Outreach Assistant

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	HOURS CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	293001	02	01	1-42654-3100	BEN		1251.43	0	81.40	0	.00	0						
	293002	02	01	1-42654-3100	BEN		1251.45	0	81.41	0	.00	0						
	294001	02	01	1-42654-3100	BEN		1530.14	0	464.36	0	.00	0						
	294005	02	01	1-42654-3100	BEN		120.90	0	6.21	0	.00	0						
	272001	03	01	1-42680-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42680-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42680-1445	LBR		642.48	0	214.16	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42680-3100	BEN		158.40	0	.00	0	.00	0						
	273001	03	01	1-42680-3100	BEN		159.21	0	.00	0	.00	0						
	274001	03	01	1-42680-3100	BEN		197.12	0	52.11	0	.00	0						
				LABOR TOTALS			27,695.92		3,486.50		.00		266.00		20.00		.00	
				BENEFIT TOTALS			7,184.55		848.29		.00							
COLE, JERRY R				1PE-1H P														
565-48-0025	153338	00	01	1-41702-1160	LBR		24323.60	0	2432.36	0	.00	0	1740.00	0	174.00	0	.00	0
	153338	00	01	1-41702-3100	BEN		915.82	0	280.52	0	.00	0						
				LABOR TOTALS			24,323.60		2,432.36		.00		1,740.00		174.00		.00	
				BENEFIT TOTALS			915.82		280.52		.00							
COLE, MICHAEL CHARLES				2CA-2ARTS														
573-56-0126	250234	00	01	1-42612-1105	LBR		8750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250234	00	01	1-42612-1160	LBR		81881.50	0	8188.15	0	.00	0	1400.00	0	140.00	0	.00	0
	293001	02	01	1-42612-1320	LBR		3129.69	0	207.06	0	.00	0	36.00	0	.00	0	.00	0
	250234	00	01	1-42612-3100	BEN		26033.48	0	2495.15	0	.00	0						
	293001	02	01	1-42612-3100	BEN		123.72	0	8.19	0	.00	0						
	292001	03	01	2-12909-1430	LBR		645.84	0	645.84	0	.00	0	13.00	0	13.00	0	.00	0
	293002	03	01	2-12909-1430	LBR		1192.32	0	1192.32	0	.00	0	24.00	0	24.00	0	.00	0
	294001	03	01	2-12909-1430	LBR		1341.36	0	1341.36	0	.00	0	27.00	0	27.00	0	.00	0
	292001	03	01	2-12909-3200	BEN		25.56	0	25.56	0	.00	0						
	293002	03	01	2-12909-3200	BEN		47.17	0	47.17	0	.00	0						
	294001	03	01	2-12909-3200	BEN		53.07	0	53.07	0	.00	0						
				LABOR TOTALS			96,940.71		11,574.73		.00		1,500.00		204.00		.00	
				BENEFIT TOTALS			26,283.00		2,629.14		.00							
COLE, NANCY J				2ST-2VPST														
492-46-4432	230271	00	01	1-42215-2170	LBR		64923.15	0	5410.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230271	00	01	1-42215-3100	BEN		27894.40	0	2324.52	0	.00	0						
				LABOR TOTALS			64,923.15		5,410.26		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			27,894.40		2,324.52		.00							
COLE, SHERI L				2ST-2ADMI														
542-74-5040	234512	00	01	1-42287-2170	LBR		36688.41	0	2425.45	0	.00	0	2001.00	0	130.50	0	.00	0
	234512	00	01	1-42287-3100	BEN		21822.49	0	1684.50	0	.00	0						
				LABOR TOTALS			36,688.41		2,425.45		.00		2,001.00		130.50		.00	

NBR Assistant

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
BENEFIT TOTALS							21,822.49		1,684.50		.00							
COLEMAN, DAVID				2CO-2COUN														
568-31-4578	250083	00	01	1-42248-1205	LBR		1400.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	1-42248-1260	LBR		63048.68	0	5731.70	0	.00	0	1091.86	0	99.26	0		
	250083	00	01	1-42248-3100	BEN		17824.66	0	1496.54	0	.00	0						
	250083	00	01	1-42250-1105	LBR		400.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	1-42250-1160	LBR		18014.09	0	1637.64	0	.00	0	312.08	0	28.37	0		
	250083	00	01	1-42250-3100	BEN		4756.54	0	427.59	0	.00	0						
	257705	00	01	1-42381-1250	LBR		4503.51	0	409.41	0	.00	0	1559.91	0	141.81	0		
	257705	00	01	1-42381-3100	BEN		1133.07	0	106.89	0	.00	0						
	250083	00	01	2-12264-1205	LBR		200.00	0	.00	0	.00	0	.00	0	.00	0		
	250083	00	01	2-12264-1260	LBR		9006.88	0	818.81	0	.00	0	155.97	0	14.18	0		
	250083	00	01	2-12264-3100	BEN		2378.02	0	213.76	0	.00	0						
LABOR TOTALS							96,573.16		8,597.56		.00		3,119.82		283.62			
BENEFIT TOTALS							26,092.29		2,244.78		.00							
COLEMAN, FRANK EUGUNE				-														
570-27-6347	192001	02	01	1-51504-1320	LBR		1548.23	0	64.10	0	.00	0	28.00	0	.00	0		
	192002	02	01	1-51504-1320	LBR		1412.19	0	34.08	0	.00	0	25.98	0	.00	0		
	192003	02	01	1-51504-1320	LBR		1327.06	993	54.94	0	.00	0	4.80	0	.00	0		
	192001	02	01	1-51504-3100	BEN		120.84	0	2.55	0	.00	0						
	192002	02	01	1-51504-3100	BEN		111.15	0	1.34	0	.00	0						
	192003	02	01	1-51504-3100	BEN		103.56	79	2.19	0	.00	0						
LABOR TOTALS							4,287.48		153.12		.00		58.78		.00		.00	
BENEFIT TOTALS							335.55		6.08		.00							
COLEMAN, JESSICA ADRIANNA				2LA-2LART														
553-73-9403	240001	00	01	1-44036-3100	BEN		46.75	46	.00	0	.00	0						
	280001	00	01	1-48308-2410	LBR		1263.00	0	.00	0	.00	0	105.25	0	.00	0	.00	0
	280001	00	01	1-48308-3200	BEN		23.62	0	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		2500.00	0	.00	0	.00	0	250.00	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	46-	.00	0	.00	0						
LABOR TOTALS							3,763.00		.00		.00		355.25		.00		.00	
BENEFIT TOTALS							70.37		.00		.00							
COLEMAN, JUDY C				2CO-2COUN														
559-78-6477	250001	00	01	1-42248-1205	LBR		3500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	1-42248-1260	LBR		64988.53	0	5908.04	0	.00	0	1091.97	0	99.27	0	.00	0
	250001	00	01	1-42248-3100	BEN		17495.11	0	1480.22	0	.00	0						
	250001	00	01	1-42250-1105	LBR		1000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	1-42250-1160	LBR		18567.96	0	1688.00	0	.00	0	311.96	0	28.36	0	.00	0
	250001	00	01	1-42250-3100	BEN		4998.52	0	422.92	0	.00	0						
	250001	00	01	2-12264-1205	LBR		500.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	250001	00	01	2-12264-1260	LBR		9283.94	0	844.00	0	.00	0	155.98	0	14.18	0	.00	0
	250001	00	01	2-12264-3100	BEN		2499.37	0	211.46	0	.00	0						

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TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 191
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
				BENEFIT TOTALS			621.79		25.74		.00							
COLLIGAN, MARY K				21A-2RDNS														
274-44-0112	260018	00	01	1-42211-2350		LBR	270.53	270	.00	0	.00	0	.00	0	.00	0	.00	0
	260018	00	01	1-42211-3200		BEN	31.79	31	.00	0	.00	0						
	260018	00	01	1-42223-2350		LBR	206.12	270-	.00	0	.00	0	9.25	0	.00	0	.00	0
	260018	00	01	1-42223-3200		BEN	8.18	31-	.00	0	.00	0						
	291001	02	01	1-42662-1320		LBR	6959.92	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42662-1320		LBR	6959.92	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320		LBR	6084.18	0	402.54	0	.00	0	60.00	0	.00	0	.00	0
	291003	03	01	1-42662-1330		LBR	795.32	0	.00	0	.00	0	10.00	0	.00	0		
	291004	03	01	1-42662-1330		LBR	397.66	0	.00	0	.00	0	5.00	0	.00	0		
	293005	02	01	1-42662-1330		LBR	927.14	0	61.34	0	.00	0	10.00	0	.00	0		
	272001	03	01	1-42662-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42662-1445		LBR	618.36	0	.00	0	.00	0	12.00	0	.00	0		
	272001	03	01	1-42662-3100		BEN	74.57	0	.00	0	.00	0						
	273001	03	01	1-42662-3100		BEN	75.56	0	.00	0	.00	0						
	291001	02	01	1-42662-3100		BEN	849.72	0	.00	0	.00	0						
	291002	02	01	1-42662-3100		BEN	849.78	0	.00	0	.00	0						
	291003	03	01	1-42662-3100		BEN	97.10	0	.00	0	.00	0						
	291004	03	01	1-42662-3100		BEN	48.55	0	.00	0	.00	0						
	292001	02	01	1-42662-3100		BEN	734.28	0	49.20	0	.00	0						
	292002	02	01	1-42662-3100		BEN	734.27	0	49.18	0	.00	0						
	293001	02	01	1-42662-3100		BEN	743.49	0	49.19	0	.00	0						
	293002	02	01	1-42662-3100		BEN	743.50	0	49.18	0	.00	0						
	293005	02	01	1-42662-3100		BEN	113.30	0	7.50	0	.00	0						
				LABOR TOTALS			42,090.07		1,671.50		.00		418.25		.00			
				BENEFIT TOTALS			5,104.09		204.25		.00							
COLLINGS, EARL				1AP-1PR														
559-42-9972	130265	00	01	1-41047-2170		LBR	89971.63	0	7746.23	0	.00	0	2088.00	0	174.00	0	.00	0
	130265	00	01	1-41047-2360		LBR	190.69	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	130265	00	01	1-41047-3100		BEN	32855.24	0	2766.04	0	.00	0						
	130265	00	01	1-41047-3200		BEN	14.59	0	.00	0	.00	0						
				LABOR TOTALS			90,162.32		7,746.23		.00		2,091.00		174.00		.00	
				BENEFIT TOTALS			32,869.83		2,766.04		.00							
COLLINS, JACQUELINE JEAN				-														
549-94-2950	194001	02	01	1-41656-1320		LBR	5181.99	0	1955.89	0	.00	0	60.00	0	20.00	0	.00	0
	194001	02	01	1-41656-3100		BEN	633.23	0	239.01	0	.00	0						
				LABOR TOTALS			5,181.99		1,955.89		.00		60.00		20.00		.00	
				BENEFIT TOTALS			633.23		239.01		.00							

Web Coordinator

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
COLSON, MERRY				-														
563-70-3366	191001	02	01	2-21291-1320	LBR		1065.24	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	191002	02	01	2-21291-1320	LBR		1065.24	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	2-21291-1320	LBR		1570.23	0	103.89	0	.00	0	36.00	0	.00	0	.00	0
	192002	02	01	2-21291-1320	LBR		1427.46	0	94.44	0	.00	0	36.00	0	.00	0	.00	0
	192003	02	01	2-21291-1320	LBR		1427.46	0	94.44	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	193003	02	01	2-21291-1320	LBR		1712.97	0	113.34	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	194002	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	194003	02	01	2-21291-1320	LBR		1712.97	0	646.55	0	.00	0	36.00	0	12.00	0	.00	0
	191001	02	01	2-21291-3100	BEN		130.15	0	.00	0	.00	0						
	191002	02	01	2-21291-3100	BEN		130.19	0	.00	0	.00	0						
	192001	02	01	2-21291-3100	BEN		191.88	0	12.70	0	.00	0						
	192002	02	01	2-21291-3100	BEN		174.45	0	11.54	0	.00	0						
	192003	02	01	2-21291-3100	BEN		174.41	0	11.53	0	.00	0						
	193001	02	01	2-21291-3100	BEN		209.33	0	13.85	0	.00	0						
	193002	02	01	2-21291-3100	BEN		209.32	0	13.86	0	.00	0						
	193003	02	01	2-21291-3100	BEN		209.33	0	13.85	0	.00	0						
	194001	02	01	2-21291-3100	BEN		209.33	0	79.01	0	.00	0						
	194002	02	01	2-21291-3100	BEN		209.32	0	79.01	0	.00	0						
	194003	02	01	2-21291-3100	BEN		209.32	0	79.00	0	.00	0						
				LABOR TOTALS			16,833.45		2,572.44		.00		372.00		36.00		.00	
				BENEFIT TOTALS			2,057.03		314.35		.00							
COLVARD, JOYCE A				-														
579-54-1256	291001	02	01	1-42506-1320	LBR		4285.32	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42506-1320	LBR		3746.98	0	247.91	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42506-1320	LBR		2432.26	0	160.93	0	.00	0	31.20	0	.00	0	.00	0
	293001	02	01	1-42506-1320	LBR		5304.39	0	350.94	0	.00	0	68.04	0	.00	0	.00	0
	293002	02	01	1-42506-1320	LBR		3746.97	0	247.92	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42506-1320	LBR		3746.97	0	1414.27	0	.00	0	48.00	0	16.00	0	.00	0
	294002	02	01	1-42506-1320	LBR		4070.58	0	1536.40	0	.00	0	52.20	0	17.40	0	.00	0
	291001	00	01	1-42506-3100	BEN		7.11	7	.00	0	.00	0						
	291001	02	01	1-42506-3100	BEN		115.10	7	.00	0	.00	0						
	292001	02	01	1-42506-3100	BEN		107.65	0	19.47	0	.00	0						
	292002	02	01	1-42506-3100	BEN		69.86	0	12.63	0	.00	0						
	293001	02	01	1-42506-3100	BEN		152.38	0	27.55	0	.00	0						
	293002	02	01	1-42506-3100	BEN		107.63	0	19.46	0	.00	0						
	294001	02	01	1-42506-3100	BEN		186.72	0	111.03	0	.00	0						
	294002	02	01	1-42506-3100	BEN		207.08	0	120.62	0	.00	0						
				LABOR TOTALS			27,333.47		3,958.37		.00		343.44		33.40		.00	
				BENEFIT TOTALS			953.53		310.76		.00							
COMANDA, DEBORAH				1GU-1ADMR														
558-04-3475	130220	00	01	1-41054-2170	LBR		37436.49	0	4159.61	0	.00	0	1566.00	0	174.00	0	.00	0

Senior Cashier

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC	CURR-PERIOD DIRECT	RLOC
	130220	00	01	1-41054	3100	BEN	15128.73	0	1685.85	0	.00	0						
	234410	00	01	1-48226	2170	LBR	12478.83	0	.00	0	.00	0	522.00	0	.00	0		
	234410	00	01	1-48226	3100	BEN	5101.43	0	.00	0	.00	0						
LABOR TOTALS							49,915.32		4,159.61		.00		2,088.00		174.00			
BENEFIT TOTALS							20,230.16		1,685.85		.00							
CONENS, PATRICIA D 4HA-4HURS																		
558-04-3236	470011	00	01	1-44022	2170	LBR	6628.59	0	565.58	0	.00	0	215.49	0	17.39	0		
	470011	00	01	1-44022	3100	BEN	2370.31	0	200.33	0	.00	0						
	470011	00	01	1-44062	2170	LBR	59659.55	0	5090.46	0	.00	0	1879.26	0	156.61	0		
	470011	00	01	1-44062	3100	BEN	21332.95	0	1802.96	0	.00	0						
LABOR TOTALS							66,288.14		5,656.04		.00		2,094.75		174.00			
BENEFIT TOTALS							23,703.26		2,003.29		.00							
CONLIN, MARGARET E																		
564-37-6520	192002	03	01	1-41456	1430	LBR	560.86	211	.00	0	.00	0	8.59	0	.00	0		
	192002	03	01	1-41456	3200	BEN	43.30	16	.00	0	.00	0						
	193001	02	01	1-41457	1320	LBR	1578.16	0	104.40	0	.00	0	39.00	0	.00	0		
	193001	02	01	1-41457	3100	BEN	121.82	0	8.05	0	.00	0						
	191001	02	01	1-41477	1320	LBR	144.18	0	.00	0	.00	0	3.30	0	.00	0		
	191002	02	01	1-41477	1320	LBR	1431.42	0	.00	0	.00	0	33.00	0	.00	0		
	192001	02	01	1-41477	1320	LBR	2626.10	0	173.75	0	.00	0	64.98	0	.00	0		
	194001	02	01	1-41477	1320	LBR	2523.93	0	952.63	0	.00	0	36.00	0	12.00	0	.00	0
	191001	02	01	1-41477	3100	BEN	11.12	0	.00	0	.00	0						
	191002	02	01	1-41477	3100	BEN	110.49	0	.00	0	.00	0						
	192001	02	01	1-41477	3100	BEN	202.75	0	13.42	0	.00	0						
	194001	02	01	1-41477	3100	BEN	194.85	0	73.55	0	.00	0						
LABOR TOTALS							8,864.65		1,230.78		.00		184.87		12.00		.00	
BENEFIT TOTALS							684.33		95.02		.00							
CONLU, ROWENALYN BADIANGO 1IT-INASA																		
586-90-3352	280001	00	01	2-14520	2310	LBR	7111.50	0	.00	0	.00	0	646.50	0	.00	0	.00	0
	280001	00	01	2-14520	3200	BEN	132.98	0	.00	0	.00	0						
LABOR TOTALS							7,111.50		.00		.00		646.50		.00		.00	
BENEFIT TOTALS							132.98		.00		.00							
CONROY, CHRISTOPHER THOMA 2AC-2BOOK																		
612-28-5078	280001	00	01	1-48226	2310	LBR	415.13	0	.00	0	.00	0	61.50	0	.00	0	.00	0
	280001	00	01	1-48226	3200	BEN	7.76	0	.00	0	.00	0						
LABOR TOTALS							415.13		.00		.00		61.50		.00		.00	
BENEFIT TOTALS							7.76		.00		.00							
CONROY, LINDA CHRISTINA																		
561-11-8195	293001	03	01	1-48410	1430	LBR	801.00	0	.00	0	.00	0	16.02	0	.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT P
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CU DIR
	272001	03	01	1-42456-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0	.0
	273001	03	01	1-42456-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	274001	03	01	1-42456-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00	0	.00 0
	272001	03	01	1-42456-3100	BEN		43.88	0	.00	0	.00	0					
	273001	03	01	1-42456-3100	BEN		45.66	0	.00	0	.00	0					
	274001	03	01	1-42456-3100	BEN		45.66	0	15.22	0	.00	0					
	292001	02	01	1-42456-3100	BEN		191.94	0	12.70	0	.00	0					
	293001	02	01	1-42456-3100	BEN		199.88	0	13.22	0	.00	0					
	293002	02	01	1-42456-3100	BEN		199.84	0	13.23	0	.00	0					
	293003	02	01	1-42456-3100	BEN		171.09	0	11.31	0	.00	0					
	293004	02	01	1-42456-3100	BEN		171.11	0	11.33	0	.00	0					
	294001	02	01	1-42456-3100	BEN		199.85	0	75.43	0	.00	0					
	294002	02	01	1-42456-3100	BEN		171.09	0	64.57	0	.00	0					
	294003	02	01	1-42456-3100	BEN		171.10	0	64.58	0	.00	0					
	294004	03	01	2-12911-1430	LBR		1002.75	0	1002.75	0	.00	0	21.00	0	21.00	0	.00 0
	294004	03	01	2-12911-3200	BEN		79.92	0	79.92	0	.00	0					
				LABOR TOTALS			21,317.50		4,535.93		.00		347.00		61.00		.00
				BENEFIT TOTALS			1,698.99		361.51		.00						
COYLE, JOHN M																	
569-80-1465	194001	02	01	1-41764-1320	LBR		1801.17	0	679.83	0	.00	0	36.00	0	12.00	0	.00 0
	194001	02	01	1-41764-3100	BEN		143.55	0	54.19	0	.00	0					
				LABOR TOTALS			1,801.17		679.83		.00		36.00		12.00		.00
				BENEFIT TOTALS			143.55		54.19		.00						
COYNE, SHEILA NORA				4ET-4IS													
611-07-6918	430061	00	01	1-44754-2170	LBR		90065.48	0	7816.04	0	.00	0	2109.75	0	174.00	0	.00 0
	430061	00	01	1-44754-3100	BEN		33077.64	0	2822.85	0	.00	0					
				LABOR TOTALS			90,065.48		7,816.04		.00		2,109.75		174.00		.00
				BENEFIT TOTALS			33,077.64		2,822.85		.00						
COZZENS, SHERRI SHINN																	
570-70-4939	292010	03	01	1-42450-1430	LBR		.00	667-	.00	0	.00	0	13.35	0	.00	0	.00 0
	292010	03	01	1-42450-3200	BEN		.00	26-	.00	0	.00	0					
	250171	00	01	1-42458-1160	LBR		76644.09	0	7664.41	0	.00	0	1400.00	0	140.00	0	.00 0
	292001	02	01	1-42458-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00 0
	292002	03	01	1-42458-1320	LBR		76.94	0	5.09	0	.00	0	.96	0	.00	0	.00 0
	293001	02	01	1-42458-1320	LBR		1923.42	0	127.26	0	.00	0	24.00	0	.00	0	.00 0
	292010	03	01	1-42458-1430	LBR		667.50	667	.00	0	.00	0	.00	0	.00	0	.00 0
	293010	03	01	1-42458-1430	LBR		667.50	445	.00	0	.00	0	4.45	0	.00	0	.00 0
	294010	03	01	1-42458-1430	LBR		667.50	0	222.50	0	.00	0	13.35	0	4.45	0	.00 0
	250171	00	01	1-42458-3100	BEN		23541.09	0	2121.51	0	.00	0					
	292001	02	01	1-42458-3100	BEN		38.17	0	2.52	0	.00	0					
	292002	03	01	1-42458-3100	BEN		3.05	0	.20	0	.00	0					
	293001	02	01	1-42458-3100	BEN		76.36	0	5.05	0	.00	0					
	292010	03	01	1-42458-3200	BEN		26.52	26	.00	0	.00	0					

Senior Programmer Analyst

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC
				LABOR TOTALS			28,995.56		3,182.41		.00		599.89		53.33	
				BENEFIT TOTALS			1,151.11		126.34		.00					
CROSS, STANLEY G				4SS-4DSS1												
556-15-0031	420012	00	01	1-44358-2170	LBR		22189.40	0	2309.16	0	.00	0	612.16	0	62.64	0
	421108	00	01	1-44358-2170	LBR		4920.37	0	.00	0	.00	0	139.51	0	.00	0
	420012	00	01	1-44358-2360	LBR		1611.23	0	139.34	0	.00	0	28.44	0	2.52	0
	421108	00	01	1-44358-2360	LBR		377.66	0	.00	0	.00	0	6.84	0	.00	0
	420012	00	01	1-44358-3100	BEN		8869.13	0	916.55	0	.00	0				
	421108	00	01	1-44358-3100	BEN		2016.77	0	.00	0	.00	0				
	420012	00	01	1-44358-3200	BEN		124.15	0	10.54	0	.00	0				
	421108	00	01	1-44358-3200	BEN		29.14	0	.00	0	.00	0				
	420012	00	01	1-51911-2360	LBR		442.37	0	.00	0	.00	0	8.00	0	.00	0
	420012	00	01	1-51911-3200	BEN		33.47	0	.00	0	.00	0				
	420012	00	01	2-54370-2170	LBR		39448.56	0	4105.22	0	.00	0	1088.29	0	111.36	0
	421108	00	01	2-54370-2170	LBR		8747.48	0	.00	0	.00	0	248.04	0	.00	0
	420012	00	01	2-54370-2360	LBR		2864.59	0	247.73	0	.00	0	50.56	0	4.48	0
	421108	00	01	2-54370-2360	LBR		671.46	0	.00	0	.00	0	12.16	0	.00	0
	420012	00	01	2-54370-3100	BEN		15767.28	0	1629.39	0	.00	0				
	421108	00	01	2-54370-3100	BEN		3585.35	0	.00	0	.00	0				
	420012	00	01	2-54370-3200	BEN		220.76	0	18.74	0	.00	0				
	421108	00	01	2-54370-3200	BEN		51.85	0	.00	0	.00	0				
				LABOR TOTALS			81,273.12		6,801.45		.00		2,194.00		181.00	
				BENEFIT TOTALS			30,697.90		2,575.22		.00					
CROTTY, SEAN MICHAEL				2BH-2ENVS												
569-83-6286	280001	00	01	1-48700-2310	LBR		393.75	0	87.50	0	.00	0	45.00	0	10.00	0
	280001	00	01	1-48700-3200	BEN		7.37	0	1.64	0	.00	0				
				LABOR TOTALS			393.75		87.50		.00		45.00		10.00	
				BENEFIT TOTALS			7.37		1.64		.00					
CRUMPTON, DINA D				2ST-2ADMI												
557-15-5372	230103	00	01	1-42287-2170	LBR		33598.59	0	3397.57	0	.00	0	1654.09	0	174.00	0
	230103	00	01	1-42287-3100	BEN		14990.17	0	1524.20	0	.00	0				
	236603	00	01	6-10570-2185	LBR		6220.70	0	.00	0	.00	0	289.28	0	.00	0
	236603	00	01	6-10570-3100	BEN		3098.47	0	.00	0	.00	0				
				LABOR TOTALS			39,819.29		3,397.57		.00		1,943.37		174.00	
				BENEFIT TOTALS			18,088.64		1,524.20		.00					
CRUTCHFIELD, GARY L				-												
304-48-2498	292001	02	01	1-42503-1320	LBR		5331.56	0	352.75	0	.00	0	72.00	0	.00	0
	292002	02	01	1-42503-1320	LBR		835.81	0	55.30	0	.00	0	9.99	0	.00	0
	272001	03	01	1-42503-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0
	272001	03	01	1-42503-3100	BEN		40.31	0	.00	0	.00	0				
	292001	02	01	1-42503-3100	BEN		347.64	0	23.00	0	.00	0				
	292002	02	01	1-42503-3100	BEN		54.48	0	3.60	0	.00	0				

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT P
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION CD	ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS	FISC-TO-DATE RLOC	MO-TO-DATE/ CU DIRECT	MO-TO-DATE/ CU RLOC	DIR
					LABOR TOTALS			285.00		.00		.00		28.50		.00		
					BENEFIT TOTALS			5.33		.00		.00						
DESAI, SIDDHARTH GIRISH		2WF-2OTI																
021-82-7158	280004	00	01	2-12249-3200		LBR		2096.00	0	.00	0	.00	0	262.00	0	.00	0	
	280004	00	01	2-12249-3200		BEN		118.52	81-	.00	0	.00	0					
	280004	00	01	2-12640-3200		BEN		81.01	81	.00	0	.00	0					
					LABOR TOTALS			2,096.00		.00		.00		262.00		.00		
					BENEFIT TOTALS			199.53		.00		.00						
DESCHENE, QUEENA QUY		2ST-2CLIF																
546-89-6103	280001	00	01	1-48410-2310		LBR		8118.00	1386	2364.00	1386	.00	0	561.00	0	81.50	0	.00 0
	280001	00	01	1-48410-3200		BEN		151.82	25	44.21	25	.00	0					
					LABOR TOTALS			8,118.00		2,364.00		.00		561.00		81.50		.00
					BENEFIT TOTALS			151.82		44.21		.00						
DESHMUKH, ERIKA DAWN		2CD-2C D																
572-11-0049	280001	00	01	1-48410-2410		LBR		4661.01	4661	.00	0	.00	0	.00	0	.00	0	.00 0
	280001	00	01	1-48410-3200		BEN		105.86	105	.00	0	.00	0					
	280001	00	01	2-62352-2410		LBR		3846.44	4661-	701.25	0	.00	0	667.25	0	55.00	0	.00 0
	280001	00	01	2-62352-3200		BEN		53.22	105-	13.11	0	.00	0					
					LABOR TOTALS			8,507.45		701.25		.00		667.25		55.00		.00
					BENEFIT TOTALS			159.08		13.11		.00						
DESHONG, RACHEL TAMAR		1PE-1PEDV																
573-91-3899	180002	00	01	1-41745-2310		LBR		80.00	0	.00	0	.00	0	8.00	0	.00	0	.00 0
	180002	00	01	1-41745-3200		BEN		1.50	0	.00	0	.00	0					
	140004	00	01	1-44036-3100		BEN		4.20	4	.00	0	.00	0					
	140005	00	01	1-44036-3100		BEN		1.03	1	1.03	1	.00	0					
	140004	00	01	2-31111-2700		LBR		225.00	0	.00	0	.00	0	22.50	0	.00	0	.00 0
	140005	00	01	2-31111-2700		LBR		55.00	0	.00	0	.00	0	5.50	0	.00	0	.00 0
	140005	00	01	2-31111-3100		BEN		.00	1-	1.03-	1-	.00	0					
					LABOR TOTALS			360.00		.00		.00		36.00		.00		.00
					BENEFIT TOTALS			6.73		.00		.00						
DESHPANDE, MRINMAIE HEMAN		1GU-1ADMR																
619-04-9821	130168	00	01	1-41287-2170		LBR		36038.37	0	3462.09	0	.00	0	2055.06	0	174.00	0	.00 0
	130168	00	01	1-41287-3100		BEN		21684.55	0	1904.39	0	.00	0					
					LABOR TOTALS			36,038.37		3,462.09		.00		2,055.06		174.00		.00
					BENEFIT TOTALS			21,684.55		1,904.39		.00						
DESILETS, LENORE MICHELLE		2PS-2MATH																
551-47-7574	258894	00	01	1-42760-1160		LBR		33445.81	0	5574.42	0	.00	0	1260.02	0	151.56	0	.00 0
	258894	00	01	1-42760-3100		BEN		11528.46	0	1503.66	0	.00	0					

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ	TYPE	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURRENT-PERIOD DIRECT	RLOC
				LABOR TOTALS			1,152.00		224.00		.00		18.00		6.00			
				BENEFIT TOTALS			117.16		22.77		.00							
DUONG, QUYNH ANH THI				2BH-2OTI														
624-42-2556	180001	00	01	2-12480-2310	LBR		254.00	0	.00	0	.00	0	31.76	0	.00	0		
	180005	00	01	2-12480-2310	LBR		33.00	33	.00	0	.00	0	.00	0	.00	0		
	180001	00	01	2-12480-3200	BEN		8.44	0	.00	0	.00	0						
	180005	00	01	2-12480-3200	BEN		.61	0	.00	0	.00	0						
	180001	00	01	2-12640-2310	LBR		254.00	0	.00	0	.00	0	31.74	0	.00	0	.00	0
	180005	00	01	2-12640-2310	LBR		33.00	33	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-12640-3200	BEN		8.41	0	.00	0	.00	0						
	180005	00	01	2-12640-3200	BEN		.62	0	.00	0	.00	0						
				LABOR TOTALS			574.00		.00		.00		63.50		.00		.00	
				BENEFIT TOTALS			18.08		.00		.00							
DUONG, THO DUC				2CE-2OLDA														
586-38-8358	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							
DUONG, TUNG THI				1SM-1FAID														
625-50-9230	130026	00	01	1-41272-2170	LBR		44864.56	0	3738.72	0	.00	0	1943.42	0	161.95	0	.00	0
	130026	00	01	1-41272-2360	LBR		193.38	0	.00	0	.00	0	5.58	0	.00	0	.00	0
	130026	00	01	1-41272-3100	BEN		22592.89	0	1882.14	0	.00	0						
	130026	00	01	1-41272-3200	BEN		14.46	0	.00	0	.00	0						
	130026	00	01	2-11683-2170	LBR		813.79	0	.00	0	.00	0	36.15	0	.00	0	.00	0
	130026	00	01	2-11683-3100	BEN		415.38	0	.00	0	.00	0						
	130026	00	01	2-11684-2170	LBR		2519.79	0	277.79	0	.00	0	108.43	0	12.05	0	.00	0
	130026	00	01	2-11684-2360	LBR		14.37	0	.00	0	.00	0	.42	0	.00	0	.00	0
	130026	00	01	2-11684-3100	BEN		1263.43	0	139.86	0	.00	0						
	130026	00	01	2-11684-3200	BEN		1.08	0	.00	0	.00	0						
				LABOR TOTALS			48,405.89		4,016.51		.00		2,094.00		174.00		.00	
				BENEFIT TOTALS			24,287.24		2,022.00		.00							
DUPRE, TIMOTHY EUGENE				-														
569-76-1179	192001	03	01	1-41378-1430	LBR		7131.61	0	.00	0	.00	0	166.48	0	.00	0	.00	0
	192001	03	01	1-41378-3200	BEN		871.49	0	.00	0	.00	0						
				LABOR TOTALS			7,131.61		.00		.00		166.48		.00		.00	
				BENEFIT TOTALS			871.49		.00		.00							
DURAN BEZAK, MARIA RAQUEL				-														
564-64-1638	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	HOURS CURR-PERIOD DIRECT	CURR-PERIOD RLOC
LABOR TOTALS							38,324.04		3,472.16		.00		420.00		20.00		.00	
BENEFIT TOTALS							4,683.18		424.30		.00							
ELLYSON, ADAM W			2CA-2EUPH															
030-52-2166	260002	00	01	1-42384-2350	LBR		400.00	400	.00	0	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-42384-3200	BEN		40.64	40	.00	0	.00	0						
	260001	00	01	1-48304-2350	LBR		773.50	1778-	.00	0	.00	0	94.50	0	.00	0	.00	0
	260002	00	01	1-48304-2350	LBR		204.00	1200-	.00	0	.00	0	52.00	0	.00	0	.00	0
	260001	00	01	1-48304-3200	BEN		80.84	178-	.00	0	.00	0						
	260002	00	01	1-48304-3200	BEN		22.15	120-	.00	0	.00	0						
	260001	00	01	1-48404-2350	LBR		1778.00	1778	.00	0	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-48404-2350	LBR		800.00	800	.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48404-3200	BEN		178.66	178	.00	0	.00	0						
	260002	00	01	1-48404-3200	BEN		80.00	80	.00	0	.00	0						
	260002	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260002	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
LABOR TOTALS							5,615.50		.00		.00		188.00		.00		.00	
BENEFIT TOTALS							571.11		.00		.00							
ELLZEY, SUZANNE LOUISE			-															
549-13-1156	192001	02	01	1-41502-1320	LBR		1465.41	0	96.96	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	1-41502-3100	BEN		116.81	0	7.73	0	.00	0						
	193001	02	01	1-41507-1320	LBR		2934.75	0	194.16	0	.00	0	48.00	0	.00	0	.00	0
	193001	02	01	1-41507-3100	BEN		233.89	0	15.47	0	.00	0						
LABOR TOTALS							4,400.16		291.12		.00		72.00		.00		.00	
BENEFIT TOTALS							350.70		23.20		.00							
ELOFF, DANIEL C			4SS-4DSS2															
279-74-7308	280001	00	01	1-44358-2310	LBR		6812.00	0	700.00	0	.00	0	844.00	0	80.00	0	.00	0
	280001	00	01	1-44358-2320	LBR		108.56	0	6.56	0	.00	0	9.00	0	.50	0	.00	0
	280001	00	01	1-44358-2360	LBR		24.00	0	.00	0	.00	0	1.50	0	.00	0	.00	0
	280001	00	01	1-44358-3200	BEN		242.92	0	13.21	0	.00	0						
LABOR TOTALS							6,944.56		706.56		.00		854.50		80.50		.00	
BENEFIT TOTALS							242.92		13.21		.00							
ELVIN, LINDA LU			2AS-2DLCT															
359-38-4826	220169	00	01	1-42404-2170	LBR		72798.77	0	6334.65	0	.00	0	2094.00	0	174.00	0	.00	0
	230169	00	01	1-42404-2170	LBR		531.78	0	.00	0	.00	0	.00	0	.00	0	.00	0
	220169	00	01	1-42404-3100	BEN		29102.10	0	2466.61	0	.00	0						
	230169	00	01	1-42404-3100	BEN		210.34	0	.00	0	.00	0						
LABOR TOTALS							73,330.55		6,334.65		.00		2,094.00		174.00		.00	
BENEFIT TOTALS							29,312.44		2,466.61		.00							
ELWELL, JEAN			2ST-2ADMI															

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE/ HOURS DIRECT	MO-TO-DATE/ HOURS RLOC	D
562-45-3881	230149	00	01	1-42287-2170	LBR			63249.15	0	5398.26	0	.00	0	2088.00	0	174.00	0	
	230149	00	01	1-42287-3100	BEN			23058.63	0	1948.60	0	.00	0					
				LABOR TOTALS				63,249.15		5,398.26		.00		2,088.00		174.00		
				BENEFIT TOTALS				23,058.63		1,948.60		.00						
ELWELL, SUSANNE E				4FC-4FACA														
573-49-2710	430136	00	01	1-48301-2170	LBR			64091.36	0	5778.73	0	.00	0	1929.82	0	174.00	0	
	430136	00	01	1-48301-3100	BEN			23237.36	0	2029.31	0	.00	0					
				LABOR TOTALS				64,091.36		5,778.73		.00		1,929.82		174.00		
				BENEFIT TOTALS				23,237.36		2,029.31		.00						
ELY, JIMMY VERN				-														
519-62-9446	192001	02	01	1-51504-1320	LBR			2734.64	0	113.19	0	.00	0	82.84	0	.00	0	.00 0
	192002	02	01	1-51504-1320	LBR			2734.64	0	113.19	0	.00	0	52.05	0	.00	0	.00 0
	192001	02	01	1-51504-3100	BEN			211.08	0	8.72	0	.00	0					
	192002	02	01	1-51504-3100	BEN			211.19	0	8.75	0	.00	0					
				LABOR TOTALS				5,469.28		226.38		.00		134.89		.00		.00
				BENEFIT TOTALS				422.27		17.47		.00						
EMAMI, BAHARA				2CA-2F/TV														
615-12-7528	280001	00	01	2-12902-2310	LBR			5702.00	448	1140.00	0	.00	0	571.00	0	114.00	0	.00 0
	280001	00	01	2-12902-3200	BEN			155.61	42	21.32	0	.00	0					
				LABOR TOTALS				5,702.00		1,140.00		.00		571.00		114.00		.00
				BENEFIT TOTALS				155.61		21.32		.00						
EMMERICH, NANCY M				-														
549-90-6074	192001	02	01	1-41502-1320	LBR			520.84	0	34.46	0	.00	0	6.00	0	.00	0	.00 0
	192002	02	01	1-41502-1320	LBR			1041.68	0	68.92	0	.00	0	12.00	0	.00	0	.00 0
	192001	02	01	1-41502-3100	BEN			52.97	0	3.50	0	.00	0					
	192002	02	01	1-41502-3100	BEN			105.94	0	7.01	0	.00	0					
				LABOR TOTALS				1,562.52		103.38		.00		18.00		.00		.00
				BENEFIT TOTALS				158.91		10.51		.00						
EMRANI, HAMIDEH ALSADAT				1LB-1TUTR														
613-39-3949	180002	00	01	1-41095-2410	LBR			614.25	0	.00	0	.00	0	91.00	0	.00	0	.00 0
	180003	00	01	1-41095-2410	LBR			356.00	0	.00	0	.00	0	44.50	0	.00	0	.00 0
	180002	00	01	1-41095-3200	BEN			11.49	0	.00	0	.00	0					
	180003	00	01	1-41095-3200	BEN			6.66	0	.00	0	.00	0					
				LABOR TOTALS				970.25		.00		.00		135.50		.00		.00
				BENEFIT TOTALS				18.15		.00		.00						
ENDEMANN, GERDA CONSTANCE				-														
559-04-4098	193010	03	01	1-41411-1430	LBR			22.50	0	.00	0	.00	0	1.50	0	.00	0	.00 0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC
	192002	02	01	1-41656-3100	BEN		386.84	0	25.59	0	.00	0				
	193001	02	01	1-41656-3100	BEN		435.24	0	28.79	0	.00	0				
	194001	02	01	1-41656-3100	BEN		386.84	0	146.01	0	.00	0				
	194002	02	01	1-41656-3100	BEN		386.82	0	146.00	0	.00	0				
	194003	02	01	1-41656-3100	BEN		6.63	0	.44	0	.00	0				
				LABOR TOTALS			26,912.00		5,015.17		.00		337.00		44.00	
				BENEFIT TOTALS			2,077.62		387.17		.00					
FAST, TIFFANY E				2BH-2BIOL												
618-07-3040	260009	00	01	1-48700-2350	LBR		774.51	0	.00	0	.00	0	50.00	0	.00	0
	260009	00	01	1-48700-3200	BEN		78.76	0	.00	0	.00	0				
				LABOR TOTALS			774.51		.00		.00		50.00		.00	
				BENEFIT TOTALS			78.76		.00		.00					
FEIG, KONNILYN				1SS-1HIST												
517-34-4223	150138	00	01	1-41806-1105	LBR		7750.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150138	00	01	1-41806-1160	LBR		80180.40	0	8018.04	0	.00	0	1330.00	0	133.00	0	.00	0
	191001	02	01	1-41806-1320	LBR		5739.23	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	192001	02	01	1-41806-1320	LBR		5056.64	0	334.57	0	.00	0	48.00	0	.00	0	.00	0
	192002	02	01	1-41806-1320	LBR		5056.64	0	334.57	0	.00	0	48.00	0	.00	0	.00	0
	193001	02	01	1-41806-1320	LBR		5056.65	0	334.56	0	.00	0	48.00	0	.00	0	.00	0
	193002	02	01	1-41806-1320	LBR		5056.65	0	334.56	0	.00	0	48.00	0	.00	0	.00	0
	150138	00	01	1-41806-3100	BEN		26916.03	0	2298.92	0	.00	0						
	191001	02	01	1-41806-3100	BEN		709.26	19	.00	0	.00	0						
	192001	02	01	1-41806-3100	BEN		200.73	0	13.29	0	.00	0						
	192002	02	01	1-41806-3100	BEN		200.75	0	13.28	0	.00	0						
	193001	02	01	1-41806-3100	BEN		200.78	0	13.28	0	.00	0						
	193002	02	01	1-41806-3100	BEN		200.72	0	13.28	0	.00	0						
				LABOR TOTALS			113,896.21		9,356.30		.00		1,570.00		133.00		.00	
				BENEFIT TOTALS			28,428.27		2,352.05		.00							
FELDMAN, JOYCE K				2ST-2FNAI												
015-32-4667	230372	00	01	2-12681-2170	LBR		41327.43	0	4559.17	0	.00	0	1566.00	0	174.00	0	.00	0
	230372	00	01	2-12681-3100	BEN		15998.10	0	1770.61	0	.00	0						
	230372	00	01	2-12684-2170	LBR		13382.61	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	230372	00	01	2-12684-3100	BEN		5249.33	0	.00	0	.00	0						
				LABOR TOTALS			54,710.04		4,559.17		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,247.43		1,770.61		.00							
FELDMAN, SUSAN				2CE-2OLDA												
138-44-0265	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	FISC-TO-DATE HOURS DIRECT	RLOC	MO-TO-DATE HOURS DIRECT	RLOC	OTHER STATISTICS	
				LABOR TOTALS			403.68		.00		.00		39.00		.00			
				BENEFIT TOTALS			41.06		.00		.00							
FIELDS, KATHRYN S				2AC-2DNCS														
565-84-4946	260002	00	01	1-48406-2350	LBR		751.17	0	86.87	0	.00	0	73.50	0	8.50	0		
	260002	00	01	1-48406-2360	LBR		42.15	0	.00	0	.00	0	2.75	0	.00	0		
	260002	00	01	1-48406-3200	BEN		80.68	0	8.83	0	.00	0						
				LABOR TOTALS			793.32		86.87		.00		76.25		8.50			
				BENEFIT TOTALS			80.68		8.83		.00							
FIFIELD, PATRICIA A				2ST-2ADMI														
549-62-7356	220218	00	01	1-42287-2170	LBR		8993.07	0	769.14	0	.00	0	261.03	0	21.76	0		
	220218	00	01	1-42287-3100	BEN		3113.00	0	263.60	0	.00	0						
	220218	00	01	2-12650-2170	LBR		62949.46	0	5383.84	0	.00	0	1826.97	0	152.24	0		
	220218	00	01	2-12650-3100	BEN		21789.69	0	1845.09	0	.00	0						
				LABOR TOTALS			71,942.53		6,152.98		.00		2,088.00		174.00			
				BENEFIT TOTALS			24,902.69		2,108.69		.00							
FIGLIOMENI, PAUL				2AC-2CMPS														
553-96-6211	230178	00	01	1-48224-2170	LBR		47414.16	0	4106.69	0	.00	0	1506.73	0	130.51	0	.00	0
	230178	00	01	1-48224-2360	LBR		1612.71	0	212.42	0	.00	0	34.14	0	4.50	0	.00	0
	230178	00	01	1-48224-3100	BEN		20432.69	0	1720.97	0	.00	0						
	230178	00	01	1-48224-3200	BEN		124.67	0	16.25	0	.00	0						
	230178	00	01	1-48228-2170	LBR		15804.36	0	1368.86	0	.00	0	502.17	0	43.49	0	.00	0
	230178	00	01	1-48228-2360	LBR		537.50	0	70.80	0	.00	0	11.36	0	1.50	0	.00	0
	230178	00	01	1-48228-3100	BEN		6810.64	0	573.64	0	.00	0						
	230178	00	01	1-48228-3200	BEN		41.57	0	5.42	0	.00	0						
				LABOR TOTALS			65,368.73		5,758.77		.00		2,054.40		180.00		.00	
				BENEFIT TOTALS			27,409.57		2,316.28		.00							
FIGUEROA, JESUS O				2AC-2BOOK														
554-91-4317	280001	00	01	1-48226-2310	LBR		637.88	0	251.44	0	.00	0	94.50	0	37.25	0	.00	0
	280001	00	01	1-48226-3200	BEN		11.93	0	4.70	0	.00	0						
				LABOR TOTALS			637.88		251.44		.00		94.50		37.25		.00	
				BENEFIT TOTALS			11.93		4.70		.00							
FIGUEROA, NANCY G				2AC-2BOOK														
558-83-2780	280001	00	01	1-48226-2310	LBR		756.01	0	259.88	0	.00	0	112.00	0	38.50	0	.00	0
	280001	00	01	1-48226-3200	BEN		28.26	0	9.72	0	.00	0						
				LABOR TOTALS			756.01		259.88		.00		112.00		38.50		.00	
				BENEFIT TOTALS			28.26		9.72		.00							
FILIPPINI, ROBERT JAMES				-														

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CURR-PERIOD DIRECT	RLOC
	293001	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	291001	02	01	1-42662-3100	BEN		458.46	0	.00	0	.00	0						
	291002	02	01	1-42662-3100	BEN		458.51	0	.00	0	.00	0						
	292001	02	01	1-42662-3100	BEN		435.21	0	28.80	0	.00	0						
	292002	02	01	1-42662-3100	BEN		435.26	0	28.80	0	.00	0						
	293001	02	01	1-42662-3100	BEN		435.14	0	28.79	0	.00	0						
	293002	02	01	1-42662-3100	BEN		435.27	0	28.80	0	.00	0						
	260002	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260002	00	01	1-52363-3200	BEN		257.85	0	129.70	0	.00	0						
				LABOR TOTALS			37,768.05		3,171.98		.00		453.50		40.00		.00	
				BENEFIT TOTALS			2,915.70		244.89		.00							
FRIEND, JULIE ELIZABETH																		
562-11-7061	294002	03	01	1-42021-1430	LBR		100.00	0	100.00	0	.00	0	2.00	0	2.00	0	.00	0
	294002	03	01	1-42021-3200	BEN		7.72	0	7.72	0	.00	0						
	293001	02	01	1-42458-1320	LBR		3443.96	0	227.86	0	.00	0	180.00	0	.00	0	.00	0
	294001	02	01	1-42458-1320	LBR		6874.95	0	2594.89	0	.00	0	120.00	0	40.00	0	.00	0
	293001	02	01	1-42458-3100	BEN		265.85	0	17.58	0	.00	0						
	294001	02	01	1-42458-3100	BEN		530.76	0	200.34	0	.00	0						
				LABOR TOTALS			10,418.91		2,922.75		.00		302.00		42.00		.00	
				BENEFIT TOTALS			804.33		225.64		.00							
FRIESEN, HAZEL JOAN				2SE-2EDC														
546-56-6098	250187	00	01	2-22227-1160	LBR		24564.36	0	2456.44	0	.00	0	420.00	0	42.00	0	.00	0
	250187	00	01	2-22227-1260	LBR		57317.14	0	5731.71	0	.00	0	980.00	0	98.00	0	.00	0
	291010	03	01	2-22227-1430	LBR		5771.66	0	.00	0	.00	0	112.00	0	.00	0	.00	0
	250187	00	01	2-22227-3100	BEN		19938.23	0	1831.95	0	.00	0						
	291010	03	01	2-22227-3200	BEN		713.26	19	.00	0	.00	0						
				LABOR TOTALS			87,653.16		8,188.15		.00		1,512.00		140.00		.00	
				BENEFIT TOTALS			20,651.49		1,831.95		.00							
FRIESON, WILLIE J				1FS-1CFI														
418-72-0926	130160	00	01	1-41181-2170	LBR		64295.38	0	5404.58	0	.00	0	2104.50	0	174.00	0	.00	0
	130160	00	01	1-41181-2360	LBR		505.44	0	.00	0	.00	0	16.50	0	.00	0	.00	0
	130160	00	01	1-41181-3100	BEN		23297.53	0	1949.94	0	.00	0						
	130160	00	01	1-41181-3200	BEN		40.00	0	.00	0	.00	0						
				LABOR TOTALS			64,800.82		5,404.58		.00		2,121.00		174.00		.00	
				BENEFIT TOTALS			23,337.53		1,949.94		.00							
FRISCHE, ALLEN R				2AB-2BGTP														
545-15-5732	210016	00	01	1-42150-2110	LBR		45032.66	0	.00	0	.00	0	1052.70	0	.00	0	.00	0
	210016	00	01	1-42150-3100	BEN		16602.23	0	.00	0	.00	0						
	210016	00	01	6-10585-2150	LBR		13004.58	0	.00	0	.00	0	304.00	0	.00	0	.00	0
	210016	00	01	6-10585-3100	BEN		2652.78	0	.00	0	.00	0						

Dir. Budget & personnel

FOOTHILL DE ANZA COM[illegible]TY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ	TYPE	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC	
LABOR TOTALS							58,037.24		.00		.00		1,356.70		.00		.00		
BENEFIT TOTALS							19,255.01		.00		.00								
FRITZ, ANDREW CORBIN				1IT-1NASA															
545-59-2824	180002	00	01	2-14520-2310	LBR		5110.00	0	1020.00	0	.00	0	511.00	0	102.00	0	.00	0	
	180002	00	01	2-14520-3200	BEN		95.56	0	19.07	0	.00	0							
LABOR TOTALS							5,110.00		1,020.00		.00		511.00		102.00		.00		
BENEFIT TOTALS							95.56		19.07		.00								
RITZ, MICHELE LORRAINE				2CB-2GBUS															
063-60-7580	250034	00	01	1-42502-1160	LBR		74693.99	0	7469.40	0	.00	0	1400.00	0	14				
	250034	00	01	1-42502-3100	BEN		22994.23	0	2097.26	0	.00	0							
LABOR TOTALS							74,693.99		7,469.40		.00		1,400.00		14				
BENEFIT TOTALS							22,994.23		2,097.26		.00								
FROGNER, ASHELEY M				2CE-2OLDA															
624-07-1370	260003	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0					
	260003	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0							
LABOR TOTALS							1,660.00		.00		.00		41.50						
BENEFIT TOTALS							168.82		.00		.00								
FU, BILL SHIH CHIEH																			
562-89-1909	293001	02	01	1-42504-1320	LBR		3998.46	0	264.54	0	.00	0	60.00	0					
	273001	03	01	1-42504-1445	LBR		457.20	0	.00	0	.00	0	12.00	0					
	273001	03	01	1-42504-3100	BEN		87.15	0	.00	0	.00	0							
	293001	02	01	1-42504-3100	BEN		738.66	0	26.90	0	.00	0							
	232236	00	01	1-52023-2170	LBR		2652.10	0	.00	0	.00	0	91.65	0					
	232236	00	01	1-52023-3100	BEN		1078.71	0	.00	0	.00	0							
	232236	00	01	1-52063-2170	LBR		5932.53	0	.00	0	.00	0	221.88	0					
	232236	00	01	1-52063-3100	BEN		2314.07	0	.00	0	.00	0							
	232236	00	01	2-12572-2170	LBR		25753.84	6951	.00	0	.00	0	679.53	0					
	232236	00	01	2-12572-3100	BEN		10178.53	2679	.00	0	.00	0							
	236604	00	01	6-10570-2185	LBR		2856.27	0	.00	0	.00	0	104.31	0					
	236604	00	01	6-10570-3100	BEN		1215.72	0	.00	0	.00	0							
	232236	00	01	6-10585-2150	LBR		1179.60	0	.00	0	.00	0	43.08	0	.00	0	.00	0	
	232236	00	01	6-10585-3100	BEN		526.79	0	.00	0	.00	0							
LABOR TOTALS							42,830.00		264.54		.00		1,212.45		.00		.00		
BENEFIT TOTALS							16,139.63		26.90		.00								
FU, BIN				2AC-2BOOK															
621-19-5601	280001	00	01	1-48226-2310	LBR		433.68	0	106.31	0	.00	0	64.25	0	15.75	0	.00	0	
	280001	00	01	1-48226-3200	BEN		8.12	0	1.99	0	.00	0							
LABOR TOTALS							433.68		106.31		.00		64.25		15.75		.00		

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE/ DIRECT	RLOC I
				LABOR TOTALS			36,560.01		3,471.97		.00		649.76		42.00	
				BENEFIT TOTALS			2,822.44		268.04		.00					
GANNON, PATRICK L				2AC-2CMPS												
606-68-6785	210054	00	01	1-48224-2110	LBR		66074.96	0	5506.24	0	.00	0	1670.40	0	139.20	0
	210054	00	01	1-48224-3100	BEN		24770.49	0	2024.40	0	.00	0				
	210054	00	01	1-48228-2110	LBR		16518.90	0	1376.58	0	.00	0	417.60	0	34.80	0
	210054	00	01	1-48228-3100	BEN		6192.64	0	506.11	0	.00	0				
				LABOR TOTALS			82,593.86		6,882.82		.00		2,088.00		174.00	
				BENEFIT TOTALS			30,963.13		2,530.51		.00					
GAO, HAILUN				2BH-2ENVS												
623-46-0290	280001	00	01	2-12916-2310	LBR		476.88	0	.00	0	.00	0	54.50	0	.00	0
	280001	00	01	2-12916-3200	BEN		8.92	0	.00	0	.00	0				
				LABOR TOTALS			476.88		.00		.00		54.50		.00	
				BENEFIT TOTALS			8.92		.00		.00					
GARBACEA, DELIA-MANUELA				2CB-2CIS												
616-90-3089	250111	00	01	1-42503-1160	LBR		78144.10	0	7814.41	0	1800.00	1800	1400.00	0	140.00	0
	291001	02	01	1-42503-1320	LBR		6585.44	0	.00	0	.00	0	72.00	0	.00	0
	292001	02	01	1-42503-1320	LBR		2146.77	0	142.03	0	.00	0	36.00	0	.00	0
	293001	02	01	1-42503-1320	LBR		2146.74	0	142.02	0	.00	0	36.00	0	.00	0
	250111	00	01	1-42503-3100	BEN		11996.09	0	1153.79	0	.00	0				
	291001	02	01	1-42503-3100	BEN		789.65	21	.00	0	.00	0				
	292001	02	01	1-42503-3100	BEN		85.22	0	5.64	0	.00	0				
	293001	02	01	1-42503-3100	BEN		85.23	0	5.64	0	.00	0				
	250111	00	01	1-44043-1160	LBR		.00	0	.00	0	1800.00-	1800-	.00	0	.00	0
				LABOR TOTALS			89,023.05		8,098.46		.00		1,544.00		140.00	
				BENEFIT TOTALS			12,956.19		1,165.07		.00					
GARCIA, ALMA D				2ST-2FNAI												
609-10-7667	232222	00	01	2-12681-2170	LBR		30669.53	0	3548.65	0	.00	0	1574.00	0	174.00	0
	232222	00	01	2-12681-2360	LBR		2696.67	0	107.07	0	.00	0	93.50	0	3.50	0
	232222	00	01	2-12681-3100	BEN		13831.99	0	1560.13	0	.00	0				
	232222	00	01	2-12681-3200	BEN		208.96	0	8.19	0	.00	0				
	232222	00	01	2-12684-2170	LBR		9540.11	0	.00	0	.00	0	514.00	0	.00	0
	232222	00	01	2-12684-3100	BEN		4434.21	0	.00	0	.00	0				
				LABOR TOTALS			42,906.31		3,655.72		.00		2,181.50		177.50	
				BENEFIT TOTALS			18,475.16		1,568.32		.00					
GARCIA, ARTURO				2AC-2CUST												
605-22-5937	230675	00	01	1-41139-2180	LBR		10329.76	0	.00	0	.00	0	499.91	0	.00	0
	430080	00	01	1-41139-2180	LBR		7607.84	0	3803.92	0	.00	0	355.50	0	175.50	0
	230675	00	01	1-41139-2360	LBR		1245.04	0	.00	0	.00	0	40.50	0	.00	0
	430080	00	01	1-41139-2360	LBR		793.00	0	793.00	0	.00	0	35.00	0	35.00	0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HO MO- DIREC
	194001	02	01	1-41810-1320	LBR		4145.61	0	1564.73	0	.00	0	48.00	0	16.0
	174001	03	01	1-41810-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.0
	174001	03	01	1-41810-3100	BEN		101.21	0	30.56	0	.00	0			
	193001	02	01	1-41810-3100	BEN		826.73	0	47.76	0	.00	0			
	194001	02	01	1-41810-3100	BEN		791.79	0	272.45	0	.00	0			
				LABOR TOTALS			8,817.90		2,014.58		.00		108.00		20.0(
				BENEFIT TOTALS			1,719.73		350.77		.00				
GOBENA, LELLO TILAHUN				2LS-2LIB											
475-39-7762	280002	00	01	1-42306-2310	LBR		2128.44	0	325.94	0	.00	0	243.25	0	37.25
	280002	00	01	1-42306-3200	BEN		39.81	0	6.10	0	.00	0			
	240002	00	01	1-44036-3100	BEN		37.64	37	.00	0	.00	0			
	240002	00	01	2-32111-2700	LBR		2012.50	0	.00	0	.00	0	230.00	0	.00
	240002	00	01	2-32111-3100	BEN		.00	37-	.00	0	.00	0			
				LABOR TOTALS			4,140.94		325.94		.00		473.25		37.25
				BENEFIT TOTALS			77.45		6.10		.00				
GODDARD, NETTYE GEORGE				-											
422-18-5869	272001	03	01	1-42680-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00
	274001	03	01	1-42680-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00
	272001	03	01	1-42680-3100	BEN		22.74	0	.00	0	.00	0			
	274001	03	01	1-42680-3100	BEN		22.74	0	7.58	0	.00	0			
	292001	02	01	1-42682-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00
	294001	02	01	1-42682-1320	LBR		4510.02	0	1702.26	0	.00	0	48.00	0	16.00
	292001	02	01	1-42682-3100	BEN		179.05	0	11.85	0	.00	0			
	294001	02	01	1-42682-3100	BEN		179.05	0	67.58	0	.00	0			
				LABOR TOTALS			10,166.08		2,191.64		.00		120.00		20.00
				BENEFIT TOTALS			403.58		87.01		.00				
GODINEZ, CHRISTY				1SM-1FAID											
327-46-1855	130161	00	01	1-41272-2170	LBR		52642.03	0	4386.83	0	.00	0	1956.54	0	163.04
	130161	00	01	1-41272-3100	BEN		20202.35	0	1683.53	0	.00	0			
	130161	00	01	2-11683-2170	LBR		864.47	0	.00	0	.00	0	32.87	0	.00
	130161	00	01	2-11683-3100	BEN		334.97	0	.00	0	.00	0			
	130161	00	01	2-11684-2170	LBR		2667.54	0	294.34	0	.00	0	98.59	0	10.96
	130161	00	01	2-11684-3100	BEN		1020.61	0	112.96	0	.00	0			
				LABOR TOTALS			56,174.04		4,681.17		.00		2,088.00		174.00
				BENEFIT TOTALS			21,557.93		1,796.49		.00				
GODLEY, JANE E				-											
555-62-8477	291006	03	01	1-42248-1430	LBR		526.72	0	.00	0	.00	0	12.00	0	.00
	291006	03	01	1-42248-3200	BEN		41.97	0	.00	0	.00	0			
	292001	02	01	1-42250-1320	LBR		1840.63	0	121.78	0	.00	0	24.00	0	.00
	292002	02	01	1-42250-1320	LBR		1844.77	0	122.05	0	.00	0	24.00	0	.00
	293001	02	01	1-42250-1320	LBR		1840.62	0	121.77	0	.00	0	24.00	0	.00

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	HOURS CURR-PERIOD DIRECT	CURR-PERIOD RLOC
GONZALEZ, ALBERT				-														
559-96-4870	192001	02	01	1-51505-1320	LBR		5704.77	0	260.19	0	.00	0	108.00	0	.00	0	.00	0
	193001	02	01	1-51505-1320	LBR		5191.21	0	1281.28	0	.00	0	108.10	0	21.62	0	.00	0
	192001	02	01	1-51505-3100	BEN		454.67	0	20.74	0	.00	0						
	193001	02	01	1-51505-3100	BEN		413.73	0	102.12	0	.00	0						
				LABOR TOTALS			10,895.98		1,541.47		.00		216.10		21.62		.00	
				BENEFIT TOTALS			868.40		122.86		.00							
GONZALEZ, AMELIA				-														
564-98-8866	191001	02	01	1-41616-1320	LBR		3991.66	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	192001	02	01	1-41616-1320	LBR		4400.17	0	291.13	0	.00	0	72.00	0	.00	0	.00	0
	193001	02	01	1-41616-1320	LBR		4400.16	0	291.12	0	.00	0	72.00	0	.00	0	.00	0
	194001	02	01	1-41616-1320	LBR		4400.16	0	1660.80	0	.00	0	72.00	0	24.00	0	.00	0
	194002	02	01	1-41616-1330	LBR		161.66	0	10.70	0	.00	0	3.00	0	.00	0	.00	0
	194003	02	01	1-41616-1330	LBR		226.32	0	226.32	0	.00	0	3.00	0	3.00	0	.00	0
	191001	02	01	1-41616-3100	BEN		487.78	0	.00	0	.00	0						
	192001	02	01	1-41616-3100	BEN		537.69	0	35.57	0	.00	0						
	193001	02	01	1-41616-3100	BEN		537.69	0	35.58	0	.00	0						
	194001	02	01	1-41616-3100	BEN		537.71	0	202.96	0	.00	0						
	194002	02	01	1-41616-3100	BEN		19.75	0	1.31	0	.00	0						
	194003	02	01	1-41616-3100	BEN		27.65	0	27.65	0	.00	0						
				LABOR TOTALS			17,580.13		2,480.07		.00		270.00		27.00		.00	
				BENEFIT TOTALS			2,148.27		303.07		.00							
GONZALEZ, ELENA M				-														
564-74-3197	192001	02	01	1-41654-1320	LBR		3044.28	0	201.42	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	1-41654-1320	LBR		3044.28	0	201.42	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41654-1320	LBR		3044.28	0	1149.04	0	.00	0	36.00	0	12.00	0	.00	0
	172001	03	01	1-41654-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		14.44	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		76.72	0	5.08	0	.00	0						
	193001	02	01	1-41654-3100	BEN		76.71	0	5.07	0	.00	0						
	194001	02	01	1-41654-3100	BEN		76.72	0	28.96	0	.00	0						
				LABOR TOTALS			9,705.88		1,551.88		.00		120.00		12.00		.00	
				BENEFIT TOTALS			244.59		39.11		.00							
GONZALEZ, IMELDA				4HA-4HURS														
551-43-4467	470012	00	01	1-44062-2170	LBR		65184.07	0	5586.04	0	.00	0	2088.00	0	174.00	0	.00	0
	470012	00	01	1-44062-3100	BEN		25709.41	0	2361.83	0	.00	0						
				LABOR TOTALS			65,184.07		5,586.04		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			25,709.41		2,361.83		.00							
GONZALEZ, ISMAEL				-														
573-50-3087	191001	03	01	1-41378-1430	LBR		3332.85	0	.00	0	.00	0	63.75	0	.00	0	.00	0

EOPS Counselor

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE/ CURR-PERIOD DIRECT	HOURS MO-TO-DATE/ CURR-PERIOD RLOC
	192001	03	01	1-41378-1430	LBR		13733.01	0	.00	0	.00	0	255.00	0	.00	0
	193001	03	01	1-41378-1430	LBR		8031.00	0	.00	0	.00	0	150.00	0	.00	0
	193010	03	01	1-41378-1430	LBR		4283.20	0	.00	0	.00	0	80.00	0	.00	0
	194001	03	01	1-41378-1430	LBR		7897.16	0	.00	0	.00	0	147.50	0	.00	0
	191001	03	01	1-41378-3200	BEN		132.30	0	.00	0	.00	0				
	192001	03	01	1-41378-3200	BEN		545.19	0	.00	0	.00	0				
	193001	03	01	1-41378-3200	BEN		318.83	0	.00	0	.00	0				
	193010	03	01	1-41378-3200	BEN		170.05	0	.00	0	.00	0				
	194001	03	01	1-41378-3200	BEN		313.52	0	.00	0	.00	0				
				LABOR TOTALS			37,277.22		.00		.00		696.25		.00	
				BENEFIT TOTALS			1,479.89		.00		.00					
GONZALEZ, PETER ANTHONY																
559-15-2116	192001	02	01	1-51505-1320	LBR		5704.77	0	260.19	0	.00	0	108.00	0	.00	0
	193001	02	01	1-51505-1320	LBR		2915.21	0	646.62	0	.00	0	54.12	0	9.02	0
	193003	02	01	1-51505-1330	LBR		171.39	0	11.34	0	.00	0	3.00	0	.00	0
	192001	02	01	1-51505-3100	BEN		454.68	0	20.74	0	.00	0				
	193001	02	01	1-51505-3100	BEN		232.37	0	51.56	0	.00	0				
	193003	02	01	1-51505-3100	BEN		13.64	0	.89	0	.00	0				
				LABOR TOTALS			8,791.37		918.15		.00		165.12		9.02	
				BENEFIT TOTALS			700.69		73.19		.00					
GONZALEZ, VIOLET C				2BH-2OTI												
564-13-9711	280002	00	01	2-12249-2310	LBR		436.00	0	240.00	0	.00	0	54.50	0	30.00	0
	280002	00	01	2-12249-3200	BEN		8.15	0	4.49	0	.00	0				
	280001	00	01	2-12480-2310	LBR		260.00	0	.00	0	.00	0	32.50	0	.00	0
	280002	00	01	2-12480-2310	LBR		436.00	0	240.00	0	.00	0	54.50	0	30.00	0
	280001	00	01	2-12480-3200	BEN		4.86	0	.00	0	.00	0				
	280002	00	01	2-12480-3200	BEN		8.16	0	4.49	0	.00	0				
	280001	00	01	2-12640-2310	LBR		260.00	0	.00	0	.00	0	32.50	0	.00	0
	280001	00	01	2-12640-3200	BEN		4.86	0	.00	0	.00	0				
				LABOR TOTALS			1,392.00		480.00		.00		174.00		60.00	
				BENEFIT TOTALS			26.03		8.98		.00					
GOODMAN, JULIE SMITH				2LA-2RDNS												
557-76-1484	260002	00	01	1-42211-2350	LBR		499.30	499	.00	0	.00	0	.00	0	.00	0
	260003	00	01	1-42211-2350	LBR		189.95	189	.00	0	.00	0	.00	0	.00	0
	260005	00	01	1-42211-2350	LBR		1681.40	1681	.00	0	.00	0	.00	0	.00	0
	260002	00	01	1-42211-3200	BEN		50.79	50	.00	0	.00	0				
	260003	00	01	1-42211-3200	BEN		19.31	19	.00	0	.00	0				
	260005	00	01	1-42211-3200	BEN		171.00	171	.00	0	.00	0				
	234864	00	01	1-42212-2350	LBR		55.22	55	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-42212-2350	LBR		36.18	36	.00	0	.00	0	.00	0	.00	0
	234864	00	01	1-42212-2355	LBR		920.67	920	.00	0	.00	0	.00	0	.00	0
	234864	00	01	1-42212-3200	BEN		99.52	99	.00	0	.00	0				
	260001	00	01	1-42212-3200	BEN		2.76	2	.00	0	.00	0				

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT CD	ACCT NO	OBJ CODE	TYPE	RCD	FISCAL-TO-DATE AMOUNTS DIRECT	RLOC	MONTH-TO-DATE AMOUNTS DIRECT	RLOC	CURRENT-PERIOD AMOUNTS DIRECT	RLOC	FISC-TO-DATE HOURS DIRECT	RLOC	MO-TO-DATE HOURS DIRECT	RLOC		
					LABOR TOTALS				42,006.33		4,201.37		.00		1,771.64		174.00			
					BENEFIT TOTALS				22,974.26		2,062.21		.00							
GUDANETS, YAN					1IT-1NASA															
302-90-5027	280001	00	01	2-14520-2310			LBR		877.50	0	.00	0	.00	0	87.75	0	.00	0		
	280001	00	01	2-14520-3200			BEN		83.54	0	.00	0	.00	0						
					LABOR TOTALS				877.50		.00		.00		87.75		.00			
					BENEFIT TOTALS				83.54		.00		.00							
GUEVARA, ALFONSO C					2AC-2ECFR															
565-62-5046	230001	00	01	1-52026-2170			LBR		81557.52	0	6796.46	0	.00	0	2092.50	0	178.50	0		
	230001	00	01	1-52026-2360			LBR		234.36	0	.00	0	.00	0	4.00	0	.00	0		
	230001	00	01	1-52026-3100			BEN		31399.61	0	2662.55	0	.00	0						
	230001	00	01	1-52026-3200			BEN		17.69	0	.00	0	.00	0						
	230001	00	01	1-52239-2360			LBR		1376.87	0	1376.87	0	.00	0	23.00	0	23.00	0	.00	0
	230001	00	01	1-52239-3200			BEN		104.17	0	104.17	0	.00	0						
					LABOR TOTALS				83,168.75		8,173.33		.00		2,119.50		201.50		.00	
					BENEFIT TOTALS				31,521.47		2,766.72		.00							
GUEVARA, DAWNIS CATHERINE					2PE-2PE															
545-75-0017	250276	00	01	1-42702-1160			LBR		62596.60	0	6259.66	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42702-1320			LBR		1417.44	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	291002	02	01	1-42702-1320			LBR		4256.56	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	250276	00	01	1-42702-3100			BEN		18980.63	0	1909.12	0	.00	0						
	291001	02	01	1-42702-3100			BEN		122.79	9	.00	0	.00	0						
	291002	02	01	1-42702-3100			BEN		340.41	0	.00	0	.00	0						
	257712	00	01	1-42740-1160			LBR		6259.66	0	.00	0	.00	0	281.81	0	.00	0	.00	0
	257712	00	01	1-42740-3100			BEN		3708.26	0	.00	0	.00	0						
					LABOR TOTALS				74,530.26		6,259.66		.00		1,777.81		140.00		.00	
					BENEFIT TOTALS				23,152.09		1,909.12		.00							
GUEVARA, ERIKA C					2ST-2EOPS															
099-40-2064	230011	00	01	2-12664-2170			LBR		57161.86	0	4776.07	0	.00	0	2088.00	0	174.00	0	.00	0
	230011	00	01	2-12664-3100			BEN		26165.29	0	2183.11	0	.00	0						
					LABOR TOTALS				57,161.86		4,776.07		.00		2,088.00		174.00		.00	
					BENEFIT TOTALS				26,165.29		2,183.11		.00							
GUEVARA, JORGE					2IC-2IIS															
561-72-9513	250125	00	01	1-42682-1160			LBR		79662.80	0	7966.28	0	.00	0	1400.00	0	140.00	0	.00	0
	291001	02	01	1-42682-1320			LBR		5388.50	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	291002	02	01	1-42682-1320			LBR		5388.50	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42682-1320			LBR		4692.22	0	310.45	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42682-1320			LBR		4692.21	0	310.44	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42682-1320			LBR		4692.21	0	1771.03	0	.00	0	48.00	0	16.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE/ CURR-PERIOD HOURS DIRECT	MO-TO-DATE/ CURR-PERIOD HOURS RLOC	CURR-PERIOD HOURS
LABOR TOTALS							44,882.91		4,537.66		.00		2,134.63		200.25		
BENEFIT TOTALS							24,374.94		2,122.56		.00						
GURYEV, OLEG BORISOVICH	1LB-1TUTR																
617-25-3989	140004	00	01	1-44036-3100	BEN		3.93	3	.00	0	.00	0					
	140005	00	01	1-44036-3100	BEN		56.69	56	11.86	11	.00	0					
	140004	00	01	2-31111-2700	LBR		210.00	0	.00	0	.00	0	21.00	0	.00	0	
	140005	00	01	2-31111-2700	LBR		3031.52	0	123.63	0	.00	0	282.00	0	11.50	0	
	140005	00	01	2-31111-3100	BEN		.00	56-	9.55-	11-	.00	0					
LABOR TOTALS							3,241.52		123.63		.00		303.00		11.50		
BENEFIT TOTALS							60.62		2.31		.00						
GURYEVA, GANNA IVANOVNA	1BH-1D H																
617-25-9852	140005	00	01	1-44036-3100	BEN		55.43	55	.00	0	.00	0					
	140005	00	01	2-31111-2700	LBR		2964.00	0	.00	0	.00	0	247.00	0	.00	0	
	140005	00	01	2-31111-3100	BEN		.00	55-	.00	0	.00	0					
LABOR TOTALS							2,964.00		.00		.00		247.00		.00		
BENEFIT TOTALS							55.43		.00		.00						
GUSMAN, FRANCES ANN	1SM-1SM																
568-66-9917	110100	00	01	1-41067-1210	LBR		54892.33	227	4555.45	0	.00	0	1044.11	0	87.04	0	.00	0
	110100	00	01	1-41067-3100	BEN		14396.89	59	1194.79	0	.00	0						
	110100	00	01	1-41068-1210	LBR		49414.10	204	4100.76	0	.00	0	939.86	0	78.31	0	.00	0
	110100	00	01	1-41068-3100	BEN		12960.04	53	1075.52	0	.00	0						
	110100	00	01	2-11424-1210	LBR		4135.62	22	454.61	0	.00	0	78.00	0	8.65	0	.00	0
	110100	00	01	2-11424-3100	BEN		1082.06	5	119.24	0	.00	0						
	110100	00	01	2-11655-1210	LBR		887.84	0	.00	0	.00	0	17.34	0	.00	0	.00	0
	110100	00	01	2-11655-3100	BEN		235.68	0	.00	0	.00	0						
LABOR TOTALS							109,329.89		9,110.82		.00		2,079.31		174.00		.00	
BENEFIT TOTALS							28,674.67		2,389.55		.00							
GUSTAFSON, MARK RICHARD	2CA-2MUSI																
555-82-2434	260003	00	01	1-42622-2350	LBR		1301.16	0	123.92	0	.00	0	84.00	0	8.00	0	.00	0
	260003	00	01	1-42622-3200	BEN		132.36	0	12.61	0	.00	0						
LABOR TOTALS							1,301.16		123.92		.00		84.00		8.00		.00	
BENEFIT TOTALS							132.36		12.61		.00							
GUSTAFSON, MICHAEL LUTHER	-																
526-70-7659	192001	02	01	1-41765-1320	LBR		131.93-	0	.00	0	.00	0	.00	0	.00	0	.00	0
	192002	02	01	1-41765-1320	LBR		158.31-	0	.00	0	.00	0	.00	0	.00	0	.00	0
	192001	02	01	1-41765-3100	BEN		10.06-	0	.00	0	.00	0						
	192002	02	01	1-41765-3100	BEN		12.06-	0	.00	0	.00	0						
LABOR TOTALS							290.24-		.00		.00		.00		.00		.00	

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Dear Student Outreach

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
	430497	00	01	2-84110-2360	LBR		35.04	0	35.04	0	.00	0	1.00	0	1.00	0	.00	0
	430497	00	01	2-84110-3200	BEN		2.68	0	2.68	0	.00	0						
LABOR TOTALS							47,918.26		4,134.30		.00		2,098.00		176.00		.00	
BENEFIT TOTALS							19,771.77		1,673.52		.00							
HAMILTON, LOIS E				2WF-20TI														
541-48-8357	232280	00	01	2-12239-2170	LBR		24965.46	4222	.00	0	.00	0	854.87	0	.00	0		0
	232280	00	01	2-12239-3100	BEN		12205.47	2072	.00	0	.00	0						
	232280	00	01	6-10585-2150	LBR		414.93	0	.00	0	.00	0	17.10	0	.00	0		0
	232280	00	01	6-10585-3100	BEN		198.37	0	.00	0	.00	0						
LABOR TOTALS							25,380.39		.00		.00		871.97		.00			
BENEFIT TOTALS							12,403.84		.00		.00							
HAMILTON, WEBSTER M																		
574-30-6221	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42656-1320	LBR		2508.38	0	.00	0	.00	0	36.00	0	.00	0		
	292001	02	01	1-42656-1320	LBR		2765.13	0	182.95	0	.00	0	36.00	0	.00	0		
	293001	02	01	1-42656-1320	LBR		2889.45	0	191.16	0	.00	0	36.00	0	.00	0		
	294001	02	01	1-42656-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0		
	294002	02	01	1-42656-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0		
	294010	02	01	1-42656-1320	LBR		247.56	0	16.38	0	.00	0	3.00	0	.00	0		
	272001	03	01	1-42656-1445	LBR		526.70	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42656-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42656-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42656-3100	BEN		64.37	0	.00	0	.00	0						
	273001	03	01	1-42656-3100	BEN		67.26	0	.00	0	.00	0						
	274001	03	01	1-42656-3100	BEN		67.26	0	22.42	0	.00	0						
	291001	02	01	1-42656-3100	BEN		306.53	0	.00	0	.00	0						
	292001	02	01	1-42656-3100	BEN		337.88	0	22.35	0	.00	0						
	293001	02	01	1-42656-3100	BEN		353.11	0	23.37	0	.00	0						
	294001	02	01	1-42656-3100	BEN		353.09	0	133.26	0	.00	0						
	294002	02	01	1-42656-3100	BEN		353.10	0	133.27	0	.00	0						
	294010	02	01	1-42656-3100	BEN		30.25	0	2.01	0	.00	0						
LABOR TOTALS							15,917.00		2,755.15		.00		221.00		28.00			
BENEFIT TOTALS							1,945.07		336.68		.00							
HAMILTON-KILILI, ASHER LY 1SM-1FAID																		
520-21-3408	132214	00	01	2-11683-2170	LBR		3826.92	0	.00	0	.00	0	174.00	0	.00	0		
	132214	00	01	2-11683-3100	BEN		1650.39	0	.00	0	.00	0						
	132214	00	01	6-10585-2150	LBR		1039.87	0	.00	0	.00	0	47.28	0	.00	0		
	132214	00	01	6-10585-3100	BEN		448.48	0	.00	0	.00	0						
LABOR TOTALS							4,866.79		.00		.00		221.28		.00			
BENEFIT TOTALS							2,098.87		.00		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
546-80-3253	130380	00	01	1-41306-2170		LBR	46551.03	0	4393.11	0	.00	0	1946.32	0	174.00	0	.00	0
	130380	00	01	1-41306-3100		BEN	23997.31	0	2108.78	0	.00	0						
				LABOR TOTALS			46,551.03		4,393.11		.00		1,946.32		174.00		.00	
				BENEFIT TOTALS			23,997.31		2,108.78		.00							
HARDING, MICHAEL J				-														
546-56-8745	292001	02	01	1-42764-1320		LBR	4327.07	0	286.28	0	.00	0	48.00	0	.00	0	.00	0
	292002	02	01	1-42764-1320		LBR	3163.77	0	209.31	0	.00	0	36.00	0	.00	0	.00	0
	293001	02	01	1-42764-1320		LBR	4327.08	0	286.29	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42764-1320		LBR	3163.77	0	209.31	0	.00	0	36.00	0	.00	0	.00	0
	272001	03	01	1-42764-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42764-3100		BEN	24.55	0	.00	0	.00	0						
	292001	02	01	1-42764-3100		BEN	171.79	0	11.36	0	.00	0						
	292002	02	01	1-42764-3100		BEN	125.58	0	8.31	0	.00	0						
	293001	02	01	1-42764-3100		BEN	171.81	0	11.37	0	.00	0						
	293002	02	01	1-42764-3100		BEN	125.61	0	8.31	0	.00	0						
	273001	03	01	1-42768-1445		LBR	618.36	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42768-3100		BEN	24.54	0	.00	0	.00	0						
				LABOR TOTALS			16,218.43		991.19		.00		192.00		.00		.00	
				BENEFIT TOTALS			643.88		39.35		.00							
HARGRAVE, GARY L				-														
549-78-5908	192001	02	01	1-51506-1320		LBR	6571.25	0	299.71	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320		LBR	6715.90	0	444.35	0	.00	0	108.00	0	.00	0	.00	0
	192001	02	01	1-51506-3100		BEN	507.29	0	23.14	0	.00	0						
	193001	02	01	1-51506-3100		BEN	518.47	0	34.30	0	.00	0						
				LABOR TOTALS			13,287.15		744.06		.00		216.12		.00		.00	
				BENEFIT TOTALS			1,025.76		57.44		.00							
HARGREAVES, AMBER THERESE				2AC-2BOOK														
622-22-0310	280001	00	01	1-48226-2310		LBR	762.75	0	.00	0	.00	0	113.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200		BEN	14.26	0	.00	0	.00	0						
				LABOR TOTALS			762.75		.00		.00		113.00		.00		.00	
				BENEFIT TOTALS			14.26		.00		.00							
HARRAL, KEVIN				2ST-2FNAI														
545-73-9861	232224	00	01	2-12681-2170		LBR	37269.62	0	4249.27	0	.00	0	1566.00	0	174.00	0	.00	0
	232224	00	01	2-12681-2360		LBR	2357.04	0	540.32	0	.00	0	206.25	0	14.75	0	.00	0
	232224	00	01	2-12681-3100		BEN	15193.09	0	1719.73	0	.00	0						
	232224	00	01	2-12681-3200		BEN	179.11	0	40.90	0	.00	0						
	232224	00	01	2-12684-2170		LBR	11690.76	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	232224	00	01	2-12684-2360		LBR	967.55	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	232224	00	01	2-12684-3100		BEN	4892.83	0	.00	0	.00	0						
	232224	00	01	2-12684-3200		BEN	5.13	0	.00	0	.00	0						

FA
Outreach Coordinator

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE / RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE / RLOC	HOURS MO-TO-DATE/ C DIRECT	HOURS MO-TO-DATE/ C RLOC	DI
LABOR TOTALS							51,384.61		4,789.59		.00		2,155.25		188.75		
BENEFIT TOTALS							20,270.16		1,760.63		.00						
HARRINGTON, SHERWOOD				2PS-2ASTR													
127-38-8638	250352	00	01	1-42768-1160	LBR		76644.10	0	7664.41	0	.00	0	1400.00	0	140.00	0	
	291001	02	01	1-42768-1320	LBR		5790.30	0	.00	0	.00	0	60.00	0	.00	0	
	292001	02	01	1-42768-1320	LBR		5010.61	0	331.50	0	.00	0	60.00	0	.00	0	
	292002	02	01	1-42768-1320	LBR		5010.61	0	331.50	0	.00	0	60.00	0	.00	0	
	292003	03	01	1-42768-1320	LBR		401.01	0	26.68	0	.00	0	4.83	0	.00	0	
	292004	03	01	1-42768-1320	LBR		401.01	0	26.68	0	.00	0	4.83	0	.00	0	
	293001	02	01	1-42768-1320	LBR		5010.65	0	331.52	0	.00	0	60.00	0	.00	0	
	293002	02	01	1-42768-1320	LBR		5010.66	0	331.53	0	.00	0	60.00	0	.00	0	
	293003	03	01	1-42768-1320	LBR		400.84	0	26.51	0	.00	0	4.80	0	.00	0	
	294001	02	01	1-42768-1320	LBR		5010.66	0	1891.24	0	.00	0	60.00	0	20.00	0	
	294002	02	01	1-42768-1320	LBR		6258.42	0	3139.00	0	.00	0	76.00	0	36.00	0	
	294003	03	01	1-42768-1320	LBR		400.84	0	400.84	0	.00	0	4.80	0	4.80	0	
	250352	00	01	1-42768-3100	BEN		22107.95	0	2353.47	0	.00	0					
	291001	02	01	1-42768-3100	BEN		715.56	19	.00	0	.00	0					
	292001	02	01	1-42768-3100	BEN		198.93	0	13.16	0	.00	0					
	292002	02	01	1-42768-3100	BEN		198.92	0	13.16	0	.00	0					
	292003	03	01	1-42768-3100	BEN		15.93	0	1.06	0	.00	0					
	292004	03	01	1-42768-3100	BEN		15.91	0	1.05	0	.00	0					
	293001	02	01	1-42768-3100	BEN		198.88	0	13.15	0	.00	0					
	293002	02	01	1-42768-3100	BEN		198.94	0	13.17	0	.00	0					
	293003	03	01	1-42768-3100	BEN		15.91	0	1.05	0	.00	0					
	294001	02	01	1-42768-3100	BEN		198.88	0	75.08	0	.00	0					
	294002	02	01	1-42768-3100	BEN		248.49	0	124.63	0	.00	0					
	294003	03	01	1-42768-3100	BEN		15.92	0	15.92	0	.00	0					
LABOR TOTALS							115,349.71		14,501.41		.00		1,855.26		200.80		.00
BENEFIT TOTALS							24,130.22		2,624.90		.00						
HARRIS, ACH'SAH ROLYNCA				1AA-1IEDR													
562-55-2320	130025	00	01	1-41150-2170	LBR		27046.27	0	3734.69	0	.00	0	1312.91	0	174.00	0	.00	0
	130025	00	01	1-41150-3100	BEN		11271.02	0	1592.56	0	.00	0					
LABOR TOTALS							27,046.27		3,734.69		.00		1,312.91		174.00		.00
BENEFIT TOTALS							11,271.02		1,592.56		.00						
HARRIS, HUMPHREY ANDREW				-													
562-11-9663	193002	02	01	1-41521-1320	LBR		2409.13	0	159.39	0	.00	0	54.05	0	.00	0	.00	0
	193002	02	01	1-41521-3100	BEN		192.05	0	12.71	0	.00	0					
	192001	02	01	1-51506-1320	LBR		5415.90	0	247.02	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5535.11	0	1227.71	0	.00	0	108.06	0	18.01	0	.00	0
	192001	02	01	1-51506-3100	BEN		431.67	0	19.69	0	.00	0					
	193001	02	01	1-51506-3100	BEN		441.14	0	97.84	0	.00	0					
LABOR TOTALS							13,360.14		1,634.12		.00		270.23		18.01		.00
BENEFIT TOTALS							1,064.86		130.24		.00						

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DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 422
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC I
	274001	03	01	1-42662-3100	BEN		75.56	0	25.18	0	.00	0				
	293001	02	01	1-42662-3100	BEN		645.83	0	44.28	0	.00	0				
	293002	02	01	1-42662-3100	BEN		645.86	0	44.29	0	.00	0				
	294001	02	01	1-42662-3100	BEN		743.45	0	280.61	0	.00	0				
	294002	02	01	1-42662-3100	BEN		743.50	0	280.62	0	.00	0				
				LABOR TOTALS			24,358.06		5,523.64		.00		253.92		44.00	
				BENEFIT TOTALS			2,976.55		674.98		.00					
HENDERSON MCLEOD, JOYCE M 1SE-1SPED																
566-90-0864	134508	00	01	2-21231-2170	LBR		46535.89	0	4282.55	0	.00	0	1929.82	0	174.00	0
	134508	00	01	2-21231-3100	BEN		23628.73	0	2031.33	0	.00	0				
				LABOR TOTALS			46,535.89		4,282.55		.00		1,929.82		174.00	
				BENEFIT TOTALS			23,628.73		2,031.33		.00					
HENDERSON, APRIL COLONNA 1SM-1EOPS																
560-37-0773	130011	00	01	2-11668-2170	LBR		46708.60	0	4253.17	0	.00	0	1936.56	0	174.00	0
	130011	00	01	2-11668-3100	BEN		19550.06	0	1705.70	0	.00	0				
				LABOR TOTALS			46,708.60		4,253.17		.00		1,936.56		174.00	
				BENEFIT TOTALS			19,550.06		1,705.70		.00					
HENDERSON, BRUCE S 2LA-2RDNS																
422-56-6683	260003	00	01	1-42211-2350	LBR		296.30	296	.00	0	.00	0	.00	0	.00	0
	260003	00	01	1-42211-3200	BEN		11.77	11	.00	0	.00	0				
	250193	00	01	1-42223-1105	LBR		1750.00	0	.00	0	.00	0	.00	0	.00	0
	250193	00	01	1-42223-1160	LBR		77884.44	0	7788.44	0	.00	0	1225.00	0	122.50	0
	260003	00	01	1-42223-2350	LBR		231.89	296-	.00	0	.00	0	10.25	0	.00	0
	250193	00	01	1-42223-3100	BEN		16701.68	0	1648.02	0	.00	0				
	260003	00	01	1-42223-3200	BEN		9.21	11-	.00	0	.00	0				
	250193	00	01	1-42662-1105	LBR		250.00	0	.00	0	.00	0	.00	0	.00	0
	250193	00	01	1-42662-1160	LBR		11126.16	0	1112.62	0	.00	0	175.00	0	17.50	0
	250193	00	01	1-42662-3100	BEN		3992.95	0	235.43	0	.00	0				
				LABOR TOTALS			91,538.79		8,901.06		.00		1,410.25		140.00	
				BENEFIT TOTALS			20,715.61		1,883.45		.00					
HENDRICKSON, MARIBETH B 1SS-1PHIL																
555-64-3158	150195	00	01	1-41820-1105	LBR		4166.25	0	.00	0	.00	0	.00	0	.00	0
	150195	00	01	1-41820-1160	LBR		28130.70	0	2813.07	0	.00	0	1400.00	0	140.00	0
	150195	00	01	1-41820-3100	BEN		14385.19	0	1090.90	0	.00	0				
				LABOR TOTALS			32,296.95		2,813.07		.00		1,400.00		140.00	
				BENEFIT TOTALS			14,385.19		1,090.90		.00					
HENDRIX, VICTORIA LYNN 1FA-1FADV																
614-09-3602	160001	00	01	1-51618-2350	LBR		3463.38	1022-	332.28	0	.00	0	351.00	0	26.00	0	.00	0
	160001	00	01	1-51618-2360	LBR		629.44	0	9.59	0	.00	0	31.00	0	.50	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC	HOURS D
				LABOR TOTALS			131,576.22		11,085.90		.00		2,091.00		174.00		
				BENEFIT TOTALS			34,720.26		3,109.19		.00						
HOCHSTRASER, ALEX L				2CO-2COUN													
548-80-7646	230612	00	01	1-42287-2170	LBR		26735.17	6546	1682.40	0	.00	0	759.27	0	63.27	0	
	230612	00	01	1-42287-2860	LBR		6.65	0	6.65	0	.00	0	25	0	.25	0	
	230612	00	01	1-42287-3100	BEN		11002.10	2701	1161.11	0	.00	0					
	230612	00	01	1-42287-3200	BEN		.67	0	.67	0	.00	0					
	230612	00	01	1-42300-2170	LBR		26490.05	6546-	.00	0	.00	0	1218.75	0	.00	0	
	230612	00	01	1-42300-3100	BEN		9931.01	2701-	.00	0	.00	0					
	230612	00	01	6-10585-2150	LBR		8142.81	0	8142.81	0	.00	0	306.24	0	306.24	0	
	230612	00	01	6-10585-3100	BEN		1719.75	0	1719.75	0	.00	0					
				LABOR TOTALS			61,374.68		9,831.86		.00		2,284.51		369.76		
				BENEFIT TOTALS			22,653.53		2,881.53		.00						
HODGES, ACACIA EVE				1IT-1NASA													
552-71-5475	180002	00	01	2-14520-2310	LBR		5747.50	0	.00	0	.00	0	574.75	0	.00	0	
	180002	00	01	2-14520-3200	BEN		327.79	0	.00	0	.00	0					
				LABOR TOTALS			5,747.50		.00		.00		574.75		.00		
				BENEFIT TOTALS			327.79		.00		.00						
HODGES, PAMELA				1LB-1LIB													
566-90-0442	130154	00	01	1-41306-2170	LBR		50142.63	0	4317.11	0	.00	0	2088.00	0	174.00	0	
	130154	00	01	1-41306-3100	BEN		24706.04	0	2092.66	0	.00	0					
				LABOR TOTALS			50,142.63		4,317.11		.00		2,088.00		174.00		
				BENEFIT TOTALS			24,706.04		2,092.66		.00						
HOEKENGA, DAVID MARTIN				-													
607-28-2318	192099	03	01	1-41263-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192099	03	01	1-41263-3200	BEN		7.72	0	.00	0	.00	0						
	192001	02	01	1-41662-1320	LBR		4498.71	0	297.65	0	.00	0	72.00	0	.00	0	.00	0
	172001	03	01	1-41662-1445	LBR		457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41662-3100	BEN		35.29	0	.00	0	.00	0						
	192001	02	01	1-41662-3100	BEN		347.31	0	22.98	0	.00	0						
	192002	02	01	1-41820-1320	LBR		3998.47	0	264.55	0	.00	0	60.00	0	.00	0	.00	0
	194001	02	01	1-41820-1320	LBR		3931.81	0	1442.53	0	.00	0	60.00	0	20.00	0	.00	0
	192002	02	01	1-41820-3100	BEN		308.66	0	20.41	0	.00	0						
	194001	02	01	1-41820-3100	BEN		303.53	0	111.37	0	.00	0						
	293001	02	01	1-42804-1320	LBR		3998.46	0	264.54	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42804-3100	BEN		308.66	0	20.43	0	.00	0						
				LABOR TOTALS			16,984.71		2,269.27		.00		254.00		20.00		.00	
				BENEFIT TOTALS			1,311.17		175.19		.00							
HOFBAUER, MICHAEL J				1AA-1PD													

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	E
	191002	02	01	1-41702-3100	BEN		395.38	0	.00	0	.00	0					
	192001	02	01	1-41702-3100	BEN		414.51	0	25.01	0	.00	0					
	192002	02	01	1-41702-3100	BEN		414.49	0	25.02	0	.00	0					
	192003	02	01	1-41702-3100	BEN		414.53	0	25.01	0	.00	0					
	193001	02	01	1-41702-3100	BEN		414.50	0	25.01	0	.00	0					
	193002	02	01	1-41702-3100	BEN		414.52	0	25.01	0	.00	0					
	193003	02	01	1-41702-3100	BEN		414.52	0	25.02	0	.00	0					
	194001	02	01	1-41702-3100	BEN		391.51	0	142.68	0	.00	0					
	194002	02	01	1-41702-3100	BEN		389.15	0	113.28	0	.00	0					
	194003	02	01	1-41702-3100	BEN		389.15	0	113.28	0	.00	0					
				LABOR TOTALS			65,930.82		6,522.14		.00		2,067.76		168.41		
				BENEFIT TOTALS			27,889.04		2,437.56		.00						
HUNTER, GAVIN ROBERT				1SP-1INTL													
609-47-5915	180001	00	01	1-51939-2310	LBR		3472.50	0	312.50	0	.00	0	347.25	0	31.25	0	
	180002	00	01	1-51939-2310	LBR		155.00	0	155.00	0	.00	0	15.50	0	15.50	0	
	180001	00	01	1-51939-3200	BEN		64.93	0	5.84	0	.00	0					
	180002	00	01	1-51939-3200	BEN		2.90	0	2.90	0	.00	0					
				LABOR TOTALS			3,627.50		467.50		.00		362.75		46.75		
				BENEFIT TOTALS			67.83		8.74		.00						
HUNTER, KAREN KAY				2ST-2FNAI													
572-57-3836	240001	00	01	1-44036-3100	BEN		110.61	110	12.44	12	.00	0					
	280001	00	01	2-12681-2310	LBR		1312.50	0	765.00	0	.00	0	131.25	0	76.50	0	
	280001	00	01	2-12681-3200	BEN		24.54	0	14.31	0	.00	0					
	240001	00	01	2-32111-2700	LBR		5915.00	0	.00	0	.00	0	591.50	0	.00	0	
	240001	00	01	2-32111-3100	BEN		.00	110-	12.44-	12-	.00	0					
				LABOR TOTALS			7,227.50		765.00		.00		722.75		76.50		.00
				BENEFIT TOTALS			135.15		14.31		.00						
HUNTER, TERRY A				-													
548-72-2207	192050	03	01	1-41411-1430	LBR		30.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192050	03	01	1-41411-3200	BEN		3.23	0	.00	0	.00	0					
	174001	03	01	1-41606-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41606-3100	BEN		59.28	0	19.76	0	.00	0					
	191001	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191002	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191003	02	01	1-41702-1320	LBR		1789.93	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	191004	02	01	1-41702-1320	LBR		2045.64	0	.00	0	.00	0	36.00	0	.00	0	.00	0
	192001	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	192002	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	192003	02	01	1-41702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	193002	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	193003	02	01	1-41702-1320	LBR		2166.03	0	143.31	0	.00	0	36.00	0	.00	0	.00	0
	194001	02	01	1-41702-1320	LBR		2166.03	0	817.55	0	.00	0	36.00	0	12.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC		
	272001	03	01	1-42654-3100		BEN	48.90	0	.00	0	.00	0						
	273001	03	01	1-42654-3100		BEN	48.88	32	.00	0	.00	0						
	274001	03	01	1-42654-3100		BEN	48.89	0	16.30	0	.00	0						
	292001	02	01	1-42654-3100		BEN	256.66	0	16.99	0	.00	0						
	293002	02	01	1-42654-3100		BEN	256.67	0	16.97	0	.00	0						
	293003	02	01	1-42654-3100		BEN	43.97	0	2.90	0	.00	0						
	294001	02	01	1-42654-3100		BEN	256.71	0	96.90	0	.00	0						
	292002	03	01	1-42680-1430		LBR	150.23	0	.00	0	.00	0	3.75	0	.00	0		
	292002	03	01	1-42680-3200		BEN	15.29	0	.00	0	.00	0						
				LABOR TOTALS			9,696.67		1,475.44		.00		147.75		16.00			
				BENEFIT TOTALS			986.14		150.06		.00							
INDRAN, SANJIV				1LB-1TUTR														
602-45-2232	180001	00	01	1-41095-2410		LBR	82.50	82	82.50	82	.00	0	.00	0	.00	0		
	180001	00	01	1-41095-3200		BEN	1.54	1	1.54	1	.00	0						
	180001	00	01	1-41303-2410		LBR	463.50	82-	37.50-	82-	.00	0	79.00	0	6.00	0	.00	0
	180001	00	01	1-41303-3200		BEN	8.66	1-	.70-	1-	.00	0						
				LABOR TOTALS			546.00		45.00		.00		79.00		6.00		.00	
				BENEFIT TOTALS			10.20		.84		.00							
INGALLS, MELISSA H				2BH-2BHES														
567-88-2314	230122	00	01	1-42450-2170		LBR	60381.13	0	5064.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230122	00	01	1-42450-3100		BEN	26848.19	0	2244.25	0	.00	0						
				LABOR TOTALS			60,381.13		5,064.26		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			26,848.19		2,244.25		.00							
INGUITO, KEVIN SCOTT																		
573-49-8671	192050	03	01	1-41411-1430		LBR	30.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192050	03	01	1-41411-3200		BEN	2.38	0	.00	0	.00	0						
	173001	03	01	1-41622-1445		LBR	457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	173001	03	01	1-41622-3100		BEN	36.45	0	.00	0	.00	0						
	192001	02	01	1-41662-1320		LBR	4498.71	0	297.65	0	.00	0	60.00	0	.00	0	.00	0
	192002	02	01	1-41662-1320		LBR	4498.71	0	297.65	0	.00	0	60.00	0	.00	0	.00	0
	193001	02	01	1-41662-1320		LBR	4498.74	0	297.66	0	.00	0	60.00	0	.00	0	.00	0
	193002	02	01	1-41662-1320		LBR	3598.95	0	238.11	0	.00	0	48.00	0	.00	0	.00	0
	192003	02	01	1-41662-1330		LBR	411.31	0	27.21	0	.00	0	6.00	0	.00	0	.00	0
	193003	02	01	1-41662-1330		LBR	205.67	0	13.61	0	.00	0	3.00	0	.00	0	.00	0
	172001	03	01	1-41662-1445		LBR	457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41662-3100		BEN	36.43	0	.00	0	.00	0						
	192001	02	01	1-41662-3100		BEN	358.57	0	23.73	0	.00	0						
	192002	02	01	1-41662-3100		BEN	358.56	0	23.71	0	.00	0						
	192003	02	01	1-41662-3100		BEN	32.78	0	2.17	0	.00	0						
	193001	02	01	1-41662-3100		BEN	358.57	0	23.74	0	.00	0						
	193002	02	01	1-41662-3100		BEN	286.82	0	18.97	0	.00	0						
	193003	02	01	1-41662-3100		BEN	16.38	0	1.08	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	RLOC	HOURS: FISC-TO-DATE DIRECT	RLOC	HOURS: MO-TO-DATE/ DIRECT	RLOC	HOURS: CURR-PERIOD DIRECT	RLOC
LABOR TOTALS							93,150.40		8,440.04		.00		1,400.00		140.00		.00	
BENEFIT TOTALS							25,822.60		2,236.98		.00							
JOSUE SNELLEN, MARIANO AR				2AC-2BOOK														
608-09-4331	280001	00	01	1-48226-2310	LBR		131.63	0	.00	0	.00	0	19.50	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		12.53	0	.00	0	.00	0						
LABOR TOTALS							131.63		.00		.00		19.50		.00		.00	
BENEFIT TOTALS							12.53		.00		.00							
JUAREZ, RICHARD JOHN				-														
549-17-8702	192001	02	01	1-51506-1320	LBR		5704.77	0	260.19	0	.00	0	108.12	0	.00	0	.00	0
	193001	02	01	1-51506-1320	LBR		5830.35	0	385.75	0	.00	0	108.10	0	.00	0	.00	0
	192001	02	01	1-51506-3100	BEN		454.68	0	20.74	0	.00	0						
	193001	02	01	1-51506-3100	BEN		464.69	0	30.75	0	.00	0						
LABOR TOTALS							11,535.12		645.94		.00		216.22		.00		.00	
BENEFIT TOTALS							919.37		51.49		.00							
JUDGE, NAVROOP S				1IT-1NASA														
611-26-0500	280001	00	01	2-14520-2310	LBR		2790.00	0	1075.00	0	.00	0	279.00	0	107.50	0	.00	0
	280001	00	01	2-14520-3200	BEN		52.17	0	20.10	0	.00	0						
LABOR TOTALS							2,790.00		1,075.00		.00		279.00		107.50		.00	
BENEFIT TOTALS							52.17		20.10		.00							
JUDKINS, STAN L				4ET-4TSC2														
564-64-1516	430601	00	01	1-42200-2170	LBR		84585.62	0	7048.76	0	.00	0	2088.00	0	174.00	0	.00	0
	430601	00	01	1-42200-2360	LBR		18.10	0	.00	0	.00	0	.00	0	.00	0	.00	0
	430601	00	01	1-42200-3100	BEN		32029.64	0	2665.20	0	.00	0						
	430601	00	01	1-42200-3200	BEN		3.63	0	.00	0	.00	0						
	430601	00	01	7-64305-2360	LBR		1318.01	0	.00	0	.00	0	22.00	0	.00	0	.00	0
	430601	00	01	7-64305-3200	BEN		99.64	0	.00	0	.00	0						
LABOR TOTALS							85,921.73		7,048.76		.00		2,110.00		174.00		.00	
BENEFIT TOTALS							32,132.91		2,665.20		.00							
JULIEN, SCHNEIDER TONY				1PE-1PEDV														
595-44-6748	180001	00	01	1-41745-2310	LBR		2020.00	0	.00	0	.00	0	202.00	0	.00	0	.00	0
	180001	00	01	1-41745-3200	BEN		37.77	0	.00	0	.00	0						
LABOR TOTALS							2,020.00		.00		.00		202.00		.00		.00	
BENEFIT TOTALS							37.77		.00		.00							
JUNG, HENRY				1GU-1ADMR														
564-29-8270	130058	00	01	1-41287-2170	LBR		43181.69	0	3686.14	0	.00	0	2112.00	0	174.00	0	.00	0
	130058	00	01	1-41287-3100	BEN		18801.91	0	1585.42	0	.00	0						

A&R Day Supervisor

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE / DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE / DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC		
				LABOR TOTALS			43,181.69		3,686.14		.00		2,112.00		174.00			
				BENEFIT TOTALS			18,801.91		1,585.42		.00							
JURICH, JOSEPH J																		
568-06-2911	192001	02	01	1-51506-1320		LBR	6277.94	0	286.34	0	.00	0	108.12	0	.00	0		
	193001	02	01	1-51506-1320		LBR	6416.10	0	424.50	0	.00	0	108.00	0	.00	0		
	192001	02	01	1-51506-3100		BEN	500.30	0	22.81	0	.00	0						
	193001	02	01	1-51506-3100		BEN	511.37	0	33.84	0	.00	0						
				LABOR TOTALS			12,694.04		710.84		.00		216.12		.00			
				BENEFIT TOTALS			1,011.67		56.65		.00							
JUSUFAGIC, ARMINA				1PE-1PEDV														
626-94-8896	180003	00	01	1-41215-2310		LBR	30.00	0	.00	0	.00	0	3.00	0	.00	0		
	180003	00	01	1-41215-3200		BEN	.56	0	.00	0	.00	0						
	180002	00	01	1-41745-2310		LBR	270.00	0	.00	0	.00	0	27.00	0	.00	0	.00	0
	180002	00	01	1-41745-3200		BEN	5.05	0	.00	0	.00	0						
				LABOR TOTALS			300.00		.00		.00		30.00		.00		.00	
				BENEFIT TOTALS			5.61		.00		.00							
JWO, STEPHANIE CHING				2CB-2OLDA														
604-12-1850	260001	00	01	1-52363-2350		LBR	511.00	0	.00	0	.00	0	50.00	0	.00	0	.00	0
	260001	00	01	1-52363-3200		BEN	51.98	0	.00	0	.00	0						
				LABOR TOTALS			511.00		.00		.00		50.00		.00		.00	
				BENEFIT TOTALS			51.98		.00		.00							
KABAHIT, JEANNIE LEE				1IT-1NASA														
466-93-1699	280001	00	01	2-14520-2310		LBR	9422.00	0	.00	0	.00	0	935.00	0	.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	176.20	0	.00	0	.00	0						
				LABOR TOTALS			9,422.00		.00		.00		935.00		.00		.00	
				BENEFIT TOTALS			176.20		.00		.00							
KADEBA, MYRIAM TAMOUHAN				1GU-1ADMR														
610-37-7480	180001	00	01	1-41287-2310		LBR	3100.00	1856-	580.00	0	.00	0	619.50	0	72.50	0	.00	0
	180002	00	01	1-41287-2310		LBR	128.00	0	128.00	0	.00	0	16.00	0	16.00	0	.00	0
	180001	00	01	1-41287-3200		BEN	57.97	34-	10.85	0	.00	0						
	180002	00	01	1-41287-3200		BEN	2.39	0	2.39	0	.00	0						
	180001	00	01	2-51285-2310		LBR	1856.00	1856	.00	0	.00	0	.00	0	.00	0	.00	0
	180001	00	01	2-51285-3200		BEN	34.70	34	.00	0	.00	0						
				LABOR TOTALS			5,084.00		708.00		.00		635.50		88.50		.00	
				BENEFIT TOTALS			95.06		13.24		.00							
KAHALI, NEGAR				2LA-2LART														
157-08-4606	280001	00	01	1-48410-2310		LBR	330.00	0	.00	0	.00	0	41.25	0	.00	0	.00	0
	280001	00	01	1-48410-3200		BEN	6.18	0	.00	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	C DI
	293003	03	01	1-42248-1430	LBR		716.72	0	.00	0	.00	0	20.01	0	.00	0	
	291007	00	01	1-42248-3200	BEN		70.02	0	.00	0	.00	0					
	292051	03	01	1-42248-3200	BEN		247.88	0	.00	0	.00	0					
	293003	03	01	1-42248-3200	BEN		87.62	0	.00	0	.00	0					
	292001	03	01	2-12664-1430	LBR		7210.16	0	.00	0	.00	0	150.99	0	.00	0	
	293002	03	01	2-12664-1430	LBR		9072.03	0	.00	0	.00	0	189.99	0	.00	0	
	294001	03	01	2-12664-1430	LBR		10027.50	0	3342.50	0	.00	0	210.00	0	70.00	0	
	292001	03	01	2-12664-3200	BEN		881.09	0	.00	0	.00	0					
	293002	03	01	2-12664-3200	BEN		1108.57	0	.00	0	.00	0					
	294001	03	01	2-12664-3200	BEN		1225.36	0	408.46	0	.00	0					
				LABOR TOTALS			29,627.98		3,342.50		.00		625.47		70.00		
				BENEFIT TOTALS			3,620.54		408.46		.00						
KALAHASTI, USHA SUNDARI																	
643-60-0162	292001	02	01	1-42654-1320	LBR		4605.77	0	304.73	0	.00	0	60.00	0	.00	0	
	293001	02	01	1-42654-1320	LBR		4605.78	0	304.74	0	.00	0	60.00	0	.00	0	
	293002	02	01	1-42654-1320	LBR		4605.78	0	304.74	0	.00	0	60.00	0	.00	0	
	294001	02	01	1-42654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0	
	294002	02	01	1-42654-1320	LBR		4605.78	0	1738.42	0	.00	0	60.00	0	20.00	0	
	273001	03	01	1-42654-1445	LBR		526.68	351	.00	0	.00	0	4.00	0	.00	0	
	274001	03	01	1-42654-1445	LBR		526.68	0	175.56	0	.00	0	12.00	0	4.00	0	
	273001	03	01	1-42654-3100	BEN		53.55	35	.00	0	.00	0					
	274001	03	01	1-42654-3100	BEN		53.56	0	17.85	0	.00	0					
	292001	02	01	1-42654-3100	BEN		468.40	0	30.99	0	.00	0					
	293001	02	01	1-42654-3100	BEN		468.40	0	30.99	0	.00	0					
	293002	02	01	1-42654-3100	BEN		468.43	0	31.00	0	.00	0					
	294001	02	01	1-42654-3100	BEN		468.40	0	176.80	0	.00	0					
	294002	02	01	1-42654-3100	BEN		468.42	0	176.80	0	.00	0					
				LABOR TOTALS			24,082.25		4,566.61		.00		316.00		44.00		
				BENEFIT TOTALS			2,449.16		464.43		.00						
KALIANGARA, ARACELI				1SM-1FAID													
564-25-6326	130155	00	01	1-41272-2170	LBR		10543.29	0	1013.16	0	.00	0	407.11	0	37.73	0	
	130155	00	01	1-41272-3100	BEN		4404.83	0	421.59	0	.00	0					
	130072	00	01	1-41287-2170	LBR		3196.17	0	663.86	0	.00	0	112.35	0	24.51	0	
	130072	00	01	1-41287-3100	BEN		1529.37	0	276.24	0	.00	0					
	230107	00	01	1-42287-2170	LBR		26244.56	0	2192.65	0	.00	0	1044.00	0	87.00	0	
	230107	00	01	1-42287-3100	BEN		12065.85	0	912.33	0	.00	0					
	130155	00	01	2-11683-2170	LBR		433.62	0	.00	0	.00	0	16.79	0	.00	0	
	130155	00	01	2-11683-3100	BEN		171.76	0	.00	0	.00	0					
	130155	00	01	2-11684-2170	LBR		289.75	0	69.54	0	.00	0	10.00	0	2.60	0	
	230107	00	01	2-11684-2350	LBR		[illegible]	0	.00	0	.00	0	[illegible]	0	.00	0	
	130155	00	01	2-11684-3100	BEN		130.37	0	28.93	0	.00	0					
	230107	00	01	2-11684-3200	BEN		14.19	0	.00	0	.00	0					
				LABOR TOTALS			40,892.82		3,939.21		.00		1,597.25		151.84		
				BENEFIT TOTALS			18,316.37		1,639.09		.00						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	D
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0	
	291003	03	01	1-42760-1330	LBR		191.76	0	.00	0	.00	0	2.50	0	.00	0	
	291001	02	01	1-42760-3100	BEN		666.95	0	.00	0	.00	0					
	291002	02	01	1-42760-3100	BEN		666.95	0	.00	0	.00	0					
	291003	03	01	1-42760-3100	BEN		23.44	0	.00	0	.00	0					
	294001	02	01	1-42760-3100	BEN		637.02	0	240.44	0	.00	0					
				LABOR TOTALS			16,320.64		1,967.62		.00		182.50		20.00		
				BENEFIT TOTALS			1,994.36		240.44		.00						
LAWTON, JONATHAN ADAM				1IT-1NASA													
614-30-2207	180001	00	01	2-14520-2310	LBR		4647.50	0	912.50	0	.00	0	464.75	0	91.25	0	
	180001	00	01	2-14520-3200	BEN		86.90	0	17.06	0	.00	0					
				LABOR TOTALS			4,647.50		912.50		.00		464.75		91.25		
				BENEFIT TOTALS			86.90		17.06		.00						
LAZAR, ALEXIAS NICADEMUS				2CO-2STAR													
551-67-5294	280001	00	01	2-12681-2310	LBR		820.00	0	.00	0	.00	0	82.00	0	.00	0	
	280001	00	01	2-12681-3200	BEN		15.34	0	.00	0	.00	0					
				LABOR TOTALS			820.00		.00		.00		82.00		.00		.00
				BENEFIT TOTALS			15.34		.00		.00						
LAZO, LEONARDO				2ST-2ADMI													
551-91-2895	240001	00	01	1-44036-3100	BEN		59.84	59	.00	0	.00	0					
	280001	00	01	2-12681-2310	LBR		2126.25	0	770.00	0	.00	0	243.00	0	88.00	0	.00 0
	280001	00	01	2-12681-3200	BEN		39.76	0	14.40	0	.00	0					
	240001	00	01	2-32111-2700	LBR		3200.00	0	.00	0	.00	0	400.00	0	.00	0	.00 0
	240001	00	01	2-32111-3100	BEN		.00	59-	.00	0	.00	0					
				LABOR TOTALS			5,326.25		770.00		.00		643.00		88.00		.00
				BENEFIT TOTALS			99.60		14.40		.00						
LE, CHUONG HUY				2ST-2EOPS													
609-34-9022	230162	00	01	1-42378-2170	LBR		12623.46	1616	2697.03	1616	.00	0	458.33	0	43.50	0	.00 0
	230162	00	01	1-42378-3100	BEN		6208.41	795	1319.40	795	.00	0					
	230162	00	01	2-12664-2170	LBR		37870.42	1616-	1626.82	1616-	.00	0	1629.67	0	130.50	0	.00 0
	230162	00	01	2-12664-3100	BEN		18625.29	795-	774.69	795-	.00	0					
				LABOR TOTALS			50,493.88		4,323.85		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			24,833.70		2,094.09		.00						
LE, GIOI THI				2CO-2CCTR													
602-36-5161	230392	00	01	1-42260-2170	LBR		57074.85	0	4762.07	0	.00	0	2100.00	0	174.00	0	.00 0
	230392	00	01	1-42260-3100	BEN		26229.64	0	2187.04	0	.00	0					
				LABOR TOTALS			57,074.85		4,762.07		.00		2,100.00		174.00		.00
				BENEFIT TOTALS			26,229.64		2,187.04		.00						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT PAGE 590
PROGRAM ID EBC442
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ CURR-PERIOD DIRECT	MO-TO-DATE/ CURR-PERIOD RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
LABOR TOTALS							7,747.10		1,077.80		.00		493.00		68.00		.00	
BENEFIT TOTALS							787.87		109.61		.00							
LIND, CHERRYL ANN				1IT-1NASA														
495-44-6398	280001	00	01	2-14520-2310		LBR	5807.50	0	.00	0	.00	0	580.75	0	.00	0	.00	0
	280001	00	01	2-14520-3200		BEN	108.60	0	.00	0	.00	0						
LABOR TOTALS							5,807.50		.00		.00		580.75		.00		.00	
BENEFIT TOTALS							108.60		.00		.00							
LINDAUER, CHARLES M				1CB-1CTIS														
060-34-4540	110006	00	01	1-41501-1210		LBR	113826.99	4326-	9846.13	0	.00	0	1988.44	0	165.71	0	.00	0
	110006	00	01	1-41501-3100		BEN	27804.52	1057-	2430.31	0	.00	0						
	110006	00	01	1-41753-1210		LBR	10234.52	0	492.33	0	.00	0	174.09	0	8.29	0	.00	0
	110006	00	01	1-41753-3100		BEN	2500.24	0	121.53	0	.00	0						
LABOR TOTALS							124,061.51		10,338.46		.00		2,162.53		174.00		.00	
BENEFIT TOTALS							30,304.76		2,551.84		.00							
LINDBERG, LOIS HELEN				-														
457-30-6161	292001	02	01	1-42452-1320		LBR	4633.70	0	306.58	0	.00	0	72.00	0	.00	0	.00	0
	291010	03	01	1-42452-1430		LBR	1317.08	0	.00	0	.00	0	24.60	0	.00	0	.00	0
	292001	03	01	1-42452-1430		LBR	3045.52	0	.00	0	.00	0	59.10	0	.00	0	.00	0
	272001	03	01	1-42452-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42452-3100		BEN	24.55	0	.00	0	.00	0						
	292001	02	01	1-42452-3100		BEN	183.98	0	12.17	0	.00	0						
	291010	03	01	1-42452-3200		BEN	52.28	0	.00	0	.00	0						
	292001	03	01	1-42452-3200		BEN	120.89	0	.00	0	.00	0						
LABOR TOTALS							9,614.68		306.58		.00		167.70		.00		.00	
BENEFIT TOTALS							381.70		12.17		.00							
LINDENBAUM, EUGENE NATHAN				-														
273-44-2491	292001	02	01	1-42824-1320		LBR	4867.33	0	322.03	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42824-1320		LBR	4867.32	0	322.02	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42824-3100		BEN	387.95	0	25.67	0	.00	0						
	293001	02	01	1-42824-3100		BEN	387.91	0	25.66	0	.00	0						
LABOR TOTALS							9,734.65		644.05		.00		96.00		.00		.00	
BENEFIT TOTALS							775.86		51.33		.00							
LINDKE, WILLIAM JOHN				1GU-1ADMR														
072-38-8586	120098	00	01	1-41287-2170		LBR	62830.07	0	.00	0	.00	0	1750.50	0	.00	0	.00	0
	120098	00	01	1-41287-2860		LBR	100198	0	.00	0	.00	0	2278	0	.00	0	.00	0
	120098	00	01	1-41287-3100		BEN	24336.06	0	.00	0	.00	0						
	120098	00	01	1-41287-3200		BEN	16.17	0	.00	0	.00	0						
	120098	00	01	6-10585-2150		LBR	4044.22	0	.00	0	.00	0	112.00	0	.00	0	.00	0
	120098	00	01	6-10585-3100		BEN	1152.06	0	.00	0	.00	0						

Alex. Supervisor

DATE RUN 07/20/05
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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC
				LABOR TOTALS			66,974.67		.00		.00		1,865.28		.00	
				BENEFIT TOTALS			25,504.29		.00		.00					
LINDORES, COLIN MACKAY																
550-58-7451	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		10.17	0	.00	0	.00	0				
	292001	02	01	1-42702-1320	LBR		1442.57	0	95.45	0	.00	0	24.00	0	.00	0
	292002	02	01	1-42702-1320	LBR		2166.04	0	143.32	0	.00	0	36.00	0	.00	0
	293001	02	01	1-42702-1320	LBR		4332.03	0	286.62	0	.00	0	72.00	0	.00	0
	294001	02	01	1-42702-1320	LBR		4332.03	0	1635.09	0	.00	0	72.00	0	24.00	0
	291001	02	01	1-42702-1330	LBR		330.21	0	.00	0	.00	0	6.00	0	.00	0
	272001	03	01	1-42702-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0
	274001	03	01	1-42702-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0
	272001	03	01	1-42702-3100	BEN		55.98	0	.00	0	.00	0				
	274001	03	01	1-42702-3100	BEN		55.98	0	18.66	0	.00	0				
	291001	02	01	1-42702-3100	BEN		33.60	0	.00	0	.00	0				
	292001	02	01	1-42702-3100	BEN		146.67	0	9.70	0	.00	0				
	292002	02	01	1-42702-3100	BEN		220.31	0	14.59	0	.00	0				
	293001	02	01	1-42702-3100	BEN		440.60	0	29.15	0	.00	0				
	294001	02	01	1-42702-3100	BEN		440.56	0	166.28	0	.00	0				
				LABOR TOTALS			13,803.76		2,343.96		.00		236.00		28.00	
				BENEFIT TOTALS			1,403.87		238.38		.00					
LINDSEY, JILL ANN				2AC-2BOOK												
558-04-1693	260002	00	01	1-48226-2350	LBR		280.00	0	.00	0	.00	0	35.00	0	.00	0
	260002	00	01	1-48226-3200	BEN		28.48	0	.00	0	.00	0				
				LABOR TOTALS			280.00		.00		.00		35.00		.00	
				BENEFIT TOTALS			28.48		.00		.00					
LINDSTROM, THOMAS E				4OR-4MASV												
552-60-2688	430555	00	01	1-44059-2170	LBR		73499.69	0	6149.97	0	.00	0	2088.00	0	174.00	0
	430555	00	01	1-44059-3100	BEN		25232.93	0	2108.05	0	.00	0				
				LABOR TOTALS			73,499.69		6,149.97		.00		2,088.00		174.00	
				BENEFIT TOTALS			25,232.93		2,108.05		.00					
LINER, THOMAS SCOTT				1PE-1H P												
566-91-4680	150257	00	01	1-41702-1160	LBR		34090.00	0	3409.01	0	.00	0	793.12	0	79.32	0
	191001	02	01	1-41702-1320	LBR		2207.08	0	.00	0	.00	0	36.00	0	.00	0
	191002	02	01	1-41702-1320	LBR		2207.08	0	.00	0	.00	0	36.00	0	.00	0
	191003	02	01	1-41702-1320	LBR		2207.08	240-	.00	0	.00	0	36.00	0	.00	0
	191004	02	01	1-41702-1320	LBR		4853.39	375-	.00	0	.00	0	72.00	0	.00	0
	191005	02	01	1-41702-1320	LBR		2124.50	0	.00	0	.00	0	36.00	0	.00	0
	192001	02	01	1-41702-1320	LBR		2171.53	2033-	143.32	0	.00	0	72.00	0	.00	0
	192002	02	01	1-41702-1320	LBR		3.26-	3-	.00	0	.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320	LBR		2251.04	0	143.31	0	.00	0	36.00	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CUR DIRE
	234887	00	01	1-42212-3200	BEN		78.33	78	.00	0	.00	0					
	260001	00	01	1-42212-3200	BEN		48.05	48	.00	0	.00	0					
	260002	00	01	1-42212-3200	BEN		12.71	12	.00	0	.00	0					
	234887	00	01	1-42224-2350	LBR		.00	168-	.00	0	.00	0	9.50	0	.00	0	.
	260001	00	01	1-42224-2350	LBR		.00	472-	.00	0	.00	0	30.50	0	.00	0	.
	260002	00	01	1-42224-2350	LBR		.00	143-	.00	0	.00	0	4.00	0	.00	0	.
	234887	00	01	1-42224-2355	LBR		.00	583-	.00	0	.00	0	32.95	0	.00	0	.
	234887	00	01	1-42224-3200	BEN		.00	41-	.00	0	.00	0					
	260001	00	01	1-42224-3200	BEN		.00	48-	.00	0	.00	0					
	260002	00	01	1-42224-3200	BEN		.00	12-	.00	0	.00	0					
				LABOR TOTALS			1,367.67		.00		.00		76.95		.00		.
				BENEFIT TOTALS			139.09		.00		.00						
NAKAYAMA, CINDY J				2ST-2ADMI													
569-13-5755	230048	00	01	1-42287-2170	LBR		22973.64	0	1945.65	0	.00	0	1044.00	0	87.00	0	.
	230048	00	01	1-42287-3100	BEN		18348.06	0	1535.62	0	.00	0					
				LABOR TOTALS			22,973.64		1,945.65		.00		1,044.00		87.00		.
				BENEFIT TOTALS			18,348.06		1,535.62		.00						
NAKOLINNA, JAN CHRISTIAN				1SP-1ISAD													
608-39-2707	180003	00	01	1-41300-2310	LBR		1457.50	1457	.00	0	.00	0	.00	0	.00	0	.
	180003	00	01	1-41300-3200	BEN		27.26	27	.00	0	.00	0					
	180003	00	01	1-51939-2310	LBR		505.00	1457-	.00	0	.00	0	196.25	0	.00	0	.
	180003	00	01	1-51939-3200	BEN		9.45	27-	.00	0	.00	0					
				LABOR TOTALS			1,962.50		.00		.00		196.25		.00		.
				BENEFIT TOTALS			36.71		.00		.00						
NARANJO-ALCARAZ, ED TRINI				4SS-4DSS1													
559-87-0339	280001	00	01	1-44358-2310	LBR		620.00	0	516.00	0	.00	0	77.50	0	64.50	0	.
	280001	00	01	1-44358-3200	BEN		11.59	0	9.65	0	.00	0					
				LABOR TOTALS			620.00		516.00		.00		77.50		64.50		.
				BENEFIT TOTALS			11.59		9.65		.00						
NARIMANI, CHRIS MAJID				2ST-2CLIF													
612-47-3362	280001	00	01	1-48406-2310	LBR		64.00	0	.00	0	.00	0	8.00	0	.00	0	.
	280001	00	01	1-48406-3200	BEN		1.20	0	.00	0	.00	0					
				LABOR TOTALS			64.00		.00		.00		8.00		.00		.
				BENEFIT TOTALS			1.20		.00		.00						
NATSU, HIROSHI				1SA-1ACTV													
612-43-3108	180001	00	01	1-48121-2310	LBR		2338.88	0	506.25	0	.00	0	346.50	0	75.00	0	.
	180001	00	01	1-48121-3200	BEN		43.74	0	9.47	0	.00	0					
				LABOR TOTALS			2,338.88		506.25		.00		346.50		75.00		.

A&P Asst.

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	280002	00	01	2-12919-3200	BEN		11.23	0	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		1209.95	0	.00	0	.00	0	179.25	0	.00	0		
	240001	00	01	2-32111-3100	BEN		.00	58-	.00	0	.00	0						
				LABOR TOTALS			2,116.71		58.00		.00		306.50		7.25			
				BENEFIT TOTALS			75.72		1.08		.00							
NGUYEN, HA VAN				2AC-2CMPS														
555-61-7923	230379	00	01	1-48228-2180	LBR		36170.57	0	3318.08	0	.00	0	1929.82	0	174.00	0		
	230379	00	01	1-48228-2360	LBR		3318.85	0	128.72	0	.00	0	114.00	0	4.50	0		
	230379	00	01	1-48228-3100	BEN		21549.09	0	1831.39	0	.00	0						
	230379	00	01	1-48228-3200	BEN		254.64	0	9.85	0	.00	0						
				LABOR TOTALS			39,489.42		3,446.80		.00		2,043.82		178.50			
				BENEFIT TOTALS			21,803.73		1,841.24		.00							
NGUYEN, HAN THI NGOC				2LS-2LIB														
602-29-9759	240001	00	01	1-44036-3100	BEN		65.08	65	14.45	14	.00	0						
	240001	00	01	2-32111-2700	LBR		3480.00	0	202.50	0	.00	0	464.00	0	27.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	65-	10.66-	14-	.00	0						
				LABOR TOTALS			3,480.00		202.50		.00		464.00		27.00		.00	
				BENEFIT TOTALS			65.08		3.79		.00							
NGUYEN, HANH THI HONG				2AC-2BOOK														
617-35-2220	280001	00	01	1-48226-2310	LBR		148.50	0	.00	0	.00	0	22.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.78	0	.00	0	.00	0						
				LABOR TOTALS			148.50		.00		.00		22.00		.00		.00	
				BENEFIT TOTALS			2.78		.00		.00							
NGUYEN, HENRY CONG				2AB-2CASH														
605-52-4144	230151	00	01	1-42149-2170	LBR		48977.97	0	4158.33	0	.00	0	2108.25	0	176.25	0	.00	0
	230151	00	01	1-42149-2360	LBR		1772.93	0	955.65	0	.00	0	67.25	0	40.00	0	.00	0
	230151	00	01	1-42149-3100	BEN		24473.66	0	1991.96	0	.00	0						
	230151	00	01	1-42149-3200	BEN		237.98	0	174.50	0	.00	0						
				LABOR TOTALS			50,750.90		5,113.98		.00		2,175.50		216.25		.00	
				BENEFIT TOTALS			24,711.64		2,166.46		.00							
NGUYEN, HIEN MY				1GU-1ADMR														
611-13-9410	130220	00	01	1-41054-2170	LBR		8662.74	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	130220	00	01	1-41054-3100	BEN		4336.22	0	.00	0	.00	0						
	230024	00	01	1-42218-2220	LBR		25072.09	0	.00	0	.00	0	1321.09	0	.00	0	.00	0
	230024	00	01	1-42218-2360	LBR		219.91	0	.00	0	.00	0	11.00	0	.00	0	.00	0
	230024	00	01	1-42218-3100	BEN		13332.93	0	.00	0	.00	0						
	230024	00	01	1-42218-3200	BEN		39.02	0	.00	0	.00	0						
	230024	00	01	6-10585-2150	LBR		277.49	0	.00	0	.00	0	13.88	0	.00	0	.00	0
	230024	00	01	6-10585-3100	BEN		209.37	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	CU DIR
				LABOR TOTALS				34,232.23		.00		.00		1,867.97		.00		
				BENEFIT TOTALS				17,917.54		.00		.00						
NGUYEN, HIEU TRUNG				4AN-4ACC														
024-82-4843	430025	00	01	1-42805-2170	LBR			651.34	0	421.46	0	.00	0	26.89	0	17.40	0	
	430025	00	01	1-42805-3100	BEN			320.04	0	207.10	0	.00	0					
	430025	00	01	1-44040-2170	LBR			651.34	0	421.46	0	.00	0	34.39	0	24.90	0	
	430059	00	01	1-44040-2170	LBR			40839.66	0	.00	0	.00	0	1806.30	0	.00	0	
	430025	00	01	1-44040-3100	BEN			320.04	0	207.08	0	.00	0					
	430059	00	01	1-44040-3100	BEN			20117.85	0	.00	0	.00	0					
	430025	00	01	1-48126-2170	LBR			781.67	0	505.81	0	.00	0	32.26	0	20.88	0	
	430025	00	01	1-48126-3100	BEN			384.10	0	248.54	0	.00	0					
	430025	00	01	1-48224-2170	LBR			390.88	0	252.87	0	.00	0	16.17	0	10.44	0	
	430025	00	01	1-48224-3100	BEN			192.06	0	124.24	0	.00	0					
	430025	00	01	1-48226-2170	LBR			977.01	0	632.19	0	.00	0	40.33	0	26.10	0	
	430025	00	01	1-48226-3100	BEN			480.09	0	310.64	0	.00	0					
	430025	00	01	1-48228-2170	LBR			130.26	0	84.29	0	.00	0	5.37	0	3.48	0	
	430025	00	01	1-48228-3100	BEN			64.01	0	41.43	0	.00	0					
	430025	00	01	1-48351-2170	LBR			977.01	0	632.19	0	.00	0	40.33	0	26.10	0	
	430025	00	01	1-48351-3100	BEN			480.02	0	310.62	0	.00	0					
	430025	00	01	1-48500-2170	LBR			1954.05	0	1264.39	0	.00	0	80.67	0	52.20	0	
	430025	00	01	1-48500-3100	BEN			960.18	0	621.28	0	.00	0					
	430059	00	01	2-14610-2170	LBR			3026.97	0	.00	0	.00	0	125.67	0	.00	0	
	430059	00	01	2-14610-3100	BEN			1491.16	0	.00	0	.00	0					
				LABOR TOTALS				50,380.19		4,214.66		.00		2,208.38		181.50		
				BENEFIT TOTALS				24,809.55		2,070.93		.00						
NGUYEN, HOANG M				-														
549-77-6368	291001	02	01	1-42503-1320	LBR			5133.42	0	.00	0	.00	0	72.00	0	.00	0	
	292001	02	01	1-42503-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0	
	293001	02	01	1-42503-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0	
	294005	02	01	1-42503-1320	LBR			343.61	0	22.73	0	.00	0	4.00	0	.00	0	
	272001	03	01	1-42503-1445	LBR			573.04	0	.00	0	.00	0	12.00	0	.00	0	
	273001	03	01	1-42503-1445	LBR			573.00	0	.00	0	.00	0	12.00	0	.00	0	
	272001	03	01	1-42503-3100	BEN			45.67	0	.00	0	.00	0					
	273001	03	01	1-42503-3100	BEN			45.66	0	.00	0	.00	0					
	291001	02	01	1-42503-3100	BEN			409.13	0	.00	0	.00	0					
	292001	02	01	1-42503-3100	BEN			319.56	0	21.15	0	.00	0					
	293001	02	01	1-42503-3100	BEN			319.53	0	21.13	0	.00	0					
	294005	02	01	1-42503-3100	BEN			27.39	0	1.82	0	.00	0					
				LABOR TOTALS				14,641.89		553.25		.00		196.00		.00		
				BENEFIT TOTALS				1,166.94		44.10		.00						
NGUYEN, HUNG DUY				2LA-2TUTR														
624-37-9502	280002	00	01	1-42220-2410	LBR			446.25	1515-77-	1069.69-	1515-77-	.00	0	224.25	0	51.00	0	
	280002	00	01	1-42220-3200	BEN			8.34		68.70-		.00	0					

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TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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PROGRAM ID EBC442
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
NGUYEN, JENNIFER D				2AB-2ACTV														
566-67-1675	230285	00	01	1-42150-2170	LBR		14467.84	0	1205.64	0	.00	0	522.06	0	43.51	0		
	230285	00	01	1-42150-3100	BEN		6599.79	0	549.97	0	.00	0						
	230285	00	01	1-48409-2170	LBR		43402.09	0	3616.85	0	.00	0	1565.94	0	130.49	0		
	230285	00	01	1-48409-3100	BEN		19798.49	0	1649.90	0	.00	0						
				LABOR TOTALS			57,869.93		4,822.49		.00		2,088.00		174.00			
				BENEFIT TOTALS			26,398.28		2,199.87		.00							
NGUYEN, JOANNA VICTORIA				2AC-2BOOK														
626-92-7310	280001	00	01	1-48226-2310	LBR		933.19	0	.00	0	.00	0	138.25	0	.00	0		
	280001	00	01	1-48226-3200	BEN		35.39	0	.00	0	.00	0						
				LABOR TOTALS			933.19		.00		.00		138.25		.00			
				BENEFIT TOTALS			35.39		.00		.00							
NGUYEN, JOHN PAUL NHAN DU				4CN-4CHAN														
150-88-8202	180001	00	01	1-44010-2310	LBR		1432.50	0	670.00	0	.00	0	143.25	0	67.00	0		
	180001	00	01	1-44010-3200	BEN		26.79	0	12.53	0	.00	0						
	140001	00	01	1-44036-3100	BEN		44.95	44	.00	0	.00	0						
	140001	00	01	2-31111-2700	LBR		2404.00	0	.00	0	.00	0	300.50	0	.00	0		
	140001	00	01	2-31111-3100	BEN		.00	44-	.00	0	.00	0						
				LABOR TOTALS			3,836.50		670.00		.00		443.75		67.00			
				BENEFIT TOTALS			71.74		12.53		.00							
NGUYEN, KATHLEEN LICH				2AC-2BOOK														
618-66-9537	280001	00	01	1-48226-2310	LBR		642.94	0	.00	0	.00	0	95.25	0	.00	0		
	280001	00	01	1-48226-3200	BEN		23.63	0	.00	0	.00	0						
				LABOR TOTALS			642.94		.00		.00		95.25		.00			
				BENEFIT TOTALS			23.63		.00		.00							
NGUYEN, KHANH BAO				2ST-2FNAI														
617-58-0285	240001	00	01	1-44036-3100	BEN		60.95	60	11.46	11	.00	0						
	240001	00	01	2-32111-2700	LBR		3259.95	0	193.50	0	.00	0	303.25	0	18.00	0	.00	
	240001	00	01	2-32111-3100	BEN		.00	60-	7.84-	11-	.00	0						
				LABOR TOTALS			3,259.95		193.50		.00		303.25		18.00		.00	
				BENEFIT TOTALS			60.95		3.62		.00							
NGUYEN, KHANH TRUC				2LS-2LIB														
606-80-2972	280001	00	01	2-12919-2310	LBR		1863.75	0	228.75	0	.00	0	248.50	0	30.50	0	.00	0
	280001	00	01	2-12919-3200	BEN		34.87	0	4.28	0	.00	0						
				LABOR TOTALS			1,863.75		228.75		.00		248.50		30.50		.00	
				BENEFIT TOTALS			34.87		4.28		.00							
NGUYEN, KHANH TUONG				2AC-2CMPS														

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	I
607-49-8797	280001	00	01	1-48224-2310	LBR		632.82	0	.00	0	.00	0	93.75	0	.00	0	
	280001	00	01	1-48224-3200	BEN		11.83	0	.00	0	.00	0					
				LABOR TOTALS			632.82		.00		.00		93.75		.00		
				BENEFIT TOTALS			11.83		.00		.00						
NGUYEN, KIM HONG T				2LS-2LIB													
623-21-3916	240001	00	01	1-44036-3100	BEN		47.43	47	8.35	8	.00	0					
	240001	00	01	2-32111-2700	LBR		2535.00	0	150.00	0	.00	0	338.00	0	20.00	0	.00
	240001	00	01	2-32111-3100	BEN		.00	47-	5.54-	8-	.00	0					
				LABOR TOTALS			2,535.00		150.00		.00		338.00		20.00		.00
				BENEFIT TOTALS			47.43		2.81		.00						
NGUYEN, KIM LOAN THI				-													
586-36-4735	194001	02	01	1-41754-1320	LBR		7242.36	0	2733.56	0	.00	0	108.00	0	36.00	0	.00
	194002	02	01	1-41754-1320	LBR		4477.23	0	1689.89	0	.00	0	72.00	0	24.00	0	.00
	194001	02	01	1-41754-3100	BEN		885.02	0	334.05	0	.00	0					
	194002	02	01	1-41754-3100	BEN		547.11	0	206.49	0	.00	0					
				LABOR TOTALS			11,719.59		4,423.45		.00		180.00		60.00		.00
				BENEFIT TOTALS			1,432.13		540.54		.00						
NGUYEN, LESLIE KHANH				2CO-2MATR													
560-77-1806	230448	00	01	1-42245-2170	LBR		19615.01	0	1634.59	0	.00	0	835.20	0	69.60	0	.00
	230448	00	01	1-42245-3100	BEN		8017.67	0	668.14	0	.00	0					
	230448	00	01	1-42248-2170	LBR		3677.59	0	306.46	0	.00	0	156.48	0	13.04	0	.00
	230448	00	01	1-42248-3100	BEN		1503.23	0	125.27	0	.00	0					
	230448	00	01	2-12650-2170	LBR		25745.59	0	2145.46	0	.00	0	1096.32	0	91.36	0	.00
	230448	00	01	2-12650-3100	BEN		10523.29	0	876.94	0	.00	0					
				LABOR TOTALS			49,038.19		4,086.51		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			20,044.19		1,670.35		.00						
NGUYEN, LONG DUONG				2BH-2OTI													
551-87-9892	280001	00	01	1-48405-2310	LBR		253.00	0	92.00	0	.00	0	31.62	0	11.50	0	.00
	280001	00	01	1-48405-3200	BEN		4.73	0	1.72	0	.00	0					
	280001	00	01	2-12480-2310	LBR		253.00	0	92.00	0	.00	0	31.63	0	11.50	0	.00
	280001	00	01	2-12480-3200	BEN		4.73	0	1.72	0	.00	0					
				LABOR TOTALS			506.00		184.00		.00		63.25		23.00		.00
				BENEFIT TOTALS			9.46		3.44		.00						
NGUYEN, MARTA TROYANO				2LA-2TUTR													
603-35-7869	280003	00	01	1-42220-2410	LBR		752.44	0	203.44	0	.00	0	86.25	0	23.25	0	.00
	280003	00	01	1-42220-3200	BEN		15.90	0	3.80	0	.00	0					
	280003	00	01	1-48407-2410	LBR		821.87	0	.00	0	.00	0	97.25	0	.00	0	.00
	280003	00	01	1-48407-3200	BEN		15.36	0	.00	0	.00	0					
	280001	00	01	2-12919-2310	LBR		4862.88	0	702.00	0	.00	0	633.75	0	87.75	0	.00

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	D
	280002	00	01	2-12681-3200	BEN		48.25	0	7.33	0	.00	0					
				LABOR TOTALS			2,580.00		392.00		.00		322.50		49.00		
				BENEFIT TOTALS			48.25		7.33		.00						
NGUYEN, THANH NHAN HUU				2AB-2CASH													
614-92-4809	240001	00	01	2-32111-2700	LBR		2512.50	0	.00	0	.00	0	251.25	0	.00	0	
				LABOR TOTALS			2,512.50		.00		.00		251.25		.00		
				BENEFIT TOTALS			.00		.00		.00						
NGUYEN, THAO NGUYEN TRAN				2AB-2CASH													
622-90-4472	280001	00	01	1-42149-2310	LBR		1982.50	0	475.00	0	.00	0	198.25	0	47.50	0	
	280001	00	01	1-42149-3200	BEN		37.07	0	8.88	0	.00	0					
	240002	00	01	1-44036-3100	BEN		65.91	65	.00	0	.00	0					
	240002	00	01	2-32111-2700	LBR		3525.00	0	.00	0	.00	0	352.50	0	.00	0	
	240002	00	01	2-32111-3100	BEN		.00	65-	.00	0	.00	0					
				LABOR TOTALS			5,507.50		475.00		.00		550.75		47.50		
				BENEFIT TOTALS			102.98		8.88		.00						
NGUYEN, THU HANG THI				2ST-2FNAI													
605-86-7257	240001	00	01	1-44036-3100	BEN		9.31	9	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		497.50	0	.00	0	.00	0	49.75	0	.00	0	
	240001	00	01	2-32111-3100	BEN		.00	9-	.00	0	.00	0					
				LABOR TOTALS			497.50		.00		.00		49.75		.00		
				BENEFIT TOTALS			9.31		.00		.00						
NGUYEN, THU NGOC				2AB-2CASH													
613-80-1314	280001	00	01	1-42149-2310	LBR		330.00	0	.00	0	.00	0	33.00	0	.00	0	.00 0
	280001	00	01	1-42149-3200	BEN		6.17	0	.00	0	.00	0					
	240001	00	01	1-44036-3100	BEN		18.98	18	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		1015.00	0	.00	0	.00	0	101.50	0	.00	0	.00 0
				LABOR TOTALS			1,345.00		.00		.00		134.50		.00		.00
				BENEFIT TOTALS			25.15		.00		.00						
NGUYEN, THU TRANG THI				2LS-2LIB													
605-86-7470	240002	00	01	1-44036-3100	BEN		9.33	9	.00	0	.00	0					
	240002	00	01	2-32111-2700	LBR		498.76	0	.00	0	.00	0	57.00	0	.00	0	.00 0
	240002	00	01	2-32111-3100	BEN		.00	9-	.00	0	.00	0					
				LABOR TOTALS			498.76		.00		.00		57.00		.00		.00
				BENEFIT TOTALS			9.33		.00		.00						
NGUYEN, THUY B				2AC-2OFCS													
622-37-8645	280001	00	01	1-42158-2310	LBR		2664.38	0	385.00	0	.00	0	304.50	0	44.00	0	.00 0
	280001	00	01	1-42158-3200	BEN		49.83	0	7.20	0	.00	0					

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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562-95-9430	260001	00	01	1-52363-2350	LBR		2390.00	0	1130.00	0	.00	0	58.50	0	27.00	0
	260001	00	01	1-52363-3200	BEN		243.07	0	114.93	0	.00	0				
				LABOR TOTALS			2,390.00		1,130.00		.00		58.50		27.00	
				BENEFIT TOTALS			243.07		114.93		.00					
OLLER, PAUL DALE				-												
310-48-4596	193001	02	01	1-51505-1320	LBR		2767.56	0	183.10	0	.00	0	54.00	0	.00	0
	194001	02	01	1-51505-1320	LBR		2629.18	0	1035.44	0	.00	0	54.00	0	18.00	0
	193001	02	01	1-51505-3100	BEN		213.65	0	14.14	0	.00	0				
	194001	02	01	1-51505-3100	BEN		202.98	0	79.94	0	.00	0				
				LABOR TOTALS			5,396.74		1,218.54		.00		108.00		18.00	
				BENEFIT TOTALS			416.63		94.08		.00					
OLSEN, LYNN G				1GU-1ADMR												
549-62-7127	120130	00	01	1-41287-2170	LBR		15564.89	0	.00	0	.00	0	1028.87	0	.00	0
	120130	00	01	1-41287-2360	LBR		7.86	0	.00	0	.00	0	.25	0	.00	0
	120130	00	01	1-41287-3100	BEN		11903.95	0	.00	0	.00	0				
	120130	00	01	1-41287-3200	BEN		1.43	0	.00	0	.00	0				
	120130	00	01	6-10585-2150	LBR		437.79	0	.00	0	.00	0	13.93	0	.00	0
	120130	00	01	6-10585-3100	BEN		176.80	0	.00	0	.00	0				
				LABOR TOTALS			16,010.54		.00		.00		1,043.05		.00	
				BENEFIT TOTALS			12,082.18		.00		.00					
OLSEN, MARQUINNA H				1GU-1CNSL												
518-40-1779	153322	00	01	1-41248-1260	LBR		10192.87	0	.00	0	.00	0	783.00	0	.00	0
	153322	00	01	1-41248-3100	BEN		41.80	0	.00	0	.00	0				
	153322	00	01	2-11268-1260	LBR		.00	1132-	1132.57-	1132-	.00	0	87.00	0	.00	0
	153322	00	01	2-11268-3100	BEN		.00	3-	3.80-	3-	.00	0				
	153322	00	01	2-11425-1260	LBR		1132.57	1132	1132.57	1132	.00	0	.00	0	.00	0
	153322	00	01	2-11425-3100	BEN		3.80	3	3.80	3	.00	0				
				LABOR TOTALS			11,325.44		.00		.00		870.00		.00	
				BENEFIT TOTALS			45.60		.00		.00					
OLSEN, NANCY H				-												
524-38-7578	293010	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	294005	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	293010	03	01	1-42021-3200	BEN		12.22	0	.00	0	.00	0				
	294005	03	01	1-42021-3200	BEN		12.22	0	.00	0	.00	0				
	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0				
	292003	02	01	1-42682-1320	LBR		4867.33	0	322.03	0	.00	0	48.00	0	.00	0
	293003	02	01	1-42682-1320	LBR		4867.32	0	322.02	0	.00	0	48.00	0	.00	0
	292003	02	01	1-42682-3100	BEN		594.79	0	39.36	0	.00	0				
	293003	02	01	1-42682-3100	BEN		594.80	0	39.35	0	.00	0				
	292004	03	01	1-42804-1430	LBR		100.50	0	.00	0	.00	0	2.01	0	.00	0

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	194001	02	01	1-41452-3100	BEN		146.66	0	55.36	0	.00	0				
	194002	02	01	1-41452-3100	BEN		259.69	0	98.01	0	.00	0				
	194003	02	01	1-41452-3100	BEN		146.67	0	55.35	0	.00	0				
	194004	02	01	1-41452-3100	BEN		146.62	0	55.34	0	.00	0				
	194005	02	01	1-41452-3100	BEN		26.13	0	26.13	0	.00	0				
				LABOR TOTALS			29,287.31		4,741.43		.00		474.00		62.00	
				BENEFIT TOTALS			2,260.98		366.03		.00					
OWENS-SANDERS, KENDRA				2CA-2CART												
570-86-8472	230070	00	01	1-42600-2170	LBR		24687.64	0	.00	0	.00	0	1233.13	0	.00	0
	230070	00	01	1-42600-3100	BEN		15088.08	0	.00	0	.00	0				
	230070	00	01	6-10585-2150	LBR		350.01	0	.00	0	.00	0	17.10	0	.00	0
	230070	00	01	6-10585-3100	BEN		738.93	0	.00	0	.00	0				
				LABOR TOTALS			25,037.65		.00		.00		1,250.23		.00	
				BENEFIT TOTALS			15,827.01		.00		.00					
OWIESNY, CHERYL L				2PE-2PE												
566-59-3983	250134	00	01	1-42702-1160	LBR		67458.30	0	6745.83	0	.00	0	1400.00	0	140.00	0
	291001	02	01	1-42702-1320	LBR		2293.58	0	.00	0	.00	0	36.00	0	.00	0
	291002	02	01	1-42702-1320	LBR		1146.78	0	.00	0	.00	0	18.00	0	.00	0
	250134	00	01	1-42702-3100	BEN		19902.11	0	2022.62	0	.00	0				
	291001	02	01	1-42702-3100	BEN		189.14	5	.00	0	.00	0				
	291002	02	01	1-42702-3100	BEN		91.72	0	.00	0	.00	0				
	257720	00	01	1-42742-1160	LBR		8432.28	0	.00	0	.00	0	281.81	0	.00	0
	257720	00	01	1-42742-3100	BEN		3895.38	0	.00	0	.00	0				
	260001	00	01	1-48412-2350	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48412-3200	BEN		79.11	0	.00	0	.00	0				
				LABOR TOTALS			81,330.94		6,745.83		.00		1,735.81		140.00	
				BENEFIT TOTALS			24,157.46		2,022.62		.00					
OZANNE, JEANETTE L				2LA-2TUTR												
613-03-1478	280001	00	01	1-42221-2410	LBR		60.00	0	.00	0	.00	0	6.00	0	.00	0
	280001	00	01	1-42221-3200	BEN		1.12	0	.00	0	.00	0				
				LABOR TOTALS			60.00		.00		.00		6.00		.00	
				BENEFIT TOTALS			1.12		.00		.00					
PABROS, ANGELITA M				2ST-2ADMI												
457-39-2232	230219	00	01	1-42287-2170	LBR		49390.76	0	4179.27	0	.00	0	2088.00	0	174.00	0
	230219	00	01	1-42287-3100	BEN		24467.86	0	2047.34	0	.00	0				
				LABOR TOTALS			49,390.76		4,179.27		.00		2,088.00		174.00	
				BENEFIT TOTALS			24,467.86		2,047.34		.00					
PACCIORETTI, MICHAEL				4SS-4DSS2												
568-80-4169	430008	00	01	1-42240-2360	LBR		255.52	0	.00	0	.00	0	5.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPC PROG FY

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ TYPE CODE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC		
PAPE, MARY P				-														
563-78-4446	294001	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294002	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294003	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	294001	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	294002	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	294003	03	01	1-42415-3200	BEN		12.22	0	.00	0	.00	0						
	250086	00	01	1-42503-1160	LBR		79242.81	0	7924.28	0	.00	0	1400.00	0	140.00	0		
	250086	00	01	1-42503-3100	BEN		23220.81	0	2070.01	0	.00	0						
				LABOR TOTALS			79,542.81		7,924.28		.00		1,406.00		140.00			
				BENEFIT TOTALS			23,257.47		2,070.01		.00							
PAPIRI, NICHOLAS ROBERT				1IT-1NASA														
609-20-6071	280001	00	01	2-14520-2310	LBR		8860.00	0	255.00	0	.00	0	886.00	0	25.50	0	.00	0
	280001	00	01	2-14520-3200	BEN		379.88	0	4.77	0	.00	0						
				LABOR TOTALS			8,860.00		255.00		.00		886.00		25.50		.00	
				BENEFIT TOTALS			379.88		4.77		.00							
PARAMITA, PRISILIA				2LA-2TUTR														
620-43-0139	280002	00	01	1-42220-2410	LBR		288.75	691-	402.50-	691-	.00	0	112.00	0	33.00	0	.00	0
	280002	00	01	1-42220-3200	BEN		5.40	12-	7.53-	12-	.00	0						
	280001	00	01	1-48226-2310	LBR		114.75	0	.00	0	.00	0	17.00	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.14	0	.00	0	.00	0						
	280002	00	01	1-48407-2410	LBR		3306.76	691	691.25	691	.00	0	309.50	0	.00	0	.00	0
	280002	00	01	1-48407-3200	BEN		61.85	12	12.93	12	.00	0						
				LABOR TOTALS			3,710.26		288.75		.00		438.50		33.00		.00	
				BENEFIT TOTALS			69.39		5.40		.00							
PARAMONOVA, EMILY LAY				-														
577-60-9737	194001	02	01	1-41660-1320	LBR		4812.88	0	1816.57	0	.00	0	48.00	0	16.00	0	.00	0
	194001	02	01	1-41660-3100	BEN		383.61	0	144.79	0	.00	0						
				LABOR TOTALS			4,812.88		1,816.57		.00		48.00		16.00		.00	
				BENEFIT TOTALS			383.61		144.79		.00							
PARDO, INES C				1SM-1EOPS														
559-84-8697	130125	00	01	1-41067-2170	LBR		4556.67	0	379.74	0	.00	0	141.86	0	11.83	0	.00	0
	130125	00	01	1-41067-3100	BEN		1927.18	0	160.61	0	.00	0						
	130125	00	01	1-41378-2170	LBR		28950.94	0	2412.55	0	.00	0	902.14	0	75.17	0	.00	0
	130125	00	01	1-41378-3100	BEN		12242.13	0	1020.17	0	.00	0						
	130125	00	01	2-11668-2170	LBR		33507.30	0	2792.29	0	.00	0	1044.00	0	87.00	0	.00	0
	130125	00	01	2-11668-3100	BEN		14168.79	0	1180.74	0	.00	0						
				LABOR TOTALS			67,014.91		5,584.58		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			28,338.10		2,361.52		.00							

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE HOURS DIRECT	FISC-TO-DATE HOURS RLOC	MO-TO-DATE HOURS DIRECT	MO-TO-DATE HOURS RLOC		
				BENEFIT TOTALS			1,271.75		77.97		.00							
PELOIAN, JOYCE E				-														
552-50-4685	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0		
	292099	03	01	1-42023-3200	BEN		2.52	0	.00	0	.00	0						
	292001	02	01	1-42760-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	292002	02	01	1-42760-1320	LBR		5407.61	0	357.77	0	.00	0	60.00	0	.00	0		
	293001	02	01	1-42760-1320	LBR		5407.62	0	357.78	0	.00	0	60.00	0	.00	0		
	294001	02	01	1-42760-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	294002	02	01	1-42760-1320	LBR		5407.62	0	2041.06	0	.00	0	60.00	0	20.00	0		
	272001	03	01	1-42760-1445	LBR		618.38	0	.00	0	.00	0	12.00	0	.00	0		
	273001	03	01	1-42760-1445	LBR		618.36	0	.00	0	.00	0	12.00	0	.00	0		
	274001	03	01	1-42760-1445	LBR		618.36	0	206.12	0	.00	0	12.00	0	4.00	0		
	272001	03	01	1-42760-3100	BEN		15.58	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		15.57	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		15.57	0	5.19	0	.00	0						
	292001	02	01	1-42760-3100	BEN		136.27	0	9.02	0	.00	0						
	292002	02	01	1-42760-3100	BEN		136.29	0	9.01	0	.00	0						
	293001	02	01	1-42760-3100	BEN		136.29	0	9.03	0	.00	0						
	294001	02	01	1-42760-3100	BEN		136.26	0	51.42	0	.00	0						
	294002	02	01	1-42760-3100	BEN		136.28	0	51.44	0	.00	0						
				LABOR TOTALS			28,993.18		5,361.56		.00		338.00		44.00		.00	
				BENEFIT TOTALS			730.63		135.11		.00							
PELZEL, ROBERT E				1FA-1RAD														
561-88-3121	150230	00	01	1-41633-1105	LBR		5000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150230	00	01	1-41633-1160	LBR		79242.80	0	7924.28	0	.00	0	1400.00	0	140.00	0	.00	0
	191001	02	01	1-41633-1320	LBR		4278.48	0	.00	0	.00	0	84.00	0	.00	0	.00	0
	191002	02	01	1-41633-1320	LBR		4278.48	0	.00	0	.00	0	84.00	0	.00	0	.00	0
	191003	02	01	1-41633-1320	LBR		4399.59	0	.00	0	.00	0	96.00	0	.00	0	.00	0
	150230	00	01	1-41633-3100	BEN		20611.58	0	1798.80	0	.00	0						
	191001	02	01	1-41633-3100	BEN		428.29	28	.00	0	.00	0						
	191002	02	01	1-41633-3100	BEN		399.65	0	.00	0	.00	0						
	191003	02	01	1-41633-3100	BEN		410.94	0	.00	0	.00	0						
				LABOR TOTALS			97,199.35		7,924.28		.00		1,664.00		140.00		.00	
				BENEFIT TOTALS			21,850.46		1,798.80		.00							
PENA-FERRICK, JOAN				2ST-2ADMI														
558-04-4241	230242	00	01	1-42287-2170	LBR		53433.51	0	4465.29	0	.00	0	2103.00	0	174.00	0	.00	0
	230242	00	01	1-42287-3100	BEN		20671.46	0	1725.27	0	.00	0						
				LABOR TOTALS			53,433.51		4,465.29		.00		2,103.00		174.00		.00	
				BENEFIT TOTALS			20,671.46		1,725.27		.00							
PENG, QUAN YING				2AB-2CASH														
546-55-4597	260005	00	01	1-42149-2350	LBR		11871.36	0	1868.64	0	.00	0	864.00	0	136.00	0	.00	0
	260005	00	01	1-42149-2360	LBR		772.88	0	.00	0	.00	0	37.50	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC	HOURS CU DIF	
	280001	00	01	1-48407-3200	BEN		2.70	0	.00	0	.00	0						
				LABOR TOTALS			146.19		2.19		.00		18.25		.25			
				BENEFIT TOTALS			2.74		.04		.00							
PEREZ, ANNETTE				4OR-4MASV														
563-39-0194	430169	00	01	1-44059-2170	LBR		17391.43	0	1455.14	0	.00	0	521.93	0	43.50	0	.00	0
	430169	00	01	1-44059-3100	BEN		6099.47	0	509.53	0	.00	0						
	430169	00	01	7-65501-2170	LBR		52175.49	0	4365.44	0	.00	0	1566.07	0	130.50	0	.00	0
	430169	00	01	7-65501-3100	BEN		18299.29	0	1528.64	0	.00	0						
				LABOR TOTALS			69,566.92		5,820.58		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			24,398.76		2,038.17		.00							
PEREZ, DEBBIE CAMPOS				2LA-2LART														
563-45-9928	280001	00	01	1-52003-2310	LBR		2607.38	0	.00	0	.00	0	204.50	0	.00	0	.00	0
	280001	00	01	1-52003-3200	BEN		162.78	0	.00	0	.00	0						
				LABOR TOTALS			2,607.38		.00		.00		204.50		.00		.00	
				BENEFIT TOTALS			162.78		.00		.00							
PEREZ, DENISE M KORN				1AA-1IEDR														
554-59-9392	130025	00	01	1-41150-2170	LBR		10576.54	0	.00	0	.00	0	348.00	0	.00	0	.00	0
	130177	00	01	1-41150-2170	LBR		56897.72	0	5689.77	0	.00	0	1746.75	0	174.00	0	.00	0
	130025	00	01	1-41150-3100	BEN		4528.36	0	.00	0	.00	0						
	130177	00	01	1-41150-3100	BEN		23259.22	0	2329.83	0	.00	0						
				LABOR TOTALS			67,474.26		5,689.77		.00		2,094.75		174.00		.00	
				BENEFIT TOTALS			27,787.58		2,329.83		.00							
PEREZ, MARLENE VALERIE				2CE-2OLDA														
604-17-3461	260001	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
				LABOR TOTALS			1,660.00		.00		.00		41.50		.00		.00	
				BENEFIT TOTALS			168.82		.00		.00							
PEREZ, SAMUEL				2AB-2CASH														
612-30-5052	260001	00	01	1-42149-2350	LBR		1305.61	0	.00	0	.00	0	127.75	0	.00	0	.00	0
	260001	00	01	1-42149-3200	BEN		132.79	0	.00	0	.00	0						
	160001	00	01	1-48126-2350	LBR		1534.56	0	139.75	0	.00	0	142.75	0	13.00	0	.00	0
	160001	00	01	1-48126-2360	LBR		32.25	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	160001	00	01	1-48126-3200	BEN		159.34	0	14.21	0	.00	0						
				LABOR TOTALS			2,872.42		139.75		.00		272.50		13.00		.00	
				BENEFIT TOTALS			292.13		14.21		.00							
PEREZALONSO, MARIA LEONOR				2CO-2TRSF														
562-67-1466	230437	00	01	1-42263-2170	LBR		53854.60	0	4542.56	0	.00	0	2103.00	0	177.75	0	.00	0

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE/ DIRECT	RLOC	D
	293001	02	01	1-42620-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	
	292001	02	01	1-42620-3100	BEN		344.71	0	22.81	0	.00	0					
	293001	02	01	1-42620-3100	BEN		223.47	0	14.79	0	.00	0					
				LABOR TOTALS			7,609.80		471.69		.00		132.00		.00		
				BENEFIT TOTALS			606.49		37.60		.00						
PHAN, VAN THI				1IT-1NASA													
610-76-3238	280001	00	01	2-14520-2310	LBR		12210.00	0	1122.00	0	.00	0	1170.50	0	102.00	0	
				LABOR TOTALS			12,210.00		1,122.00		.00		1,170.50		102.00		
				BENEFIT TOTALS			.00		.00		.00						
PHAN, VY MNIM NGUYEN				2ST-2ADMI													
626-66-9963	230054	00	01	1-42287-2170	LBR		42060.29	0	3561.49	0	.00	0	2088.00	0	174.00	0	.00	0
	230054	00	01	1-42287-3100	BEN		22961.94	0	1925.47	0	.00	0						
				LABOR TOTALS			42,060.29		3,561.49		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			22,961.94		1,925.47		.00							
PHELPS, ANDREW RUSSELL				-													
578-58-0734	292001	02	01	1-42760-1320	LBR		5617.91	0	371.69	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5617.92	0	371.70	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5617.92	0	2120.44	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		642.48	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		642.48	0	214.16	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		147.59	0	.00	0	.00	0						
	273001	03	01	1-42760-3100	BEN		147.63	0	.00	0	.00	0						
	274001	03	01	1-42760-3100	BEN		139.28	0	40.86	0	.00	0						
	292001	02	01	1-42760-3100	BEN		1276.27	0	70.91	0	.00	0						
	293001	02	01	1-42760-3100	BEN		1276.28	0	70.93	0	.00	0						
	294001	02	01	1-42760-3100	BEN		1208.11	0	404.55	0	.00	0						
				LABOR TOTALS			18,781.19		3,077.99		.00		216.00		24.00		.00	
				BENEFIT TOTALS			4,195.16		587.25		.00							
PHILLIPS, ANTHONY JAMES				2CE-2OLDA													
363-70-0762	260001	00	01	1-52363-2350	LBR		3340.00	0	1680.00	0	.00	0	81.50	0	40.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		339.68	0	170.86	0	.00	0						
				LABOR TOTALS			3,340.00		1,680.00		.00		81.50		40.00		.00	
				BENEFIT TOTALS			339.68		170.86		.00							
PHILLIPS, JULIE A				-													
554-88-9084	292011	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293011	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293012	03	01	1-42415-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292011	03	01	1-42415-3200	BEN		3.96	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	AMOUNTS: MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	AMOUNTS: CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	HOURS: MO-TO-DATE DIRECT	MO-TO-DATE RLOC	HOURS: CURR-PERIOD DIRECT	CURR-PERIOD RLOC
				LABOR TOTALS			14,723.67		2,391.81		.00		182.00		20.00		.00	
				BENEFIT TOTALS			584.56		94.96		.00							
RAINEY, KENNETH				2WF-1OPI														
572-98-3450	180001	00	01	2-12633-2310	LBR		560.00	0	.00	0	.00	0	70.00	0	.00	0	.00	0
	180001	00	01	2-12633-3200	BEN		53.31	0	.00	0	.00	0						
	180001	00	01	2-12640-2310	LBR		560.00	0	.00	0	.00	0	70.00	0	.00	0	.00	0
	180001	00	01	2-12640-3200	BEN		53.31	0	.00	0	.00	0						
				LABOR TOTALS			1,120.00		.00		.00		140.00		.00		.00	
				BENEFIT TOTALS			106.62		.00		.00							
RAINEY, PHOENIX ANNABELL				2SE-2PEA														
573-33-0972	280001	00	01	2-22706-2410	LBR		6016.00	0	216.00	0	.00	0	752.00	0	27.00	0	.00	0
	280001	00	01	2-22706-3200	BEN		193.89	0	4.04	0	.00	0						
				LABOR TOTALS			6,016.00		216.00		.00		752.00		27.00		.00	
				BENEFIT TOTALS			193.89		4.04		.00							
RAJESH, SANGHRAJKA PARIT				2AC-2BOOK														
605-45-1897	280001	00	01	1-48226-2310	LBR		1164.38	0	.00	0	.00	0	172.50	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		21.78	0	.00	0	.00	0						
				LABOR TOTALS			1,164.38		.00		.00		172.50		.00		.00	
				BENEFIT TOTALS			21.78		.00		.00							
RAMADANOFF, DAVID D				-														
289-44-4899	192001	02	01	1-41636-1320	LBR		3934.05	0	260.28	0	.00	0	54.00	0	.00	0	.00	0
	193001	02	01	1-41636-1320	LBR		3934.05	0	260.28	0	.00	0	54.00	0	.00	0	.00	0
	194001	02	01	1-41636-1320	LBR		3934.05	0	1484.87	0	.00	0	54.00	0	18.00	0	.00	0
	192001	02	01	1-41636-3100	BEN		256.49	0	16.97	0	.00	0						
	193001	02	01	1-41636-3100	BEN		256.48	0	16.96	0	.00	0						
	194001	02	01	1-41636-3100	BEN		256.50	0	96.82	0	.00	0						
				LABOR TOTALS			11,802.15		2,005.43		.00		162.00		18.00		.00	
				BENEFIT TOTALS			769.47		130.75		.00							
RAMAN, CHANDRIKA				2LA-2TUTR														
615-04-8340	260002	00	01	1-48700-2350	LBR		290.45	0	15.49	0	.00	0	18.75	0	1.00	0	.00	0
	260002	00	01	1-48700-3200	BEN		29.53	0	1.57	0	.00	0						
				LABOR TOTALS			290.45		15.49		.00		18.75		1.00		.00	
				BENEFIT TOTALS			29.53		1.57		.00							
RAMIREZ MOYA, FRANCISCA				2CO-2TSTG														
560-71-7283	230128	00	01	1-42226-2170	LBR		1112.37	0	378.74	0	.00	0	63.14	0	20.88	0	.00	0
	230191	00	01	1-42226-2170	LBR		229.87	0	.00	0	.00	0	13.23	0	.00	0	.00	0
	230128	00	01	1-42226-3100	BEN		657.08	0	220.71	0	.00	0						

DATE RUN 07/20/05
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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC		
	230191	00	01	1-42226-3100	BEN		135.70	0	.00	0	.00	0						
	230128	00	01	2-12650-2170	LBR		7786.32	0	2651.05	0	.00	0	458.86	0	153.12	0		
	230191	00	01	2-12650-2170	LBR		1609.16	0	.00	0	.00	0	92.68	0	.00	0		
	230128	00	01	2-12650-3100	BEN		4599.23	0	1544.87	0	.00	0						
	230191	00	01	2-12650-3100	BEN		949.89	0	.00	0	.00	0						
	230191	00	01	2-12664-2170	LBR		24935.72	0	.00	0	.00	0	1460.09	0	.00	0	.00	0
	230191	00	01	2-12664-3100	BEN		14700.05	0	.00	0	.00	0						
				LABOR TOTALS			35,673.44		3,029.79		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,041.95		1,765.58		.00							
RAMIREZ, MARTHA PATRICIA				1SM-1EOPS														
564-57-8329	180001	00	01	2-11668-2310	LBR		4805.00	0	700.00	0	.00	0	480.50	0	70.00	0	.00	0
	180001	00	01	2-11668-3200	BEN		89.85	0	13.09	0	.00	0						
				LABOR TOTALS			4,805.00		700.00		.00		480.50		70.00		.00	
				BENEFIT TOTALS			89.85		13.09		.00							
RAMIREZ, MYRA C				1IT-1NASA														
556-73-5699	280001	00	01	2-14516-2310	LBR		6715.00	0	892.50	0	.00	0	671.50	0	89.25	0	.00	0
	280001	00	01	2-14516-3200	BEN		125.57	0	16.69	0	.00	0						
				LABOR TOTALS			6,715.00		892.50		.00		671.50		89.25		.00	
				BENEFIT TOTALS			125.57		16.69		.00							
RAMOS, ALEXJANDRO M				1AA-1IEDR														
546-85-4298	140001	00	01	1-44036-3100	BEN		22.22	22	6.92	6	.00	0						
	140001	00	01	2-31111-2700	LBR		1188.00	0	122.00	0	.00	0	148.50	0	15.25	0	.00	0
	140001	00	01	2-31111-3100	BEN		.00	22-	4.64-	6-	.00	0						
				LABOR TOTALS			1,188.00		122.00		.00		148.50		15.25		.00	
				BENEFIT TOTALS			22.22		2.28		.00							
RAMOS, CARMEN M				-														
511-86-3778	191001	02	01	1-41654-1320	LBR		2185.00	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	192001	02	01	1-41654-1320	LBR		2408.61	0	159.36	0	.00	0	30.00	0	.00	0	.00	0
	192002	02	01	1-41654-1320	LBR		2408.61	0	159.36	0	.00	0	30.00	0	.00	0	.00	0
	193001	02	01	1-41654-1320	LBR		1553.27	0	102.76	0	.00	0	28.00	0	.00	0	.00	0
	172001	03	01	1-41654-1445	LBR		550.44	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		43.88	0	.00	0	.00	0						
	191001	02	01	1-41654-3100	BEN		174.14	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		191.94	0	12.70	0	.00	0						
	192002	02	01	1-41654-3100	BEN		191.96	0	12.70	0	.00	0						
	193001	02	01	1-41654-3100	BEN		123.80	0	8.19	0	.00	0						
	293001	02	01	1-42654-1320	LBR		2889.45	0	191.16	0	.00	0	36.00	0	.00	0	.00	0
	294001	02	01	1-42654-1320	LBR		2889.45	0	1090.59	0	.00	0	36.00	0	12.00	0	.00	0
	273001	03	01	1-42654-1445	LBR		550.44	550	.00	0	.00	0	.00	0	.00	0	.00	0
	274001	03	01	1-42654-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42654-3100	BEN		43.86	43	.00	0	.00	0						

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPORT OF 860
PROGRAM
FY=05

NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT CD	ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT PERIOD DIRECT	AMOUNTS CURRENT PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURRENT PERIOD DIRECT	HOURS CURRENT PERIOD RLOC
	260046	00	01	1-52360-3200		BEN			30.01	0	30.01	0	.00	0						
				LABOR TOTALS					4,513.50		295.00		.00		24.50		3.50			
				BENEFIT TOTALS					459.04		30.01		.00							
BENTERIA, MATILDA P				1SM-1FAID																
570-58-7003	130164	00	01	1-41272-2170		LBR			63813.53	0	5317.78	0	.00	0	1833.21	0	152.76	0		
	130164	00	01	1-41272-3100		BEN			25873.95	0	2156.16	0	.00	0						
	130164	00	01	2-11683-2170		LBR			2169.75	0	.00	0	.00	0	63.71	0	.00	0		
	130164	00	01	2-11683-3100		BEN			888.87	0	.00	0	.00	0						
	130164	00	01	2-11684-2170		LBR			6697.48	0	738.95	0	.00	0	191.08	0	21.24	0		
	130164	00	01	2-11684-3100		BEN			2706.41	0	299.61	0	.00	0						
				LABOR TOTALS					72,680.76		6,056.73		.00		2,088.00		174.00			
				BENEFIT TOTALS					29,469.23		2,455.77		.00							
RESCH, NATHAN P				-																
387-78-5545	191001	02	01	1-41702-1320		LBR			3810.06	0	.00	0	.00	0	72.00	0	.00	0	.00	0
	191002	02	01	1-41702-1320		LBR			6529.66	0	.00	0	.00	0	144.00	0	.00	0	.00	0
	193001	02	01	1-41702-1320		LBR			4415.94	0	292.17	0	.00	0	72.00	0	.00	0	.00	0
	194001	02	01	1-41702-1320		LBR			4415.94	0	1666.76	0	.00	0	72.00	0	24.00	0	.00	0
	191001	02	01	1-41702-3100		BEN			294.14	0	.00	0	.00	0						
	191002	02	01	1-41702-3100		BEN			504.09	0	.00	0	.00	0						
	193001	02	01	1-41702-3100		BEN			340.88	0	22.55	0	.00	0						
	194001	02	01	1-41702-3100		BEN			340.91	0	128.68	0	.00	0						
	192001	02	01	1-41720-1320		LBR			7568.04	0	500.73	0	.00	0	180.00	0	.00	0	.00	0
	192001	02	01	1-41720-3100		BEN			584.25	0	38.66	0	.00	0						
				LABOR TOTALS					26,739.64		2,459.66		.00		540.00		24.00		.00	
				BENEFIT TOTALS					2,064.27		189.89		.00							
RESPICIO, MANUEL R				4SS-4DSS1																
551-91-9583	430395	00	01	1-44358-2170		LBR			19708.55	0	1674.34	0	.00	0	839.64	0	77.85	0	.00	0
	430395	00	01	1-44358-2360		LBR			5510.35	0	385.83	0	.00	0	125.76	0	9.54	0	.00	0
	430395	00	01	1-44358-3100		BEN			9425.50	0	790.76	0	.00	0						
	430395	00	01	1-44358-3200		BEN			422.89	0	29.05	0	.00	0						
	430395	00	01	1-51911-2360		LBR			178.94	0	.00	0	.00	0	4.75	0	.00	0	.00	0
	430395	00	01	1-51911-3200		BEN			13.50	0	.00	0	.00	0						
	430395	00	01	1-52225-2360		LBR			150.69	0	.00	0	.00	0	4.00	0	.00	0	.00	0
	430395	00	01	1-52225-3200		BEN			11.34	0	.00	0	.00	0						
	430395	00	01	2-54370-2170		LBR			35038.08	0	2976.67	0	.00	0	1335.36	0	110.40	0	.00	0
	430395	00	01	2-54370-2360		LBR			8933.70	0	685.93	0	.00	0	202.24	0	16.96	0	.00	0
	430395	00	01	2-54370-3100		BEN			16756.46	0	1405.81	0	.00	0						
	430395	00	01	2-54370-3200		BEN			686.83	0	51.65	0	.00	0						
				LABOR TOTALS					69,520.31		5,722.77		.00		2,511.75		214.75		.00	
				BENEFIT TOTALS					27,316.52		2,277.27		.00							
RESTREPO, EDGAR ALBERTO				1SM-1EOPS																

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC		
	194001	02	01	1-41806-3100	BEN		68.95	0	59.91-	0	.00	0						
	150241	00	01	1-44043-1160	LBR		.00	0	.00	0	1350.00-	1350-	.00	0	.00	0		
				LABOR TOTALS			62,820.95		1,704.75		.00		1,424.40		120.40			
				BENEFIT TOTALS			9,200.73		362.03		.00							
ROBINSON, LINDA A				1LB-1MDIA														
558-74-0377	130028	00	01	1-41306-2170	LBR		60575.47	0	5529.96	0	.00	0	1929.82	0	174.00	0		
	130028	00	01	1-41306-3100	BEN		26889.42	0	2343.00	0	.00	0						
				LABOR TOTALS			60,575.47		5,529.96		.00		1,929.82		174.00			
				BENEFIT TOTALS			26,889.42		2,343.00		.00							
ROBINSON, RANDOLPH K				1IT-1NASA														
569-75-6808	280001	00	01	2-14516-2310	LBR		5490.00	0	1150.00	0	.00	0	549.00	0	115.00	0		
	280001	00	01	2-14516-3200	BEN		102.68	0	21.51	0	.00	0						
				LABOR TOTALS			5,490.00		1,150.00		.00		549.00		115.00			
				BENEFIT TOTALS			102.68		21.51		.00							
ROBLEDO, CAROLINA				-														
554-94-2324	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	292001	02	01	1-42656-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42656-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42656-1320	LBR		3129.69	0	1181.27	0	.00	0	36.00	0	12.00	0	.00	0
	294002	02	01	1-42656-1320	LBR		3129.69	0	1181.27	0	.00	0	36.00	0	12.00	0	.00	0
	294003	02	01	1-42656-1320	LBR		4692.21	0	1771.03	0	.00	0	48.00	0	16.00	0	.00	0
	272001	03	01	1-42656-1445	LBR		457.26	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42656-3100	BEN		55.87	0	.00	0	.00	0						
	292001	02	01	1-42656-3100	BEN		688.92	0	45.58	0	.00	0						
	293001	02	01	1-42656-3100	BEN		688.95	0	45.58	0	.00	0						
	294001	02	01	1-42656-3100	BEN		382.45	0	144.35	0	.00	0						
	294002	02	01	1-42656-3100	BEN		382.45	0	144.35	0	.00	0						
	294003	02	01	1-42656-3100	BEN		573.38	0	216.42	0	.00	0						
				LABOR TOTALS			22,783.94		4,879.56		.00		254.00		40.00		.00	
				BENEFIT TOTALS			2,784.24		596.28		.00							
ROBLES, GEORGE				2ST-2EOPS														
556-02-4439	220185	00	01	1-42378-2170	LBR		22000.70	0	1860.82	0	.00	0	522.00	0	43.50	0	.00	0
	220185	00	01	1-42378-3100	BEN		7942.53	0	670.85	0	.00	0						
	220185	00	01	2-12664-2170	LBR		66000.63	0	5582.32	0	.00	0	1566.00	0	130.50	0	.00	0
	220185	00	01	2-12664-3100	BEN		23826.85	0	2012.49	0	.00	0						
				LABOR TOTALS			88,001.33		7,443.14		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			31,769.38		2,683.34		.00							
ROCHA, FRANCISCO R				4SS-4DSS1														

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC		
	430472	00	01	2-84110-3200	BEN			11.94	0	5.97	0	.00	0						
				LABOR TOTALS				56,355.08		4,853.78		.00		2,127.50		180.00			
				BENEFIT TOTALS				25,897.30		2,175.83		.00							
RODRIGUEZ, JAMES J																			
564-64-1491	293001	02	01	1-42504-1320	LBR			4009.41	0	265.26	0	.00	0	48.00	0	.00	0		
	294001	02	01	1-42504-1320	LBR			4009.41	0	1513.31	0	.00	0	48.00	0	16.00	0		
	274001	03	01	1-42504-1445	LBR			573.00	0	191.00	0	.00	0	12.00	0	4.00	0		
	274001	03	01	1-42504-3100	BEN			70.02	0	23.34	0	.00	0						
	293001	02	01	1-42504-3100	BEN			489.94	0	32.42	0	.00	0						
	294001	02	01	1-42504-3100	BEN			489.93	0	184.92	0	.00	0						
				LABOR TOTALS				8,591.82		1,969.57		.00		108.00		20.00		.00	
				BENEFIT TOTALS				1,049.89		240.68		.00							
RODRIGUEZ, JORGE A				1SM-1EOPS															
609-20-6769	132215	00	01	2-11668-2170	LBR			54510.69	0	4542.56	0	.00	0	2100.00	0	174.00	0	.00	0
	132215	00	01	2-11668-3100	BEN			25685.80	0	2140.48	0	.00	0						
				LABOR TOTALS				54,510.69		4,542.56		.00		2,100.00		174.00		.00	
				BENEFIT TOTALS				25,685.80		2,140.48		.00							
RODRIGUEZ, LUCY LYNNETTE				1IT-1IIRS															
535-11-1024	130149	00	01	1-41403-2170	LBR			45156.46	0	4323.85	0	.00	0	1866.45	0	174.00	0	.00	0
	130149	00	01	1-41403-3100	BEN			17215.90	0	1692.11	0	.00	0						
				LABOR TOTALS				45,156.46		4,323.85		.00		1,866.45		174.00		.00	
				BENEFIT TOTALS				17,215.90		1,692.11		.00							
RODRIGUEZ, MATTHEW STEVEN				2CE-2SHOR															
557-83-9161	230344	00	01	1-52360-2170	LBR			60041.01	0	5003.42	0	.00	0	2088.00	0	174.00	0	.00	0
	230344	00	01	1-52360-3100	BEN			26788.03	0	2232.33	0	.00	0						
				LABOR TOTALS				60,041.01		5,003.42		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS				26,788.03		2,232.33		.00							
RODRIGUEZ, ROZELLA FELIPA				1IT-1NASA															
608-42-5610	280001	00	01	2-14520-2310	LBR			11106.50	0	1319.00	0	.00	0	1110.25	0	131.50	0	.00	0
	280001	00	01	2-14520-3200	BEN			399.53	0	24.67	0	.00	0						
				LABOR TOTALS				11,106.50		1,319.00		.00		1,110.25		131.50		.00	
				BENEFIT TOTALS				399.53		24.67		.00							
RODRIGUEZ-MONTANA, MAGDA				1LA-1SPAN															
522-77-7980	180001	00	01	1-41652-2310	LBR			310.00	90	.00	0	.00	0	22.00	0	.00	0	.00	0
	180002	00	01	1-41652-2410	LBR			560.00	0	.00	0	.00	0	56.00	0	.00	0	.00	0
	180001	00	01	1-41652-3200	BEN			4.11	0	.00	0	.00	0						
	180002	00	01	1-41652-3200	BEN			10.49	0	.00	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	D
	294003	03	01	2-12681-1430		LBR	440.27	0	.00	0	.00	0	10.50	0	
	294005	03	01	2-12681-1430		LBR	419.30	0	.00	0	.00	0	10.00	0	
	293006	03	01	2-12681-3100		BEN	84.64	0	.00	0	.00	0			
	291002	03	01	2-12681-3200		BEN	156.71	0	.00	0	.00	0			
	291003	03	01	2-12681-3200		BEN	3.57	3	.00	0	.00	0			
	291005	03	01	2-12681-3200		BEN	63.57	0	.00	0	.00	0			
	292001	03	01	2-12681-3200		BEN	150.89	0	.00	0	.00	0			
	292003	03	01	2-12681-3200		BEN	92.85	0	.00	0	.00	0			
	292004	03	01	2-12681-3200		BEN	105.90	0	.00	0	.00	0			
	293005	03	01	2-12681-3200		BEN	51.48	0	.00	0	.00	0			
	293007	03	01	2-12681-3200		BEN	62.57	0	.00	0	.00	0			
	294001	03	01	2-12681-3200		BEN	108.37	0	.00	0	.00	0			
	294003	03	01	2-12681-3200		BEN	79.77	0	.00	0	.00	0			
	294005	03	01	2-12681-3200		BEN	75.98	0	.00	0	.00	0			
	291003	03	01	2-12684-1430		LBR	782.40	18-	.00	0	.00	0	20.00	0	
	291003	03	01	2-12684-3200		BEN	140.48	3-	.00	0	.00	0			
				LABOR TOTALS			86,965.50		8,506.62		.00		2,384.76		
				BENEFIT TOTALS			26,632.86		2,363.16		.00				
SILBERSTEIN, LAURA HARRIE -															
552-74-9751	192099	03	01	1-41263-1430		LBR	100.00	0	.00	0	.00	0	2.00	0	
	192099	03	01	1-41263-3200		BEN	19.62	0	.00	0	.00	0			
	192001	02	01	1-41503-1320		LBR	3962.00	0	262.13	0	.00	0	48.00	0	
	172001	03	01	1-41503-1445		LBR	618.38	0	.00	0	.00	0	12.00	0	
	172001	03	01	1-41503-3100		BEN	123.43	0	.00	0	.00	0			
	192001	02	01	1-41503-3100		BEN	780.78	0	42.28	0	.00	0			
	192002	02	01	1-41540-1320		LBR	540.27	0	35.74	0	.00	0	6.00	0	
	192003	02	01	1-41540-1320		LBR	1080.53	0	71.48	0	.00	0	12.00	0	
	192004	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	192005	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	192006	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	192007	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	192008	02	01	1-41540-1320		LBR	180.10	0	11.92	0	.00	0	6.00	0	
	193001	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	193002	02	01	1-41540-1320		LBR	.00	0	.01-	0	.00	0	.00	0	
	193003	02	01	1-41540-1320		LBR	1080.56	0	71.50	0	.00	0	12.00	0	
	193004	02	01	1-41540-1320		LBR	1080.55	0	71.49	0	.00	0	12.00	0	
	194001	02	01	1-41540-1320		LBR	540.28	0	35.75	0	.00	0	6.00	0	
	194002	02	01	1-41540-1320		LBR	540.28	0	35.75	0	.00	0	6.00	0	
	194003	02	01	1-41540-1320		LBR	1080.56	0	71.50	0	.00	0	12.00	0	
	194004	02	01	1-41540-1320		LBR	540.27	0	540.27	0	.00	0	6.00	0	
	194005	02	01	1-41540-1320		LBR	2065.86	0	1080.55	0	.00	0	24.00	0	
	192002	02	01	1-41540-3100		BEN	104.85	0	5.78	0	.00	0			
	192003	02	01	1-41540-3100		BEN	214.57	0	11.53	0	.00	0			
	192004	02	01	1-41540-3100		BEN	214.57	0	11.52	0	.00	0			
	192005	02	01	1-41540-3100		BEN	214.59	0	11.54	0	.00	0			
	192006	02	01	1-41540-3100		BEN	35.76	0	1.92	0	.00	0			
	192007	02	01	1-41540-3100		BEN	35.75	0	1.92	0	.00	0			

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE, DIRECT	MO-TO-DATE, RLOC		
	294001	02	01	1-42682-3100	BEN			440.57	0	166.29	0	.00	0						
				LABOR TOTALS				30,536.28		2,940.39		.00		374.00		20.00			
				BENEFIT TOTALS				3,105.52		299.04		.00							
SAMUELSSON, OLOV CARL				2LA-2LART															
606-47-4573	280001	00	01	1-48410-2310	LBR			910.00	266	.00	0	.00	0	80.50	0	.00	0		
	280001	00	01	1-48410-3100	BEN			4.97	0	.00	0	.00	0						
	280001	00	01	1-48410-3200	BEN			12.04	0	.00	0	.00	0						
				LABOR TOTALS				910.00		.00		.00		80.50		.00		.00	
				BENEFIT TOTALS				17.01		.00		.00							
SAN ROMAN, JULIO MIGUEL				2AC-2BOOK															
612-51-2133	280001	00	01	1-48226-2310	LBR			163.69	0	163.69	0	.00	0	24.25	0	24.25	0	.00	0
	280001	00	01	1-48226-3200	BEN			15.58	0	15.58	0	.00	0						
				LABOR TOTALS				163.69		163.69		.00		24.25		24.25		.00	
				BENEFIT TOTALS				15.58		15.58		.00							
SANCHEZ CASTILLO, CESAR				2ST-2ADMI															
611-70-5750	240001	00	01	1-44036-3100	BEN			88.21	88	2.24	2	.00	0						
	280001	00	01	2-12681-2310	LBR			915.00	0	412.50	0	.00	0	132.00	0	55.00	0	.00	0
	280001	00	01	2-12681-3200	BEN			17.11	0	7.71	0	.00	0						
	240001	00	01	2-32111-2700	LBR			4717.50	0	.00	0	.00	0	629.00	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN			.00	88-	2.24-	2-	.00	0						
				LABOR TOTALS				5,632.50		412.50		.00		751.00		55.00		.00	
				BENEFIT TOTALS				105.32		7.71		.00							
SANCHEZ, AMELIA P				2CO-2COUN															
560-08-3778	230490	00	01	1-42300-2170	LBR			51387.76	0	4206.92	0	.00	0	2088.00	0	174.00	0	.00	0
	230490	00	01	1-42300-3100	BEN			20542.65	0	1695.88	0	.00	0						
				LABOR TOTALS				51,387.76		4,206.92		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS				20,542.65		1,695.88		.00							
SANCHEZ, LOUIS EDWARD				-															
571-48-1624	292099	03	01	1-42023-1430	LBR			100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN			7.72	0	.00	0	.00	0						
	291001	02	01	1-42506-1320	LBR			2109.52	0	.00	0	.00	0	28.80	0	.00	0	.00	0
	292001	02	01	1-42506-1320	LBR			1380.48	0	91.34	0	.00	0	21.60	0	.00	0	.00	0
	292002	02	01	1-42506-1320	LBR			3071.87	0	203.24	0	.00	0	48.00	0	.00	0	.00	0
	292004	02	01	1-42506-1320	LBR			306.79	0	20.31	0	.00	0	4.80	0	.00	0	.00	0
	293001	02	01	1-42506-1320	LBR			3453.27	0	228.48	0	.00	0	54.00	0	.00	0	.00	0
	294001	02	01	1-42506-1320	LBR			5458.38	0	2060.22	0	.00	0	81.60	0	27.20	0	.00	0
	292003	02	01	1-42506-1330	LBR			230.30	0	15.24	0	.00	0	3.50	0	.00	0	.00	0
	293002	02	01	1-42506-1330	LBR			240.66	0	15.92	0	.00	0	3.50	0	.00	0	.00	0
	294002	02	01	1-42506-1330	LBR			378.18	0	378.18	0	.00	0	5.50	0	5.50	0	.00	0

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS FISCAL-TO-DATE DIRECT	AMOUNTS FISCAL-TO-DATE RLOC	AMOUNTS MONTH-TO-DATE DIRECT	AMOUNTS MONTH-TO-DATE RLOC	AMOUNTS CURRENT-PERIOD DIRECT	AMOUNTS CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	HOURS FISC-TO-DATE RLOC	HOURS MO-TO-DATE DIRECT	HOURS MO-TO-DATE RLOC	HOURS CURR-PERIOD DIRECT	HOURS CURR-PERIOD RLOC
				LABOR TOTALS				4,353.76		475.88		.00		645.00		70.50		.00	
				BENEFIT TOTALS				81.41		8.90		.00							
SCHIERON, SARA M			-																
621-03-6389	293002	03	01	1-42021-1430		LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293002	03	01	1-42021-3200		BEN		7.72	0	.00	0	.00	0						
	293001	02	01	1-42620-1320		LBR		3199.47	0	211.68	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42620-1320		LBR		3199.47	0	1207.61	0	.00	0	48.00	0	16.00	0	.00	0
	273001	03	01	1-42620-1445		LBR		457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42620-1445		LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42620-3100		BEN		35.28	0	.00	0	.00	0						
	274001	03	01	1-42620-3100		BEN		35.29	0	11.77	0	.00	0						
	293001	02	01	1-42620-3100		BEN		246.98	0	16.34	0	.00	0						
	294001	02	01	1-42620-3100		BEN		246.99	0	93.23	0	.00	0						
				LABOR TOTALS				7,413.34		1,571.69		.00		122.00		20.00		.00	
				BENEFIT TOTALS				572.26		121.34		.00							
SCHMIDT, BENJAMIN JAN			-																
562-81-9564	191001	02	01	1-41461-1320		LBR		2807.82	0	.00	0	.00	0	84.36	0	.00	0	.00	0
	191002	02	01	1-41461-1320		LBR		2807.82	0	.00	0	.00	0	84.36	0	.00	0	.00	0
	192001	02	01	1-41461-1320		LBR		2322.21	0	153.65	0	.00	0	38.00	0	.00	0	.00	0
	172001	03	01	1-41461-1445		LBR		293.57	0	.00	0	.00	0	7.00	0	.00	0	.00	0
	172001	03	01	1-41461-3100		BEN		22.63	0	.00	0	.00	0						
	191001	02	01	1-41461-3100		BEN		216.74	0	.00	0	.00	0						
	191002	02	01	1-41461-3100		BEN		216.77	0	.00	0	.00	0						
	192001	02	01	1-41461-3100		BEN		179.30	0	11.86	0	.00	0						
				LABOR TOTALS				8,231.42		153.65		.00		213.72		.00		.00	
				BENEFIT TOTALS				635.44		11.86		.00							
SCHMIDT, CYNTHIA LYNN			-																
552-33-3949	193001	02	01	1-41814-1320		LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00	0
	193001	02	01	1-41814-3100		BEN		123.34	0	8.16	0	.00	0						
				LABOR TOTALS				1,597.95		105.72		.00		24.00		.00		.00	
				BENEFIT TOTALS				123.34		8.16		.00							
SCHMIDT, ERIC A			2CA-2F/TV																
545-55-7025	280001	00	01	2-12902-2310		LBR		450.00	0	182.00	0	.00	0	56.25	0	22.75	0	.00	0
	280001	00	01	2-12902-3200		BEN		8.41	0	3.40	0	.00	0						
				LABOR TOTALS				450.00		182.00		.00		56.25		22.75		.00	
				BENEFIT TOTALS				8.41		3.40		.00							
SCHMIDT, JANET S			2ST-2FNAI																
546-66-8035	230390	00	01	1-42272-2170		LBR		44077.35	0	3657.72	0	.00	0	1868.75	0	153.12	0	.00	0
	230390	00	01	1-42272-3100		BEN		21672.28	0	1764.04	0	.00	0						

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	230390	00	01	2-12681-2170	LBR		4525.24	0	498.79	0	.00	0	187.92	0	20.88	0	
	230390	00	01	2-12681-3100	BEN		2190.04	0	240.56	0	.00	0					
	230390	00	01	2-12684-2170	LBR		695.45	0	.00	0	.00	0	31.33	0	.00	0	
	230390	00	01	2-12684-3100	BEN		358.31	0	.00	0	.00	0					
				LABOR TOTALS			49,298.04		4,156.51		.00		2,088.00		174.00		
				BENEFIT TOTALS			24,220.63		2,004.60		.00						
SCHMIDT, KARL R																	
169-38-1512	191001	02	01	1-41622-1320	LBR		1633.70	0	.00	0	.00	0	36.00	0	.00	0	
	192001	02	01	1-41622-1320	LBR		1668.71	0	110.41	0	.00	0	36.00	0	.00	0	
	192002	02	01	1-41622-1320	LBR		1668.70	0	110.41	0	.00	0	36.00	0	.00	0	.00 0
	192003	02	01	1-41622-1320	LBR		1610.06	0	106.52	0	.00	0	36.00	0	.00	0	.00 0
	193001	02	01	1-41622-1320	LBR		1668.69	0	110.40	0	.00	0	36.00	0	.00	0	.00 0
	193002	02	01	1-41622-1320	LBR		1668.69	0	110.40	0	.00	0	36.00	0	.00	0	.00 0
	193003	02	01	1-41622-1320	LBR		1610.07	0	106.53	0	.00	0	36.00	0	.00	0	.00 0
	194001	02	01	1-41622-1320	LBR		1668.69	0	629.83	0	.00	0	36.00	0	12.00	0	.00 0
	194002	02	01	1-41622-1320	LBR		1668.69	0	629.83	0	.00	0	36.00	0	12.00	0	.00 0
	194003	02	01	1-41622-1320	LBR		1610.07	0	607.71	0	.00	0	36.00	0	12.00	0	.00 0
	172001	03	01	1-41622-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	173001	03	01	1-41622-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	174001	00	01	1-41622-1445	LBR		191.00	191	.00	0	.00	0	.00	0	.00	0	.00 0
	174001	03	01	1-41622-1445	LBR		382.00	0	191.00	0	.00	0	8.00	0	4.00	0	.00 0
	172001	03	01	1-41622-3100	BEN		61.72	0	.00	0	.00	0					
	173001	03	01	1-41622-3100	BEN		61.71	0	.00	0	.00	0					
	174001	00	01	1-41622-3100	BEN		20.57	20	.00	0	.00	0					
	174001	03	01	1-41622-3100	BEN		41.14	0	20.57	0	.00	0					
	191001	02	01	1-41622-3100	BEN		175.94	0	.00	0	.00	0					
	192001	02	01	1-41622-3100	BEN		179.71	0	11.90	0	.00	0					
	192002	02	01	1-41622-3100	BEN		179.75	0	11.89	0	.00	0					
	192003	02	01	1-41622-3100	BEN		173.37	0	11.46	0	.00	0					
	193001	02	01	1-41622-3100	BEN		179.72	0	11.90	0	.00	0					
	193002	02	01	1-41622-3100	BEN		179.70	0	11.88	0	.00	0					
	193003	02	01	1-41622-3100	BEN		173.42	0	11.48	0	.00	0					
	194001	02	01	1-41622-3100	BEN		179.71	0	67.83	0	.00	0					
	194002	02	01	1-41622-3100	BEN		179.71	0	67.83	0	.00	0					
	194003	02	01	1-41622-3100	BEN		173.41	0	65.45	0	.00	0					
				LABOR TOTALS			18,195.11		2,713.04		.00		392.00		40.00		.00
				BENEFIT TOTALS			1,959.58		292.19		.00						
SCHMIDT, STEVEN DALE				40R-40PER													
544-54-7646	430037	00	01	1-44128-2180	LBR		86402.78	0	7200.23	0	.00	0	2100.00	0	174.00	0	.00 0
	430037	00	01	1-44128-3100	BEN		32379.84	0	2698.32	0	.00	0					
				LABOR TOTALS			86,402.78		7,200.23		.00		2,100.00		174.00		.00
				BENEFIT TOTALS			32,379.84		2,698.32		.00						
SCHMIEDT, JAMES B																	

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
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	292003	02	01	1-42654-3100		BEN		588.15	0	38.91	0	.00	0					
	293001	02	01	1-42654-3100		BEN		588.12	0	38.90	0	.00	0					
	294001	02	01	1-42654-3100		BEN		588.15	0	222.00	0	.00	0					
	294002	02	01	1-42654-3100		BEN		294.06	0	110.99	0	.00	0					
				LABOR TOTALS				22,758.87		3,863.62		.00		301.50		34.00		.00
				BENEFIT TOTALS				2,781.11		472.14		.00						
SCHOLAR, DEIRDRE CLAIRE																		
131-60-9445	172001	03	01	1-41764-1445		LBR		480.74	0	.00	0	.00	0	12.00	0	.00	0	.00 0
	172001	03	01	1-41764-3100		BEN		38.33	0	.00	0	.00	0					
	192001	02	01	1-41767-1320		LBR		3125.58	0	206.79	0	.00	0	48.00	0	.00	0	.00 0
	192001	02	01	1-41767-3100		BEN		249.08	0	16.48	0	.00	0					
				LABOR TOTALS				3,606.32		206.79		.00		60.00		.00		.00
				BENEFIT TOTALS				287.41		16.48		.00						
SCHOOLER, SHIRLEY A				2SE-2DSS														
573-57-2058	230136	00	01	2-22224-2170		LBR		56070.70	0	4672.56	0	.00	0	2088.00	0	174.00	0	.00 0
	230136	00	01	2-22224-3100		BEN		21535.90	0	1794.66	0	.00	0					
				LABOR TOTALS				56,070.70		4,672.56		.00		2,088.00		174.00		.00
				BENEFIT TOTALS				21,535.90		1,794.66		.00						
SCHOTT, THOMAS				2CA-2F/TV														
294-80-1025	230325	00	01	1-42620-2220		LBR		60071.77	0	5029.93	0	.00	0	2088.00	0	174.00	0	.00 0
	230325	00	01	1-42620-3100		BEN		26865.31	0	2243.85	0	.00	0					
				LABOR TOTALS				60,071.77		5,029.93		.00		2,088.00		174.00		.00
				BENEFIT TOTALS				26,865.31		2,243.85		.00						
SCHRECKENGOST, JOSHUA LEE				1BH-1BHDV														
566-67-0420	160001	00	01	1-41091-2350		LBR		226.26	0	.00	0	.00	0	9.00	0	.00	0	.00 0
	160001	00	01	1-41091-3200		BEN		23.01	0	.00	0	.00	0					
				LABOR TOTALS				226.26		.00		.00		9.00		.00		.00
				BENEFIT TOTALS				23.01		.00		.00						
SCHREIBER, SHELLEY A				1AP-1PR														
213-46-8277	130106	00	01	1-41048-2170		LBR		87672.82	0	7306.07	0	.00	0	2091.38	0	174.00	0	.00 0
	130106	00	01	1-41048-3100		BEN		32072.03	0	2672.67	0	.00	0					
				LABOR TOTALS				87,672.82		7,306.07		.00		2,091.38		174.00		.00
				BENEFIT TOTALS				32,072.03		2,672.67		.00						
SCHROCK, RODERICK STEPHEN																		
587-41-2277	292099	03	01	1-42023-1430		LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00 0
	292099	03	01	1-42023-3200		BEN		7.72	0	.00	0	.00	0					
	292001	02	01	1-42622-1320		LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00 0

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CARE Coordinator

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	155504	00	01	2-11268-1260	LBR	429.97	0	.00	0	.00	0	7.02-	0	.00	0	.00	0
	150052	00	01	2-11268-3100	BEN	906.11	0	84.36	0	.00	0						
	155504	00	01	2-11268-3100	BEN	85.11	0	.00	0	.00	0						
				LABOR TOTALS		125,816.48		9,443.04		.00		3,139.58		285.14		.00	
				BENEFIT TOTALS		23,620.44		1,852.64		.00							
SIERRA, ANNMARIE J.				1IT-1NASA													
569-39-3023	280001	00	01	2-14516-2310	LBR	2711.50	0	.00	0	.00	0	246.50	0	.00	0	.00	0
	280001	00	01	2-14516-3200	BEN	275.76	0	.00	0	.00	0						
				LABOR TOTALS		2,711.50		.00		.00		246.50		.00		.00	
				BENEFIT TOTALS		275.76		.00		.00							
SIGALA-AGUILAR, GRISELDA																	
562-02-1906	291004	03	01	1-42248-1430	LBR	500.78	0	.00	0	.00	0	12.50	0	.00	0	.00	0
	292002	03	01	1-42248-1430	LBR	480.75	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	293003	00	01	1-42248-1430	LBR	701.05-	701-	.00	0	.00	0	.00	0	.00	0	.00	0
	293003	03	01	1-42248-1430	LBR	701.05	0	.00	0	.00	0	17.50	0	.00	0	.00	0
	293004	03	01	1-42248-1430	LBR	801.60	0	.00	0	.00	0	20.01	0	.00	0	.00	0
	291004	03	01	1-42248-3200	BEN	93.48	0	.00	0	.00	0						
	292002	03	01	1-42248-3200	BEN	89.16	0	.00	0	.00	0						
	293003	00	01	1-42248-3200	BEN	143.63-	143-	.00	0	.00	0						
	293003	03	01	1-42248-3200	BEN	128.71	0	.00	0	.00	0						
	293004	03	01	1-42248-3200	BEN	152.89	0	.00	0	.00	0						
	291001	02	01	1-42250-1320	LBR	635.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	294002	02	01	1-42250-1320	LBR	58.18	0	759.89-	0	.00	0	.00	0	12.00-	0	.00	0
	294004	02	01	1-42250-1320	LBR	29.09	0	381.45-	0	.00	0	.00	0	6.00-	0	.00	0
	294005	02	01	1-42250-1320	LBR	1680.92	0	1680.92	0	.00	0	24.00	0	24.00	0	.00	0
	294006	02	01	1-42250-1320	LBR	1700.31	0	1700.31	0	.00	0	24.00	0	24.00	0	.00	0
	291001	02	01	1-42250-3100	BEN	114.15	0	.00	0	.00	0						
	294002	02	01	1-42250-3100	BEN	16.52	0	131.03-	0	.00	0						
	294004	02	01	1-42250-3100	BEN	8.61	0	65.78-	0	.00	0						
	294005	02	01	1-42250-3100	BEN	289.86	0	289.86	0	.00	0						
	294006	02	01	1-42250-3100	BEN	293.21	0	293.21	0	.00	0						
	230240	00	01	1-42378-2170	LBR	18672.65	3038	4605.12	3038	.00	0	464.54	0	47.99	0	.00	0
	230240	00	01	1-42378-3100	BEN	6103.27	996	1490.51	996	.00	0						
	230240	00	01	2-12664-2170	LBR	56018.09	3038-	1661.61	3038-	.00	0	1651.21	0	130.51	0	.00	0
	230240	00	01	2-12664-3100	BEN	18309.85	996-	486.39	996-	.00	0						
	291002	03	01	2-12681-1430	LBR	841.32	0	.00	0	.00	0	21.00	0	.00	0	.00	0
	291003	03	01	2-12681-1430	LBR	18.86	18	.00	0	.00	0	.00	0	.00	0	.00	0
	291005	03	01	2-12681-1430	LBR	340.54	0	.00	0	.00	0	8.50	0	.00	0	.00	0
	292001	03	01	2-12681-1430	LBR	801.26	0	.00	0	.00	0	20.00	0	.00	0	.00	0
	292003	03	01	2-12681-1430	LBR	500.78	0	.00	0	.00	0	12.50	0	.00	0	.00	0
	292004	03	01	2-12681-1430	LBR	560.84	0	.00	0	.00	0	14.00	0	.00	0	.00	0
	293005	03	01	2-12681-1430	LBR	280.42	0	.00	0	.00	0	7.00	0	.00	0	.00	0
	293006	03	01	2-12681-1430	LBR	460.69	460	.00	0	.00	0	.00	0	.00	0	.00	0
	293007	03	01	2-12681-1430	LBR	340.51	0	.00	0	.00	0	8.50	0	.00	0	.00	0
	294001	03	01	2-12681-1430	LBR	600.90	0	.00	0	.00	0	15.00	0	.00	0	.00	0

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				LABOR TOTALS			6,963.27		2,599.89		.00		72.00		24.00			
				BENEFIT TOTALS			850.92		317.71		.00							
SLATER, BERNADETTA E				4AN-4BUSV														
609-24-4425	410040	00	01	1-44032-2110	LBR		87930.19	0	7327.52	0	.00	0	1943.82	0	161.99	0		
	410040	00	01	1-44032-3100	BEN		33298.09	0	2640.58	0	.00	0						
	410040	00	01	2-14610-2110	LBR		6517.01	0	543.08	0	.00	0	144.18	0	12.01	0		
	410040	00	01	2-14610-3100	BEN		2319.72	0	195.71	0	.00	0						
				LABOR TOTALS			94,447.20		7,870.60		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			33,617.81		2,836.29		.00							
SLAYTON, VIRGINIA E				1GU-1ADMR														
566-82-0406	130146	00	01	1-41287-2170	LBR		49935.50	0	4161.29	0	.00	0	2091.00	0	174.00	0	.00	0
	130146	00	01	1-41287-3100	BEN		24644.43	0	2053.71	0	.00	0						
				LABOR TOTALS			49,935.50		4,161.29		.00		2,091.00		174.00		.00	
				BENEFIT TOTALS			24,644.43		2,053.71		.00							
SLOAN, CYNTHIA JEAN																		
385-50-9668	294001	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	294003	02	01	1-42662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0	.00	0
	274001	03	01	1-42662-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	274001	03	01	1-42662-3100	BEN		35.29	0	11.76	0	.00	0						
	294001	02	01	1-42662-3100	BEN		347.30	0	131.09	0	.00	0						
	294002	02	01	1-42662-3100	BEN		347.31	0	131.08	0	.00	0						
	294003	02	01	1-42662-3100	BEN		347.30	0	131.09	0	.00	0						
				LABOR TOTALS			13,953.42		5,246.46		.00		192.00		64.00		.00	
				BENEFIT TOTALS			1,077.20		405.02		.00							
SLOTHOWER, ARIEL D				2CO-2TSTG														
573-48-3325	260051	00	01	1-42226-2350	LBR		308.14	0	.00	0	.00	0	6.50	0	.00	0	.00	0
	260051	00	01	1-42226-3200	BEN		21.16	0	.00	0	.00	0						
	291001	02	01	1-42662-1320	LBR		6514.76	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	291002	02	01	1-42662-1320	LBR		6514.76	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42662-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42662-1320	LBR		5637.55	0	373.00	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	293002	02	01	1-42662-1320	LBR		5637.54	0	372.99	0	.00	0	60.00	0	.00	0	.00	0
	272001	03	01	1-42662-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42662-1445	LBR		573.00	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42662-3100	BEN		61.44	0	.00	0	.00	0						
	273001	03	01	1-42662-3100	BEN		61.71	0	.00	0	.00	0						
	291001	02	01	1-42662-3100	BEN		697.63	0	.00	0	.00	0						
	291002	02	01	1-42662-3100	BEN		697.64	0	.00	0	.00	0						
	292001	02	01	1-42662-3100	BEN		604.61	0	40.18	0	.00	0						

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	260001	00	01	2-22224-3200	BEN		516.22	0	.00	0	.00	0					
				LABOR TOTALS			5,076.00		.00		.00		141.00		.00		
				BENEFIT TOTALS			516.22		.00		.00						
SNIDER, CATHERINE DANA																	
552-02-8808	191001	02	01	1-41616-1320	LBR		439.38	0	.00	0	.00	0	7.20	0	.00	0	
	191002	02	01	1-41616-1320	LBR		4575.77	0	.00	0	.00	0	108.00	0	.00	0	
	191001	02	01	1-41616-3100	BEN		35.01	0	.00	0	.00	0					
	191002	02	01	1-41616-3100	BEN		364.69	0	.00	0	.00	0					
				LABOR TOTALS			5,015.15		.00		.00		115.20		.00		.00
				BENEFIT TOTALS			399.70		.00		.00						
SNOW, FRANKLIN DELANO																	
557-56-2158	292001	02	01	1-42760-1320	LBR		4400.16	0	291.12	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4400.16	0	291.12	0	.00	0	60.00	0	.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		503.22	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		503.16	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		40.09	0	.00	0	.00	0					
	273001	03	01	1-42760-3100	BEN		40.11	0	.00	0	.00	0					
	292001	02	01	1-42760-3100	BEN		350.69	0	23.19	0	.00	0					
	293001	02	01	1-42760-3100	BEN		350.69	0	23.20	0	.00	0					
				LABOR TOTALS			9,806.70		582.24		.00		144.00		.00		.00
				BENEFIT TOTALS			781.58		46.39		.00						
SNOWDEN, BETTY J				2ST-2ADMI													
530-38-2030	230055	00	01	1-42287-2170	LBR		66627.14	0	5552.26	0	.00	0	2088.00	0	174.00	0	.00	0
	230055	00	01	1-42287-3100	BEN		27896.54	0	2300.66	0	.00	0					
				LABOR TOTALS			66,627.14		5,552.26		.00		2,088.00		174.00		.00
				BENEFIT TOTALS			27,896.54		2,300.66		.00						
SNYDER, JERROLD T																	
547-50-2154	292001	02	01	1-42622-1320	LBR		1668.70	0	110.41	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42622-1320	LBR		1668.69	0	110.40	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42622-1320	LBR		1668.69	0	629.83	0	.00	0	24.00	0	8.00	0	.00	0
	294002	02	01	1-42622-1320	LBR		2507.58	0	946.46	0	.00	0	36.00	0	12.00	0	.00	0
	292001	02	01	1-42622-3100	BEN		66.24	0	4.38	0	.00	0					
	293001	02	01	1-42622-3100	BEN		66.26	0	4.39	0	.00	0					
	294001	02	01	1-42622-3100	BEN		66.25	0	25.01	0	.00	0					
	294002	02	01	1-42622-3100	BEN		99.54	0	37.57	0	.00	0					
				LABOR TOTALS			7,513.66		1,797.10		.00		108.00		20.00		.00
				BENEFIT TOTALS			298.29		71.35		.00						
SNYDER, NICOLE E				1PE-1PEDV													
556-83-2430	180001	00	01	1-41745-2310	LBR		470.00	0	.00	0	.00	0	47.00	0	.00	0	.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/31/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC
	240001	00	01	2-32111-3100	BEN		.00	19-	6.31-	9-	.00	0				
				LABOR TOTALS			2,517.78		145.13		.00		373.00		21.50	
				BENEFIT TOTALS			47.08		2.71		.00					
TEPLITXKY, ALEXANDER P				2LS-2OML												
607-18-0659	280001	00	01	2-12919-2310	LBR		223.13	146	.00	0	.00	0	10.25	0	.00	0
	280001	00	01	2-12919-3200	BEN		4.17	2	.00	0	.00	0				
				LABOR TOTALS			223.13		.00		.00		10.25		.00	
				BENEFIT TOTALS			4.17		.00		.00					
TERRANOVA, CHERYL A				1GU-1ADMR												
547-66-8420	130013	00	01	1-41287-2170	LBR		41390.65	0	3891.29	0	.00	0	1897.70	0	174.00	0
	130013	00	01	1-41287-3100	BEN		21805.56	0	2002.33	0	.00	0				
	136606	00	01	6-10570-2185	LBR		2938.08	0	.00	0	.00	0	131.37	0	.00	0
	136606	00	01	6-10570-3100	BEN		1720.30	0	.00	0	.00	0				
				LABOR TOTALS			44,328.73		3,891.29		.00		2,029.07		174.00	
				BENEFIT TOTALS			23,525.86		2,002.33		.00					
TERRY, SUSAN L				2PE-2PE												
545-93-9262	260001	00	01	1-48412-2350	LBR		1500.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48412-3200	BEN		152.55	0	.00	0	.00	0				
				LABOR TOTALS			1,500.00		.00		.00		.00		.00	
				BENEFIT TOTALS			152.55		.00		.00					
THAGGERT, HENRY L				-												
435-64-6608	291001	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0
	291002	02	01	1-42760-1320	LBR		5986.64	0	.00	0	.00	0	60.00	0	.00	0
	292001	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0
	292002	02	01	1-42760-1320	LBR		5213.03	0	344.90	0	.00	0	60.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0
	293002	02	01	1-42760-1320	LBR		5213.04	0	344.91	0	.00	0	60.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5213.04	0	1967.62	0	.00	0	60.00	0	20.00	0
	291001	02	01	1-42760-3100	BEN		747.76	0	.00	0	.00	0				
	291002	02	01	1-42760-3100	BEN		747.74	0	.00	0	.00	0				
	292001	02	01	1-42760-3100	BEN		1297.72	0	85.65	0	.00	0				
	292002	02	01	1-42760-3100	BEN		1297.75	0	85.66	0	.00	0				
	293001	02	01	1-42760-3100	BEN		1313.88	0	85.65	0	.00	0				
	293002	02	01	1-42760-3100	BEN		1313.96	0	85.67	0	.00	0				
	294001	02	01	1-42760-3100	BEN		1729.70	0	488.65	0	.00	0				
				LABOR TOTALS			38,038.46		3,347.24		.00		420.00		20.00	
				BENEFIT TOTALS			8,448.51		831.28		.00					
THAI, BINH N				2ST-2ADMI												
556-69-5289	230188	00	01	1-42287-2170	LBR		56775.49	0	4731.29	0	.00	0	2088.00	0	174.00	0

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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO - OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DATE DIRECT	RLOC		
	230188	00	01	1-42287-3100	BEN	25598.06	0	2111.26	0	.00	0						
				LABOR TOTALS		56,775.49		4,731.29		.00		2,088.00		174.00			
				BENEFIT TOTALS		25,598.06		2,111.26		.00							
THAI, JANNY				2CO-2COUN													
558-59-5168	230305	00	01	1-42300-2170	LBR	77378.75	0	6490.73	0	.00	0	2088.00	0	174.00	0		
	230305	00	01	1-42300-3100	BEN	30450.48	0	2547.83	0	.00	0						
				LABOR TOTALS		77,378.75		6,490.73		.00		2,088.00		174.00			
				BENEFIT TOTALS		30,450.48		2,547.83		.00							
THAI, LISA NGUYEN				1IT-1NASA													
557-83-0483	280001	00	01	2-14520-2310	LBR	11566.00	0	990.00	0	.00	0	1107.00	0	90.00	0		
	280001	00	01	2-14520-3200	BEN	395.30	0	18.51	0	.00	0						
				LABOR TOTALS		11,566.00		990.00		.00		1,107.00		90.00			
				BENEFIT TOTALS		395.30		18.51		.00							
THAI, MAY				2AB-2CASH													
556-69-8806	230351	00	01	1-42149-2170	LBR	49022.20	0	4161.71	0	.00	0	2136.75	0	189.00	0		
	230351	00	01	1-42149-2360	LBR	1748.43	138-	960.35	138-	.00	0	77.75	0	44.00	0		
	230351	00	01	1-42149-3100	BEN	24125.18	0	1939.46	0	.00	0						
	230351	00	01	1-42149-3200	BEN	235.21	10-	174.51	10-	.00	0						
	230351	00	01	1-52239-2360	LBR	138.50	138	138.50	138	.00	0	.00	0	.00	0		
	230351	00	01	1-52239-3200	BEN	10.66	10	10.66	10	.00	0						
				LABOR TOTALS		50,909.13		5,260.56		.00		2,214.50		233.00			
				BENEFIT TOTALS		24,371.05		2,124.63		.00							
THAI, SON				2BH-2OTI													
580-18-3432	180002	00	01	2-12480-2310	LBR	448.00	0	98.00	0	.00	0	56.00	0	12.25	0		
	180002	00	01	2-12480-3200	BEN	15.90	0	9.34	0	.00	0						
	180002	00	01	2-12640-2310	LBR	448.00	0	98.00	0	.00	0	56.00	0	12.25	0		
	180002	00	01	2-12640-3200	BEN	15.85	0	9.32	0	.00	0						
				LABOR TOTALS		896.00		196.00		.00		112.00		24.50			
				BENEFIT TOTALS		31.75		18.66		.00							
THAI, TRUNG THANH				4AN-4ACC													
589-02-3118	430048	00	01	1-44040-2170	LBR	5093.55	0	3864.08	0	.00	0	213.50	0	161.97	0	.00	0
	430048	00	01	1-44040-3100	BEN	2458.51	0	1865.07	0	.00	0						
	230051	00	01	1-52362-2170	LBR	43864.00	0	.00	0	.00	0	1867.64	0	.00	0	.00	0
	230051	00	01	1-52362-3100	BEN	21581.75	0	.00	0	.00	0						
	430048	00	01	2-14610-2170	LBR	377.55	0	286.41	0	.00	0	15.86	0	12.03	0	.00	0
	430048	00	01	2-14610-3100	BEN	182.23	0	138.25	0	.00	0						
				LABOR TOTALS		49,335.10		4,150.49		.00		2,097.00		174.00		.00	
				BENEFIT TOTALS		24,222.49		2,003.32		.00							

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CORPORATION 001

FOOTHILL DE ANZA COM. ITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPOR. AGE 1027
PROGRAM ID EBC442
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
THAM, JANICE YAT MANN				1LB-1TUTR														
548-81-7566	180001	00	01	1-41095-2310		LBR	278.00	278	278.00	278	.00	0	.00	0	.00	0	.00	0
	180001	00	01	1-41095-3200		BEN	5.20	5	5.20	5	.00	0						
	180001	00	01	1-41303-2310		LBR	272.00	278-	278.00-	278-	.00	0	68.75	0	.00	0	.00	0
	180001	00	01	1-41303-3200		BEN	5.09	5-	5.20-	5-	.00	0						
	180001	00	01	1-48302-2310		LBR	278.00	0	.00	0	.00	0	34.75	0	.00	0	.00	0
	180001	00	01	1-48302-3200		BEN	5.20	0	.00	0	.00	0						
				LABOR TOTALS			828.00		.00		.00		103.50		.00		.00	
				BENEFIT TOTALS			15.49		.00		.00							
THANG, JU				4SS-4DSS2														
558-61-0439	460002	00	01	1-44358-2320		LBR	60.75	0	.00	0	.00	0	2.00				--	0
	460002	00	01	1-44358-2350		LBR	7290.00	0	648.00	0	.00	0	360.00					
	460002	00	01	1-44358-2360		LBR	1458.00	0	60.75	0	.00	0	48.00				0.	C
	460002	00	01	1-44358-3200		BEN	895.83	0	72.08	0	.00	0						
				LABOR TOTALS			8,808.75		708.75		.00		410.00				60,163.09	+
				BENEFIT TOTALS			895.83		72.08		.00						26,884.93	+
																	87,048.92	*
THANH, QUANG X				2LS-2LIB														
586-40-2421	230002	00	01	1-42306-2170		LBR	60163.99	0	5073.42	0	.00	0	2088.00					
	230002	00	01	1-42306-3100		BEN	26884.93	0	2253.10	0	.00	0						
																	87,048.92	÷
				LABOR TOTALS			60,163.99		5,073.42		.00		2,088.00				1,800.	=
				BENEFIT TOTALS			26,884.93		2,253.10		.00						48.36051111	*
THAO, CHANTAL																		
559-91-1586	292099	03	01	1-42023-1430		LBR	100.00	0	.00	0	.00	0	2.00					
	292099	03	01	1-42023-3200		BEN	7.97	0	.00	0	.00	0					0.	C
	291001	02	01	1-42654-1320		LBR	1997.62	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	291002	02	01	1-42654-1320		LBR	3991.66	0	.00	0	.00	0	60.00	0	.00	0	.00	0
	292001	02	01	1-42654-1320		LBR	4400.17	0	291.13	0	.00	0	60.00	0	.00	0	.00	0
	292002	02	01	1-42654-1320		LBR	4400.17	0	291.13	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	294002	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	294003	02	01	1-42654-1320		LBR	4400.16	0	1660.80	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42654-1445		LBR	503.22	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42654-1445		LBR	503.16	0	167.72	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42654-3100		BEN	40.10	0	.00	0	.00	0						
	274001	03	01	1-42654-3100		BEN	40.11	0	13.37	0	.00	0						
	291001	02	01	1-42654-3100		BEN	159.22	0	.00	0	.00	0						
	291002	02	01	1-42654-3100		BEN	318.12	0	.00	0	.00	0						
	292001	02	01	1-42654-3100		BEN	350.69	0	23.19	0	.00	0						
	292002	02	01	1-42654-3100		BEN	350.71	0	23.21	0	.00	0						
	294001	02	01	1-42654-3100		BEN	350.69	0	132.37	0	.00	0						
	302	02	01	1-42654-3100		BEN	350.74	0	132.3	0	.00	0						
	.003	02	01	1-42654-3100		BEN	350.69	0	132.3	0	.00	0						

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	173001	03	01	1-41502-1445	LBR		503.16	0	.00	0	.00	0	12.00	0	.00	0	
	172001	03	01	1-41502-3100	BEN		36.76	0	.00	0	.00	0					
	173001	03	01	1-41502-3100	BEN		40.11	0	.00	0	.00	0					
	191001	02	01	1-41502-3100	BEN		190.99	0	.00	0	.00	0					
	191002	02	01	1-41502-3100	BEN		191.00	0	.00	0	.00	0					
	192001	02	01	1-41502-3100	BEN		210.56	0	13.93	0	.00	0					
	192002	02	01	1-41502-3100	BEN		210.54	0	13.93	0	.00	0					
	193001	02	01	1-41502-3100	BEN		210.53	0	13.92	0	.00	0					
	194001	02	01	1-41502-3100	BEN		210.53	0	79.47	0	.00	0					
				LABOR TOTALS			16,324.01		1,521.42		.00		240.00		12.00		
				BENEFIT TOTALS			1,301.02		121.25		.00						
TIEN, SANITH				2LS-2LIB													
615-04-8477	240001	00	01	1-44036-3100	BEN		8.30	8	.00	0	.00	0					
	240001	00	01	2-32111-2700	LBR		443.82	0	.00	0	.00	0	65.75	0	.00	0	.00	0
				LABOR TOTALS			443.82		.00		.00		65.75		.00		.00	
				BENEFIT TOTALS			8.30		.00		.00							
TILLES, DANIEL DAVID				2CE-2SHOR													
566-24-3716	260013	00	01	1-52360-2350	LBR		238.00	0	.00	0	.00	0	2.50	0	.00	0	.00	0
	260013	00	01	1-52360-3200	BEN		24.21	0	.00	0	.00	0						
				LABOR TOTALS			238.00		.00		.00		2.50		.00		.00	
				BENEFIT TOTALS			24.21		.00		.00							
TIN, TSZ TO				1LB-1TUTR													
613-43-6786	180001	00	01	1-48302-2410	LBR		592.00	0	80.00	0	.00	0	74.00	0	10.00	0	.00	0
	180001	00	01	1-48302-3200	BEN		11.08	0	1.50	0	.00	0						
				LABOR TOTALS			592.00		80.00		.00		74.00		10.00		.00	
				BENEFIT TOTALS			11.08		1.50		.00							
TING, JUDY LEE				2ST-2ADMI													
113-34-3329	230360	00	01	1-42287-2170	LBR		54807.50	0	4567.29	0	.00	0	2088.00	0	174.00	0	.00	0
	230360	00	01	1-42287-3100	BEN		21268.06	0	1772.33	0	.00	0						
				LABOR TOTALS			54,807.50		4,567.29		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			21,268.06		1,772.33		.00							
TINSLEY, BARBARA H																		
396-34-3326	191001	02	01	1-41806-1320	LBR		5739.23	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	194001	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	194002	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	194003	02	01	1-41806-1320	LBR		5056.65	0	1908.59	0	.00	0	48.00	0	16.00	0	.00	0
	174001	03	01	1-41806-1445	LBR		615.71	0	187.39	0	.00	0	12.00	0	4.00	0	.00	0
	174001	03	01	1-41806-3100	BEN		62.62	0	19.06	0	.00	0						
	191001	02	01	1-41806-3100	BEN		583.69	0	.00	0	.00	0						

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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE	RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
LABOR TOTALS								811.70		21.94		.00		120.25		3.25		.00	
BENEFIT TOTALS								15.19		.41		.00							
TODD JR, MYRON DELIN	1PE-1PEDV																		
613-36-2613	180001	00	01	1-41745-2310	LBR			4030.00	0	.00	0	.00	0	403.00	0	.00	0	.00	0
	180001	00	01	1-41745-3200	BEN			75.37	0	.00	0	.00	0						
LABOR TOTALS								4,030.00		.00		.00		403.00		.00		.00	
BENEFIT TOTALS								75.37		.00		.00							
TOEWS, MICHAEL LEE	2WF-2OTI																		
626-30-6164	280002	00	01	2-12249-2310	LBR			296.00	0	.00	0	.00	0	37.00	0	.00	0	.00	0
	280002	00	01	2-12249-3200	BEN			17.78	0	.00	0	.00	0						
	280002	00	01	2-12640-2310	LBR			296.00	0	.00	0	.00	0	37.00	0	.00	0	.00	0
	280002	00	01	2-12640-3200	BEN			17.77	0	.00	0	.00	0						
LABOR TOTALS								592.00		.00		.00		74.00		.00		.00	
BENEFIT TOTALS								35.55		.00		.00							
TOFFT, IRENE LIDA	2SE-2DSS																		
566-77-3129	260001	00	01	2-22224-2350	LBR			1692.36	0	.00	0	.00	0	54.00	0	.00	0	.00	0
	260002	00	01	2-22224-2350	LBR			108.00	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	260001	00	01	2-22224-3200	BEN			172.13	0	.00	0	.00	0						
	260002	00	01	2-22224-3200	BEN			10.98	0	.00	0	.00	0						
LABOR TOTALS								1,800.36		.00		.00		57.00		.00		.00	
BENEFIT TOTALS								183.11		.00		.00							
TOIVIO, JOHANNA ARJA	1SA-1BOOK																		
609-15-7391	180001	00	01	1-48126-2310	LBR			475.88	0	.00	0	.00	0	70.50	0	.00	0	.00	0
	180001	00	01	1-48126-3200	BEN			45.30	0	.00	0	.00	0						
LABOR TOTALS								475.88		.00		.00		70.50		.00		.00	
BENEFIT TOTALS								45.30		.00		.00							
TOLEDO, RICHARD J	1BH-1EMT																		
570-63-6667	160003	00	01	1-51142-2350	LBR			587.26	0	202.50	0	.00	0	29.00	0	10.00	0	.00	0
	160003	00	01	1-51142-3200	BEN			59.75	0	20.61	0	.00	0						
LABOR TOTALS								587.26		202.50		.00		29.00		10.00		.00	
BENEFIT TOTALS								59.75		20.61		.00							
TOMALINAS, ROBERT T	2ST-2ADMI																		
571-95-2785	260001	00	01	1-42287-2350	LBR			1804.59	0	1804.59	0	.00	0	116.50	0	116.50	0	.00	0
	260003	00	01	1-42287-2350	LBR			983.62	0	.00	0	.00	0	63.50	0	.00	0	.00	0
	260004	00	01	1-42287-2350	LBR			380.88	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	260001	00	01	1-42287-3200	BEN			183.54	0	183.54	0	.00	0						
	260003	00	01	1-42287-3200	BEN			100.02	0	.00	0	.00	0						
	260004	00	01	1-42287-3200	BEN			38.74	0	.00	0	.00	0						

A&R Evaluation Specialist

2350 Hourly Non-Instr.

Vera

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REP
PRO
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DAT DIRECT	RLO
LABOR TOTALS							3,169.09		1,804.59		.00		204.00		116.50	
BENEFIT TOTALS							322.30		183.54		.00					
TOMANENG, ROWENA MAGDALEN			2LA-2ENGL													
560-73-5790	250358	00	01	1-42662-1160	LBR		52402.44	3053-	5789.25	0	.00	0	1154.92	0	123.04	0
	250358	00	01	1-42662-1260	LBR		17467.51	3053	1929.75	0	.00	0	301.45	0	41.02	0
	294003	02	01	1-42662-1330	LBR		429.52	0	429.52	0	.00	0	5.00	0	5.00	0
	250358	00	01	1-42662-3100	BEN		19438.97	0	2060.78	0	.00	0				
	294003	02	01	1-42662-3100	BEN		17.05	0	17.05	0	.00	0				
	293001	02	01	1-42682-1320	LBR		4510.02	0	298.38	0	.00	0	48.00	0	.00	0
	294001	02	01	1-42682-1320	LBR		2255.01	0	851.13	0	.00	0	24.00	0	8.00	0
	294002	02	01	1-42682-1320	LBR		4692.20	0	1771.03	0	.00	0	48.00	0	16.00	0
	293001	02	01	1-42682-3100	BEN		179.07	0	11.85	0	.00	0				
	294001	02	01	1-42682-3100	BEN		89.52	0	33.80	0	.00	0				
	294002	02	01	1-42682-3100	BEN		186.29	0	70.31	0	.00	0				
LABOR TOTALS							81,756.70		11,069.06		.00		1,581.37		193.06	
BENEFIT TOTALS							19,910.90		2,193.79		.00					
TOMITA, IKUKO																
622-28-2735	194001	03	01	1-41412-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0
	194001	03	01	1-41412-3200	BEN		22.84	10	.00	0	.00	0				
	150116	00	01	1-41654-1160	LBR		81942.10	0	8194.21	0	.00	0	1400.00	0	140.00	0
	191001	02	01	1-41654-1320	LBR		6190.56	0	.00	0	.00	0	56.00	0	.00	0
	150116	00	01	1-41654-3100	BEN		24400.02	0	2203.09	0	.00	0				
	191001	02	01	1-41654-3100	BEN		754.71	10	.00	0	.00	0				
LABOR TOTALS							88,232.66		8,194.21		.00		1,458.00		140.00	
BENEFIT TOTALS							25,177.57		2,203.09		.00					
TON, AMY HIEU			2ST-2FNAI													
603-68-3190	240001	00	01	1-44036-3100	BEN		28.71	28	.00	0	.00	0				
	240001	00	01	2-32111-2700	LBR		1535.00	0	.00	0	.00	0	153.50	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	28-	.00	0	.00	0				
LABOR TOTALS							1,535.00		.00		.00		153.50		.00	
BENEFIT TOTALS							28.71		.00		.00					
TONPACK, FOYET ELISA			1AA-1BOOK													
614-47-4462	180001	00	01	1-48126-2310	LBR		3614.19	0	194.00	0	.00	0	514.00	0	24.25	0
	180002	00	01	1-48126-2310	LBR		160.00	0	160.00	0	.00	0	20.00	0	20.00	0
	180001	00	01	1-48126-3200	BEN		67.58	0	3.63	0	.00	0				
	180002	00	01	1-48126-3200	BEN		2.99	0	2.99	0	.00	0				
LABOR TOTALS							3,774.19		354.00		.00		534.00		44.25	
BENEFIT TOTALS							70.57		6.62		.00					
TONPACK, LARISSA NONGNI-			1AA-1BOOK													

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3,169•09 +
322•30 +
3,491•39 *

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204• =
17•11 *

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	192001	02	01	1-51502-3100	BEN		431.66	0	19.69	0	.00	0						
LABOR TOTALS							5,415.90		247.02		.00		108.06		.00		.00	
BENEFIT TOTALS							431.66		19.69		.00							
TRIEU, NGOC THANH				2LA-2TUTR														
623-41-6146	280001	00	01	1-48407-2410	LBR		188.00	0	.00	0	.00	0	23.50	0	.00	0	.00	0
	280001	00	01	1-48407-3200	BEN		3.51	0	.00	0	.00	0						
LABOR TOTALS							188.00		.00		.00		23.50		.00		.00	
BENEFIT TOTALS							3.51		.00		.00							
TRIGILIO, MICHAEL J			-															
466-33-8500	292001	02	01	1-42622-1320	LBR		1597.95	0	105.72	0	.00	0	24.00	0	.00	0	.00	0
	292002	02	01	1-42622-1320	LBR		1331.62	0	88.11	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42622-1320	LBR		1464.78	0	96.90	0	.00	0	24.00	0	.00	0	.00	0
	293002	02	01	1-42622-1320	LBR		1464.78	0	96.90	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42622-1320	LBR		1597.95	0	603.13	0	.00	0	24.00	0	8.00	0	.00	0
	294002	02	01	1-42622-1320	LBR		1331.64	0	502.62	0	.00	0	24.00	0	8.00	0	.00	0
	292001	02	01	1-42622-3100	BEN		127.37	0	8.43	0	.00	0						
	292002	02	01	1-42622-3100	BEN		106.13	0	7.02	0	.00	0						
	293001	02	01	1-42622-3100	BEN		116.76	0	7.73	0	.00	0						
	293002	02	01	1-42622-3100	BEN		116.73	0	7.71	0	.00	0						
	294001	02	01	1-42622-3100	BEN		127.36	0	48.08	0	.00	0						
	294002	02	01	1-42622-3100	BEN		106.15	0	40.07	0	.00	0						
	273001	03	01	1-42631-1445	LBR		457.20	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42631-1445	LBR		457.20	0	152.40	0	.00	0	12.00	0	4.00	0	.00	0
	273001	03	01	1-42631-3100	BEN		36.45	0	.00	0	.00	0						
	274001	03	01	1-42631-3100	BEN		36.45	0	12.15	0	.00	0						
LABOR TOTALS							9,703.12		1,645.78		.00		168.00		20.00		.00	
BENEFIT TOTALS							773.40		131.19		.00							
TRIGO, YOVANIA DILIA				2CO-2COUN														
605-11-0639	280001	00	01	1-48403-2310	LBR		3929.26	0	345.63	0	.00	0	462.00	0	39.50	0	.00	0
	280001	00	01	1-48403-3200	BEN		73.48	0	6.46	0	.00	0						
LABOR TOTALS							3,929.26		345.63		.00		462.00		39.50		.00	
BENEFIT TOTALS							73.48		6.46		.00							
TRINH, CUONG PHUE				2BH-2ENVS														
554-89-7569	280001	00	01	1-48700-2310	LBR		113.75	0	.00	0	.00	0	13.00	0	.00	0	.00	0
	280001	00	01	1-48700-3200	BEN		2.12	0	.00	0	.00	0						
LABOR TOTALS							113.75		.00		.00		13.00		.00		.00	
BENEFIT TOTALS							2.12		.00		.00							
TRINH, LAN NGUYET				2ST-2FNAI														
586-18-1154	232218	00	01	2-12681-2170	LBR		31724.75	0	3649.96	0	.00	0	1566.00	0	174.00	0	.00	0

FA Distrib 1x5 t.

DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

REPO
PROG
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NAME / EMPLOYEE ID	POS.NO	EF	CP	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLO		
	232218	00	01	2-12681-3100	BEN		13961.17	0	1577.74	0	.00	0						
	232218	00	01	2-12684-2170	LBR		10190.37	0	.00	0	.00	0	522.00	0	.00	(		
	232218	00	01	2-12684-3100	BEN		4572.16	0	.00	0	.00	0						
				LABOR TOTALS			41,915.12		3,649.96		.00		2,088.00		174.00			
				BENEFIT TOTALS			18,533.33		1,577.74		.00							
TRINH, MUOI				2PE-2PE														
548-55-1591	230142	00	01	1-42702-2180	LBR		54914.17	0	4576.18	0	.00	0	2088.00	0	174.00	0	.00	
	230142	00	01	1-42702-3100	BEN		25123.29	0	2093.61	0	.00	0						
				LABOR TOTALS			54,914.17		4,576.18		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			25,123.29		2,093.61		.00							
TRINH, NGUYEN PHUONG H				2CO-2COUN														
613-35-4045	280002	00	01	1-42763-2410	LBR		472.00	0	.00	0	.00	0	59.00	0	.00	0	.00	0
	280002	00	01	1-42763-3200	BEN		8.83	0	.00	0	.00	0						
				LABOR TOTALS			472.00		.00		.00		59.00		.00		.00	
				BENEFIT TOTALS			8.83		.00		.00							
TRIPP CALDWELL, KRISTIN R				1FA-1F TV														
456-73-9604	150070	00	01	1-41635-1160	LBR		64933.00	0	6493.30	0	.00	0	1400.00	0	140.00	0	.00	0
	191001	02	01	1-41635-1320	LBR		4578.82	0	.00	0	.00	0	30.00	0	.00	0	.00	0
	150070	00	01	1-41635-3100	BEN		22172.87	0	1974.36	0	.00	0						
	191001	02	01	1-41635-3100	BEN		565.81	15	.00	0	.00	0						
				LABOR TOTALS			69,511.82		6,493.30		.00		1,430.00		140.00		.00	
				BENEFIT TOTALS			22,738.68		1,974.36		.00							
TRIVEDI, CAROL L.				-														
372-56-4574	292099	03	01	1-42023-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	292099	03	01	1-42023-3200	BEN		12.22	0	.00	0	.00	0						
	291001	02	01	1-42503-1320	LBR		3925.34	0	.00	0	.00	0	48.00	0	.00	0	.00	0
	292001	02	01	1-42503-1320	LBR		4009.42	0	265.26	0	.00	0	48.00	0	.00	0	.00	0
	291001	02	01	1-42503-3100	BEN		479.69	0	.00	0	.00	0						
	292001	02	01	1-42503-3100	BEN		489.93	0	32.41	0	.00	0						
				LABOR TOTALS			8,034.76		265.26		.00		98.00		.00		.00	
				BENEFIT TOTALS			981.84		32.41		.00							
TROGEN, ANNA JENNI				1SP-11SAD														
621-29-2326	180004	00	01	1-41300-2310	LBR		1110.00	1110	.00	0	.00	0	.00	0	.00	0	.00	0
	180004	00	01	1-41300-3200	BEN		20.76	20	.00	0	.00	0						
	180004	00	01	1-51939-2310	LBR		1127.50	1110-	.00	0	.00	0	223.75	0	.00	0	.00	0
	180004	00	01	1-51939-3200	BEN		21.08	20-	.00	0	.00	0						
	180005	00	01	2-21231-2310	LBR		2420.00	0	992.50	0	.00	0	242.00	0	99.25	0	.00	0
	180005	00	01	2-21231-3200	BEN		45.26	0	18.56	0	.00	0						

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41,915.12 +
18,533.33 +
60,449.45 *

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1,800. =
33.58 *

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40,935.46 +
18,218.38 +
59,153.84 *

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1,800. =
32.86 *

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DATE RUN 07/20/05
TIME RUN 20:55:32
CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DA DIRECT	RL		
624-23-5663	240001	00	01	1-44036-3100	BEN		65.03	65	8.83	8	.00	0						
	240001	00	01	2-32111-2700	LBR		3477.94	0	166.25	0	.00	0	422.25	0	19.00			
	240001	00	01	2-32111-3100	BEN		.00	65-	5.72-	8-	.00	0						
				LABOR TOTALS			3,477.94		166.25		.00		422.25		19.00			
				BENEFIT TOTALS			65.03		3.11		.00							
VAN, HOANG DINH				4ET-4TSC2														
610-28-0830	430238	00	01	1-42200-2170	LBR		78015.45	0	6628.76	0	.00	0	2088.00	0	174.00	0	.00	0
	430238	00	01	1-42200-3100	BEN		30023.58	0	2529.02	0	.00	0						
				LABOR TOTALS			78,015.45		6,628.76		.00		2,088.00		174.00		.00	
				BENEFIT TOTALS			30,023.58		2,529.02		.00							
VAN, NINA NGUYEN				2ST-2FNAI														
008-78-1136	232216	00	01	2-12681-2170	LBR		30171.03	0	3478.65	0	.00	0	1566.00	0	174.00	0	.00	0
	232216	00	01	2-12681-2360	LBR		1075.84	0	134.95	0	.00	0	37.50	0	4.50	0	.00	0
	232216	00	01	2-12681-3100	BEN		13670.21	0	1546.29	0	.00	0						
	232216	00	01	2-12681-3200	BEN		82.50	0	10.33	0	.00	0						
	232216	00	01	2-12684-2170	LBR		9688.59	0	.00	0	.00	0	522.00	0	.00	0	.00	0
	232216	00	01	2-12684-3100	BEN		4465.67	0	.00	0	.00	0						
				LABOR TOTALS			40,935.46		3,613.60		.00		2,125.50		178.50		.00	
				BENEFIT TOTALS			18,218.38		1,556.62		.00							
VAN, QUYNH NGOC				2LA-2LART														
607-06-7850	240001	00	01	1-44036-3100	BEN		63.16	63	15.33	15	.00	0						
	240001	00	01	2-32111-2700	LBR		3377.00	0	160.00	0	.00	0	362.50	0	16.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	63-	12.34-	15-	.00	0						
				LABOR TOTALS			3,377.00		160.00		.00		362.50		16.00		.00	
				BENEFIT TOTALS			63.16		2.99		.00							
VAN, THAI CONG				1IT-1NASA														
637-18-5403	280002	00	01	2-14520-2310	LBR		8297.00	0	.00	0	.00	0	813.00	0	.00	0	.00	0
	280002	00	01	2-14520-3200	BEN		295.69	0	.00	0	.00	0						
				LABOR TOTALS			8,297.00		.00		.00		813.00		.00		.00	
				BENEFIT TOTALS			295.69		.00		.00							
VANBUUREN, M LAMBERT																		
213-62-0521	291001	02	01	1-42618-1320	LBR		1574.92	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	291002	02	01	1-42618-1320	LBR		1574.92	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42618-1320	LBR		1602.87	0	604.99	0	.00	0	24.00	0	8.00	0	.00	0
	274001	03	01	1-42618-1445	LBR		550.44	0	183.48	0	.00	0	12.00	0	4.00	0	.00	0
	274001	03	01	1-42618-3100	BEN		42.48	0	14.16	0	.00	0						
	291001	02	01	1-42618-3100	BEN		121.57	0	.00	0	.00	0						
	291002	02	01	1-42618-3100	BEN		121.61	0	.00	0	.00	0						
	294001	02	01	1-42618-3100	BEN		123.76	0	46.71	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS: FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS: FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE/ DIRECT	MO-TO-DATE/ RLOC	CURR-PERIOD DIRECT	CURR-PERIOD RLOC
	172001	03	01	1-41654-1445	LBR		526.70	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	172001	03	01	1-41654-3100	BEN		53.58	0	.00	0	.00	0						
	191001	02	01	1-41654-3100	BEN		258.19	0	.00	0	.00	0						
	192001	02	01	1-41654-3100	BEN		468.37	0	30.99	0	.00	0						
	260001	00	01	1-52064-2350	LBR		900.00	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	260001	00	01	1-52064-3200	BEN		91.53	0	.00	0	.00	0						
				LABOR TOTALS			8,570.96		304.74		.00		144.00		.00		.00	
				BENEFIT TOTALS			871.67		30.99		.00							
WANG, MAXWELL HUNG				1SS-1POLI														
602-76-7345	180001	00	01	1-41046-2310	LBR		750.00	0	.00	0	.00	0	75.00	0	.00	0	.00	0
	180001	00	01	1-41046-3200	BEN		14.03	0	.00	0	.00	0						
				LABOR TOTALS			750.00		.00		.00		75.00		.00		.00	
				BENEFIT TOTALS			14.03		.00		.00							
WANG, MENG				2AC-2CMPS														
616-39-0919	280001	00	01	1-42224-2310	LBR		933.19	0	.00	0	.00	0	138.25	0	.00	0	.00	0
	280001	00	01	1-42224-3200	BEN		17.45	0	.00	0	.00	0						
				LABOR TOTALS			933.19		.00		.00		138.25		.00		.00	
				BENEFIT TOTALS			17.45		.00		.00							
WANG, MINGLE				2AC-2BOOK														
604-17-8675	280001	00	01	1-48226-2310	LBR		109.69	0	.00	0	.00	0	16.25	0	.00	0	.00	0
	280001	00	01	1-48226-3200	BEN		2.05	0	.00	0	.00	0						
				LABOR TOTALS			109.69		.00		.00		16.25		.00		.00	
				BENEFIT TOTALS			2.05		.00		.00							
WANG, PATRICK ZONG HO				2LA-2TUTR														
573-83-5246	280002	00	01	1-42221-2410	LBR		528.39	0	69.88	0	.00	0	51.00	0	6.50	0	.00	0
	280002	00	01	1-42221-3200	BEN		9.89	0	1.31	0	.00	0						
	280001	00	01	2-14520-2310	LBR		8565.00	0	.00	0	.00	0	856.50	0	.00	0	.00	0
	280001	00	01	2-14520-3200	BEN		398.82	0	.00	0	.00	0						
				LABOR TOTALS			9,093.39		69.88		.00		907.50		6.50		.00	
				BENEFIT TOTALS			408.71		1.31		.00							
WANG, QIAN				2LS-2LIB														
620-39-8901	240001	00	01	1-44036-3100	BEN		30.51	30	.00	0	.00	0						
	240001	00	01	2-32111-2700	LBR		1631.81	0	.00	0	.00	0	241.75	0	.00	0	.00	0
	240001	00	01	2-32111-3100	BEN		.00	30-	.00	0	.00	0						
				LABOR TOTALS			1,631.81		.00		.00		241.75		.00		.00	
				BENEFIT TOTALS			30.51		.00		.00							
WANG, RHODA				2AB-2BGTP														

Director's Budget Reviewed

DATE RUN 07/20/05
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CORPORATION 001

FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	AMOUNTS MONTH-TO-DATE DIRECT	RLOC	AMOUNTS CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	HOURS MO-TO-DATE DIRECT	RLOC		
134-56-3380	210016	00	01	1-42150-2110	LBR		52514.52	0	8752.42	0	.00	0	1044.00	0	174.00	0		
	210016	00	01	1-42150-3100	BEN		17723.39	0	2975.19	0	.00	0						
	420010	00	01	1-44046-2170	LBR		44341.09	0	.00	0	.00	0	947.08	0	.00	0		
	420010	00	01	1-44046-2360	LBR		1782.56	0	.00	0	.00	0	37.24	0	.00	0		
	420010	00	01	1-44046-3100	BEN		15170.20	0	.00	0	.00	0						
	420010	00	01	1-44046-3200	BEN		325.48	0	.00	0	.00	0						
	420010	00	01	2-14610-2170	LBR		3286.48	0	.00	0	.00	0	68.81	0	.00	0		
	420010	00	01	2-14610-2360	LBR		132.12	0	.00	0	.00	0	2.76	0	.00	0		
	420010	00	01	2-14610-3100	BEN		1124.35	0	.00	0	.00	0						
	420010	00	01	2-14610-3200	BEN		24.12	0	.00	0	.00	0						
				LABOR TOTALS			102,056.77		8,752.42		.00		2,099.89		174.00		.00	
				BENEFIT TOTALS			34,367.54		2,975.19		.00							
WANG, XIAO																		
519-45-4695	191001	02	01	1-41754-1320	LBR		8013.76	0	.00	0	.00	0	108.00	0	.00	0	.00	0
	193001	02	01	1-41754-1320	LBR		4678.59	0	309.54	0	.00	0	72.00	0	.00	0	.00	0
	192001	02	01	1-41754-1330	LBR		371.31	0	24.57	0	.00	0	4.50	0	.00	0	.00	0
	191001	02	01	1-41754-3100	BEN		618.67	0	.00	0	.00	0						
	192001	02	01	1-41754-3100	BEN		28.67	0	1.90	0	.00	0						
	193001	02	01	1-41754-3100	BEN		361.22	0	23.91	0	.00	0						
	293010	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293011	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	294005	03	01	1-42021-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	293010	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	293011	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	294005	03	01	1-42021-3200	BEN		7.72	0	.00	0	.00	0						
	292001	02	01	1-42754-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00	0
	292002	02	01	1-42754-1320	LBR		1373.27	0	90.86	0	.00	0	24.00	0	.00	0	.00	0
	293001	02	01	1-42754-1320	LBR		961.71	0	63.63	0	.00	0	12.00	0	.00	0	.00	0
	293002	02	01	1-42754-1320	LBR		1373.27	0	90.87	0	.00	0	24.00	0	.00	0	.00	0
	294001	02	01	1-42754-1320	LBR		961.71	0	362.99	0	.00	0	12.00	0	4.00	0	.00	0
	294002	02	01	1-42754-1320	LBR		1373.28	0	518.34	0	.00	0	24.00	0	8.00	0	.00	0
	292001	02	01	1-42754-3100	BEN		74.26	0	4.91	0	.00	0						
	292002	02	01	1-42754-3100	BEN		105.98	0	7.01	0	.00	0						
	293001	02	01	1-42754-3100	BEN		74.23	0	4.91	0	.00	0						
	293002	02	01	1-42754-3100	BEN		106.03	0	7.02	0	.00	0						
	294001	02	01	1-42754-3100	BEN		74.24	0	28.02	0	.00	0						
	294002	02	01	1-42754-3100	BEN		106.01	0	40.01	0	.00	0						
				LABOR TOTALS			20,368.61		1,524.43		.00		298.50		12.00		.00	
				BENEFIT TOTALS			1,572.47		117.69		.00							
WANG, XIUJUAN																		
277-84-7986	194004	03	01	1-41412-1430	LBR		100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	194004	03	01	1-41412-3200	BEN		12.56	0	.00	0	.00	0						
	150013	00	01	1-41757-1105	LBR		2000.00	0	.00	0	.00	0	.00	0	.00	0	.00	0
	150013	00	01	1-41757-1160	LBR		84400.40	0	8440.04	0	.00	0	1400.00	0	140.00	0	.00	0
	150013	00	01	1-41757-3100	BEN		21319.41	0	1862.28	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DAT DIRECT	RLO		
				LABOR TOTALS			22,000.00		2,200.00		.00		1,740.00		174.00			
				BENEFIT TOTALS			745.80		246.84		.00							
WIRTH, NATHAN L			-															
572-65-2131	194050	03	01	1-41411-1430	LBR		22.50	0	.00	0	.00	0	1.50	0	.00	0		
	194050	03	01	1-41411-3200	BEN		1.80	0	.00	0	.00	0						
	194001	02	01	1-41662-1320	LBR		4498.74	0	1698.02	0	.00	0	60.00	0	20.00	0		
	194001	02	01	1-41662-3100	BEN		358.54	0	135.33	0	.00	0						
				LABOR TOTALS			4,521.24		1,698.02		.00		61.50		20.00		.00	
				BENEFIT TOTALS			360.34		135.33		.00							
WISHART JR, WILLIAM H			-															
605-05-3613	292001	02	01	1-42568-1320	LBR		2803.94	0	185.51	0	.00	0	48.00	0	.00	0	.00	0
	293001	02	01	1-42568-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	.00	0
	293002	02	01	1-42568-1320	LBR		2803.95	0	185.52	0	.00	0	48.00	0	.00	0	.00	0
	294001	02	01	1-42568-1320	LBR		2803.95	0	1058.33	0	.00	0	48.00	0	16.00	0	.00	0
	292001	02	01	1-42568-3100	BEN		342.64	0	22.67	0	.00	0						
	293001	02	01	1-42568-3100	BEN		342.59	0	22.67	0	.00	0						
	293002	02	01	1-42568-3100	BEN		342.69	0	22.68	0	.00	0						
	294001	02	01	1-42568-3100	BEN		342.64	0	129.32	0	.00	0						
				LABOR TOTALS			11,215.79		1,614.88		.00		192.00		16.00		.00	
				BENEFIT TOTALS			1,370.56		197.34		.00							
WISINSKI, ANABEL			2CD-2C D															
617-04-2449	280001	00	01	2-12310-2310	LBR		170.00	0	.00	0	.00	0	17.00	0	.00	0	.00	0
	280001	00	01	2-12310-3200	BEN		3.18	0	.00	0	.00	0						
				LABOR TOTALS			170.00		.00		.00		17.00		.00		.00	
				BENEFIT TOTALS			3.18		.00		.00							
WITKOP, INNA			1SM-1FAID															
605-94-5931	132212	00	01	2-11683-2170	LBR		9688.59	0	.00	0	.00	0	553.13	0	.00	0	.00	0
	132212	00	01	2-11683-3100	BEN		4465.67	0	.00	0	.00	0						
	132212	00	01	2-11684-2170	LBR		29999.74	0	3307.36	0	.00	0	1566.00	0	174.00	0	.00	0
	132212	00	01	2-11684-2360	LBR		684.29	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	132212	00	01	2-11684-3100	BEN		13619.32	0	1505.09	0	.00	0						
	132212	00	01	2-11684-3200	BEN		53.00	0	.00	0	.00	0						
				LABOR TOTALS			40,372.62		3,307.36		.00		2,143.13		174.00		.00	
				BENEFIT TOTALS			18,137.99		1,505.09		.00							
WOJNO, LAEL L			2CE-2OLDA															
074-38-4058	260001	00	01	1-52363-2350	LBR		1660.00	0	.00	0	.00	0	41.50	0	.00	0	.00	0
	260001	00	01	1-52363-3200	BEN		168.82	0	.00	0	.00	0						
				LABOR TOTALS			1,660.00		.00		.00		41.50		.00		.00	
				BENEFIT TOTALS			168.82		.00		.00							

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
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				LABOR TOTALS				615.00		.00		.00		61.50		.00	
				BENEFIT TOTALS				11.49		.00		.00					
WOO, PUI KUEN WALTER				2PS-2CHEM													
605-45-2694	280001	00	01	1-42754-2310	LBR			435.00	0	198.75	0	.00	0	58.00	0	26.50	
	280001	00	01	1-42754-3200	BEN			8.14	0	3.72	0	.00	0				
				LABOR TOTALS				435.00		198.75		.00		58.00		26.50	
				BENEFIT TOTALS				8.14		3.72		.00					
WOO, SHIREEN LUNA				2CO-2STAR													
549-69-0214	258879	00	01	1-42248-1260	LBR			46327.81	0	4211.62	0	.00	0	1091.86	0	99.26	0	.00	0
	258879	00	01	1-42248-3100	BEN			14876.36	0	1352.05	0	.00	0						
	258879	00	01	1-42250-1160	LBR			13236.48	0	1203.32	0	.00	0	311.96	0	28.36	0	.00	0
	258879	00	01	1-42250-3100	BEN			5427.22	0	386.29	0	.00	0						
	258879	00	01	2-12264-1260	LBR			6618.42	0	601.67	0	.00	0	156.09	0	14.19	0	.00	0
	258879	00	01	2-12264-3100	BEN			2125.21	0	193.15	0	.00	0						
				LABOR TOTALS				66,182.71		6,016.61		.00		1,559.91		141.81		.00	
				BENEFIT TOTALS				22,428.79		1,931.49		.00							
WOOD, GABRIEL THOMAS				1LB-1MDIA													
569-93-2328	180001	00	01	1-41311-2310	LBR			1888.70	0	307.50	0	.00	0	275.25	0	41.00	0	.00	0
	180001	00	01	1-41311-3200	BEN			35.31	0	5.75	0	.00	0						
				LABOR TOTALS				1,888.70		307.50		.00		275.25		41.00		.00	
				BENEFIT TOTALS				35.31		5.75		.00							
WOOD, MARY M																	
527-38-6235	192099	03	01	1-41263-1430	LBR			100.00	0	.00	0	.00	0	2.00	0	.00	0	.00	0
	192099	03	01	1-41263-3200	BEN			10.77	0	.00	0	.00	0						
	191001	02	01	2-21291-1320	LBR			1113.20	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	191002	02	01	2-21291-1320	LBR			1113.20	0	.00	0	.00	0	24.00	0	.00	0	.00	0
	192001	02	01	2-21291-1320	LBR			897.02	0	59.36	0	.00	0	18.00	0	.00	0	.00	0
	191001	02	01	2-21291-3100	BEN			119.88	0	.00	0	.00	0						
	191002	02	01	2-21291-3100	BEN			119.92	0	.00	0	.00	0						
	192001	02	01	2-21291-3100	BEN			96.62	0	6.40	0	.00	0						
				LABOR TOTALS				3,223.42		59.36		.00		68.00		.00		.00	
				BENEFIT TOTALS				347.19		6.40		.00							
WOOD, PATRICIA MAY				1GU-1ADMR													
565-84-2447	130117	00	01	1-41287-2170	LBR			45589.36	0	4086.51	0	.00	0	2096.64	0	175.88	0	.00	0
	130117	00	01	1-41287-3100	BEN			19418.22	0	1670.36	0	.00	0						
				LABOR TOTALS				45,589.36		4,086.51		.00		2,096.64		175.88		.00	
				BENEFIT TOTALS				19,418.22		1,670.36		.00							

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
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	180001	00	01	2-11016-3200	BEN		3.55	0	.00	0	.00	0						
				LABOR TOTALS			190.00		.00		.00		19.00		.00		.00	
				BENEFIT TOTALS			3.55		.00		.00							
WU, BALDWIN S				4AN-4ACC														
365-82-3714	460001	00	01	1-44040-2350	LBR		5803.80	0	2987.25	0	.00	0	340.00	0	175.00	0	.00	0
	460001	00	01	1-44040-3200	BEN		1167.84	0	601.09	0	.00	0						
	280004	00	01	1-48226-2310	LBR		8440.51	0	.00	0	.00	0	662.00	0	.00	0	.00	0
	280004	00	01	1-48226-3200	BEN		504.09	0	.00	0	.00	0						
				LABOR TOTALS			14,244.31		2,987.25		.00		1,002.00		175.00		.00	
				BENEFIT TOTALS			1,671.93		601.09		.00							
WU, CHRISTINE TREFONG				2CD-2C D														
561-59-9334	280001	00	01	2-62352-2410	LBR		1083.75	0	.00	0	.00	0	85.00	0	.00	0	.00	0
	280001	00	01	2-62352-3200	BEN		20.27	0	.00	0	.00	0						
				LABOR TOTALS			1,083.75		.00		.00		85.00		.00		.00	
				BENEFIT TOTALS			20.27		.00		.00							
WU, ERIC W				1FA-1DRAM														
609-09-5702	160003	00	01	1-51643-2350	LBR		2249.28	0	.00	0	.00	0	176.00	0	.00	0	.00	0
	160003	00	01	1-51643-3200	BEN		228.75	0	.00	0	.00	0						
				LABOR TOTALS			2,249.28		.00		.00		176.00		.00		.00	
				BENEFIT TOTALS			228.75		.00		.00							
WU, HUNG YIP				2LA-2TUTR														
608-35-0092	280001	00	01	1-42220-2410	LBR		155.31	0	.00	0	.00	0	17.75	0	.00	0	.00	0
	280001	00	01	1-42220-3200	BEN		2.91	0	.00	0	.00	0						
	280001	00	01	1-48407-2410	LBR		250.00	0	.00	0	.00	0	31.25	0	.00	0	.00	0
	280001	00	01	1-48407-3200	BEN		4.67	0	.00	0	.00	0						
				LABOR TOTALS			405.31		.00		.00		49.00		.00		.00	
				BENEFIT TOTALS			7.58		.00		.00							
WU, MICHELLE FANG WEI				2AC-2BOOK														
216-31-0602	280001	00	01	1-48226-2310	LBR		440.44	0	286.88	0	.00	0	65.25	0	42.50	0	.00	0
	280001	00	01	1-48226-3200	BEN		8.23	0	5.36	0	.00	0						
				LABOR TOTALS			440.44		286.88		.00		65.25		42.50		.00	
				BENEFIT TOTALS			8.23		5.36		.00							
WU, TILLY LIU				-														
586-14-9358	191001	02	01	1-41250-1320	LBR		2728.90	0	.00	0	.00	0	18.00	0	.00	0	.00	0
	191002	02	01	1-41250-1320	LBR		1301.03	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	191001	02	01	1-41250-3100	BEN		412.55	11	.00	0	.00	0						
	191002	02	01	1-41250-3100	BEN		135.31	0	.00	0	.00	0						

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FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT
HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
REPORT DATE 06/21/2005

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NAME / EMPLOYEE ID	POS.NO	EF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	FISCAL-TO-DATE RLOC	MONTH-TO-DATE DIRECT	MONTH-TO-DATE RLOC	CURRENT-PERIOD DIRECT	CURRENT-PERIOD RLOC	HOURS FISC-TO-DATE DIRECT	FISC-TO-DATE RLOC	MO-TO-DATE DIRECT	MO-TO-DATE RLOC		
	191003	02	01	1-41250-3100	BEN		56.15-	0	.00	0	.00	0						
	150007	00	01	2-11668-1260	LBR		67140.69	4565	6103.70	0	.00	0	1364.20	0	133.30	0		
	150007	00	01	2-11668-3100	BEN		26874.87	1692	2348.75	0	.00	0						
	150007	00	01	2-11679-1260	LBR		4285.60	4565-	389.60	0	.00	0	195.71	0	8.51	0		
	150007	00	01	2-11679-3100	BEN		1715.35	1692-	149.91	0	.00	0						
				LABOR TOTALS			75,456.22		6,493.30		.00		1,589.91		141.81			
				BENEFIT TOTALS			29,081.93		2,498.66		.00							
WU, XUEMEI				1IT-1NASA														
615-92-5871	180001	00	01	2-14516-2310	LBR		2640.00	0	920.00	0	.00	0	264.00	0	92.00	0		
	180001	00	01	2-14516-3200	BEN		49.37	0	17.20	0	.00	0						
				LABOR TOTALS			2,640.00		920.00		.00		264.00		92.00			
				BENEFIT TOTALS			49.37		17.20		.00							
WU, YING-KUANG G				4AN-4ACC														
587-15-4735	420314	00	01	1-44040-2170	LBR		94019.61	0	7834.96	0	.00	0	1956.10	0	163.10	0		
	420314	00	01	1-44040-3100	BEN		31831.98	0	2701.20	0	.00	0						
	420314	00	01	2-14610-2170	LBR		6968.62	0	580.73	0	.00	0	144.28	0	12.03	0		
	420314	00	01	2-14610-3100	BEN		2359.40	0	200.24	0	.00	0						
				LABOR TOTALS			100,988.23		8,415.69		.00		2,100.38		175.13		.00	
				BENEFIT TOTALS			34,191.38		2,901.44		.00							
WULCZYNSKI, SHERI L				1BH-1RSPT														
566-69-8981	180001	00	01	1-41091-2310	LBR		48.00	0	.00	0	.00	0	4.00	0	.00	0	.00	0
	160001	00	01	1-41091-2350	LBR		716.49	0	289.11	0	.00	0	28.50	0	11.50	0	.00	0
	160001	00	01	1-41091-3200	BEN		72.87	0	29.40	0	.00	0						
	180001	00	01	1-41091-3200	BEN		.90	0	.00	0	.00	0						
				LABOR TOTALS			764.49		289.11		.00		32.50		11.50		.00	
				BENEFIT TOTALS			73.77		29.40		.00							
WYATT JR, JAMES BASCOMB																		
556-27-0569	191001	02	01	1-41461-1320	LBR		4356.81	0	.00	0	.00	0	63.96	0	.00	0	.00	0
	191001	02	01	1-41461-3100	BEN		532.42	0	.00	0	.00	0						
	192001	02	01	1-41470-1320	LBR		1403.59	0	92.88	0	.00	0	24.00	0	.00	0	.00	0
	192002	02	01	1-41470-1320	LBR		2573.21	0	170.24	0	.00	0	42.00	0	.00	0	.00	0
	193001	02	01	1-41470-1320	LBR		2027.40	0	134.13	0	.00	0	42.00	0	.00	0	.00	0
	193002	02	01	1-41470-1320	LBR		1403.61	0	92.88	0	.00	0	21.00	0	.00	0	.00	0
	194001	02	01	1-41470-1320	LBR		1403.61	0	529.79	0	.00	0	24.00	0	8.00	0	.00	0
	194002	02	01	1-41470-1320	LBR		2807.16	0	1059.54	0	.00	0	42.00	0	14.00	0	.00	0
	192001	02	01	1-41470-3100	BEN		171.52	0	11.35	0	.00	0						
	192002	02	01	1-41470-3100	BEN		314.42	0	20.80	0	.00	0						
	193001	02	01	1-41470-3100	BEN		247.72	0	16.39	0	.00	0						
	193002	02	01	1-41470-3100	BEN		171.56	0	11.37	0	.00	0						
	194001	02	01	1-41470-3100	BEN		171.50	0	64.73	0	.00	0						
	194002	02	01	1-41470-3100	BEN		343.04	0	129.48	0	.00	0						

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HUMAN RESOURCE SYSTEM
LABOR DISTRIBUTION BY EMPLOYEE
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NAME / EMPLOYEE ID	POS.NO	BF	CP CD	LOCATION ACCT NO	OBJ CODE	TYPE RCD	AMOUNTS FISCAL-TO-DATE DIRECT	RLOC	MONTH-TO-DATE DIRECT	RLOC	CURRENT-PERIOD DIRECT	RLOC	HOURS FISC-TO-DATE DIRECT	RLOC	MO-TO-DA DIRECT	RL		
				LABOR TOTALS			3,103.75		477.50		.00		65.00		10.00			
				BENEFIT TOTALS			247.34		38.05		.00							
ZAMORA RODRIGUEZ, JOSE			2AC-2CUST															
721-09-6574	260001	00	01	1-41118-2350	LBR		9789.12	0	.00	0	.00	0	864.00	0	.00			
	260001	00	01	1-41118-3200	BEN		1717.61	0	.00	0	.00	0						
	260003	00	01	1-48224-2350	LBR		1706.38	3456-	.00	0	.00	0	355.25	0	.00	0	.00	0
	260003	00	01	1-48224-2360	LBR		136.75	0	.00	0	.00	0	3.00	0	.00	0	.00	0
	260003	00	01	1-48224-3200	BEN		312.69	608-	.00	0	.00	0						
	260001	00	01	1-48228-2350	LBR		2685.31	0	.00	0	.00	0	262.75	0	.00	0	.00	0
	260003	00	01	1-48228-2350	LBR		3456.92	3456	.00	0	.00	0	.00	0	.00	0	.00	0
	260001	00	01	1-48228-2360	LBR		350.03	0	.00	0	.00	0	22.50	0	.00	0	.00	0
	260001	00	01	1-48228-3200	BEN		499.44	0	.00	0	.00	0						
	260003	00	01	1-48228-3200	BEN		608.48	608	.00	0	.00	0						
				LABOR TOTALS			18,124.51		.00		.00		1,507.50		.00		.00	
				BENEFIT TOTALS			3,138.22		.00		.00							
ZAMORA, LILLIAN DOROTHY			2CO-2TSTG															
559-15-8464	230128	00	01	1-42226-2170	LBR		.00	3617-	3617.96-	3617-	.00	0	182.54	0	.00	0	.00	0
	230128	00	01	1-42226-3100	BEN		.00	1610-	1610.37-	1610-	.00	0						
	230128	00	01	2-12650-2170	LBR		28942.58	3617	3617.96	3617	.00	0	1295.55	0	.00	0	.00	0
	230128	00	01	2-12650-3100	BEN		12881.89	1610	1610.37	1610	.00	0						
	230128	00	01	2-12664-2170	LBR		2099.46	0	.00	0	.00	0	105.91	0	.00	0	.00	0
	230191	00	01	2-12664-2170	LBR		10347.36	0	3449.12	0	.00	0	522.00	0	174.00	0	.00	0
	230128	00	01	2-12664-3100	BEN		934.44	0	.00	0	.00	0						
	230191	00	01	2-12664-3100	BEN		4605.47	0	1535.16	0	.00	0						
				LABOR TOTALS			41,389.40		3,449.12		.00		2,106.00		174.00		.00	
				BENEFIT TOTALS			18,421.80		1,535.16		.00							
ZANARDI, RICHARD M			-															
560-62-9341	292001	02	01	1-42620-1320	LBR		3257.07	0	215.49	0	.00	0	54.00	0	.00	0	.00	0
	292002	02	01	1-42620-1320	LBR		856.55	0	56.68	0	.00	0	18.00	0	.00	0	.00	0
	292001	02	01	1-42620-3100	BEN		129.30	0	8.56	0	.00	0						
	292002	02	01	1-42620-3100	BEN		34.01	0	2.25	0	.00	0						
				LABOR TOTALS			4,113.62		272.17		.00		72.00		.00		.00	
				BENEFIT TOTALS			163.31		10.81		.00							
ZARANTONELLO, MARY W			-															
244-54-9919	292001	02	01	1-42760-1320	LBR		5010.62	0	331.51	0	.00	0	60.00	0	.00	0	.00	0
	293001	02	01	1-42760-1320	LBR		4927.14	0	326.00	0	.00	0	60.00	0	.00	0	.00	0
	294001	02	01	1-42760-1320	LBR		5010.65	0	1891.23	0	.00	0	60.00	0	20.00	0	.00	0
	272001	03	01	1-42760-1445	LBR		573.04	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	273001	03	01	1-42760-1445	LBR		549.13	0	.00	0	.00	0	12.00	0	.00	0	.00	0
	274001	03	01	1-42760-1445	LBR		573.00	0	191.00	0	.00	0	12.00	0	4.00	0	.00	0
	272001	03	01	1-42760-3100	BEN		45.66	0	.00	0	.00	0						

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Foothill-De Anza Com nity College District
308/95 Enrollment Fee ollection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. (See documentation in the 05-06 claim only.)
Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,790
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,296
	Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.							
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,399
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee					
1.8-4 line 5	Summer							
	Fall							
	Winter/Interssion							
	Spring							
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,318
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298						
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**

CALIFORNIA COMMUNITY COLLEGES Exhibit B-2A
CATEGORICAL APPORTIONMENTS - PART 1
2004-2005 SECOND PRINCIPAL APPORTIONMENT

16:14 Thursday, June 23, 2005

COUNTY	DISTRICT	FEE WAIVER ADMIN (2%)	STUDENT FINANCIAL AID ADMIN	E.O.P.S.	C.A.R.E.	D.S.P.S.	STATE HOSPITALS	TANF (GAIN)	CALWORKS
San Francisco	San Francisco	96,645	945,498	1,533,782	60,230	2,300,811	0	171,557	750,600
San Joaquin	San Joaquin Delta	106,922	688,229	1,563,049	277,122	1,182,570	0	175,855	753,857
San Luis Obispo	San Luis Obispo	40,063	328,028	407,953	112,559	727,175	0	25,789	136,418
San Mateo	San Mateo	75,866	745,553	1,494,501	109,773	1,487,620	0	38,871	171,573
Santa Barbara	Allan Hancock	41,991	287,055	603,711	241,653	757,330	0	68,238	392,912
	Santa Barbara	61,800	400,019	987,387	90,200	881,572	0	40,894	215,942
Santa Barbara		103,791	687,074	1,591,098	331,853	1,638,902	0	109,132	608,854
Santa Clara	Foothill-DeAnza	84,495	943,126	1,595,477	136,516	3,970,772	0	67,731	308,737
	Gavilan	19,536	204,998	447,027	114,505	649,574	0	19,045	84,318
	San Jose-Evergreen	89,284	644,991	1,575,910	132,353	815,789	0	110,155	693,877
	West Valley-Mission	37,881	526,901	1,133,306	126,494	1,225,301	292,468	48,780	246,380
Santa Clara		231,196	2,320,016	4,751,720	509,868	6,661,436	292,468	245,711	1,333,312
Santa Cruz	Cabrillo	47,338	389,682	452,871	144,996	1,535,036	0	40,554	199,960
Shasta	Shasta-Tehama-Trinity	33,756	399,069	941,623	161,985	635,163	0	89,222	402,676
Siskiyou	Siskiyou	15,562	160,229	337,409	61,076	358,044	0	25,027	109,569
Solano	Solano	34,275	294,515	457,526	88,486	604,549	0	43,544	190,506
Sonoma	Sonoma	67,983	592,118	594,788	62,724	1,951,708	0	69,359	282,968
Stanislaus	Yosemite	82,891	640,818	1,455,256	155,897	1,660,851	0	151,913	678,226
Tulare	Sequoias	64,550	435,620	915,995	176,568	693,405	0	89,859	364,415
Ventura	Ventura	118,378	1,048,011	1,920,704	276,544	2,388,571	0	96,539	358,883
Yuba	Yuba	52,706	387,121	954,628	215,274	641,664	0	111,000	389,319
		5,461,100	44,538,000	86,068,993	12,720,279	83,313,363	1,638,637	8,000,000	34,580,000

Schedule 5A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Initial year claim 98-99 through 05-06.
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,875.05
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 143,144.78
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$155,700.00	$163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$(105,724.20)	$(166,880.97)	$(176,159.90)	$(163,502.22)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 143,144.78**

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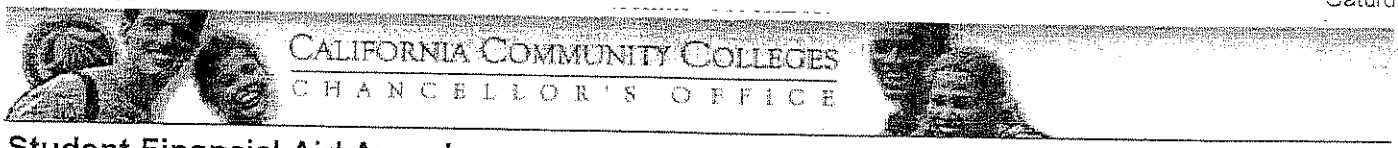

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 24, 2006 03:16:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	20	7,565
BOGW - Part A-2 based on SSI recipient status	25	5,888
BOGW - Part A-3 based on general assistance recipient status	7	2,450
BOGW - Part A-4 based on Veteran's or National Guard dependent status	18	3,292
BOGW - Part B based on income standards	1,126	365,031
BOGW - Part C based on financial need	1,744	736,070

Total Unduplicated Count = 2,939
Total Amount = $ 1,120,296

Back to Top of Page

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04-05

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2,939.00 ÷

6,978.00 ÷

3,917.00 *

waivers approved

California Home

Saturd

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 24, 2006 03:14:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	203	75,446
BOGW - Part A-2 based on SSI recipient status	442	166,689
BOGW - Part A-3 based on general assistance recipient status	6	1,724
BOGW - Part A-4 based on Veteran's or National Guard dependent status	21	5,697
BOGW - Part B based on income standards	1,908	622,295
BOGW - Part C based on financial need	4,409	2,013,984

Total Unduplicated Count = 6,978
Total Amount = $ 2,885,835

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 11, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2006-2007
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Bramwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 43045
(02) Claimant Name: Foothill-De Anza Community College District
County of Location: Santa Clara
Street Address or P.O. Box: 12345 El Monte Road
City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,691,674
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,681,674
Due from State	(08)	(17) $ 1,681,674
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,862
(23) EFCW-1, (04)(A)(1)(b)(f)	6,118
(24) EFCW-1, (04)(A)(2)(a)(f)	1,333,627
(25) EFCW-1, (04)(B)(1)(a)(f)	3,615
(26) EFCW-1, (04)(B)(1)(b)(f)	2,363
(27) EFCW-1, (04)(B)(2)(a)(f)	20,875
(28) EFCW-1, (04)(B)(2)(b)(f)	105,073
(29) EFCW-1, (04)(B)(2)(c)(f)	11,218
(30) EFCW-1, (06)	29
(31) EFCW-1, (07)	429,382
(32) EFCW-1, (09)	80,315
(33) EFCW-1, (10)	143,145
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

BW

Andrew Dunn
Type or Print Name

Date: 12/20/07

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

›gram 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Foothill-De Anza Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,862.48	$ -	$ -	$ -	$ -	$ 2,862.48
b. Staff training (One time per employee)	$ 6,117.61	$ -	$ -	$ -	$ -	$ 6,117.61
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment ›es	$ 1,333,626.78	$ -	$ -	$ -	$ -	$ 1,333,626.78
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,615.30	$ -	$ -	$ -	$ -	$ 3,615.30
b. Staff training (One time per employee)	$ 2,363.45	$ -	$ -	$ -	$ -	$ 2,363.45
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 20,875.05	$ -	$ -	$ -	$ -	$ 20,875.05
b. Waiving student fees	$ 105,072.91	$ -	$ -	$ -	$ -	$ 105,072.91
c. Reporting BOG fee waiver data to CCC	$ 11,218.07	$ -	$ -	$ -	$ -	$ 11,218.07
(05) Total Direct Costs	$ 1,485,751.65	$ -	$ -	$ -	$ -	$ 1,485,751.65

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	28.90%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 429,382.23
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,915,133.88
Cost Reduction		
(09) ‹ess: Enrollment Fee Revenue offset		$ 80,315.00
(10) ‹ Enrollment Fee Waiver offsets		$ 143,144.78
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,691,674.10

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chao, Nancy	Cashiering Supervisor	$52.55	40.0	$ 2,102.00				
Thai, May	Senior Cashier	$43.07	8.0	$ 344.56				
Thanh, Henry	Senior Cashier	$51.99	8.0	$ 415.92				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 2,862.48	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Castillo, Cindy	Manager, Financial Aid	$71.07	3.0	$ 213.21				
Chao, Nancy	Cashiering Supervisor	$52.55	40.0	$ 2,102.00				
Thai, May	Senior Cashier	$43.07	40.0	$ 1,722.80				
Thanh, Henry	Senior Cashier	$51.99	40.0	$ 2,079.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,117.61	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$43.80	7,599.3	$ 332,849.34				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$43.80	6,318.2	$ 276,737.16				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$43.80	9,987.7	$ 437,461.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$43.80	5,212.5	$ 228,307.50				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$43.80	1,330.4	$ 58,271.52				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,333,626.78	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Manager, Financial Aid	$71.07	10.0	$ 710.70				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	10.0	$ 417.30				
Collings, Earl - Foothill	Web Coordinator	$75.50	30.0	$ 2,265.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,615.30	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	5.0	$ 249.65				
Feldman, Joyce K	Financial Aid Assistant	$44.46	10.0	$ 444.60				
Harrai, Kevin	Financial Aid Outreach Coordinator	$41.73	40.0	$ 1,669.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,363.45	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	5.0	$ 249.65				
Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	100.0	$ 7,321.00				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	40.0	$ 1,669.20				
Chao, Nancy	Cashiering Supervisor	$52.55	8.0	$ 420.40				
Pabros, Angelita	Division Assistant	$42.64	125.0	$ 5,330.00				
Collings, Earl - Foothill	Web Coordinator	$75.50	35.0	$ 2,642.50				
Collings, Earl - DeAnza	Web Coordinator	$75.50	40.0	$ 3,020.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 20,875.05	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	609.1	$ 28,956.61				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	400.3	$ 19,030.26				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	469.9	$ 22,339.05				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$47.54	730.9	$ 34,746.99				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 105,072.91	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	40.0	$ 1,997.20				
Castillo, Cindy	Manager, Financial Aid	$71.07	20.0	$ 1,421.40				
Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	40.0	$ 2,928.40				
Feldman, Joyce K	Financial Aid Assistant	$44.46	5.0	$ 222.30				
Gusman, Frances	Dean, Student Outreach	$76.33	2.0	$ 152.66				
Renteria, Matilda	Financial Aid Coordinator	$54.17	83.0	$ 4,496.11				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,218.07	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District

308/95 ENROLLMENT FEE EXCEPTIONS/WAIVERS

2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$249.65	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	5.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$249.65	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	40.00	Bloom, Susan Lynn	Financial Aid Coordinator	$49.93	$1,997.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.00	**Bloom, Susan Lynn Total**			$2,496.50		
05-06	10.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$710.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	3.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$213.21	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	20.00	Castillo, Cindy	Manager, Financial Aid	$71.07	$1,421.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	33.00	**Castillo, Cindy Total**			$2,345.31		
05-06	40.00	Chao, Nancy	Cashiering Supervisor	$52.55	$2,102.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Chao, Nancy	Cashiering Supervisor	$52.55	$2,102.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	8.00	Chao, Nancy	Cashiering Supervisor	$52.55	$420.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	88.00	**Chao, Nancy Total**			$4,624.40		
05-06	40.00	Collings, Earl - DeAnza	Web Coordinator	$75.50	$3,020.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	40.00	**Collings, Earl - DeAnza Total**			$3,020.00		
05-06	30.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$2,265.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	30.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$2,265.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	5.00	Collings, Earl - Foothill	Web Coordinator	$75.50	$377.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	65.00	**Collings, Earl - Foothill Total**			$4,907.50		
05-06	100.00	Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	$7,321.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	40.00	Coyne, Sheila Nora	Senior Programmer Analyst	$73.21	$2,928.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	140.00	**Coyne, Sheila Nora Total**			$10,249.40		
05-06	7,599.30	Enrollment Office Staff	Collecting Fees	$43.80	$332,849.34	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,318.20	Enrollment Office Staff	Collecting Fees	$43.80	$276,737.16	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	9,987.70	Enrollment Office Staff	Collecting Fees	$43.80	$437,461.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,212.50	Enrollment Office Staff	Collecting Fees	$43.80	$228,307.50	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	1,330.40	Enrollment Office Staff	Collecting Fees	$43.80	$58,271.52	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	30,448.10	**Enrollment Office Staff Total**			$1,333,626.78		
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	10.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$444.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining re
05-06	5.00	Feldman, Joyce K	Financial Aid Assistant	$44.46	$222.30	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	25.00	**Feldman, Joyce K Total**			$1,111.50		
05-06	609.10	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$28,956.61	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	400.30	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$19,030.26	Receiving waiver applications	Waiving student fees
05-06	469.90	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$22,339.05	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	730.90	Financial Aid Office Staf	Waiving Enrollment Fees	$47.54	$34,746.99	Entering approved application information into district records; providing student award letter	Waiving student fees
	2,210.20	**Financial Aid Office Staff Total**			$105,072.91		
05-06	2.00	Gusman, Frances	Dean, Student Outreach	$76.33	$152.66	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	2.00	**Gusman, Frances Total**			$152.66		
05-06	10.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$417.30	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$1,669.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver

Foothill-De Anza Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	40.00	Harral, Kevin	Financial Aid Outreach Coordinator	$41.73	$1,669.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	90.00	**Harral, Kevin Total**			$3,755.70		
05-06	125.00	Pabros, Angelita	Division Assistant	$42.64	$5,330.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$5,330.00		
05-06	83.00	Renteria, Matilda	Financial Aid Coordinator	$54.17	$4,496.11	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	83.00	**Renteria, Matilda Total**			$4,496.11		
05-06	8.00	Thai, May	Senior Cashier	$43.07	$344.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Thai, May	Senior Cashier	$43.07	$1,722.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thai, May Total**			$2,067.36		
05-06	8.00	Thanh, Henry	Senior Cashier	$51.99	$415.92	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Thanh, Henry	Senior Cashier	$51.99	$2,079.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Thanh, Henry Total**			$2,495.52		
	33,495.30	**Grand Total**			$1,485,751.65		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$88,722,888		$88,722,888	$352,089	$88,370,799
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,478,992		9,478,992	135,170	9,343,822
Course and Curriculum Development	6020	244,060		244,060	37,778	206,282
Academic/Faculty Senate	6030	226,850		226,850	1,795	225,055
Other Instructional Administration & Instructional Governance	6090	359,913		359,913		359,913
Instructional Support Services	6100					
Learning Center	6110	193,283		193,283	6,792	186,491
Library	6120	3,298,907		3,298,907	460	3,298,447
Media	6130	597,079		597,079	13,631	583,448
Museums and Galleries	6140	83,125		83,125		83,125
Academic Information Systems and Technology	6150	1,199,267		1,199,267	50,969	1,148,298
Other Instructional Support Services	6190	333,774		333,774	88,005	245,769
Admissions and Records	6200	3,373,585		3,373,585	1,700	3,371,885
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,693,765		3,693,765		3,693,765
Matriculation and Student Assessment	6320	1,294,824		1,294,824		1,294,824
Transfer Programs	6330	317,250		317,250	3,431	313,819
Career Guidance	6340	424,480		424,480		424,480
Other Student Counseling and Guidance	6390	318,421		318,421		318,421
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,033,410		1,033,410	63,046	970,364
Subtotal		$115,193,873	$0	$115,193,873	$754,866	$114,439,007

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,803,659		$1,803,659	$1,396	$1,802,263
Health Services	6440	1,331,812		1,331,812	2,914	1,328,898
Student Personnel Admin.	6450	229,437		229,437	2,287	227,150
Financial Aid Administration	6460	2,009,828		2,009,828	33,351	1,976,477
Job Placement Services	6470	599,465		599,465	8,084	591,381
Veterans Services	6480					
Miscellaneous Student Services	6490	855,469		855,469		855,469
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,911,513		3,911,513	3,911,513	0
Custodial Services	6530	3,416,808		3,416,808	3,416,808	0
Grounds Maintenance and Repairs	6550	1,534,999		1,534,999	1,534,999	0
Utilities	6570	1,820,425		1,820,425	1,820,425	0
Other	6590	836,976		836,976	836,976	0
Planning, Policy Making, and Coordination	6600	4,841,314		4,841,314	4,841,314	0
General Inst. Support Services	6700					
Community Relations	6710	1,507,635		1,507,635	1,507,635	0
Fiscal Operations	6720	1,709,662		1,709,662	1,709,662	0
Human Resources Management	6730	2,393,172		2,393,172	2,393,172	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	418,224		418,224	418,224	0
Staff Diversity	6760	181,655		181,655	181,655	0
Logistical Services	6770	6,541,677		6,541,677	6,541,677	0
Management Information Systems	6780	7,093,748		7,093,748	7,093,748	0
Subtotal		$158,231,351	$0	$158,231,351	$37,010,706	$121,220,645

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,104,264		1,104,264	1,104,264	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,754,490		1,754,490	32,721	1,721,769
Community Service Classes	6820	1,619,868		1,619,868	13,439	1,606,429
Community Use of Facilities	6830	511,647		511,647		511,647
Economic Development	6840	385,916		385,916	2,010	383,906
Other Community Services & Economic Development	6890	38,212		38,212		38,212
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,123,070		1,123,070		1,123,070
Student and Co-curricular Activities	6960	606,735		606,735	11,543	595,192
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	700,365		700,365		700,365
Other Auxiliary Operations	7090	4,522,477		4,522,477	75,541	4,446,936
Physical Property Acquisitions	7100					
(05) Total		$170,598,395	$0	$170,598,395	$38,250,224	$132,348,171
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				28.90%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	516,291	60,094	9,860	1,292		587,537
Architecture and Environmental Design	0200						
Biological Sciences	0400	2,820,668	105,223	151,046			3,076,937
Business and Management	0500	3,806,517	129,044	17,598	5,319		3,958,478
Communications	0600	1,319,433	44,581	57,075	7,459		1,428,548
Computer and Information Science	0700	4,028,443	513,721	99,645	68,247		4,710,056
Education	0800	5,930,611	719,959	289,418	28,623		6,968,611
Engineering and Related Industrial Tech.	0900	4,337,423	208,247	189,988	29,015		4,764,673
Fine and Applied Arts	1000	6,492,239	355,641	984,247	5,683		7,837,810
Foreign Language	1100	2,558,981	76,133	11,201			2,646,315
Health	1200	3,656,696	462,527	336,870	33,839		4,489,932
Consumer Education and Home Economics	1300	726,598	240,011	28,082			994,691
Law	1400	202,389	20,613	5,627			228,629
Humanities (Letters)	1500	10,169,131	409,362	97,342	3,588		10,679,423
Library Science	1600	51,962					51,962
Mathematics	1700	6,933,140	253,642	12,151	926		7,199,859
Military Studies	1800						
Physical Sciences	1900	3,227,616	170,963	110,394	2,772		3,511,745
Psychology	2000	1,547,512	17,768	7,818			1,573,098
Public Affairs and Services	2100	573,108	50,592	10,347			634,047
Social Sciences	2200	7,070,292	272,416	60,550			7,403,258
Commercial Services	3000	316,759	4,918	14,649			336,326
Interdisciplinary Studies	4900	10,855,134	4,204,058	416,435	165,326		15,640,953
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	5999	77,140,943	8,310,513	2,610,343	352,089		88,723,888

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 16:10 FAX 6509411638 FOOTHILL-DE ANZA

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,035,147	1,308,675	135,170		9,478,992
Course and Curriculum Development	6020		194,714	11,568	37,778		244,060
Academic/Faculty Senate	6030		213,985	11,070	1,795		226,850
Other Instruct. Admin. & Instruct. Governance	6090		260,270	99,643			359,913
Subtotal - Instructional Administration	**6000**		8,704,116	1,430,956	174,743		10,309,815
Instructional Support Services (6100)							
Learning Center	6110	116,554	69,024	913	6,792		193,283
Library	6120		2,871,613	426,834	460		3,298,907
Media	6130		509,597	73,851	13,631		597,079
Museums and Galleries	6140		80,866	2,259			83,125
Academic Information Systems and Tech.	6150		626,706	521,592	50,969		1,199,267
Other Instructional Support Services	6190		185,617	60,152	88,005		333,774
Subtotal - Instructional Support Services	**6100**	116,554	4,343,423	1,085,601	159,857		5,705,435
Admissions and Records	**6200**		3,063,813	308,072	1,700		3,373,585
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,629,937	63,828			3,693,765
Matriculation and Student Assessment	6320		1,229,893	64,931			1,294,824
Transfer Programs	6330		288,545	25,274	3,431		317,250
Career Guidance	6340		407,281	17,199			424,480
Other Student Counseling and Guidance	6390		279,734	38,687			318,421
Subtotal - Student Counseling and Guidance	**6300**		5,835,390	209,919	3,431		6,048,740

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 10:10 FAX 6509411638 FOOTHILL-DE ANZA

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		643,892	326,472	63,046		1,033,410
Extended Opportunity Prgms. & Services (EOPS)	6430		1,528,431	273,832	1,396		1,803,659
Health Services	6440		1,055,365	273,533	2,914		1,331,812
Student Personnel Administration	6450		215,640	11,510	2,287		229,437
Financial Aid Administration	6460		1,591,410	385,067	33,351		2,009,828
Job Placement Services	6470		122,478	468,903	8,084		599,465
Veterans Services	6480						
Miscellaneous Student Services	6490		766,379	89,090			855,469
Subtotal - Other Student Services	**6400**		5,923,595	1,828,407	111,078		7,863,080
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,297,041	422,724	191,748		3,911,513
Custodial Services	6530		2,216,129	1,200,679			3,416,808
Grounds Maintenance and Repairs	6550		1,404,686	126,565	3,748		1,534,999
Utilities	6570			1,820,425			1,820,425
Other Operation and Maintenance of Plant	6590		537,116	299,860			836,976
Subtotal - Operation and Maintenance of Plant	**6500**		7,454,972	3,870,253	195,496		11,520,721
Planning, Policymaking, and Coordination	**6600**		1,988,717	2,736,875	115,722		4,841,314

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,136,772	353,500	17,363		1,507,635
Fiscal Operations	6720		1,666,429	(132)	43,365		1,709,662
Human Resources Management	6730		2,150,044	243,128			2,393,172
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		199,894	216,964	1,366		418,224
Staff Diversity	6760		168,310	13,345			181,655
Logistical Services	6770		3,148,465	3,303,591	89,621		6,541,677
Management Information Systems	6780		5,707,563	1,023,715	362,470		7,093,748
Other General Institutional Support Services	6790		255,390	848,874			1,104,264
Subtotal - General Institutional Support Services	**6700**		14,432,867	6,002,985	514,185		20,950,037
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		79,230	1,642,539	32,721		1,754,490
Community Service Classes	6820		956,431	649,998	13,439		1,619,868
Community Use Facilities	6830		379,610	132,037			511,647
Economic Development	6840		226,220	157,686	2,010		385,916
Other Community Svcs. & Economic Development	6890		5,074	33,138			38,212
Subtotal - Community Services	**6800**		1,646,565	2,615,398	48,170		4,310,133

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,076,268	46,802			1,123,070
Student and Co-curricular Activities	6960		553,916	41,276	11,543		606,735
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,630,184	88,078	11,543		1,729,805
Auxiliary Operations (7000)							
Contract Education	7010		468,086	232,279			700,365
Other Auxiliary Operations	7090		3,725,164	721,772	75,541		4,522,477
Subtotal - Auxiliary Operations	**7000**		4,193,250	954,051	75,541		5,222,842
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					15,506,885	15,506,885
Student Aid	7320						
Other Outgo	7330					491,107	491,107
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					15,997,992	15,997,992
TOTAL EXPENDITURES and OTHER OUTGO	**391**	77,257,497	67,530,405	24,040,038	1,765,559	15,997,992	186,590,387

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

10/10/05 MON 16:12 FAX 6509411638 FOOTHILL-DE ANZA

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	
Avg. time p/account	130,274
Total Time (in minutes)	3.5
Per Hour	455959
Hours Worked (** **11**)	60
	7599.3
***EFC 2**	
Avg. time p/student	94,773
Total Time (in minutes)	4.0
Per Hour	379092
Hours Worked (** **12**)	60
	6318.2
***EFC 1**	
Avg. time p/question	130,274
Total Time (in minutes)	4.6
Per Hour	599260
Hours Worked (** **13**)	60
	9987.7
***EFC 2**	
Avg. time p/file	94,773
Total Time (in minutes)	3.3
Per Hour	312751
Hours Worked (** **14**)	60
	5212.5
***EFC 4**	
Avg. time p/account	13,763
Total Time (in minutes)	5.8
Per Hour	79825
Hours Worked (** **15**)	60
	1330.4
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/question	3.5
Total Time (in minutes)	36547
Per Hour	60
Hours Worked (** **21**)	**609.1**
***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/application	2.3
Total Time (in minutes)	24017
Per Hour	60
Hours Worked (** **22**)	**400.3**
***EFW 6 (Not provided - Used *EFW 7)**	10,442
Avg. time p/evaluation	2.7
Total Time (in minutes)	28193
Per Hour	60
Hours Worked (** **23**)	**469.9**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	10,442
Avg. time p/application	4.2
Total Time (in minutes)	43856
Per Hour	60
Hours Worked (** **25**)	**730.9**
***EFW 8 (Not provided - no substitute)**	
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
.6 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Aced, Shawna	Associate Registrar	A&R - Foothill - A	3	2	3	2	3	4
Alexander, Irma	A&R Assistant	A&R - Foothill - F	2	3	1	3	3	3
Almendarez, Susan	A&R Assistant	A&R - Foothill - A	5	3	3	2	2	3
Avancena, Jeoffrey	A&R PT Student Worker	A&R - Foothill - S	1	2	1	3	5	1
Bergstedt, Stacy	A&R Senior Cashier	A&R - Foothill - F	5	1	1	5	7	8
Bhan, Vanessa	A&R Cashier	A&R - Foothill - F	1	9	3	5	10	
Bookvich, Patricia	A&R Assistant	A&R - De Anza	5	5	8	5		
Borelli, Dennis	Cashiering Supervisor	Cashiering - De Anza	1	1	1	1	1	1
Bowers, Shelly	A&R Clerk	A&R - Foothill - A	10	10	10	10		
Brewer, Pam	A&R Assistant	A&R - Foothill - A	5	2	5			3
Burfine, Mary Alice	A&R Assistant	A&R - De Anza	3	3	5	3		
Carpenter, Susan	A&R Assistant	A&R - Foothill - F	2	3	1	3	2	2
Chang, Ching (Tiffany)	A&R PT Student Worker	A&R - Foothill - S	3	3	4	4	5	5
Chao, Nancy Tu-Ning	Cashiering Supervisor	Cashiering - De Anza	5	1	15	1	20	3
Cheney, Melodie	A&R Assistant	A&R - De Anza	7	7	4	6		
Cheng, Mei	A&R PT Student Worker	A&R - Foothill - S	1	5	3	5	10	7
Cole, Sheri	A&R Assistant	A&R - De Anza	3	3	4	3		
Comanda, Deborah	A&R Cashier	A&R - Foothill - F	5	15	5	3	15	10
Comanda, Deborah	Senior Cashier	Cashiering - De Anza	5	1		1		
Crumpton, Dena	A&R Assistant	A&R - De Anza	3	3	5	3		
Deshpande,Mrinmaie	A&R Assistant	A&R - Foothill - A	7	9	5	4	10	10
Elwell, Jean	A&R Coordinator	A&R - De Anza	3	1	1	3		
Fifield, Patricia	Assoc. Registrar	A&R - De Anza	3	3	5	3		
Fowler, Cindy	A&R Supervisor	A&R - Foothill - F	2	3	1	3	2	3
Frische, Allen	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
Furuhata, Eri	A&R PT Student Worker	A&R - Foothill - S	4	4	5	4	4	2
Furukawa, Nami	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Henderson, April	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	4
Hochstraser, Alex	A&R Assistant	A&R - De Anza	4	5	4	4		
Ichimura, Sachie	A&R PT Student Worker	A&R - Foothill - S	5	4	5	3	5	4
Ingalls, Melissa	Division A&R Assistant	A&R - De Anza	5	5	8	5		
Jeffries, Portia	A&R Assistant	A&R - Foothill - F	2	3	1	2	2	3
Johnson, Barry	A&R Supervisor	A&R - De Anza	4	5	3	3		
Jung, Henry	A&R Day Supervisor	A&R - Foothill - A	2	3	3	5	2	3
Kaliangara, Araceli	A&R Assistant	A&R - De Anza	8	7	6	4		
Kawr, Jasmeet	A&R PT Student Worker	A&R - Foothill - S	5	5	2	5	5	5
Khaolaor, Orawan	A&R Senior Cashier	A&R - Foothill - A	3	3	2	1	7	5
Lai, Su Kei	A&R PT Student Worker	A&R - Foothill - S	1	2	1	1	2	1
Lindke, William	A&R Supervisor	A&R - Foothill - F	2	3	1	2	2	3
McLaughlin, Annette	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nakayama, Cindy	A&R Assistant	A&R - De Anza	4	3	2	3		
Nguyen, Henry Cong	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Nguyen, Hien	A&R Cashier	A&R - Foothill - F	1	10	3	1		
Nguyen, Khanh	A&R Assistant	A&R - De Anza	3	3	5	3		
Okyneel, Yelena	A&R PT Student Worker	A&R - Foothill - S	2	2	4	5	3	1
Olsen, Lynn	A&R Supervisor	A&R - Foothill - F	3	4	2	1	3	4
Pabros, Angelita	Division A&R Assistant	A&R - De Anza	4	3	2	3		

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

			*EFC Workload Multiplier					
			1	2	1	2	4	5
			**Activity Codes					
Staff	Title	***Department	11	12	13	14	15	16
Pena-Ferrick, Joan	A&R Assistant	A&R - De Anza	3	6	4	3		
Perez, Denise	A&R Technician	A&R - Foothill - A	2	3	5	3	7	2
Phan, Vy	A&R Assistant	A&R - De Anza	5	5	8	5		
Ranii, Lindsay	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Roberts, Brian	A&R Assistant	A&R - De Anza	3	3	5	3		
Sanchez, Amelia	A&R Assistant	A&R - De Anza	3	3	5	3		
Schooler, Shirley	Cashier	Cashiering - De Anza	5	1	15	1	5	1
Slayton, Virginia	A&R Specialist	A&R - Foothill - A	5	7	3	7	7	3
Snowden, Betty	A&R Coordinator	A&R - De Anza	3	3	5	3		
Starratt, Elaine	A&R Assistant	A&R - Foothill - F	3	4	2	2	4	3
Sung, See Wan	A&R PT Student Worker	A&R - Foothill - S	1	5	3	10	10	5
Terranova, Cheryl	A&R Clerk	A&R - Foothill - A	2	2	3	1		
Thai, Binh	A&R Assistant	A&R - De Anza	3	5	5	3		
Thai, May	Senior Cashier	Cashiering - De Anza	5	1	15	1	5	1
Ting, Judy	A&R Assistant	A&R - De Anza	5	10	10	3		
Tomalinas, Robert	A&R Evaluation Specialist	A&R - De Anza	4	4	4	4		
Wang, Rhoda	Director of Budget & Personnel	Finance - De Anza	1		1		5	1
White, Essie	A&R Assistant	A&R - De Anza	4	4	7	3		
Wood, Patricia	Cashiering Services Coord.	A&R - Foothill - A	5	3	5	2	12	3
Ye, Yunzei	A&R Cashier	A&R - Foothill - F	2	3	7		10	
Zimmerman, Brian	A&R Assistant	A&R - Foothill - A	1	3	2	2	3	2
Average			**3.5**	**4.0**	**4.6**	**3.3**	**5.8**	**3.3**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

*****Department**
A&R - Foothill - A = Active Employees
A&R - Foothill - F = Former Cashiers and Employees
A&R - Foothill - S = Partime Student Workers

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and Foothill De Anza payroll run.
Findings:

		Productive Hourly Rates							
Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Aced, Shawna	Associate Registrar		10.07	22.75	30.73	34.98	39.69	41.51	49.76
Alexander, Irma	A&R Assistant		29.18	31.20					
Almendarez, Susan	A&R Assistant			11.11	11.11		26.62	31.70	36.15
Avancena, Jeoffrey	A&R PT Student Worker								
Bergstedt, Stacy	A&R Senior Cashier	20.86	26.68	29.78					
Bhan, Vanessa	A&R Cashier				23.09	24.78	29.75		
Bookvich, Patricia	A&R Assistant	23.59	32.00						
Borelli, Dennis	Cashiering Supervisor	38.22	41.29	44.98	47.86	51.27	56.23	53.91	
Bowers, Shelly	A&R Clerk	27.96	29.05	30.78	33.81	36.41	38.56	39.65	44.00
Brewer, Pam	A&R Assistant			25.05	28.07	31.10	35.13	40.79	43.25
Burfine, Mary Alice	A&R Assistant	26.34	28.20	30.75	33.08	35.15	37.74	38.98	39.38
Carpenter, Susan	A&R Assistant	19.32	18.92						
Chang, Ching (Tiffany)	A&R PT Student Worker								
Chao, Nancy Tu-Ning	Cashiering Supervisor	30.07	32.41	35.91	39.89	42.41	47.76	49.53	52.55
Cheney, Melodie	A&R Assistant		26.44	25.57	28.62	31.59	34.38	36.40	40.39
Cheng, Mei	A&R PT Student Worker								
Cole, Sheri	A&R Assistant	13.48	12.66	13.60	16.56	23.94	30.85	32.51	41.65
Comanda, Deborah	Senior Cashier	28.50	56.93	35.17		39.39	37.78	38.97	39.50
Crumpton, Dena	A&R Assistant	10.26	14.25	23.21	26.39	29.13	32.62	34.65	36.51
Deshpande,Mrinmaie	A&R Assistant				11.18	28.50	34.43	32.07	38.19
Elwell, Jean	A&R Coordinator	34.34	35.20	39.10	40.98	43.08	46.21	47.95	50.18
Fifield, Patricia	Assoc. Registrar	31.21	34.94	38.58	42.42	46.70	51.55	53.80	56.39
Fowler, Cindy	A&R Supervisor								
Frische, Allen	Director of Budget & Personnel	43.21	45.25	51.36	56.50	61.58	64.37	66.23	
Furuhata, Erl	A&R PT Student Worker								
Furukawa, Nami	A&R PT Student Worker								
Henderson, April	A&R Assistant	18.91	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hochstraser, Alex	A&R Assistant	35.60	36.46	37.43	41.41	39.77	42.25	46.68	
Ichimura, Sachie	A&R PT Student Worker								
Ingalls, Melissa	Division A&R Assistant							48.46	
Jeffries, Portia	A&R Assistant	8.37	14.29	20.56					
Johnson, Barry	A&R Supervisor	29.56	33.00	36.34	39.71	42.03	46.55	46.70	47.93
Jung, Henry	A&R Day Supervisor		8.72	11.91	26.03	28.51	31.91	34.44	40.73
Kaliangara, Araceli	A&R Assistant	27.71	30.26	36.59	39.84	40.94	40.82	43.15	44.63
Kawr, Jasmeet	A&R PT Student Worker								
Khaolaor, Orawan	A&R Senior Cashier								
Lai, Su Kei	A&R PT Student Worker								
Lindke, William	A&R Supervisor	34.49	39.33	43.37	48.09	51.39	56.73	57.66	
McLaughlin, Annette	Senior Cashier								
Nakayama, Cindy	A&R Assistant	27.69	27.50	32.04	35.37	39.32	43.83	46.02	48.52
Nguyen, Henry Cong	Senior Cashier	13.65	15.59	24.35	29.14	33.24	37.51	40.94	42.99
Nguyen, Hien	A&R Cashier			9.03	8.18	12.52	25.63	32.52	
Nguyen, Khanh	A&R Assistant	26.99	32.21						
Okyneel, Yelena	A&R PT Student Worker								
Olsen, Lynn	A&R Supervisor	37.63	38.65	41.89	43.54	47.07	37.59	31.31	
Pabros, Angelita	Division A&R Assistant			21.26	28.63	32.39	38.07	41.03	42.64
Pena-Ferrick, Joan	A&R Assistant	27.33	30.19	32.84	34.40	36.26	38.89	41.17	44.64
Perez, Denise	A&R Technician	29.57	34.04	35.59	43.20	45.48	44.76	52.92	55.67

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Enrollment Office Staff

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Phan, Vy	A&R Assistant	11.61	10.39	18.10	23.67	29.60	33.89	36.12	39.12
Ranii, Lindsay	A&R Assistant			22.08	24.93	33.51	21.76		
Roberts, Brian	A&R Assistant								31.66
Sanchez, Amelia	A&R Assistant	22.75	25.72	29.81	30.80	34.07	39.08	39.96	41.23
Schooler, Shirley	Cashier	24.56	25.87	30.91	34.25	37.71	41.75	43.11	46.98
Slayton, Virginia	A&R Specialist	27.61	29.43	32.12	35.10	36.88	40.00	41.43	43.46
Snowden, Betty	A&R Coordinator							52.51	
Starratt, Elaine	A&R Assistant	24.03	27.39	30.36					
Sung, See Wan	A&R PT Student Worker								
Terranova, Cheryl	A&R Clerk	22.79	30.21	27.43	29.92	30.72	36.64	37.70	41.31
Thai, Binh	A&R Assistant	31.03	33.06	35.49	37.80	40.94	44.50	45.76	49.75
Thai, May	Senior Cashier	12.87	15.44	23.24	28.44	32.88	37.15	41.82	43.07
Ting, Judy	A&R Assistant	28.13	30.28	32.78	34.77	37.52	41.03	42.26	45.71
Tomalinas, Robert	A&R Evaluation Specialist			16.84	16.87	22.06	17.24	17.11	27.58
Wang, Rhoda	Director of Budget & Personnel	46.77	50.01	56.28	60.18	65.29	71.39	75.79	75.96
White, Essie	A&R Assistant	27.88	29.53	31.22					
Wood, Patricia	Cashiering Services Coord.	16.68	20.49	25.13	28.22	30.52	34.18	36.12	40.40
Ye, Yunzei	A&R Cashier			21.76	23.24				
Zimmerman, Brian	A&R Assistant								30.18
Average		**25.99**	**28.43**	**29.65**	**32.38**	**36.88**	**39.61**	**42.71**	**43.80**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

			*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
Staff	Title	Department	21	22	23	24	25	26
Billan, Ryan	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Brown, Susan	Assistant Director of Financial Aid	Financial Aid - De Anza	2	1	2	4	6	2
Bostic, John		EOPS - Foothill	5	5	2	1	1	1
Castillo, Cindy	Director of Financial Aid	Financial Aid - De Anza	1	1				
Castro, Richard James	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Chacon, Beatriz		EOPS - Foothill	2	1	2			1
Chavez, Antoinette	Financial Aid Outreach Assistant	EOPS - Foothill	4	2	1	3	3	2
Chen, I	Financial Aid Outreach Coordinator	EOPS - Foothill	2	1	2	2	5	3
Christensen, Josephine	Financial Aid Outreach Assistant	EOPS - Foothill	2	1	2	2.5	4	3
Claros, Randy	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	2	2	5	5	3
Cross, Lindsey		EOPS - Foothill	3	2	1	2	1	1
Duong, Tung	Financial Aid Assistant	EOPS - Foothill	2	1	2	2	3	2
Feldman, Joyce	Financial Aid Assistant	Financial Aid - De Anza	3	5	3	10	7	4
Garcia, Alma	Financial Aid Outreach Assistant	Financial Aid - De Anza	10	2	1	2	2	5
Godinez, Christy	Financial Aid Assistant	EOPS - Foothill	2	1	2	3	3	1
Gonzalez, Ismael	EOPS Counselor	EOPS - Foothill	10					
Guevara, Erika	Administrative Assistant I	EOPS - De Anza	5	5	2	5	2	5
Hamilton-Kilili, Asher		EOPS - Foothill	3	3	1	1	1	1
Harral, Kevin	Financial Aid Outreach Coordinator	Financial Aid - De Anza	5	1	2	4	3	2
Henderson, April	EOPS Specialist	EOPS - Foothill	3		1			
Hunter, Karen	Financial Aid Assistant	Financial Aid - De Anza	1					
Kaliangara, Araceli		EOPS - Foothill	1	1	1	1	1	1
Lambrecht, Donna	Sr. Admin. Asst. II	EOPS - Foothill	3	1				
Le, Chuong Huy	EOPS Services Coordinator	EOPS - De Anza	5	5	5	2		
Nava, Tobias	EOPS Counselor	EOPS - Foothill	2	1	3	4	1	
Ngo, Fei	Financial Aid Assistant	Financial Aid - De Anza	5	2	5	10	5	5
Nguyen, Leslie	Office Assistant	EOPS - De Anza	2	2	3			
Nguyen, Thao	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
O'Malley, Dawna	Financial Aid Assistant	Financial Aid - De Anza	10	1	10	20	20	10
Pardo, Ines	EOPS Program Serv. Coordinator	EOPS - Foothill	5	2	3	3		
Ramirez-Moya, Francisca	Office Assistant	EOPS - De Anza	2	2	3			
Renteria, Matilda	Financial Aid Coordinator	EOPS - Foothill	3	1	3	1	3	2

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Staff	Title	Department	*EFW Workload Multiplier					
			6			8	7	8
			**Activity Codes					
			21	22	23	24	25	26
Robles, George	EOPS Supervisor	EOPS - De Anza	2	2	5	5	10	10
Rodriguez, Jorge	Sr. EOPS Specialist	EOPS - Foothill	4		1			
Schmidt, Janet	Financial Aid Assistant	Financial Aid - De Anza	1	1	1	1	2	1
Sigala-Aguilar, Griselda	CARE Coordinator	EOPS - De Anza	5	5	5	2	10	10
Trejo, Adrian	EOPS Specialist	EOPS - De Anza	5	5	5	2		
Trinh, Lan	Financial Aid Outreach Assistant	Financial Aid - De Anza	1		2			
Van, Nina	Financial Aid Outreach Assistant	Financial Aid - De Anza	2	5	1	2	1	2
Witkop, Inna	Financial Aid Outreach Assistant	EOPS - Foothill	3	1	7	5	8	5
Wu, Tilly	EOPS Counselor	EOPS - Foothill	1	1	2	3	1	
Zamora, Lillian	Office Clerk	EOPS - De Anza	2	2	3			
Average			**3.5**	**2.3**	**2.7**	**3.7**	**4.2**	**3.5**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and Foothill De Anza payroll run.
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Billan, Ryan	Financial Aid Outreach Assistant							
Brown, Susan	Assistant Director of Financial Aid							
Bostic, John		48.64	51.35	55.97	71.84			
Castillo, Cindy	Director of Financial Aid	51.19	52.92	55.66	63.57	68.01	70.02	71.07
Castro, Richard James	EOPS Specialist	25.28	29.68			21.96		
Chacon, Beatriz							58.17	62.49
Chavez, Antoinette	Financial Aid Outreach Assistant	12.03	25.17	26.87				31.99
Chen, I	Financial Aid Outreach Coordinator						37.42	39.58
Christensen, Josephine	Financial Aid Outreach Assistant					29.56	31.38	35.32
Claros, Randy	Financial Aid Outreach Assistant							
Cross, Lindsey		10.39	17.18	26.89	31.64			
Duong, Tung	Financial Aid Assistant	24.15	26.22	28.94	33.95	38.30	40.27	42.73
Feldman, Joyce	Financial Aid Assistant	29.01	32.04	33.64	38.16	40.91	42.20	44.46
Garcia, Alma	Financial Aid Outreach Assistant					31.03	32.60	35.18
Godinez, Christy	Financial Aid Assistant	29.91	32.39	33.94	37.94	40.68	43.18	44.32
Gonzalez, Ismael	EOPS Counselor	69.07	73.60	77.95	82.00	88.73	64.70	75.70
Guevara, Erika	Administrative Assistant I	33.08	36.38	37.28	40.89	44.98	46.29	47.66
Hamilton-Kilili, Asher						35.89	36.66	
Harral, Kevin	Financial Aid Outreach Coordinator			25.05	29.44	34.90	38.46	41.73
Henderson, April	EOPS Specialist	24.03	28.76	31.54	34.52	37.27	39.79	41.04
Hunter, Karen	Financial Aid Assistant					11.62	11.84	29.10
Kaliangara, Araceli		30.26	36.59	39.84	40.94	40.82	43.15	44.63
Lambrecht, Donna	Sr. Admin. Asst. II	43.50	47.63	50.50	55.36	60.14		57.22
Le, Chuong Huy	EOPS Services Coordinator			16.87	33.78	38.79	41.85	41.81
Nava, Tobias	EOPS Counselor							69.39
Ngo, Fei	Financial Aid Assistant							
Nguyen, Leslie	Office Assistant	22.34	26.46	29.83	33.38	36.86	38.38	41.68
Nguyen, Thao	Financial Aid Outreach Assistant				7.99	11.88	11.84	
O'Malley, Dawna	Financial Aid Assistant	10.88	16.42	23.87	30.42	34.25		39.95
Pardo, Ines	EOPS Program Serv. Coordinator	37.16	42.77	45.00	47.46	51.14	52.97	54.52
Ramirez-Moya, Francisca	Office Assistant	8.69		23.58	26.55	29.98	31.51	33.51
Renteria, Matilda	Financial Aid Coordinator	38.03	40.91	43.32	47.17	55.03	56.75	54.17

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Financial Office Staff

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Robles, George	EOPS Supervisor	45.73	50.85	52.98	58.69	64.55	66.54	68.29
Rodriguez, Jorge	Sr. EOPS Specialist	26.64	30.56	33.73	37.25	42.10	44.55	46.95
Schmidt, Janet	Financial Aid Assistant	23.38	25.79	28.14	33.30	37.67	40.84	41.13
Sigala-Aguilar, Griselda	CARE Coordinator	47.52	51.96	56.50	57.25	61.78	63.11	62.50
Trejo, Adrian	EOPS Specialist		28.19	31.83				
Trinh, Lan	Financial Aid Outreach Assistant	8.52	11.71	16.91	30.34	30.87	33.58	36.17
Van, Nina	Financial Aid Outreach Assistant					29.68	32.86	35.09
Witkop, Inna	Financial Aid Outreach Assistant						32.51	37.59
Wu, Tilly	EOPS Counselor	46.16	50.62	55.55	61.17	67.55	76.47	80.64
Zamora, Lillian	Office Clerk	21.98	23.60	25.96	28.86	30.94	33.23	33.76
Average		**30.70**	**35.59**	**37.34**	**42.07**	**41.60**	**43.10**	**47.54**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
EFC 2	1.8-1	2. Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012
EFC 4	1.8-2	1. Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763
EFC 5	1.8-2	2. Refunds								
EFW 6	1.8-3	1. Waivers Requested	X							
EFW 7	1.8-3	2. Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442
EFW 8	1.8-3 (1-2)	Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

EFC/EFW Workload Multiplier
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Deanza For 2005-2006
Data Current As Of May 18, 2012 12:25:54

Download The Result In Comma Delimited Format

Headcount
40,135

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Foothill For 2005-2006

Data Current As Of May 18, 2012 12:25:39

Download The Result In Comma Delimited Format

Headcount
31,618

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05 06

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

408-864-8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A (2B) 3 4		
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan K. Bloom Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: PHDA

Fiscal Year: 05-06

Cindy Carrillo
Employee Name

Dir Fin Aid
Exact Position Title

Fin Aid
Department/Location

408-864-8403
Telephone #

12mo/11mo/10mo/hriv
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
/ /	1A 1B (2A) 2B 3 4		10
/ /	1A 1B 2A 2B 3 (4)		3
/ /	1A 1B 2A 2B 3 4		20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Carrillo Date 5/31/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Nancy Chao — Employee Name

Cashiering Supervisor — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408.864-5308 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	8	8	8	8	8	8	8	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	88	88	88	88	88	88	88	88

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill De Anza

EARL COLLINGS — Employee Name

WEB MASTER — Exact Position Title

MARKETING — College/Department/Location

6509497647 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						5	40	30
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						5	40	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Collings Date 04-18-07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 2006

EARL COLLINGS
Employee Name

Web Coordinator
Exact Position Title

Marketing
Department/Location

650 942-7647
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03/03	1A 1B 2A 2B (3) 4	Web updates for BOG Waiver	20
03/04	1A 1B 2A 2B (3) 4	Design Online Webforms for BOG	80
03/05	1A 1B 2A 2B (3) 4	Update Online Forms for BOG	60
04/06	1A 1B 2A 2B (3) 4	Update Online forms for BOG	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

02-03-8HA
03-04-8HA
04-05-8HA
05-06-8HA

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-3-2006

"you have any questions, please contact Bee Chacon, at 949 7223

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FOOTHILL-DE ANZA Fiscal Year: 2005-2006

SHEILA COYNE
Employee Name

PROGRAMMER ANALYST, SENIOR
Exact Position Title

ETS-District
Department/Location

408-864-8740
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

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Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/1/05	1A 1B 2A 2B (3) 4	ADD NEW STUDENT ID TO RECORDS	100
11/1/05	1A 1B 2A 2B 3 (4)	GENERATE STATE MIS REPORT(S)	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila Coyne Date 5-23-06

If you have any questions, please contact JOE LAMPO, at 408-864-8626

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05-06

Joyce Feldman
Employee Name

Fin Aid Asst
Exact Position Title

Fin Aid
Department/Location

408-864-8377
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

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Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		
/ /	1A 1B 2A (2B) 3 4		5
/ /	1A 1B 2A 2B (3) 4		10
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce K. Feldman Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: ~~03~~ 04-05

FRANCES GUSMAN
Employee Name

Dean Student Outreach & Retention
Exact Position Title

Foothill/Dean 650-949-7524
Department/Location Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/1/05	1A 1B 2A 2B 3 (4)	Final Report	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Frances Gusman Date 5/17/06

If you have any questions, please contact Bee Chacon, at 949-7223

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 05-06

Kevin Harral
Employee Name

Fin Aid Outreach Coordinator
Exact Position Title

Fin Aid
Department/Location

408 864-8334
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A (1B) 2A 2B 3 4		10
/ /	1A 1B 2A (2B) 3 4		40
/ /	1A 1B 2A 2B (3) 4		40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Harral Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 00 - 06

Angelita Pabros
Employee Name

Division Assistant
Exact Position Title

Admissions / De Anza
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	(3 minutes @ 10% of students)	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6 yrs @ 125 = 750 ttl	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-12-07

If you have any questions, please contact 408-864-8292, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill / De Anza Fiscal Year: 04-05

Matilda Benton — Financial Aid Coordinator
Employee Name — Exact Position Title

Foothill / Fin Aid — 650-949-7247 — (12mo/11mo/10mo/hrly)
Department/Location — Telephone # — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/ 05	1A 1B 2A 2B 3 (4)	Find BTAP Report	3
9/ 05	1A 1B 2A 2B 3 4	MIS	80
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total	83

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Benton Date 5/17/06

If you have any questions, please contact Bee Chacon, at 949-7223

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

May Thai — Employee Name

Sr. Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-8290 — Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature May Thai Date 4/20/07

You have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA CCD

Henry Thanh — Employee Name

Senior Cashier — Exact Position Title

DA / Cashiering Svcs — College/Department/Location

408-864-5699 — Telephone #

~~Work~~ 12mo/11mo/10mo/hrly year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	8	8	8	8	8	8	8	8
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	40	40	40	40	40	40	40	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	48	48	48	48	48	48	48	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records Footh. 11
Department/Location

Shawna Aced
Employee Name

Associate Registrar
Exact Position Title

7771
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shawna Aced Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Irma ALCALA ALEXANDER
Employee Name

Admission & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admission & Records
Department/Location

Susan Almendarez
Employee Name

Admission & Records Assistant
Exact Position Title

650 949-7518
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	5					
C 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almendarez Date 4-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

ADMISSIONS + RECORDS.
Department/Location

JEFFREY AVANCENA
Employee Name

PART-TIME STUDENT WORKER.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ar eligibility, and printing out a list of enrolled courses.	1 min					
C 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/18/07

If you have any questions, please contact _____, at _____

LEA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Deanza
District

A & R
Department/Location

STACY L. Bernstedt
Employee Name

Sr. Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and w eligibility, and printing out a list of enrolled courses.	5					
Cc 2 Calculating the enrollment fee, collect the pay...ent or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible or waivers (not just course changes), explain the process, and update student account/record.	8					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

iployee Signature _____ Date 4-20-07

ol ve any questions, please contact _____, at _____

EAS UBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Ahn, Vanessa A
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions / De Anza
Department/Location

Patricia Bookvich
Employee Name

A & R Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hriy
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Borrelli, Dennis
Employee Name

Cashiering Supervisor
Exact Position Title

864-5308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret A Michaels Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA
District

ADMISSIONS / FOOTHILL
Department/Location

SHELLY BOWERS
Employee Name

ADMISSIONS CLERK
Exact Position Title

0 949-7643
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ~~n~~ lists student courses, status of payments, and ~~w~~ver eligibility, ~~and printing out a list of enrolled courses.~~	~~5~~ 10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, ~~and providing a copy to the student.~~	~~5~~ 10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

m[illegible]ee Signature [signature] Date 4/20/07

you have any questions, please contact SHELLY, at #7643

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admissions - F.H.
Department/Location

Pam Brewer
Employee Name

Admissions Asst.
Exact Position Title

x 7003
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela J. Brewer Date 4-18-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Mary Alice Burfine
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Alice Burfine Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Susan A Carpenter
Employee Name

A+R Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the ment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza
District

Admissions & Records
Department/Location

Ching (Tiffany) Chang
Employee Name

Part time student worker
Exact Position Title

650 - 2158786 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	3			✓		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

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Employee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD — District

Cashiering Services — Department/Location

Nancy Tu-Ning Chao — Employee Name

Cashiering Supervisor — Exact Position Title

408864-6308 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06) 5/~~06~~ 05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Melodie Cheney
Employee Name

Admissions Assistant
Exact Position Title

342
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De-Anza
District

Admissions & Record
Department/Location

NEI CHENG
Employee Name

Part-time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...h lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	1 Min					
C... **12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Neil Cheng Date 4/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Ag P 1 De Anza
Department/Location

Sheri Cole
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A & R — Department/Location

Deborah Comandon — Employee Name

Cashier — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

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Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Cashiering Svcs
Department/Location

Comanda, Deborah
Employee Name

Senior Cashier
Exact Position Title 5/00 – 6/01 @ 50%

NA
Telephone #

~~50%~~ (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Comanda Date 4/28/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A & R | De Anza
Department/Location

Dena Crumpton
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza District
District

A&R - Foothill Campus
Department/Location

Mrinmaie Deshpande
Employee Name

A&R Assistant
Exact Position Title

650-949-7644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and iver eligibility, and printing out a list of enrolled courses.	7 min					
e **12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mrinmaie Deshpande Date 04/13/07

I have any questions, please contact Mrinmaie Deshpande, at 949-7604

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Jean Elwell
Employee Name

Admissions Coordinator
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Adr I De Anza
Department/Location

Patricia Fifield
Employee Name

Associate Registrar
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A Fifield Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions & Records
Department/Location

Cindy Maria Fowler
Employee Name

Supervisor
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Finance / De Anza College
Department/Location

Allen Frische
Employee Name

Director of Budget & Personnel
Exact Position Title

(408) 864-8857 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Corinne Hawk Date 4/30/07

If I have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

A & R
Department/Location

ERI FURUHATA
Employee Name

part time student worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eri Furuhata Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Admission and record
Department/Location

Nami Furukawa
Employee Name

Part-time student worker
Exact Position Title

~~Tel~~
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min.					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature 古川奈実 Date 4/13/2007

If you have any questions, please contact _____, at _____

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7

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

April Colonna Henderson
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

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Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Alex Hochstraser
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DEANZA
District

Admissions & Records
Department/Location

SACHIE ICHIMURA
Employee Name

Part-time Student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

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Employee Signature [signature] Date 4/03/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R | De Anza
Department/Location

Melissa Ingalls
Employee Name

Dursion Admin Asst
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Portia Denice Jaffries
Employee Name

Admissions & Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and over eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Barry Johnson
Employee Name

Admissions Supervisor
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		- 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barry Johnson Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza
District

A&R
Department/Location

Henry Ling
Employee Name

Day Supervisor
Exact Position Title

(650)949-7024
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Araceli Kalaingara
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Araceli Kalaingara Date 4/17/06

If you have any questions, please contact EXT 8230 at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Jasmeet Kaur
Employee Name

Department/Location

Part time student worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jasmeet Kaur Date 4/20/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — District

A&R — Department/Location

ORANAN KHAOLAOR — Employee Name

Senior Cashier — Exact Position Title

7189 — Telephone

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and iver eligibility, and printing out a list of enrolled courses.	3					
le 12 Calculating the enrollment fee, collect the ment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

I have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Admission & Records
Department/Location

Su Kai Lai
Employee Name

Part-Time Student Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and verifying eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-18-2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

William John Lindke
Employee Name

Admissions + Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-07

If you have any questions, please contact Shawna Aced, at 7771

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Cashiering Svcs
Department/Location

McLaughlin, Annette
Employee Name

Senior Cashier
Exact Position Title

408-864-8590 Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

1/14/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
ode 11 Referencing the student account or record hich lists student courses, status of payments, and ver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Annette McLaughlin Date 4/28/07

If have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Cindy Nakayama
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Cindy Nakayama Date 4/7/01

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Svcs
Department/Location

Nguyen, Henry Cong
Employee Name

Senior Cashier
Exact Position Title

408-864-5689 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
8/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
ode 11 Referencing the student account or record ich lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
e 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill – De Anza
District

A S R
Department/Location

Hien M. Nguyen
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R | De Anza
Department/Location

Khanh Nguyen
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Khanh Nguyen Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

AR
Department/Location

Yelena Okunev
Employee Name

part time student worker
Exact Position Title

408 701 0037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Okunev Date 04 20 2007

If have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lynn G Olsen
Employee Name

Admissions + Records Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...n lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
C... 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

...e Signature _____ Date 4-20-07

you have any questions, please contact _____, at _____

...EA ...UBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

AFKL/DE ANZA
Department/Location

Angelita Pabros
Employee Name

Division Admin Asst
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Joan Pena-Fenicle
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Pena Fenicle Date 04/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza Comm. Coll. Dist — District

A & R — Department/Location

Denise Perez — Employee Name

A & R Technician — Exact Position Title

7856 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Vy Pham
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vy Pham Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Lindsay Knodel Ranii
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...n lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	3					
C... **12** Calculating the enrollment fee, collect the pa...ent or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nf... e Signature _____ Date 4-20-07

You have any questions, please contact _____, at _____

EA... UBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R / De Anza
Department/Location

Brian Roberts
Employee Name

Admissions Assistant
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Amelia Sanchez
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-16-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering Srcs
Department/Location

Schooler, Shirley
Employee Name

Cashier
Exact Position Title

NA
Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
5/00

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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ployee Signature Shirley A. Schooler Date 4/20/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Lost Hills — District

Admissions & Records — Department/Location

Yvonne Slayton — Employee Name

Admissions Specialist — Exact Position Title

7772 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvonne Slayton Date 4/13/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Foothill - De Anza
Department/Location: A&R / De Anza
Employee Name: Betty Snowden
Exact Position Title: Admissions Coordinator
Telephone #:
12mo/11mo/10mo/hrly — Work year length(circle) [12mo circled]
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 7-18-07

If you have any questions, please contact ______________________, at ____________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Elaine Hilda Starratt
Employee Name

Admissions + Records Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature _____ PLEASE USE BLUE INK

Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL - DE ANZA
District

ADMISSION & RECORDS
Department/Location

SEE WAN SUNG
Employee Name

PART TIME STUDENT WORKER
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 MIN					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 MIN					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 MIN					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 MIN					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 MIN					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 MIN					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SEE WAN SUNG Date 6/13/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill College
District

Admissions + Records
Department/Location

Cheryl Terrazas
Employee Name

Clerk
Exact Position Title

949-7773
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl A. Terrazas Date 4/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R / De Anza
Department/Location

Bunh Thai
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature _____ Date 4-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA CCD
District

Cashiering SVCS
Department/Location

Thai, May
Employee Name

Senior Cashier
Exact Position Title

408-864-8290
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature _____ Date 9/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R | De Anza
Department/Location

Judy Ting
Employee Name

Admissions Assistant
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 4-17-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R / De Anza
Department/Location

Robert Tomalunas
Employee Name

Admissions Evaluation Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDACCD
District

Finance
Department/Location

RHODA WANG
Employee Name

Director of Budget & Personnel
Exact Position Title

864-8857
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhoda Wang Date 5-1-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A&R / De Anza
Department/Location

Geeri White
Employee Name

Admissions Assistant
Exact Position Title

(12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Geeri White Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT
District

CASHIERS DEPT / ADMISSION & RECORDS
Department/Location

PATRICIA WOOD
Employee Name

CASHIERING SERVICES COORDINATOR
Exact Position Title

(650) 949-7331
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Wood Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

A & R
Department/Location

Yuntei Ye
Employee Name

Cashier
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and ...er eligibility, and printing out a list of enrolled courses.	2					
Co... 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Admissions + Records
Department/Location

Brian Zimmerman
Employee Name

Admissions + Records Assistant
Exact Position Title

(510)949-7674
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...h lists student courses, status of payments, and w...er eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

...ee Signature _____ Date 4/13/07

...ve any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Ryan Bellow
Employee Name

FA Outreach ASST
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/16/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Susan Bloom
Employee Name

Asst FA Div
Exact Position Title

8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 2007

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Co[illegible]21 Answering Questions regarding fee waivers or referring the[illegible] the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Susan Bloom Date 4/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

John Bostic — Employee Name

Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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loyee Signature _____ Date 4-19-07

If have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Cindy Cossio
Employee Name

Dir of Fin Aid
Exact Position Title

8403
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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e Signature Cindy Cossio (Cindy Cossio) Date 4/13/07

any questions, please contact _____, at _____

MIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

RICHARD JAMES CASTRO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

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Employee Signature Kenya Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Beatriz Chacon
Employee Name

Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Beatriz Chacon Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

Financial Aid / Foothill
Department/Location

Antoinette Chavez
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
de 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Antoinette Chavez Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

I Chen
Employee Name

Financial Aid Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
de 21 Answering Questions regarding fee waivers or referring m to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature I Chen Date 4/10/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill DeAnza C.C. District
District

Foothill College - Middlefield Campus
Department/Location

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650-949-6987
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature _____ Date 4/10/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Claros
Employee Name

FA Outreach Asst
Exact Position Title

8x10
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature _____ Date 3/16/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Financial Aid / Foothill Campus
Department/Location

Lindsey Cross
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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loyee Signature [signature] Date 4-20-07

If you have any questions, please contact _____, at _____

PL[illegible]SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill Campus
Department/Location

Tung Duong
Employee Name

Financial Aid Assistant
Exact Position Title

916-725-1
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
ode 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
ode 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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loyee Signature Tung Duong Date 4/13/07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA ASST
Exact Position Title

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

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Employee Signature Joyce Feldman Date 4-16-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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prior employee at list of Keyla Bellin Back to 03/04

EFCW 1.7-3

ee AVERAGE Time Record for Mandated Costs
ENROLLMENT FEE COLLECTION AND WAIVERS
LLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Alma Garcia
Employee Name

FA Outreach Asst
Exact Position Title

5270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

n, ee Signature Alma Garcia Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Financial Aid / Foothill Campus
Department/Location

Christy Godinez
Employee Name

Financial Aid Assistant
Exact Position Title

(650) 949-7246
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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loyee Signature Christy Godinez Date 4/13/07

If you have any questions, please contact _____, at _____

PL E SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS - Campus/Foothill
Department/Location

Ismael Gonzalez
Employee Name

EOPS Counselor
Exact Position Title

650 949-7224
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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ployee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

EOPS - DE ANZA
Department/Location

ERIKA GUEVARA
Employee Name

ADMINISTRATIVE ASSISTANT I
Exact Position Title

408 864-5619
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
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Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

n, ee Signature Erika Guevara Date 5-1-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Asher Hamilton-Kilili — Employee Name

Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
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Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
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Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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...loyee Signature A. Hamilton-Johnson Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

FA

Department/Location

Kevin Harral

Employee Name

FA Outreach Coor.

Exact Position Title

5334

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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n yee Signature Kevin C Harral Date 4/6-07

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

EOPS / Foothill Campus — Department/Location

April Henderson — Employee Name

EOPS Specialist II — Exact Position Title

650-949-7207 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

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Employee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Karen Hunter
Employee Name

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06) 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Karen Hunter Karen Hunter Date 4/13/07 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza — District

Financial Aid / Foothill Campus — Department/Location

Araceli Kaliangara — Employee Name

Exact Position Title

Telephone # — part-time 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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ode 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	/				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	/				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	/				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

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loyee Signature [signature] Date 4-19-07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza Comm. College District — District

EOPS/Foothill College — Department/Location

Donna Cambrecht — Employee Name

Sr. Admin. Asst. II — Exact Position Title

650 949 7037 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 ~~Daily~~				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Donna Cambrecht Date 4/13/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

CHUONG HUY LE
Employee Name

EOPS SERVICES COORDINATOR
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
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m, ee Signature Chuong Le Date 4/23/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza
District

EOPS - Foothill Campus
Department/Location

Tobias Nava
Employee Name

EOPS Counselor
Exact Position Title

949-7034
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
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Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
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Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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ployee Signature Tobias Nava Date 4-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Fred Ngo
Employee Name

FA ASST
Exact Position Title

8228
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS - DE ANZA
Department/Location

LESLIE NGUYEN
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and ing the information. Entering information into district records. roviding student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation ovided when denial is appealed. Providing written notification to udent of final eligibility status.	—				

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty erjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ple Signature Nancy Kubba, EOPS SUPERVISOR Date 4-23-07

u have any questions, please contact _____, at _____

ASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

FA

Department/Location

Donna O'Malley

Employee Name

FT ASST

Exact Position Title

8

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

n ee Signature _____ Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

EOPS - Foothill Campus
Department/Location

Ines Pardo
Employee Name

EOPS Program Serv. Coordinator
Exact Position Title

) 949-7206
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ines Pardo Date 4/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS-DE ANZA
Department/Location

FRANCISCA RAMIREZ-MOYA
Employee Name

OFFICE ASSISTANT
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and ing the information. Entering information into district records. roviding student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation ovided when denial is appealed. Providing written notification to udent of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that I have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Please Signature Francisca Ramirez, EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

Financial Aid / Foothill College
Department/Location

Matilda Renteria
Employee Name

Financial Aid Coordinator
Exact Position Title

650-949-7247
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Renteria Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL/DE ANZA — District

EOPS - DE ANZA — Department/Location

GEORGE ROBLES — Employee Name

EOPS SUPERVISOR — Exact Position Title

X8452 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

m ee Signature George Robles Date 4-20-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY 4-20-07; TO BRET X6272.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS (FH)
Department/Location

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/13/07

If you have any questions, please contact Same, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Janet Schmidt
Employee Name

FA Asst
Exact Position Title

8719
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

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ployee Signature Janet Schmidt Date 4/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

EOPS DeAnza College
Department/Location

Griselda Sigala-Aguilar
Employee Name

CARE Coordinator
Exact Position Title

864-8830
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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m, ee Signature Griselda Sigala Aguilar Date 7-18-07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA
District

EOPS DE ANZA
Department/Location

ADRIAN TREJO
Employee Name

EOPS SPECIALIST
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	/				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	/				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature George Robles, EOPS Supervisor Date 4-23-07

If you have any questions, please contact _____, at _____

EACH SUBMIT THIS INFORMATION BY _____; TO _____.

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03-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

~~Dan Nguyen~~ Lan Trinh
Employee Name

FA
Department/Location

FA Outreach Asst
Exact Position Title

5562
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lan Trinh by Cindy Cuyan Date 4/13/07

If I have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
C 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Cod 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

m ee Signature Nancy Nina Van Date 4/16/07

you have any questions, please contact _____, at _____

EA SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-DeAnza — District

Fin. Aid - Foothill Campus — Department/Location

Inna Witkop — Employee Name

Fin. Aid Outreach Assist — Exact Position Title

650.949.7710 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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Employee Signature [signature] Date 4/10/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

EOPS / Foothill
Department/Location

Tillie L. Wu
Employee Name

EOPS Counselor
Exact Position Title

(650) 949-7180
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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loyee Signature _____ Date 4/12/07

If you have any questions, please contact _____, at _____

PL SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL-DE ANZA
District

EOPS - DE ANZA
Department/Location

LILIAN ZAMORA
Employee Name

OFFICE CLERK
Exact Position Title

(408) 864-8950
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Morgan Hobbs - EOPS SUPERVISOR Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

Enrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
Total Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958
(#1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834
	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274
Enroll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232
	Fall	34,278	35,368	33,587	34,399	36,315	35,508	32,775	34,357
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785
Enr[illegible] Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500
Wa[illegible]ers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500
#3 form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038
	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**
	Total	**13,372**	13,806	12,937	13,478	12,098	19,773	21,734	**22,012**
let Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732
Charged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857
#2 form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658
	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**

Source: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06

FHDA IR&P - RBB - 5/19/06

5/22/06

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
De Anza								
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961
Fall	2,144	1,435	601	632	681	912	1,231	3,017
Wtr	1,483	799	634	508	524	550	2,251	2,431
Spr	1,215	987	546	476	662	615	2,101	2,374
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783
Foothill								
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608
Fall	1,139	970	382	738	435	507	812	1,655
Wtr	742	566	346	326	418	340	1,430	1,342
Spr	768	688	546	307	344	409	1,332	1,375
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980

The following for #1 on form EFCW 1.8-2

District Totals								
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672
Wtr	2,225	1,365	980	834	942	890	3,681	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06

5/22/06

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:31:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	22	6,469
BOGW - Part A-2 based on SSI recipient status	26	7,326
BOGW - Part A-3 based on general assistance recipient status	4	851
BOGW - Part A-4 based on Veteran's or National Guard dependent status	27	6,504
BOGW - Part B based on income standards	1,301	413,485
BOGW - Part C based on financial need	1,943	772,612

Total Amount = $ 1,207,247

Back to Top of Page

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05-06

22.00
25.00
4.00
27.00
1,301.00
1,943.00
161.00
412.00
12.00
2,173.00
4,551.00
10,442.00

waivers approved

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:30:20

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	161	63,560
BOGW - Part A-2 based on SSI recipient status	412	180,071
BOGW - Part A-4 based on Veteran's or National Guard dependent status	12	3,677
BOGW - Part B based on income standards	2,003	656,259
BOGW - Part C based on financial need	4,531	2,020,570

Total Amount = $ 2,924,137

Back to Top of Page

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Note: INFORMATION NOT AVAILABLE

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: FOOTHILL-DE ANZA COMMUNITY COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

2005-2006 PHRs
Foothill DeAnza CCD

El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
141287	2170	ACED, SHAWNA D	1ADMR	ASSOC REG *Classified Contracted Non Inst*	120098	2112	61,147.69				
141287	3100	ACED, SHAWNA D	1ADMR	ASSOCIATE REGISTRAR	120098	0	28,427.88	2112	1800	$ 89,575.57	**$49.76**
141287	2170	ALMENDAREZ, SUSAN ELLEN	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130067	2106	44,928.63				
141287	3100	ALMENDAREZ, SUSAN ELLEN	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130067	0	20,147.36	2106	1800	$ 65,075.99	**$36.15**
141287	2310	AVANCENA, JEOFFREY	1ADMR	*Student Salary Non Instructional*	180002	182	1,174.7				
251285	2310	AVANCENA, JEOFFREY	1ADMR	*Student Salary Non Instructional*	180002	0	420.				
141287	3200	AVANCENA, JEOFFREY	1ADMR		180002	0	17.86				
251285	3200	AVANCENA, JEOFFREY	1ADMR		180002	0	6.38	182	157	$ 1,618.94	**$10.34**
142272	2170	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	2088	61,000.58				
141068	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**18**	**805.65**				
142272	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**12**	**550.69**				
212681	**2360**	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	**71**	**3,085.12**				
142272	3100	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	28,538.5				
141068	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	60.61				
142272	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	45.63				
212681	3200	BLOOM, SUSAN LYNN	2FNAI	FINANCIAL AID COORDINATOR	230139	0	232.05	2088	1800	$ 89,877.37	**$49.93**
141287	2170	BOWERS, SHELLY L	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130103	2088	52,498.98				
141287	3100	BOWERS, SHELLY L	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130103	0	26,706.8	2088	1800	$ 79,205.78	**$44.00**
141287	2170	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	178	4,379.48				
211423	2170	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	1909	46,906.45				
141287	3100	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	0	2,268.				
211423	3100	BREWER, PAMELA S	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130195	0	24,290.67	2087	1800	$ 77,844.60	**$43.25**
610585	2150	BURFINE, MARYALICE S	2ADMI	A&R Asst. *Classified Vacation Payoff*	230316	248	6,347.7				
142287	2170	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	696	17,679.74				
142287	**2360**	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	**0**	**3.83**				
142[illegible]	3100	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	6,483.75				
61[illegible]	3100	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	1,457.41				
14228[illegible]	3200	BURFINE, MARYALICE S	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	0.54	944	812	$ 31,969.14	**$39.38**
14227[illegible]	2105	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	0	2,500.				
1422[illegible]	110	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	2088	95,234.28				
142272	3100	CASTILLO, CINDY	2FNAI	DIR, FINANCIAL AID & SCHOLARSH	210024	0	30,193.48	2088	1800	$ 127,927.76	**$71.07**
141272	1210	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	1044	40,063.19				
141378	1210	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	1044	40,063.32				
141272	3100	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	0	16,179.79				
141378	3100	CHACON, BEATRIZ CORONADO	1FAID	DIRECTOR, FINANCIAL AID & EOPS	110010	0	16,180.58	2088	1800	$ 112,486.88	**$62.49**
142149	2170	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	2106	69,918.35				
142149	**2360**	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	**2**	**125.53**				
142149	3100	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	0	24,659.23				
142149	3200	CHAO, NANCY TU-NING	2CASH	CASHIERING SERVICES SUPERVISOR	220148	0	9.2	2106	1800	$ 94,586.78	**$52.55**
211684	2170	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	1807	33,645.56				
211684	**2360**	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	**24**	**684.05**				
211684	3100	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	0	16,021.29				
211684	3200	CHAVEZ, ANTOINETTE	1FAID	FINANCIAL AID OUTREACH ASST	132220	0	53.24	1807	1554	$ 49,720.09	**$31.99**
211684	2170	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	2153	48,552.17				
211684	**2360**	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	**65**	**2,262.83**				
211684	3100	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	0	22,516.96				
211684	3200	CHEN, I	1FAID	FINANCIAL AID OUTREACH COORD	132214	0	176.76	2153	1800	$ 71,245.89	**$39.58**
142287	2170	CHENEY, MELODIE DAWN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230077	2100	51,283.03				
142287	3100	CHENEY, MELODIE DAWN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230077	0	21,411.7	2100	1800	$ 72,694.73	**$40.39**
211684	2170	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	2094	42,229.25				
211684	**2360**	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	**37**	**1,154.7**				
211684	3100	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	0	21,261.41				
211684	3200	CHRISTENSEN, JOSEPHINE THROWER	1MFLD	FINANCIAL AID OUTREACH ASST	132230	0	89.49	2094	1800	$ 63,580.15	**$35.32**
142287	2170	COLE, SHERI L	2ADMI	ADMISSIONS & RECORDS ASSISTANT	234512	1566	33,217.52				
142287	3100	COLE, SHERI L	2ADMI	ADMISSIONS & RECORDS ASSISTANT	234512	0	22,870.35	1566	1347	$ 56,087.87	**$41.65**
141047	2170	COLLINGS, EARL	1PR	COLLEGE WEB COORDINATOR, SR	130265	2091	103,164.69				
141047	3100	COLLINGS, EARL	1PR	COLLEGE WEB COORDINATOR, SR	130265	0	32,727.93	2091	1800	$ 135,892.62	**$75.50**
610585	2150	COMANDA, DEBORAH	1ADMR	CASHIER *Classified Vacation Payoff*	130220	96	2,346.99				
14[illegible]	2170	COMANDA, DEBORAH	1ADMR	CASHIER *Classified Contracted Non Instructi*	130220	1876	45,131.78				
14[illegible]	3100	COMANDA, DEBORAH	1ADMR	CASHIER	130220	0	18,713.38				
610585	3100	COMANDA, DEBORAH	1ADMR	CASHIER	130220	0	794.23	1972	1696	$ 66,986.38	**$39.50**
1447[illegible]	2170	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	2144	96,450.7				
1447[illegible]	**2360**	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	**11**	**790.23**				

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144754	3100	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	0	35,272.39				
144754	3200	COYNE, SHEILA NORA	4IS	PROGRAMMER ANALYST, SENIOR	430061	0	48.26	2144	1800	$ 131,771.35	**$73.21**
142287	2170	CRUMPTON, DINA D	2ADMI	A&R Asst. *Classified Contracted Non Instr*	230103	1988	45,022.88				
610570	2185	CRUMPTON, DINA D	2ADMI	A&R Asst. *Classified Extended Sick Leave*	236604	18	437.31				
142287	3100	CRUMPTON, DINA D	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230103	0	20,054.48				
610570	3100	CRUMPTON, DINA D	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236604	0	199.02	2006	1800	$ 65,713.69	**$36.51**
141287	2170	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130168	1344	27,307.22				
610570	2185	DESHPANDE, MRINMAIE HEMANT	1ADMR	A&R Asst. *Extended Sick Leave*	136601	216	4,727.7				
141287	3100	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130168	0	16.264.				
610570	3100	DESHPANDE, MRINMAIE HEMANT	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136601	0	2,934.05	1560	1342	$ 51,232.97	**$38.19**
141272	2170	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	1943	47,047.25				
211684	2170	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	144	3,495.79				
141272	**2360**	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	**11**	**410.19**				
211684	**2360**	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	**0**	**30.5**				
141272	3100	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	24,510.39				
211684	3100	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	1,821.25				
141272	3200	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	31.28				
211684	3200	DUONG, TUNG THI	1FAID	FINANCIAL AID ASSISTANT	130026	0	2.33	2087	1800	$ 76,908.29	**$42.73**
142287	2170	ELWELL, JEAN	2ADMI	ADMISSIONS & RECORDS COORD	230149	2088	65,982.94				
142287	3100	ELWELL, JEAN	2ADMI	ADMISSIONS & RECORDS COORD	230149	0	24,337.04	2088	1800	$ 90,319.98	**$50.18**
212681	2170	FELDMAN, JOYCE K	2FNAI	FINANCIAL AID ASSISTANT	230372	2088	57,392.5				
212681	3100	FELDMAN, JOYCE K	2FNAI	FINANCIAL AID ASSISTANT	230372	0	22,627.62	2088	1800	$ 80,020.12	**$44.46**
142287	2170	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	261	9,414.27				
212650	2170	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	1827	65,898.2				
142287	3100	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	0	3,274.42				
212[illegible]	3100	FIFIELD, PATRICIA A	2ADMI	ASSOCIATE REGISTRAR	220218	0	22,919.03	2088	1800	$ 101,505.92	**$56.39**
212[illegible]	2350	FRISCHE, ALLEN R	2ACAD	*Classified Hourly Non Instructional*	260008	144	2,458.08				
21258[illegible]	3200	FRISCHE, ALLEN R	2ACAD		260008	0	462.02	144	144	$ 2,920.10	**$20.28**
1412[illegible]	310	FURUHATA, ERI	1ADMR	*Student Salary Non Instructional*	180001	117	940.				
14128[illegible]	3200	FURUHATA, ERI	1ADMR		180001	0	14.29	117	101	$ 954.29	**$9.48**
141287	2310	FURUKAWA, NAMI	1ADMR	*Student Salary Non Instructional*	180001	199	1,592.				
141287	3200	FURUKAWA, NAMI	1ADMR		180001	0	24.2	199	171	$ 1,616.20	**$9.44**
610585	2150	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	78	1,624.87				
212681	2170	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	1696	35,277.71				
212681	**2360**	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	**75**	**2,336.67**				
212681	3100	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	15,973.16				
610585	3100	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	622.55				
212681	3200	GARCIA, ALMA D	2FNAI	FINANCIAL AID OUTREACH ASST	232222	0	180.81	1774	1526	$ 53,679.10	**$35.18**
141272	2170	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	1960	53,581.5				
211684	2170	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	131	3,595.02				
141272	**2360**	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	**3**	**153.97**				
211684	**2360**	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	**0**	**10.33**				
141272	3100	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	21,169.57				
211684	3100	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	1,420.39				
141272	3200	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	11.78				
211684	3200	GODINEZ, CHRISTY	1FAID	FINANCIAL AID ASSISTANT	130161	0	0.79	2091	1800	$ 79,779.05	**$44.32**
141250	1320	GONZALEZ, ISMAEL		*Certificated Salary Hourly Instr*	192001	12	1,606.2				
141250	1320	GONZALEZ, ISMAEL		*Certificated Salary Hourly Instr*	192002	12	1,606.2				
141248	1430	GONZALEZ, ISMAEL		*Certificated Salary Non Instr*	191001	73	3,908.42				
141248	1430	GONZALEZ, ISMAEL		*Certificated Salary Non Instr*	194010	120	6,530.4				
141250	3100	GONZALEZ, ISMAEL			192001	0	55.88				
141250	3100	GONZALEZ, ISMAEL			192002	0	55.9				
141248	3200	GONZALEZ, ISMAEL			191001	0	136.02				
141248	3200	GONZALEZ, ISMAEL			194010	0	227.26	217	187	$ 14,126.28	**$75.70**
610585	2150	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	201	5,622.82				
212664	2170	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	1027	28,715.59				
610570	2185	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	236601	332	9,232.69				
21[illegible]	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	13,070.24				
61	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	1,625.05				
610570	3100	GUEVARA, ERIKA C	2EOPS	ADMINISTRATIVE ASSISTANT I	236601	0	5,676.24	1560	1342	$ 63,942.63	**$47.66**
1410[illegible]	1210	GUSMAN, FRANCES ANN	1SM	DEAN, STUDENT OUTREACH & RETEN	110100	2088	107,267.77				
1410[illegible]	3100	GUSMAN, FRANCES ANN	1SM	DEAN, STUDENT OUTREACH & RETEN	110100	0	30,118.42	2088	1800	$ 137,386.19	**$76.33**

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142272	2170	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	1914	48,822.54				
212681	2170	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	174	4,249.27				
142272	**2360**	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	**20**	**764.16**				
212681	**2360**	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	**46**	**1,747.48**				
142272	3100	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	20,053.56				
212681	3100	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	1,789.44				
142272	3200	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	61.95				
212681	3200	HARRAL, KEVIN	2FNAI	FINANCIAL AID OUTREACH COORD	232224	0	133.69	2088	1800	$ 75,110.45	**$41.73**
211668	2170	HENDERSON, APRIL COLONNA	1EOPS	EOPS SPECIALIST	130011	1950	48,055.21				
211668	3100	HENDERSON, APRIL COLONNA	1EOPS	EOPS SPECIALIST	130011	0	20,768.72	1950	1677	$ 68,823.93	**$41.04**
212681	2170	HUNTER, KAREN KAY	2FNAI	FINANCIAL AID ASSISTANT	230113	1524	27,719.5				
212681	2310	HUNTER, KAREN KAY	2FNAI		280001	141	1,417.5				
232111	2700	HUNTER, KAREN KAY	2FNAI		240001	37	377.5				
212681	3100	HUNTER, KAREN KAY	2FNAI	FINANCIAL AID ASSISTANT	230113	0	12,949.8				
144036	3100	HUNTER, KAREN KAY	2FNAI		240001	0	5.74				
212681	3200	HUNTER, KAREN KAY	2FNAI		280001	0	129.99	1702	1464	$ 42,600.03	**$29.10**
142287	2170	JOHNSON, BARRY W	2ADMI	ADMISSIONS & RECORDS SUPV	220156	2094	62,611.74				
142287	3100	JOHNSON, BARRY W	2ADMI	ADMISSIONS & RECORDS SUPV	220156	0	23,666.3	2094	1800	$ 86,278.04	**$47.93**
141287	2170	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS SUPV	120094	1169	30,410.86				
141287	2170	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	925	21,386.45				
141287	3100	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS SUPV	120094	0	12,223.35				
141287	3100	JUNG, HENRY	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	0	9,290.39	2094	1800	$ 73,311.05	**$40.73**
141287	2170	KALIANGARA, ARACELI	1ADMR	EVALUATION SPECIALIST, SENIOR	130072	92	2,709.69				
141272	2170	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	221	2,073.32				
211684	2170	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	6	142.05				
142[illegible]	2170	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	348	9,621.44				
14[illegible]	2170	KALIANGARA, ARACELI	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230107	695	19,644.25				
142[illegible]	**2360**	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	**16**	**655.82**				
141287	3100	KALIANGARA, ARACELI	1ADMR	EVALUATION SPECIALIST, SENIOR	130072	0	1,236.75				
141[illegible]	3100	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	0	-31,246.71				
2116[illegible]	3100	KALIANGARA, ARACELI	1FAID	FINANCIAL AID ASSISTANT	130155	0	-2,143.54				
142294	3100	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	0	4,612.98				
142287	3100	KALIANGARA, ARACELI	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230107	0	45,572.7				
142294	3200	KALIANGARA, ARACELI	2VETP	VETERANS PROGRAM COORDINATOR	230079	0	50.17	1362	1171	$ 52,273.10	**$44.63**
141378	2170	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	1984	67,826.57				
141378	**2360**	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	**5**	**292.28**				
141378	3100	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	0	29,789.03				
141378	3200	LAMBRECHT, DONNA WOLF	1FAID	ADMINISTRATIVE ASSISTANT, SR	130460	0	22.66	1984	1706	$ 97,638.26	**$57.22**
142306	2170	LE, CHUONG HUY	2LIB	LIBRARY TECHNICIAN, SENIOR	230034	2088	49,133.96				
142306	3100	LE, CHUONG HUY	2LIB	LIBRARY TECHNICIAN, SENIOR	230034	0	26,130.85	2088	1800	$ 75,264.81	**$41.81**
142287	2170	NAKAYAMA, CINDY J	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230048	1044	25,641.6				
142287	3100	NAKAYAMA, CINDY J	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230048	0	17,925.96	1044	898	$ 43,567.56	**$48.52**
141250	1160	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	389	17,554.56				
141378	1260	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	1169	52,663.9				
141250	3100	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	0	5,688.87				
141378	3100	NAVA, TOBIAS B	1EOPS	COUNSELOR	150408	0	17,066.92	1558	1340	$ 92,974.25	**$69.39**
142149	2170	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	2103	50,882.78				
142149	**2360**	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	**4**	**164.49**				
142149	3100	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	0	26,484.05				
142149	3200	NGUYEN, HENRY CONG	2CASH	CASHIER, SENIOR	230151	0	12.59	2103	1800	$ 77,379.42	**$42.99**
232111	2700	NGUYEN, KHANH BAO	2FNAI	*C.W.S.P.*	240001	305	3,666.				
144036	3100	NGUYEN, KHANH BAO	2FNAI		240001	0	55.72				
232111	3100	NGUYEN, KHANH BAO	2FNAI		240001	0	0.	305	262	$ 3,721.72	**$14.19**
212892	2310	NGUYEN, KHANH TRUC	2OML	*Student Salary Non Instructional*	280001	23	176.25				
212892	3200	NGUYEN, KHANH TRUC	2OML		280001	0	16.17	23	20	$ 192.42	**$9.73**
148226	2310	NGUYEN, KHANH TUONG	2BOOK	*Student Salary Non Instructional*	280002	60	408.38				
148226	3200	NGUYEN, KHANH TUONG	2BOOK		280002	0	6.2	60	52	$ 414.58	**$8.03**
142245	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	730	18,070.18				
14[illegible]	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	136	3,387.94				
21[illegible]	2170	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	958	23,717.75				
142245	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	8,079.06				
14224[illegible]	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	1,514.67				
2126[illegible]	3100	NGUYEN, LESLIE KHANH	2MATR	SECRETARY, SENIOR	230448	0	10,603.81	1824	1569	$ 65,373.41	**$41.68**

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142272	2170	O'MALLEY, DAWNA LEE	2FNAI	FINANCIAL AID ASSISTANT	230026	2088	50,632.07				
142272	3100	O'MALLEY, DAWNA LEE	2FNAI	FINANCIAL AID ASSISTANT	230026	0	21,282.56	2088	1800	$ 71,914.63	**$39.95**
141287	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180001	621	3,674.				
251285	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180001	0	1,294.				
141287	2310	OR, ORAWAN KHAOLA	1ADMR	*Student Salary Non Instructional*	180002	140	1,405.				
141287	3200	OR, ORAWAN KHAOLA	1ADMR		180001	0	75.51				
251285	3200	OR, ORAWAN KHAOLA	1ADMR		180001	0	6.14				
141287	3200	OR, ORAWAN KHAOLA	1ADMR		180002	0	21.35				
141287	3200	OR, ORAWAN KHAOLA			180003	0	-6.14	761	654	$ 6,469.86	**$9.89**
142287	2170	PABROS, ANGELITA M	2ADMI	DIVISION ADMINISTRATIVE ASST	230219	2088	53,323.41				
142287	3100	PABROS, ANGELITA M	2ADMI	DIVISION ADMINISTRATIVE ASST	230219	0	23,433.85	2088	1800	$ 76,757.26	**$42.64**
141067	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	141	4,637.51				
141378	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	902	29,464.44				
211668	2170	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	1044	34,101.64				
141067	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	2,035.35				
141378	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	12,927.79				
211668	3100	PARDO, INES C	1EOPS	EOPS SERVICES COORDINATOR	130125	0	14,962.21	2087	1800	$ 98,128.94	**$54.52**
142287	2170	PENA-FERRICK, JOAN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230242	2088	57,905.43				
142287	3100	PENA-FERRICK, JOAN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230242	0	22,438.7	2088	1800	$ 80,344.13	**$44.64**
141150	2170	PEREZ, DENISE M KORN	1IEDR	ACADEMIC SCHEDULING COORD	130177	2090	72,881.7				
141150	3100	PEREZ, DENISE M KORN	1IEDR	ACADEMIC SCHEDULING COORD	130177	0	27,325.49	2090	1800	$ 100,207.19	**$55.67**
142287	2170	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230054	2066	45,373.08				
610570	2185	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236606	-8	-210.97				
142287	3100	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230054	0	25,363.96				
610570	3100	PHAN, VY MNIM NGUYEN	2ADMI	ADMISSIONS & RECORDS ASSISTANT	236606	0	-116.87	2058	1800	$ 70,409.20	**$39.12**
142[illegible]	2170	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	254	4,952.67				
21[illegible]	2170	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	1833	34,667.07				
142[illegible]	3100	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	0	2,588.5				
212[illegible]	3100	RAMIREZ MOYA, FRANCISCA	2TSTG	TESTING TECHNICIAN	230128	0	18,118.64	2087	1800	$ 60,326.88	**$33.51**
141[illegible]	170	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	2002	64,923.59				
211684	2170	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	85	2,775.99				
141272	**2360**	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	**9**	**466.32**				
211684	**2360**	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	**0**	**19.95**				
141272	3100	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	28,548.73				
211684	3100	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	1,220.59				
141272	3200	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	35.76				
211684	3200	RENTERIA, MATILDA P	1FAID	FINANCIAL AID COORDINATOR	130164	0	1.53	2087	1800	$ 97,506.19	**$54.17**
142287	2170	ROBERTS, BRIAN R	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	559	10,359.77				
142287	3100	ROBERTS, BRIAN R	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230316	0	4,862.18	559	481	$ 15,221.95	**$31.66**
142378	2170	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	522	22,364.24				
212664	2170	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	1566	67,091.33				
142378	3100	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	0	8,365.83				
212664	3100	ROBLES, GEORGE	2EOPS	EOPS SUPERVISOR	220185	0	25,096.12	2088	1800	$ 122,917.52	**$68.29**
211668	2170	RODRIGUEZ, JORGE A	1EOPS	EOPS SPECIALIST, SENIOR	132215	2123	56,842.96				
211668	3100	RODRIGUEZ, JORGE A	1EOPS	EOPS SPECIALIST, SENIOR	132215	0	27,664.76	2123	1800	$ 84,507.72	**$46.95**
142300	2170	SANCHEZ, AMELIA P	2COUN	SECRETARY, SENIOR	230490	2088	52,556.06				
142300	3100	SANCHEZ, AMELIA P	2COUN	SECRETARY, SENIOR	230490	0	21,665.44	2088	1800	$ 74,221.50	**$41.23**
142272	2170	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	2067	50,556.33				
212681	2170	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	20	498.8				
142272	3100	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	0	22,754.6				
212681	3100	SCHMIDT, JANET S	2FNAI	FINANCIAL AID ASSISTANT	230390	0	228.14	2087	1800	$ 74,037.87	**$41.13**
222224	2170	SCHOOLER, SHIRLEY A	2DSS	ADMINISTRATIVE ASSISTANT II	230136	2088	61,176.61				
222224	3100	SCHOOLER, SHIRLEY A	2DSS	ADMINISTRATIVE ASSISTANT II	230136	0	23,380.19	2088	1800	$ 84,556.80	**$46.98**
142250	1320	SIGALA-AGUILAR, GRISELDA T			291001	12	684.23				
142250	1320	SIGALA-AGUILAR, GRISELDA T			292001	12	878.25				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291002	17	733.78				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291003	14	587.02				
212681	1430	SIGALA-AGUILAR, GRISELDA T			291004	15	649.92				
21[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			292002	16	670.88				
21[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			292003	21	880.53				
212681	1430	SIGALA-AGUILAR, GRISELDA T			293001	21	880.53				
212[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			294001	14	641.19				
212[illegible]	1430	SIGALA-AGUILAR, GRISELDA T			294002	23	1,039.17				

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SIX_TEN_PHR 98-99 thru 05-06 efcw

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Colmuns I-L by SixTen and Associates
sea 6/25/07

2005-2006 PHRs
Foothill DeAnza CCD

El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
212681	1430	SIGALA-AGUILAR, GRISELDA T			294010	25	1,048.25				
142378	2170	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	513	19,128.01				
212664	2170	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	1612	57,384.75				
142378	3100	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	0	6,444.95				
212664	3100	SIGALA-AGUILAR, GRISELDA T	2EOPS	PROGRAM COORDINATOR II	230240	0	19,335.12				
142250	3100	SIGALA-AGUILAR, GRISELDA T			291001	0	115.74				
142250	3100	SIGALA-AGUILAR, GRISELDA T			292001	0	152.64				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291002	0	130.25				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291003	0	105.22				
212681	3200	SIGALA-AGUILAR, GRISELDA T			291004	0	116.35				
212681	3200	SIGALA-AGUILAR, GRISELDA T			292002	0	113.11				
212681	3200	SIGALA-AGUILAR, GRISELDA T			292003	0	154.84				
212681	3200	SIGALA-AGUILAR, GRISELDA T			293001	0	154.81				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294001	0	114.61				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294002	0	180.55				
212681	3200	SIGALA-AGUILAR, GRISELDA T			294010	0	177.15	2315	1800	$ 112,501.85	**$62.50**
141287	2170	SLAYTON, VIRGINIA E	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130146	2088	54,557.43				
141287	3100	SLAYTON, VIRGINIA E	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130146	0	23,679.26	2088	1800	$ 78,236.69	**$43.46**
141287	2170	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	1705	34,547.36				
610570	2185	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136608	254	6,237.01				
610575	2600	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	0	4,207.72				
141287	3100	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130013	0	20,977.19				
610570	3100	TERRANOVA, CHERYL A	1ADMR	ADMISSIONS & RECORDS ASSISTANT	136608	0	3,624.48	1959	1685	$ 69,593.76	**$41.31**
142287	2170	THAI, BINH N	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230188	2088	61,237.42				
142287	3100	THAI, BINH N	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230188	0	28,306.25	2088	1800	$ 89,543.67	**$49.75**
142[illegible]	2170	THAI, MAY	2CASH	CASHIER, SENIOR	230351	2118	50,982.09				
14[illegible]	**2360**	THAI, MAY	2CASH	CASHIER, SENIOR	230351	**11**	**421.83**				
142149	3100	THAI, MAY	2CASH	CASHIER, SENIOR	230351	0	26,511.48				
142149	3200	THAI, MAY	2CASH	CASHIER, SENIOR	230351	0	32.62	2118	1800	$ 77,526.19	**$43.07**
1423[illegible]	170	THANH, QUANG X	2LIB	COMPUTER LAB OPERATIONS COORD	230002	2088	64,404.88				
14230[illegible]	3100	THANH, QUANG X	2LIB	COMPUTER LAB OPERATIONS COORD	230002	0	29,169.19	2088	1800	$ 93,574.07	**$51.99**
142287	2170	TING, JUDY LEE	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230360	2088	59,269.4				
142287	3100	TING, JUDY LEE	2ADMI	ADMISSIONS & RECORDS ASSISTANT	230360	0	23,000.77	2088	1800	$ 82,270.17	**$45.71**
142287	2170	TOMALINAS, ROBERT T	2ADMI	EVAL. SPEC. *Class. Contracted Non Instr.*	230340	108	2,270.48				
212650	2170	TOMALINAS, ROBERT T	2ADMI	EVAL. SPEC. Class. Contracted Non Instr.	230340	761	15,893.12				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260001	487	7,543.64				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260005	0	946.				
148700	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260005	88	0.				
142164	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260009	0	1,239.2				
142287	2350	TOMALINAS, ROBERT T	2ADMI	*Classified Hourly Non Instructional*	260009	80	0.				
142287	3100	TOMALINAS, ROBERT T	2ADMI	EVALUATION SPECIALIST	230340	0	913.61				
212650	3100	TOMALINAS, ROBERT T	2ADMI	EVALUATION SPECIALIST	230340	0	6,394.9				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260001	0	730.21				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260005	0	91.57				
148700	3200	TOMALINAS, ROBERT T	2ADMI		260005	0	0.				
142164	3200	TOMALINAS, ROBERT T	2ADMI		260009	0	119.96				
142287	3200	TOMALINAS, ROBERT T	2ADMI		260009	0	0.	1524	1311	$ 36,142.69	**$27.58**
212664	2170	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	150	3,452.41				
212681	2170	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	1937	41,484.32				
212664	**2360**	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	**2**	**68.92**				
212681	**2360**	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	**1**	**56.17**				
212664	3100	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	1,497.75				
212681	3100	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	0	18,655.5				
212664	3200	TRINH, LAN NGUYET	2EOPS	ADMINISTRATIVE ASSISTANT I	230011	0	5.27				
212681	3200	TRINH, LAN NGUYET	2FNAI	FINANCIAL AID OUTREACH ASST	232218	0	4.29	2087	1800	$ 65,099.54	**$36.17**
212681	2170	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	1823	37,212.7				
610570	2185	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	236608	176	3,629.25				
212681	**2360**	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	**43**	**1,315.3**				
2[illegible]	3100	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	0	17,325.21				
6[illegible]	3100	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	236608	0	2,049.				
212681	3200	VAN, NINA NGUYEN	2FNAI	FINANCIAL AID OUTREACH ASST	232216	0	102.28	1999	1719	$ 60,318.44	**$35.09**
1421[illegible]	2110	WANG, RHODA	2BGTP	DIRECTOR, BUDGET & PERSONNEL	210016	1044	53,302.23				
1440[illegible]	170	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	983	47,397.				

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SIX_TEN_PHR 98-99 thru 05-06 efcw

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Colmuns I-L by SixTen and Associates
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2005-2006 PHRs
Foothill DeAnza CCD

El Account	El Object	El Emply Name	El Dept	El Pos Title	El Pos No	El Fiscal Ytd Hours	El Fiscal Ytd Amt	Hrs Wkd	Productive Hours	Labor + Benefits Total	05-06 PHR
214610	2170	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	72	3,512.94				
142150	3100	WANG, RHODA	2BGTP	DIRECTOR, BUDGET & PERSONNEL	210016	0	16,113.26				
144046	3100	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	0	15,267.83				
214610	3100	WANG, RHODA	4PYRL	ASSISTANT CONTROLLER	420010	0	1,131.67	2099	1800	$ 136,724.93	**$75.96**
211684	2170	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	2100	42,718.69				
211684	**2360**	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	**46**	**1,422.35**				
211684	3100	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	0	24,828.41				
211684	3200	WITKOP, INNA	1FAID	FINANCIAL AID OUTREACH ASST	132212	0	109.47	2100	1800	$ 67,656.57	**$37.59**
141287	2170	WOOD, PATRICIA MAY	1ADMR	CASHIERING SERVICES COORD	130117	1884	47,892.62				
610570	2185	WOOD, PATRICIA MAY	1ADMR	CASHIER, SENIOR	136604	144	3,415.06				
141287	3100	WOOD, PATRICIA MAY	1ADMR	CASHIERING SERVICES COORD	130117	0	19,734.61				
610570	3100	WOOD, PATRICIA MAY	1ADMR	CASHIER, SENIOR	136604	0	1,682.23	2028	1800	$ 72,724.52	**$40.40**
211668	1260	WU, TILLY LIU	1EOPS	COUNSELOR	150007	1466	71,136.92				
211679	1260	WU, TILLY LIU	1EOPS	COUNSELOR	150007	93	4,540.73				
141250	1320	WU, TILLY LIU			191001	12	1,501.62				
141250	1320	WU, TILLY LIU			191002	36	3,149.62				
141248	1430	WU, TILLY LIU			192001	7	358.13				
211668	3100	WU, TILLY LIU	1EOPS	COUNSELOR	150007	0	28,846.95				
211679	3100	WU, TILLY LIU	1EOPS	COUNSELOR	150007	0	1,754.33				
141250	3100	WU, TILLY LIU			191001	0	157.54				
141250	3100	WU, TILLY LIU			191002	0	423.25				
141248	3200	WU, TILLY LIU			192001	0	66.93	1614	1388	$ 111,936.02	**$80.64**
212664	2170	ZAMORA, LILLIAN DOROTHY	2EOPS	OFFICE ASSISTANT	230191	2088	41,334.41				
212664	3100	ZAMORA, LILLIAN DOROTHY	2EOPS	OFFICE ASSISTANT	230191	0	19,432.74	2088	1800	$ 60,767.15	**$33.76**
141287	2170	ZIMMERMAN, BRIAN M	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	478	8,854.81				
141[illegible]	3100	ZIMMERMAN, BRIAN M	1ADMR	ADMISSIONS & RECORDS ASSISTANT	130058	0	3,553.54	478	411	$ 12,408.35	**$30.18**

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Colmuns I-L by SixTen and Associates
sea 6/25/07

Foothill-De Anza C... ...nity College District
308/95 Enrollm... ...ee ...ection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. (See documentation in the 05-06 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,79
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,29
		Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.						
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,39
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,40
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee					
1.8-4 line 5	Summer							
	Fall							
	Winter/Interssion							
	Spring							
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,31
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,2
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298						
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Foothill-DeAnza
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$56,513,652	$50,137,336	$1,866,336	$52,003,672
EQUALIZATION	1,276,441	1,174,325	102,116	1,276,441
ENROLL FEE ADMIN (2%)	80,315	73,889	6,426	80,315
APPRENTICE ALLOWANCE	1,969,874	1,841,899	127,975	1,969,874
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	972,422	894,629	77,793	972,422
S.F.A.A.	928,789	853,412	75,377	928,789
E.O.P.S.	1,749,642	1,605,414	144,228	1,749,642
C.A.R.E.	135,699	124,843	10,856	135,699
D.S.P.S.	4,119,151	3,789,619	329,532	4,119,151
STATE HOSPITALS	0	0	0	0
CALWORKS	296,337	272,630	23,707	296,337
MATRICULATION (CREDIT)	1,442,844	1,327,418	115,426	1,442,844
MATRIC. (NONCREDIT)	71,637	65,906	5,731	71,637
FAC.& STAFF DIVERSITY	31,824	26,908	4,916	31,824
PART-TIME FAC. INS.	68,356	0	68,356	68,356
PART-TIME FAC. OFF. HRS	279,306	0	279,306	279,306
PART-TIME FAC. ALLO.	1,475,772	1,357,711	118,061	1,475,772
TELECOMMUNICATIONS	104,664	67,524	37,140	104,664
PLANT & INSTRUCTIONAL	744,593	685,024	59,569	744,593
ECON. DEVELOPMENT	610,280	512,634	1	512,635
TANF	67,731	62,311	5,420	67,731
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	37,625	31,605	0	31,605
VTEA TITLE I C	340,605	107,027	179,081	286,108
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	883,011	883,010	1	883,011
TOTAL	$74,200,570	$65,895,074	$3,637,354	$69,532,428

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,875.05
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 143,144.78
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$155,700.00	$163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$(105,724.20)	$(166,880.97)	$(176,159.90)	$(163,502.22)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 143,144.78**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:31:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	22	6,469
BOGW - Part A-2 based on SSI recipient status	26	7,326
BOGW - Part A-3 based on general assistance recipient status	4	851
BOGW - Part A-4 based on Veteran's or National Guard dependent status	27	6,504
BOGW - Part B based on income standards	1,301	413,485
BOGW - Part C based on financial need	1,943	772,612

Total Amount = $ 1,207,247

Back to Top of Page

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22.00 +
26.00 +
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27.00 +
1,301.00 +
1,943.00 +
161.00 +
412.00 +
12.00 +
2,103.00 +
4,531.00 +
10,442.00

 waivers approved

California Home

Fri

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 08, 2007 12:30:20

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	161	63,560
BOGW - Part A-2 based on SSI recipient status	412	180,071
BOGW - Part A-4 based on Veteran's or National Guard dependent status	12	3,677
BOGW - Part B based on income standards	2,003	656,259
BOGW - Part C based on financial need	4,531	2,020,570

Total Amount = $ 2,924,137

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 18, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8697

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D.T Brownell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43045

(02) Claimant Name: Foothill-De Anza Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 12345 El Monte Road

City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 1,351,000	(13) $ 1,228,251
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,228,251
Due from State	(08) $ 1,351,000	(17) $ 1,228,251
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	465
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	967,742
(25) EFCW-1, (04)(B)(1)(a)(f)	3,482
(26) EFCW-1, (04)(B)(1)(b)(f)	1,131
(27) EFCW-1, (04)(B)(2)(a)(f)	11,793
(28) EFCW-1, (04)(B)(2)(b)(f)	169,798
(29) EFCW-1, (04)(B)(2)(c)(f)	4,202
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	343,992
(32) EFCW-1, (09)	83,949
(33) EFCW-1, (10)	190,406
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date**

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 1 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **Foothill-De Anza Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2006-2007**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 465.12	$ -	$ -	$ -	$ -	$ 465.12
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 967,742.10	$ -	$ -	$ -	$ -	$ 967,742.10
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,482.25	$ -	$ -	$ -	$ -	$ 3,482.25
b. Staff training (One time per employee)	$ 1,131.06	$ -	$ -	$ -	$ -	$ 1,131.06
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 11,792.87	$ -	$ -	$ -	$ -	$ 11,792.87
b. Waiving student fees	$ 169,797.83	$ -	$ -	$ -	$ -	$ 169,797.83
c. Reporting BOG fee waiver data to CCC	$ 4,202.32	$ -	$ -	$ -	$ -	$ 4,202.32
(05) Total Direct Costs	$ 1,158,613.55	$ -	$ -	$ -	$ -	$ 1,158,613.55

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.69%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 343,992.36
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,502,605.91
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 83,949.00
(10) Enrollment Fee Waiver offsets		$ 190,406.33
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,228,250.58

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
othill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Moberg, Kathleen Dean, Admissions & Outreach	$77.52	6.0	$ 465.12				
(05) Total [X] Subtotal [ ] Page 1 of 1			$ 465.12	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
'hill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$35.10	8,047.3	$ 282,460.23				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$35.10	5,120.9	$ 179,743.59				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$35.10	8,699.7	$ 305,359.47				
ing written and computer records for enrollment fee information Enrollment Office Staff Various	$35.10	4,567.3	$ 160,312.23				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$35.10	1,135.8	$ 39,866.58				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 967,742.10	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: 'hill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Director, Financial Aid	$75.10	30.0	$ 2,253.00				
Chacon, Beatriz	Director, Financial Aid	$77.82	12.0	$ 933.84				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,482.25	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Castillo, Cindy	Director, Financial Aid	$75.10	3.0	$ 225.30				
Feldman, Joyce	Financial Aid Assistant	$47.38	10.0	$ 473.80				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,131.06	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: hill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Chacon, Beatriz	Director, Financial Aid	$77.82	40.0	$ 3,112.80				
Collings, Lee	Webmaster	$78.17	10.0	$ 781.70				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	8.0	$ 886.96				
Pabros, Angelita	Division Assistant	$48.40	125.0	$ 6,050.00				
Renteria, Matilda	Financial Aid Coordinator	$58.51	6.0	$ 351.06				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,792.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: othill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$41.66	1,164.0	$ 48,492.24				
Receiving waiver applications							
Financial Aid Office Staff Various	$41.66	748.3	$ 31,174.18				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$41.66	873.0	$ 36,369.18				
lying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$41.66	94.1	$ 3,920.21				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$41.66	1,117.5	$ 46,555.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$41.66	78.9	$ 3,286.97				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 169,797.83	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Foothill-De Anza Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan	Financial Aid Coordinator	$53.35	35.0	$ 1,867.25				
Chacon, Beatriz	Director, Financial Aid	$77.82	16.0	$ 1,245.12				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	4.0	$ 443.48				
Renteria, Matilda	Financial Aid Coordinator	$58.51	7.0	$ 409.57				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,202.32	$ -	$ -	$ -	$ -

Foothill-De Anza Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$1,867.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	49.00	**Bloom, Susan Total**			$2,614.15		
06-07	30.00	Castillo, Cindy	Director, Financial Aid	$75.10	$2,253.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Castillo, Cindy	Director, Financial Aid	$75.10	$225.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	33.00	**Castillo, Cindy Total**			$2,478.30		
06-07	40.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$3,112.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	16.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$1,245.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	12.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$933.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	68.00	**Chacon, Beatriz Total**			$5,291.76		
2/10/2007	10.00	Collings, Lee	Webmaster	$78.17	$781.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin, rds
	10.00	**Collings, Lee Total**			$781.70		
06-07	1,135.80	Enrollment Office Staff	Various	$35.10	$39,866.58	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	8,047.30	Enrollment Office Staff	Various	$35.10	$282,460.23	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	5,120.90	Enrollment Office Staff	Various	$35.10	$179,743.59	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	8,699.70	Enrollment Office Staff	Various	$35.10	$305,359.47	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	4,567.30	Enrollment Office Staff	Various	$35.10	$160,312.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,571.00	**Enrollment Office Staff Total**			$967,742.10		
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	10.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$473.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	25.00	**Feldman, Joyce Total**			$1,184.50		
06-07	1,164.00	Financial Aid Office Staf	Various	$41.66	$48,492.24	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	748.30	Financial Aid Office Staf	Various	$41.66	$31,174.18	Receiving waiver applications	Waiving student fees
06-07	78.90	Financial Aid Office Staf	Various	$41.66	$3,286.97	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
06-07	873.00	Financial Aid Office Staf	Various	$41.66	$36,369.18	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	94.10	Financial Aid Office Staf	Various	$41.66	$3,920.21	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,117.50	Financial Aid Office Staf	Various	$41.66	$46,555.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,075.80	**Financial Aid Office Staff Total**			$169,797.83		
06-07	8.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$886.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin, ords
06-07	4.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$443.48	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	12.00	**Johnson, Penelope Total**			$1,330.44		
06-07	6.00	Moberg, Kathleen	Dean, Admissions & Outreach	$77.52	$465.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	6.00	**Moberg, Kathleen Total**			$465.12		
06-07	125.00	Pabros, Angelita	Division Assistant	$48.40	$6,050.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$6,050.00		
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$351.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$409.57	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	15.00	**Renteria, Matilda Total**			$877.65		
	31,989.80	**Grand Total**			$1,158,613.55		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$96,325,678		$96,325,678	$612,260	$95,713,418
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,739,842		9,739,842	124,585	9,615,257
Course and Curriculum Development	6020	292,951		292,951	45,482	247,469
Academic/Faculty Senate	6030	122,350		122,350		122,350
Other Instructional Administration & Instructional Governance	6090	372,931		372,931		372,931
Instructional Support Services	6100					
Learning Center	6110	213,665		213,665	18,454	195,211
Library	6120	3,393,072		3,393,072	36,864	3,356,208
Media	6130	923,299		923,299	25,808	897,491
Museums and Galleries	6140	40,873		40,873		40,873
Academic Information Systems and Technology	6150	690,037		690,037	11,654	678,383
Other Instructional Support Services	6190	237,871		237,871	18,984	218,887
Admissions and Records	6200	3,801,176		3,801,176	12,044	3,789,132
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,840,617		3,840,617		3,840,617
Matriculation and Student Assessment	6320	1,461,425		1,461,425		1,461,425
Transfer Programs	6330	310,872		310,872		310,872
Career Guidance	6340	303,294		303,294	5,786	297,508
Other Student Counseling and Guidance	6390	364,712		364,712		364,712
Other Student Services	6400					
Disabled Students Programs & Services	6420	890,827		890,827	33,263	857,564
Subtotal		$123,325,492	$0	$123,325,492	$945,184	$122,380,308

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,594,784		$1,594,784	$1,852	$1,592,932
Health Services	6440	1,267,671		1,267,671	10,140	1,257,531
Student Personnel Admin.	6450	232,295		232,295		232,295
Financial Aid Administration	6460	1,779,978		1,779,978	15,833	1,764,145
Job Placement Services	6470	902,251		902,251		902,251
Veterans Services	6480					
Miscellaneous Student Services	6490	825,959		825,959	7,262	818,697
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,943,368		3,943,368	3,943,368	0
Custodial Services	6530	3,424,388		3,424,388	3,424,388	0
Grounds Maintenance and Repairs	6550	1,673,547		1,673,547	1,673,547	0
Utilities	6570	2,488,389		2,488,389	2,488,389	0
Other	6590	720,593		720,593	720,593	0
Planning, Policy Making, and Coordination	6600	4,919,265		4,919,265	4,919,265	0
General Inst. Support Services	6700					
Community Relations	6710	1,597,315		1,597,315	1,597,315	0
Fiscal Operations	6720	2,096,060		2,096,060	2,096,060	0
Human Resources Management	6730	2,141,131		2,141,131	2,141,131	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	492,407		492,407	492,407	0
Staff Diversity	6760	222,285		222,285	222,285	0
Logistical Services	6770	6,963,386		6,963,386	6,963,386	0
Management Information Systems	6780	7,620,569		7,620,569	7,620,569	0
Subtotal		$168,231,133	$0	$168,231,133	$39,282,974	$128,948,159

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,137,945		2,137,945	2,137,945	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,598,688		1,598,688	-11,654	1,610,342
Community Service Classes	6820	1,446,393		1,446,393	20,246	1,426,147
Community Use of Facilities	6830	643,078		643,078	53,795	589,283
Economic Development	6840	787,589		787,589	17,235	770,354
Other Community Services & Economic Development	6890	3,273		3,273		3,273
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,132,223		1,132,223		1,132,223
Student and Co-curricular Activities	6960	739,200		739,200		739,200
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	585,789		585,789		585,789
Other Auxiliary Operations	7090	4,135,371		4,135,371	34,704	4,100,667
Physical Property Acquisitions	7100					
(05) Total		$181,440,682	$0	$181,440,682	$41,535,245	$139,905,437
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				29.69%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	581,115	72,364	27,707	27,852		709,038
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300	359,135	32,219	9,659			401,013
Biological Sciences	0400	3,269,817	110,056	148,518	55,466		3,583,857
Business and Management	0500	3,973,396	119,250	20,801	518		4,113,965
Communications	0600	1,447,776	85,597	49,301	7,129		1,589,803
Information Technology	0700	3,735,934	544,219	122,250	44,848		4,447,251
Education	0800	6,203,367	694,000	336,483	120,885		7,354,735
Engineering and Industrial Tech.	0900	4,835,041	205,839	2,826,021	34,573		7,901,474
Fine and Applied Arts	1000	6,860,551	421,122	1,135,055	31,024		8,447,752
Foreign Language	1100	2,548,885	81,069	15,821			2,645,775
Health	1200	3,664,468	532,054	456,025	57,981		4,710,528
Family and Consumer Sciences	1300	929,274	163,069	25,753			1,118,096
Law	1400	249,654	13,470	10,081	12,954		286,159
Humanities (Letters)	1500	10,568,881	369,063	88,559	17,372		11,043,875
Library Science	1600	54,459					54,459
Mathematics	1700	7,142,717	157,779	22,536	8,148		7,331,180
Military Studies	1800						
Physical Sciences	1900	3,671,447	166,734	142,703	20,440		4,001,324
Psychology	2000	1,663,679	30,450	7,436			1,701,565
Public and Protective Services	2100	309,226	9,849	108,203			427,278
Social Sciences	2200	7,376,579	236,910	72,766	45,909		7,732,164
Commercial Services	3000	312,504	5,078	31,811	5,072		354,465
Interdisciplinary Studies	4900	11,619,644	4,207,801	420,388	122,089		16,369,922
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	81,377,549	8,257,992	6,077,877	612,260		96,325,678

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFO[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper[illegible]tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,118,314	1,496,943	124,585		9,739,842
Course and Curriculum Development	6020		243,175	4,294	45,482		292,951
Academic/Faculty Senate	6030		111,081	11,269			122,350
Other Instruct. Admin. & Instruct. Governance	6090		277,214	95,717			372,931
Subtotal - Instructional Administration	**6000**		8,749,784	1,608,223	170,067		10,528,074
Instructional Support Services (6100)							
Learning Center	6110	121,034	73,595	582	18,454		213,665
Library	6120		2,917,750	438,458	36,864		3,393,072
Media	6130		789,087	108,404	25,808		923,299
Museums and Galleries	6140		38,211	2,662			40,873
Academic Information Systems and Tech.	6150		464,307	214,076	11,654		690,037
Other Instructional Support Services	6190		171,521	47,366	18,984		237,871
Subtotal - Instructional Support Services	**6100**	121,034	4,454,471	811,548	111,764		5,498,817
Admissions and Records	**6200**		3,437,473	351,659	12,044		3,801,176
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,760,129	80,488			3,840,617
Matriculation and Student Assessment	6320		1,413,285	48,140			1,461,425
Transfer Programs	6330		295,941	14,931			310,872
Career Guidance	6340		265,121	32,387	5,786		303,294
Other Student Counseling and Guidance	6390		333,516	31,196			364,712
Subtotal - Student Counseling and Guidance	**6300**		6,067,992	207,142	5,786		6,280,920

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		589,525	268,039	33,263		890,827
Extended Opportunity Prgms. & Services (EOPS)	6430		1,516,371	76,561	1,852		1,594,784
Health Services	6440		906,845	350,686	10,140		1,267,671
Student Personnel Administration	6450		222,927	9,368			232,295
Financial Aid Administration	6460		1,630,022	134,123	15,833		1,779,978
Job Placement Services	6470		238,689	663,562			902,251
Veterans Services	6480						
Miscellaneous Student Services	6490		730,978	87,719	7,262		825,959
Subtotal - Other Student Services	**6400**		5,835,357	1,590,058	68,350		7,493,765
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,334,730	421,440	187,198		3,943,368
Custodial Services	6530		2,331,300	1,093,088			3,424,388
Grounds Maintenance and Repairs	6550		1,527,439	144,589	1,519		1,673,547
Utilities	6570			2,488,389			2,488,389
Other Operation and Maintenance of Plant	6590		449,360	260,206	11,027		720,593
Subtotal - Operation and Maintenance of Plant	**6500**		7,642,829	4,407,712	199,744		12,250,285
Planning, Policymaking, and Coordination	**6600**		2,191,644	2,127,107	600,514		4,919,265

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,187,155	340,235	69,925		1,597,315
Fiscal Operations	6720		2,062,060	7,767	26,233		2,096,060
Human Resources Management	6730		1,898,904	237,722	4,505		2,141,131
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		256,491	234,500	1,416		492,407
Staff Diversity	6760		212,801	5,963	3,521		222,285
Logistical Services	6770		3,107,699	3,739,027	116,660		6,963,386
Management Information Systems	6780		6,040,836	1,211,683	368,050		7,620,569
Other General Institutional Support Services	6790		566,613	1,571,332			2,137,945
Subtotal - General Institutional Support Services	**6700**		15,332,559	7,348,229	590,310		23,271,098
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		91,103	1,519,239	(11,654)		1,598,688
Community Service Classes	6820		882,891	543,256	20,246		1,446,393
Community Use Facilities	6830		436,501	152,782	53,795		643,078
Economic Development	6840		308,051	462,303	17,235		787,589
Other Community Svcs. & Economic Development	6890			3,273			3,273
Subtotal - Community Services	**6800**		1,718,546	2,680,853	79,622		4,479,021

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper[illegible]tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,134,836	(2,613)			1,132,223
Student and Co-curricular Activities	6960		697,562	41,638			739,200
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,832,398	39,025			1,871,423
Auxiliary Operations (7000)							
Contract Education	7010	7,050	357,609	221,130			585,789
Other Auxiliary Operations	7090		3,402,241	698,426	34,704		4,135,371
Subtotal - Auxiliary Operations	**7000**	7,050	3,759,850	919,556	34,704		4,721,160
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					12,748,416	12,748,416
Student Aid	7320						
Other Outgo	7330					822,209	822,209
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					13,570,625	13,570,625
TOTAL EXPENDITURES and OTHER OUTGO	**391**	81,505,633	69,280,895	28,168,989	2,485,165	13,570,625	195,011,307

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	130,496
Avg. time p/account	3.7
Total Time (in minutes)	482835
Per Hour	60
Hours Worked (** **11**)	**8047.3**
***EFC 2**	83,041
Avg. time p/student	3.7
Total Time (in minutes)	307252
Per Hour	60
Hours Worked (** **12**)	**5120.9**
***EFC 1**	130,496
Avg. time p/question	4.0
Total Time (in minutes)	521984
Per Hour	60
Hours Worked (** **13**)	**8699.7**
***EFC 2**	83,041
Avg. time p/file	3.3
Total Time (in minutes)	274035
Per Hour	60
Hours Worked (** **14**)	**4567.3**
***EFC 4**	13,908
Avg. time p/account	4.9
Total Time (in minutes)	68149
Per Hour	60
Hours Worked (** **15**)	**1135.8**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	3.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	24,942
Avg. time p/question	2.8
Total Time (in minutes)	69838
Per Hour	60
Hours Worked **(** 21)**	**1164.0**
***EFW 6**	24,942
Avg. time p/application	1.8
Total Time (in minutes)	44896
Per Hour	60
Hours Worked **(** 22)**	**748.3**
***EFW 6**	24,942
Avg. time p/evaluation	2.1
Total Time (in minutes)	52378
Per Hour	60
Hours Worked **(** 23)**	**873.0**
***EFW 8**	1,821
Avg. time p/application	3.1
Total Time (in minutes)	5645
Per Hour	60
Hours Worked **(** 24)**	**94.1**
***EFW 7**	23,121
Avg. time p/application	2.9
Total Time (in minutes)	67051
Per Hour	60
Hours Worked **(** 25)**	**1117.5**
***EFW 8**	1,821
Avg. time p/application	2.6
Total Time (in minutes)	4735
Per Hour	60
Hours Worked **(** 26)**	**78.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Aced, Shawna	Associate Registrar	3	2	3	2	3	4
Almendarez, Susan	A&R Assistant	5	3	3	2	2	3
Amit Jr., Roland	A&R Supervisor	5	3	5	3	3	3
Bowers, Shelly	A&R Assistant	2		2			
Brewer, Pam	Admissions Assistant	5	2	5			3
Cheney, Melodie	Admissions Assistant	7	7	4	6		
Cole, Sheri	Admissions Assistant	3	3	4	3		
Crumpton, Dina	Administrative Assistant	3	3	5	3		
Deshpande, Mrinmate Hemant	A&R Assistant	7	9	5	4	10	10
Dickard, Jeff	Admissions Assistant	2	1	3	2		
Elwell, Jean	Admissions Coordinator	3	1	1	3		
Fifield, Patricia	Associate Registrar	3	3	5	3		
Furuhata, Eri	Part-time Student Worker	4	4	5	4	4	2
Furukawa, Nami	Part-time Student Worker	1	5	3	10	10	5
Ichimura, Sachie	Part-time Student Worker	5	4	5	3	5	4
uchi, Mineko	General Assistant	2	2	2	3.5	2.5	2
Jamello, Catrina	Admissions Assistant	4	3	4	3		
Johnson, Barry	Admissions Supervisor	4	5	3	3		
Jung, Henry	Day Supervisor	2	3	3	5	2	3
Kaliangara, Araceli	Admissions Assistant	8	7	6	4		
Kaur, Jasmeet	Part-time Student Worker	5	5	2	5	5	5
Khaola Or, Orawan	Senior Cashier	3	3	5	1	5	7
Lam, Phong	Outreach Assistant			3			
Mathis Dawson, Oudia	A&R Transcript	3	3	3	1	3	
Nakayama, Cindy	Admissions Assistant	4	3	2	3		
Neumann, Irmgard	Admissions Assistant	4	3	4	3		
Okuneva, Yelena	Part-time Student Worker	2	2	4	5	3	1
Pabros, Angelita	Division Administrative Assistant	4	3	2	3		
Pena-Ferrick, Joan	Admissions Assistant	3	6	4	3		
Pojhan, Atousa	A&R Assistant	5	1	5	2		
Roberts, Brian	Admissions Assistant	3	3	5	3		
Santa Cruz, Andrea	Admissions Assistant	4	3	4	3		
Slayton, Virginia	A&R Assistant	5	7	6	6	6	4
Snowden, Betty	Admissions Coordinator	3	3	5	3		
Terranova, Cheryl	Clerk	2	2	3	1		
Thai, Binh	Admissions Assistant	3	5	5	3		
Ting, Judy	Admissions Assistant	5	10	10	3		
Tomalinas, Robert	Admissions Evaluation Specialist	4	4	4	4		
Wood, Patricia	Cashiering Services Coordinator	5	3	5	2	12	3
Zimmerman, Brian	A&R Assistant	1	3	2	2	3	2
Average		3.7	3.7	4.0	3.3	4.9	3.8

Conclusion: Findings go forward to Schedule 1A.

Schedule 2
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16

*EFC Workload Multiplier (Default)
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

**Activity Codes
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR for Enrollment Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 2 and Foothill PHR list.
Findings:

Staff	Title	PHR 06-07
Aced, Shawna	Associate Registrar	55.19
Almendarez, Susan	A&R Assistant	39.72
Amit Jr., Roland	A&R Supervisor	40.25
Bowers, Shelly	A&R Assistant	45.75
Brewer, Pam	Admissions Assistant	45.98
Cheney, Melodie	Admissions Assistant	43.66
Cole, Sheri	Admissions Assistant	32.62
Crumpton, Dina	Administrative Assistant	36.29
Deshpande, Mrinmate Hemant	A&R Assistant	39.63
Dickard, Jeff	Admissions Assistant	32.78
Elwell, Jean	Admissions Coordinator	53.31
Fifield, Patricia	Associate Registrar	60.62
Furuhata, Eri	Part-time Student Worker	8.21
Furukawa, Nami	Part-time Student Worker	9.96
Ichimura, Sachie	Part-time Student Worker	10.15
Iguchi, Mineko	General Assistant	10.15
Jamello, Catrina	Admissions Assistant	33.73
Johnson, Barry	Admissions Supervisor	50.72
Jung, Henry	Day Supervisor	46.23
Kaliangara, Araceli	Admissions Assistant	29.16
Kaur, Jasmeet	Part-time Student Worker	8.27
Khaola Or, Orawan	Senior Cashier	27.35
Lam, Phong	Outreach Assistant	13.23
Mathis Dawson, Oudia	A&R Transcript	42.17
Nakayama, Cindy	Admissions Assistant	27.49
Neumann, Irmgard	Admissions Assistant	16.93
Okuneva, Yelena	Part-time Student Worker	9.04
Pabros, Angelita	Division Administrative Assistant	48.40
Pena-Ferrick, Joan	Admissions Assistant	47.08
Pojhan, Atousa	A&R Assistant	31.01
Roberts, Brian	Admissions Assistant	34.83
Santa Cruz, Andrea	Admissions Assistant	10.80
Slayton, Virginia	A&R Assistant	46.83
Snowden, Betty	Admissions Coordinator	50.01
Terranova, Cheryl	Clerk	45.07
Thai, Binh	Admissions Assistant	53.60
Ting, Judy	Admissions Assistant	48.60
Tomalinas, Robert	Admissions Evaluation Specialist	40.47
Wood, Patricia	Cashiering Services Coordinator	45.04
Zimmerman, Brian	A&R Assistant	33.49
Average		**35.10**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Aneja, Bhrigu	Clerical Assistant	2	1		1		
Appell, Bradley	Student Employee	2	1				
Bellon, Ryan	FA Outreach Assistant	5	2	1	2	2	5
Castillo, Cindy	Director, Financial Aid	1	1				
Chacon, Beatriz	Director, Financial Aid	2	1	2			1
Chavez, Antoinette	FA Outreach Assistant	3	1	1	4	2	2
Chen, I	FA Outreach Coordinator	2	2	3	3	1	1
Christensen, Josephine	FA Outreach Assistant	5	2	3	5	5	5
Claros, Randy	FA Outreach Assistant	2	2	2	5	5	3
Duong, Tung	Financial Aid Assistant	3	2	3	3	2	2
Feldman, Joyce	Financial Aid Assistant	3	5	3	10	7	4
Godinez, Christy	Financial Aid Assistant	2	2	1			
Henderson, April	EOPS Specialist	3		1		5	
Hunter, Karen	Financial Aid Assistant	1					
Joyner, Lindsey	Student Employee	2	1				
Lam, Phong	Outreach Assistant	3					
Lambrecht, Donna	Sr. Administrative Assistant	4	1				
McCarty, Camilie	Admissions Assistant	1	1	1	2		
Mieso, Rob	Program Coordinator	5					
Mondik, Patricia	Financial Aid Assistant	6	3	2			
Nava, Tobias	EOPS Counselor	3	1	3			
Nguyen, Thao	FA Outreach Assistant	2	1	2	1	1	
O'Malley, Dawna	Financial Aid Assistant	2	1	1	2	2	1
Pardo, Ines	EOPS Program Sewrvices Coordinator	6	3	4	4		
Renteria, Matilda	Financial Aid Coordinator	3	2	5	3	5	3
Rodriguez, Jorge	Sr. EOPS Specialist	4		1			
Tun, Yamin	Clerical Assistant	2	1		1	2	
Van, Nina	FA Outreach Assistant	2	5	1	2	1	2
Witkop, Inna	FA Outreach Assistant	3	1	2	2	2	2
Wu, Tilly	EOPS Counselor	1	1	2	3	1	
Average		**2.8**	**1.8**	**2.1**	**3.1**	**2.9**	**2.6**

Conclusion: Findings go forward to Schedule 1B.

Schedule 3
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26

***EFW Workload Multiplier (Default)**

EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answ
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibi
24 - Incomplete Applications: Notifying the student of the additional required information. Holding th in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering informati Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Pr notification to student of final eligibility status.

Schedule 3A
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Average PHR for Financial Office Staff

Purpose: To summarize productive hourly rates for staff performing Enrollment Fee Collection Functions.
Source: Sch. 3 and Foothill PHR list.
Findings:

Staff	Title	PHR 06-07
Aneja, Bhrigu	Clerical Assistant	10.15
Appell, Bradley	Student Employee	14.52
Bellon, Ryan	FA Outreach Assistant	33.09
Castillo, Cindy	Director, Financial Aid	75.10
Chacon, Beatriz	Director, Financial Aid	77.82
Chavez, Antoinette	FA Outreach Assistant	35.66
Chen, I	FA Outreach Coordinator	44.47
Christensen, Josephine	FA Outreach Assistant	38.89
Claros, Randy	FA Outreach Assistant	35.70
Duong, Tung	Financial Aid Assistant	46.79
Feldman, Joyce	Financial Aid Assistant	47.38
Godinez, Christy	Financial Aid Assistant	46.68
Henderson, April	EOPS Specialist	36.78
Hunter, Karen	Financial Aid Assistant	35.58
Joyner, Lindsey	Student Employee	15.07
Lam, Phong	Outreach Assistant	13.23
Lambrecht, Donna	Sr. Administrative Assistant	57.57
McCarty, Camille	Admissions Assistant	15.97
Mieso, Rob	Program Coordinator	57.92
Mondik, Patricia	Financial Aid Assistant	42.94
Nava, Tobias	EOPS Counselor	58.90
Nguyen, Thao	FA Outreach Assistant	31.29
O'Malley, Dawna	Financial Aid Assistant	42.97
Pardo, Ines	EOPS Program Sewrvices Coordinator	57.82
Renteria, Matilda	Financial Aid Coordinator	58.51
Rodriguez, Jorge	Sr. EOPS Specialist	51.85
Tun, Yamin	Clerical Assistant	12.17
Van, Nina	FA Outreach Assistant	38.57
Witkop, Inna	FA Outreach Assistant	44.03
Wu, Tilly	EOPS Counselor	72.37
Average		**41.66**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Foothill-De Anza Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274	130,496
EFC 2	1.8-1	2.	Paid Enrollment fees	104,031	101,576	99,492	106,432	109,954	99,673	90,840	94,773	83,041
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012	23,121
EFC 4	1.8-2	1.	Delinquencies collections	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763	13,908
EFC 5	1.8-2	2.	Refunds									
EFW 6	1.8-3	1.	Waivers Requested	X								24,942
EFW 7	1.8-3	2.	Waivers Approved	X -	6,088	5,873	6,199	7,619	9,201	9,917	10,442	23,121
EFW 8	1.8-3 (1-2)		Waivers Denied	X								1,821

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Friday, May 18, 2012

Student Demographics By Academic Year

Student Headcount
For Deanza For 2006-2007
Data Current As Of May 18, 2012 01:50:40

Download The Result in Comma Delimited Format

Headcount
40,529

Back to Top of Page

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California Home Friday, May 18, 2012

Student Demographics By Academic Year

Student Headcount
For Foothill For 2006-2007
Data Current As Of May 18, 2012 01:50:29

Download The Result In Comma Delimited Format

Headcount
32,668

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 06 07

Susan Bloom
Employee Name

Fin Aid Coordinator
Exact Position Title

Fin Aid
Department/Location

8227
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4		7
/ /	1A 1B 2A 2B (3) 4		7
/ /	1A 1B 2A 2B 3 (4)		35
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Bloom Date 9/24/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Cindy Castillo — Employee Name

Dir Fin Aid — Exact Position Title

Fin Aid — Department/Location

8403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		30
/ /	1A 1B (2A) 2B 3 4		3
/ /	1A 1B 2A 2B 3 (4)		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Castillo Date 9/19/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Beatriz Chacon
Employee Name

Director, Financial Aid & EOPS
Exact Position Title

Fin Aid/EOPS
Department/Location

650 949-7223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		12
/ /	1A 1B 2A 2B (3) 4		40
/ /	1A 1B 2A 2B 3 (4)		16
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hansel for Beatriz Date 10-5-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Lee Collings — Employee Name

Webmaster — Exact Position Title

Marketing — Department/Location

650 949-2647 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
6/1/06	1A 1B 2A 2B 3 4	Prep for 8007 listing	5
2/10/07	1A 1B 2A 2B 3 4	Code Updates	10
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

05-06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lee Collings Date 10-8-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA

Fiscal Year: 06-07

Joyce Feldman
Employee Name

FA A552
Exact Position Title

Fin Aid
Department/Location

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4		5
/ /	1A 1B 2A (2B) 3 4		10
/ /	1A 1B 2A 2B (3) 4		5
/ /	1A 1B 2A 2B 3 (4)		5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 9/20/07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Penelope Johnson
Employee Name

Dean, Counseling & St. Support
Exact Position Title

Counseling & St. Support
Department/Location

650 949-7163
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4		8
/ /	1A 1B 2A 2B 3 (4)		4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Penelope Johnson for Penelope Date 10-5-07

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 06-07

Kathleen Moberg — Employee Name

Dean, Admissions and Outreach — Exact Position Title

DA / Admissions — Department/Location

408 864-8292 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	(1A) 1B 2A 2B 3 4	Updates/review of catalog/sched.	4
/ /	(1A) 1B 2A 2B 3 4	Updates/review of Outreach mtls	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

6 months

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Moberg Date 9-17-07

If you have any questions, please contact Kathleen Moberg, at 408-864-8292

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Foothill-De Anza Fiscal Year: 06-07

Angelita Pabros — Employee Name

Division Assistant — Exact Position Title

Admissions/Deanza — Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Respond to 1098T questions	125/yr
/ /	1A 1B 2A 2B 3 4	13minutes @ 10% of Students	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	6yrs@125 = 750hr	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrig for Angelita Pabros Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FHDA Fiscal Year: 06-07

Matilda Renteria
Employee Name

Fin Aid Coordinator
Exact Position Title

Financial Aid - Foothill 650-949-7247 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/ 06	1A (1B) 2A 2B 3 4	review app & new income standards	1
5/ 106	1A 1B 2A (2B) 3 4	update staff of new procedures	1
8/ 107	1A 1B 2A 2B (3) 4	Verify BOG Waiver pool	2
8/ 107	1A 1B 2A 2B 3 (4)	review new units & update screen	3.5
9/ 107	1A 1B 2A 2B 3 (4)	update new accounts w/ MIS code	2
9/ 107	1A 1B 2A 2B (3) 4	review report & correct	2
10/ 107	1A 1B 2A 2B (3) 4	review Cm's total submitted	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

* 3.5 total
** 2 total

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Matilda Renteria Date 10/5/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA Department/Location Foothill Admissions and Records

Employee Name Shawna Acad Exact Position Title Associate Registrar

Telephone # 7771 Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA Department/Location Admission + Records-FT

Employee Name Susan Almendarez Exact Position Title Admission + Records Assistant

Telephone # 650-949-7518 Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: ~~05-06~~ ~~06-07~~ ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susan Almendarez Date 10-30-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FOOTHILL DE ANZA

Department/Location FH A+R

Employee Name ROLAND AMIT

Exact Position Title A+R SUPERVISOR

Telephone # 7112

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 ~~06-07~~ 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ARA Date 10/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL / DE ANZA
District

SHELLY BOWERS
Employee Name

Department/Location ADMISSIONS/FOOTHILL

ADMISSIONS & RECORDS ASSISTANT
Exact Position Title

(650) 941-7643
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 MIN					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 MIN					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shelly Bowers Date 10/30/07

If you have any questions, please contact HENRY JUNG, at 949-7004

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL DE ANZA

District

Department/Location ADMISSIONS - FIN.

PAM BREWER

Employee Name

ADMISSIONS ASST.

Exact Position Title

x7003

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature NOT AVAILABLE TO SIGN Date 10.30.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R / De Anza

District — Department/Location

Melodie Cheney — Admissions Asst.

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melodie D. Cheney — Date 9.14.07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — A&R De Anza

District — Department/Location

Sheri Cole — admissions assistant

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza

District

Dina Crumpton
Employee Name

A & R / De Anza Admin asst.
Department/Location
Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen McKeag for Dina Crumpton Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza District — A&R Foothill Campus.
District — Department/Location

Manmale Deshpande — A & R Assistant
Employee Name — Exact Position Title

650-949-7644 — (12mo/11mo/10mo/hrly) Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~
Telephone # — Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MDeshpande — Date 10/29/07

If you have any questions, please contact Manmale Deshpande at 949-7644.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill De Anza
District

A=R De Anza
Department/Location

Jeff Dickard
Employee Name

ADMISSIONS Asst
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeff Dickard Date 9/19/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza

District

A&R | De Anza

Department/Location

Jean Elwell

Employee Name

Admissions Coordinator

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrig for Jean Elwell Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — A2R | De Anza

District — Department/Location

Patricia Fifield — Associate Registrar

Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judith Mohr for Pat Fifield Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location A-1R - FH

Employee Name ERI FURUKATA

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7004

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA — District

A+HR - FTI — Department/Location

NAMI FURUKAWA — Employee Name

PART TIME STUDENT WORKER — Exact Position Title

7221004 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08 — **Circle the years for which you are responding.**

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location Admissions and Records - FH

Employee Name SACHIE ICHIMURA

Exact Position Title Part Time Student Worker

Telephone # 7XXX

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ : TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Admissions & Records - FH

District

Mineko Iguchi
Employee Name

Department/Location

General Assistant
Exact Position Title

650-996-3215
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	~2 mins					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	~2 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	~2 mins					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~3.4 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	~2.3 mins					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~2 mins					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mineko Iguchi Date 10/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza
District

A&R De Anza
Department/Location

Catrina Jamello
Employee Name

Admissions Asst.
Exact Position Title

Telephone # Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohney for Catrina Jamello Date 9-17-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

Barry Johnson

Employee Name

A & R / De Anza

Department/Location

Admissions Supervisor

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barry Johnson Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District Foothill De Anza Department/Location Foothill Admissions and Record

Employee Name Henry Jinn Exact Position Title Dean Supervisor

Telephone # 7054 Work year ~~length~~(circle) 12mo/11mo/10mo/hrly Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29OCT2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R | De Anza
District — Department/Location

Araceli Kaliangara — admissions asst
Employee Name — Exact Position Title

Telephone # — Work year length(circle): (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload *multiplier* from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mor for Araceli Kaliangara Date 9-17-07

If you have any questions, please contact A. Kaliangara, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location ADM - FH

Employee Name JASMEET KAUR

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7-704

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - DeAnza

District

ORAWAN KHDELA CK

Employee Name

Department/Location

A & R - FH

Exact Position Title

718-9

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3				✓	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					✓
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					✓
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1			✓		
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature

Date 10.29.2

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location

Phong Lam
Employee Name

Outreach Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	NA					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	NA					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	NA					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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NAME : OLIDIA MATHIS

EFCW 1.7-2

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

MATHIS
OLIVIA DAWSON

Employee Name

Department/Location

A+R Transcripts -- FH

Exact Position Title

USD 949 7517

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: ~~05-06~~ 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivia Dawson Date 10/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill- De Anza — A&R | DE ANZA
District — Department/Location

Cindy Nakeshima — ADMISSIONS ASST.
Employee Name — Exact Position Title

Telephone # — Work year length(circle): (12mo/11mo/10mo/hrly) — Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligibie for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Nakashima — Date 9-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - Planter

District

A & R Planter

Department/Location

Irmgard Neumann

Employee Name

Admissions asst

Exact Position Title

Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mothersead Date 9-07-07

If you have any questions, please contact Irmgard Neumann, at

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Employee Name Helena Okuneva

Department/Location AHR - FH

Exact Position Title PART TIME STUDENT WORKER

Telephone # 7004

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — A≥R De Anza
District — Department/Location

Angelita Pabros — Division Admin Asst.
Employee Name — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle) — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angelita Pabros for Angelita Pabros — Date 9-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill-De Anza — A&R | De Anza
District — Department/Location

Joan Penn-Ferrick — Admissions Asst
Employee Name — Exact Position Title

Telephone # — Work year length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joan E Penn-Ferrick Date 09/18/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location

Atousa Pojhan
Employee Name

A&R Assistant
Exact Position Title

408-864-8503
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a *good faith estimate* which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Atousa PJ Date 9/18/07

If you have any questions, ~~please contact~~ _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

Brian Roberts

Employee Name

A&R / De Anza

Department/Location

Admissions Assistant

Exact Position Title

Telephone # Work year length(circle) 12mo/11mo/10mo/hrly Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza

District

A & R De Anza

Department/Location

Andrea Santa Cruz

Employee Name

Admissions Asst.

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle) Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Mohrington Date 9-17-07

If you have any questions, please contact Andrea Santa Cruz, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill
District

Virginia Slayton
Employee Name

Admissions & Records - FH
Department/Location

Exact Position Title

7772
Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Virginia Slayton Date 10/29/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza — A:R De-Anza

District — Department/Location

Betty Snowden — Admissions Coordinator

Employee Name — Exact Position Title

Telephone # — Work year length(circle): 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Betty Snowden — Date 9-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill College — District

Admissions & Records - FH — Department/Location

Cheryl Terranova — Employee Name

Clerk — Exact Position Title

949-7773 — Telephone #

Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Cheryl A. Terranova Date 10-29-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FOOTHILL - De Anza

District

A&R | De Anza

Department/Location

Binh Thai

Employee Name

ADMISSIONS Assistant

Exact Position Title

Telephone #

Work year length(circle) (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-19-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill | De Anza — District

AIR | De Anza — Department/Location

Judy Ting — Employee Name

Admissions assistant — Exact Position Title

Telephone # — Work year-length(circle) 12mo/11mo/10mo/hrly — Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy Ting Date 9-18-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill- De Anza

District

A & R | De Anza

Department/Location

Robert Tomalinas

Employee Name

Admissions Evaluation & Specialist

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/18/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District EHDA

Department/Location CASHIERS DEPT. / A+R

Employee Name PATRICIA WOOD

Exact Position Title CASHIERING SERVICES COORD

Telephone # 7331

Work year length (circle) 12mo/11mo/10mo/hrly

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 29 OCT 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FOOTHILL DE ANZA

Department/Location A + R - FH

Employee Name BRIAN ZIMMERMAN

Exact Position Title ADMISSIONS AND RECORDS ASST

Telephone # 7674

Work year length(circle) (12mo/11mo/10mo/hrly

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature NOT AVAILABLE TO SIGN Date 10/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Bhrigu Aneja
Employee Name

Department/Location Fin Aid

Clerical Assistant III
Exact Position Title

12mo/11mo/10mo/hrly
Work year length(circle)

Telephone #

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mathila Kanter for Bhrigu Aneja Date 10/5/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Department/Location Fin Aid

Bradley Appell

Employee Name

Student Employee

Exact Position Title

650-298-5098

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9.26.07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District FHDA

Department/Location FA

Employee Name Ryan Bellon

Exact Position Title FA Outreach Asst

5370

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding. 12

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/3/07 10/3/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

~~FHDA~~

District

Department/Location ~~FA~~ Dir of Fin Aid

Cindy Castillo

Employee Name

Exact Position Title

8403

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Castillo Date 9/19/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Fin Aid

Department/Location

Beatriz Chavez

Employee Name

Director, Financial Aid & EOPS

Exact Position Title

650 949-7223

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hammond for Beatriz Date 10-5-07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Antoinette Chavez
Employee Name

Department/Location Fin Aid, FH

Financial Aid Outreach Assistant
Exact Position Title

650-949-7572
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Antoinette Chavez Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid, FH

I Chen
Employee Name

FA Outreach Coordinator
Exact Position Title

650-949-7376
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature I Chen Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Josephine Christensen
Employee Name

Financial Aid Outreach Assistant
Exact Position Title

650.949.6987
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Josephine Date 10/2/07

If you have any questions, please contact Josephine Christensen, at 650-949-6987

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Randy Claros
Employee Name

FA Outreach Asst
Exact Position Title

8266
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/21/07

If you have any questions, please contact Randy Claros, at (408) 864-8266

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Department/Location Fin Aid

Tung Duong

Employee Name

Financial Aid Assistant

Exact Position Title

650-949-7051

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10/5/07

ou have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PHDA
District

FA
Department/Location

Joyce Feldman
Employee Name

FA Asst
Exact Position Title

8377
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Feldman Date 9/21/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Fin Aid
Department/Location

Christy Godinez
Employee Name

Financial Aid Asst I
Exact Position Title

650-949-7246
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Godinez Date 10/5/07

ou have any questions, please contact _____, at

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza — District

EOPS/Foothill College — Department/Location

April C. Henderson — Employee Name

EOPS Specialist — Exact Position Title

(650) 949-7207 x 7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~05-06~~ 06-07 ~~07-08~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. Henderson Date 10/3/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Karen Hunter
Employee Name

FA
Department/Location

Fin Aid Asst
Exact Position Title

8229
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Hunter Karen Hunter Date 9/20/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

EHOA

District

Lindsey Joyner
Employee Name

Department/Location Fin Aid

Temp FA Employee
Exact Position Title

_____

12mo/11mo/10mo/hrly (hrly)

Fiscal Year: 05-06 06-07 (06-07) 07-08

Telephone # Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Hamad for Lindsey Joyner Date 9-26-07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Department/Location Outreach Assistant

Phong Lam
Employee Name

Exact Position Title

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Telephone #

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	NA			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	NA			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	NA			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Date 9/18/07

If you have any questions, please contact , at

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foot Hill - De Anza
District

Donna Lambrecht
Employee Name

Sr. Admin. Asst. II
Department/Location
Exact Position Title

650/949-7037
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/3/07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Heathhill - De Anza — District

Air De Anza — Department/Location

Camille McCarty — Employee Name

Admissions asst. — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	WNBA 1 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	WNBA min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1-3 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0 min			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0 min			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Camille McCarty Date 9-19-07

If you have any questions, please contact _____, at _____

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Phong Ro — Outreach

EFCW 1.7-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill - De Anza
District

Department/Location

Rob Meisel
Employee Name

Program Coordinator
Exact Position Title

864-8835
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data ~~or have~~ provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-17-07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA

District

Patricia Mondik
Employee Name

Department/Location Fin Aid
Financial Aid Assn
Exact Position Title

650.949.7470 (12mo/11mo/10mo/hrly) Fiscal Year: 05-06 06-07 07-08

Telephone # Work year length(circle)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9.26.07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill/De Anza — District

EOPS - Foothill — Department/Location

Idonis Nava — Employee Name

EOPS Counselor — Exact Position Title

(650) 949-7036 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06, 06-07, 07-08 (06-07 circled)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Idonis Nava — Date 10-2-07

If you have any questions, please contact _____, at _____

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ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location FA

Thao Nguyen
Employee Name

FA Outreach Asst
Exact Position Title

5562
Telephone #

Work year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cindy Caprio for Thao Nguyen Date — out on maternity

If you have any questions, please contact _____ at 9/19/07 leave until mid-late October.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PHDA
District

FA
Department/Location

Dawna O'Malley
Employee Name

FA Asst
Exact Position Title

8368
Telephone #

12mø/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D O'Malley Date 9/21/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

~~Foothill – De Anza~~

District

Department/Location

Chris Pardo

Employee Name

EOPS Program Serv. Coordinator

Exact Position Title

650/ 949-7200

Telephone #

12mo/11mo/10mo/hrly

Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~0~~			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	~~0~~			

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Employee Signature [signature] Date 10/3/07

If you have any questions, please contact x 6143, at

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Matilda Renteria
Employee Name

Department/Location Fin Aid

Fin Aid Coordinator
Exact Position Title

650-949-7247
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			

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Employee Signature Matilda Renteria Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location EOPS - FH

Jorge A. Rodriguez
Employee Name

Senior EOPS Specialist
Exact Position Title

(650) 949-7636
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/25/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Yamin Tun
Employee Name

Clerical Assistant IV
Exact Position Title

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Telephone #

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Mohlda Santos for Yamin Tun Date 10/5/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

FA
Department/Location

Nina Van
Employee Name

FA Outreach Asst
Exact Position Title

5431
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

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Employee Signature N Nguyen Van Date 9/19/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FHDA
District

Department/Location Fin Aid

Inna Witkop
Employee Name

Exact Position Title

650.949.7710
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
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Employee Signature Witkop Date 10/05/07

If you have any questions, please contact _____ at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Foothill / De Anza
District

Department/Location

Tally L. Wu
Employee Name

EOPS / Foothill EOPS Counselor
Exact Position Title

(650) 949-7182
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Tally L. Wu Date 10/3/07

If you have any questions, please contact _____, at _____

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1.8-1

Headcount Enrollment by Enrollment Type, Year, and Term
Foothill-De Anza Community College District
Enrollment Status = E, Credits Attempted > 0, Residency excludes non-residents

Bold Red = estimated

Enrollment Type	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
Total Enrollment	Summer	24,299	25,708	24,862	25,592	27,606	26,909	25,345	24,958	25,169
(#1 form EFCW 1.8-1)	Fall	38,141	39,229	38,374	40,251	41,164	40,182	37,643	37,834	38,605
	Winter	33,796	33,401	35,124	37,952	36,440	35,371	35,205	35,082	34,516
	Spring	31,082	31,246	31,656	35,528	34,021	32,698	32,366	**32,400**	32,206
	Total	127,318	129,584	130,016	139,323	139,231	135,160	130,559	130,274	130,496
Enroll Fee Charged	Summer	23,747	21,393	20,098	20,175	22,181	23,571	21,196	22,232	19,805
	Fall	34,278	35,368	33,567	34,399	36,315	35,508	32,775	34,357	31,295
	Winter	30,002	29,561	29,796	32,671	31,799	30,600	29,493	30,696	27,781
	Spring	29,375	29,060	28,948	32,665	31,757	29,767	29,110	**29,500**	27,281
	Total	117,402	115,382	112,429	119,910	122,052	119,446	112,574	116,785	106,162
Enroll Fee BOGG	Summer	**2,166**	2,256	2,076	1,874	2,487	2,934	2,998	3,500	4,012
Waivers	Fall	**3,960**	4,074	3,846	3,799	4,641	5,662	6,337	6,500	6,715
#3 form EFCW 1.8-1)	Winter	**3,634**	3,774	3,493	3,823	4,504	5,592	6,198	6,038	6,219
	Spring	**3,612**	3,702	3,522	3,982	466	5,585	6,201	**5,974**	6,175
	Total	13,372	13,806	12,937	13,478	12,098	19,773	21,734	22,012	23,121
Net Fee Paid	Summer	21,581	19,137	18,022	18,301	19,694	20,637	18,198	18,732	15,793
Charged less Bogg)	Fall	30,318	31,294	29,741	30,600	31,674	29,846	26,438	27,857	24,580
#2 form EFCW 1.8-1)	Winter	26,369	25,787	26,303	28,848	27,295	25,008	23,295	24,658	21,562
	Spring	25,763	25,358	25,426	28,683	31,291	24,182	22,909	**23,526**	21,106
	Total	104,031	101,576	99,492	106,432	109,954	99,673	90,840	**94,773**	83,041

Note: This table has been updated with 2006-07 data; figures for 2005-06 have not been revised and hence still include estimated figures.

Source: Query of IR&P Data Warehouse Deborah; see Brio query "Enrollment Fee Collection Data.bqy"; query on 5/19/06; 12/7/07

HDA IR&P - RBB - 5/19/06; Updated with 2006-07 figures 12/11/07

12/11/07

1.8-2

Enrollment Fee Accounts Receivable Requiring Collection as of census date each term

Source: RDB 3rd Week database except where noted End of Term database
Spe Enrollment Status = E, Aa765 Current Balance >= $17.00, Curr Attempted Hrs > 0.00
Residency Status ~= N (i.e., is a resident student)
Note: For 99-00 and prior years, Spe Enrollment Status field not available

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
De Anza									
Sum	**626**	**131**	**171**	**161**	**600**	**765**	275	961	998
Fall	2,144	1,435	601	632	681	912	1,231	3,017	3,095
Wtr	1,483	799	634	508	524	550	2,251	2,431	2,592
Spr	1,215	987	546	476	662	615	2,101	2,374	2,438
Total	5,468	3,352	1,952	1,777	2,467	2,842	5,858	8,783	9,123
Foothill									
Sum	**314**	**141**	**125**	**128**	**352**	**429**	133	608	698
Fall	1,139	970	382	738	435	507	812	1,655	1,757
Wtr	742	566	346	326	418	340	1,430	1,342	1,181
Spr	768	688	546	307	344	409	1,332	1,375	1,149
Total	2,963	2,365	1,399	1,499	1,549	1,685	3,707	4,980	4,785

The following for #1 on form EFCW 1.8-2

District Totals									
Sum	**940**	**272**	**296**	**289**	**952**	**1,194**	408	1,569	1,696
Fall	3,283	2,405	983	1,370	1,116	1,419	2,043	4,672	4,852
Wtr	2,225	1,365	980	634	942	890	3,681	3,773	3,773
Spr	1,983	1,675	1,092	783	1,006	1,024	3,433	3,749	3,587
Total	8,431	5,717	3,351	3,276	4,016	4,527	9,565	13,763	13,908

Note: Bold red figures (bold only in hardcopy) are End-of-term figures as 3rd Week databases were not available for Summers 1998 to 2003.

FHDA IR&P - RBB - 5/22/06; updated with 06-07 figures 12/11/07

[server\Projects\Enrollment Fee Reimbursement\Hdcnt requiring collection.xls]

12/11/07

BOGG Enrollment Fee Waiver Counts by Term

1.8-3

	2006M	2006F	2007W	2007S	
Net Enroll Waiver	4,012	6,715	6,219	6,175	23,121
No Net Enroll Waiver	444	501	456	420	
Total	4,456	7,216	6,675	6,595	24,942

Source: Query of RMS Billing Table 12/11/07; See Brio "BOGG Enrollment Fee Waiver Counts.bqy"

DA IR&P - RBB - 12/11/07

1.8-4

Enrollment Fee Collection & Waivers
Mandated Cost Claim
Prepared by Bret Watson

	Account	Object	2004/05	2005/06	2006/07
	141000	0965	$117,339	$121,924	$103,589
	144400	0965	5,749,616	5,830,944	5,002,767
	142000	0966	213,990	218,770	188,224
	144400	0966	$10,483,345	$10,493,151	$9,236,454
1	Enrollment Fee Revenue - Net		**$16,564,290**	**$16,664,790**	**$14,531,035**
	144400	0971	$1,122,467	$1,210,961	$1,016,763
	144400	0972	$2,898,655	$2,959,438	$2,560,386
2	Enrollment Fees Waived		**$4,021,121**	**$4,170,399**	**$3,577,149**
3	2% Enrollment Fees Waived		**$80,422**	**$83,408**	**$71,543**
4	Number of Credit Units for which enrollment fees were waived		**262,247**	**245,318**	**210,421**
	Credit Course Unit Costs			$17	$17

Notes

Item #1, (Enrollment Fee Revenue Net) and item #2, (Enrollment Fees Waived) was pulled using Brio.

Item #3 (2% Enrollment Fees Waived) is computed by multiplying Enrollment Fees waived by 2%.

Item #4 (Number of Credit Units for which enrollment fees were waived), is calculated by taking the Enrollment fees waived divided by the costs per unit.

06/07 Enrollment Fee Collection/Waiver- Productive Hourly Rate

Name	Title	Employment term	Productive Hours	Labor	Benefits	Total Salary	PHR
ACED, SHAWNA D	ASSOCIATE REGISTRAR	12-months	1800	67,912	31,429	99,341	55.19
ALMENDAREZ, SUSAN ELLEN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	49,725	21,768	71,492	39.72
AMIT JR, ASTER ROLAND	ADMISSIONS & RECORDS SUPV	12-months	1800	50,554	21,894	72,447	40.25
ANEJA, BHRIGU	STUDENT EMPLOYEE		315	3,150	48	3,198	10.15
APPELL, BRADLEY TOBIN	STUDENT EMPLOYEE		390	5,580	84	5,664	14.52
BELLON, RYAN S	FINANCIAL AID OUTREACH ASST	12-months	1800	40,603	18,954	59,557	33.09
BLOOM, SUSAN LYNN	FINANCIAL AID COORDINATOR	12-months	1800	65,118	30,907	96,025	53.35
BOWERS, SHELLY L	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,692	28,654	82,345	45.75
BREWER, PAMELA S	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,968	28,799	82,767	45.98
CASTILLO, CINDY	DIR, FINANCIAL AID & SCHOLARSH	12-months	1800	103,317	31,869	135,186	75.10
CHACON, BEATRIZ CORONADO	DIRECTOR, FINANCIAL AID	9-months	1350	75,829	29,227	105,056	77.82
CHAVEZ, ANTOINETTE	FINANCIAL AID OUTREACH ASST	12-months	1800	43,619	20,567	64,186	35.66
CHEN, I	FINANCIAL AID OUTREACH COORD	12-months	1800	55,568	24,480	80,048	44.47
CHENEY, MELODIE DAWN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	55,715	22,881	78,596	43.66
CHRISTENSEN, JOSEPHINE THROWER	FINANCIAL AID OUTREACH ASST	12-months	1800	47,230	22,779	70,010	38.89
CLAROS, RANDY L	FINANCIAL AID OUTREACH ASST	12-months	1800	42,317	21,935	64,251	35.70
COLE, SHERI L	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	37,796	20,924	58,720	32.62
COLLINGS, EARL	COLLEGE WEB COORDINATOR, SR	12-months	1800	106,910	33,797	140,707	78.17
CRUMPTON, DINA D	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	44,560	20,760	65,320	36.29
DESHPANDE, MRINMAIE HEMANT	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	44,476	26,855	71,331	39.63
DICKARD, JEFFREY C	DEGREE AUDIT SPECIALIST	12-months	1800	39,304	19,694	58,998	32.78
DUONG, TUNG THI	FINANCIAL AID ASSISTANT	12-months	1800	55,255	28,963	84,218	46.79
ELWELL, JEAN	ADMISSIONS & RECORDS COORD	12-months	1800	70,176	25,782	95,958	53.31
FELDMAN, JOYCE K	FINANCIAL AID ASSISTANT	12-months	1800	61,259	24,019	85,278	47.38
FIFIELD, PATRICIA A	ASSOCIATE REGISTRAR	12-months	1800	81,201	27,911	109,112	60.62
FURUHATA, ERI	STUDENT EMPLOYEE		505	4,086	62	4,148	8.21
FURUKAWA, NAMI	STUDENT EMPLOYEE		306	3,001	45	3,047	9.96
GODINEZ, CHRISTY	FINANCIAL AID ASSISTANT	12-months	1800	60,203	23,813	84,016	46.68
HENDERSON, APRIL COLONNA	EOPS SPECIALIST	12-months	1800	45,298	20,904	66,202	36.78
HUNTER, KAREN KAY	FINANCIAL AID ASSISTANT	12-months	1800	43,529	20,523	64,052	35.58
ICHIMURA, SACHIE	STUDENT EMPLOYEE		200	2,000	30	2,030	10.15
IGUCHI, MINEKO	STUDENT EMPLOYEE		1041	10,405	157	10,562	10.15
JAMELLO, CATRINA MAREE	ADMISSIONS & RECORDS ASSISTANT	3-months	450	10,224	4,954	15,178	33.73
JOHNSON, BARRY W	ADMISSIONS & RECORDS SUPV	12-months	1800	66,289	25,000	91,290	50.72
JOHNSON, PENELOPE A	DEAN, COUNSEL & STUDENT SUPP	12-months	1800	162,657	36,909	199,566	110.87
JOYNER, LINDSEY WU	STUDENT EMPLOYEE		306	3,901	712	4,613	15.07
JUNG, HENRY	ADMISSIONS & RECORDS SUPV	12-months	1800	59,527	23,681	83,208	46.23
KALIANGARA, ARACELI	VETERANS PROGRAM COORDINATOR	12-months	1800	33,824	18,665	52,488	29.16
KAUR, JASMEET	STUDENT EMPLOYEE		742	6,118	15	6,133	8.27
KHAOLA OR, ORAWAN	CASHIER, SENIOR	12-months	1800	33,647	15,576	49,223	27.35
LAM, PHONG CAM	STUDENT EMPLOYEE		931	11,864	449	12,313	13.23
LAMBRECHT, DONNA WOLF	ADMINISTRATIVE ASSISTANT, SR	12-months	1800	71,466	32,156	103,622	57.57
MATHIS, OUDIA K	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,418	22,489	75,906	42.17
MCCARTY, CAMILLE BARBARA	STUDENT EMPLOYEE		420	6,506	202	6,707	15.97
MIESO, ROB ROBA	PROGRAM COORDINATOR II	12-months	1800	77,138	27,118	104,256	57.92
MOBERG, KATHLEEN S KIEHL	DEAN, ADMISSIONS & RECORDS	10-months	1500	87,927	28,358	116,285	77.52
MONDIK, PATRICIA	FINANCIAL AID ASSISTANT	12-months	1800	49,620	27,672	77,292	42.94
NAKAYAMA, CINDY J	ADMISSIONS & RECORDS ASSISTANT	11-months	1650	27,858	17,500	45,358	27.49

NEUMANN, IRMGARD G	STUDENT EMPLOYEE		445	6,893	641	7,534	16.93
NGUYEN, THAO PHUONG	FINANCIAL AID OUTREACH ASST	12-months	1800	37,881	18,440	56,321	31.29
OKUNEVA, YELENA IVANOVNA	STUDENT EMPLOYEE		305	2,682	74	2,756	9.04
O'MALLEY, DAWNA LEE	FINANCIAL AID ASSISTANT	12-months	1800	54,620	22,723	77,344	42.97
PABROS, ANGELITA M	DIVISION ADMINISTRATIVE ASST	12-months	1800	57,650	29,462	87,111	48.40
PARDO, INES C	EOPS SERVICES COORDINATOR	12-months	1800	71,792	32,278	104,070	57.82
PENA-FERRICK, JOAN	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	61,043	23,698	84,741	47.08
POJHAN, ATOUSA	ADMISSIONS & RECORDS ASSISTANT	3-months	450	10,069	3,887	13,956	31.01
RENTERIA, MATILDA P	FINANCIAL AID COORDINATOR	12-months	1800	72,859	32,468	105,326	58.51
ROBERTS, BRIAN R	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	42,391	20,301	62,691	34.83
RODRIGUEZ, JORGE A	EOPS SPECIALIST, SENIOR	12-months	1800	62,808	30,528	93,336	51.85
SANTACRUZ, ANDREA R	STUDENT EMPLOYEE	12-months	1800	16,416	3,025	19,440	10.80
SLAYTON, VIRGINIA E	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	59,195	25,101	84,296	46.83
SNOWDEN, BETTY J	ADMISSIONS & RECORDS COORD	12-months	1800	63,980	26,034	90,014	50.01
TERRANOVA, CHERYL A	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	53,587	27,538	81,125	45.07
THAI, BINH N	ADMISSIONS & RECORDS COORD	12-months	1800	65,676	30,805	96,481	53.60
TING, JUDY LEE	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	63,107	24,380	87,487	48.60
TOMALINAS, ROBERT T	EVALUATION SPECIALIST	12-months	1800	51,114	21,740	72,854	40.47
TUN, YAMIN	STUDENT EMPLOYEE		538	6,450	98	6,548	12.17
VAN, NINA NGUYEN	FINANCIAL AID OUTREACH ASST	12-months	1800	47,966	21,458	69,425	38.57
WITKOP, INNA	FINANCIAL AID OUTREACH ASST	12-months	1800	51,296	27,951	79,247	44.03
WOOD, PATRICIA MAY	CASHIERING SERVICES COORD	12-months	1800	57,746	23,333	81,079	45.04
WU, TILLY LIU	COUNSELOR	12-months	1800	95,040	35,218	130,258	72.37
ZIMMERMAN, BRIAN M	ADMISSIONS & RECORDS ASSISTANT	12-months	1800	40,377	19,908	60,284	33.49

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
3 Page(s) attachment

FAX TRANSMITTAL

DATE: November 30, 2007

FAX TO: ~~Bret Watson~~ Brianne Bramwell
Foothill-De Anza Community College District
650-941-1638

FROM: ~~Keith Petersen~~ KBP Bret Watson

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection & Waivers
Fiscal Year: **2006-2007**

PLEASE RESPOND BY: December 13, 2007

In order to complete the above referenced claim we need the statistics for 06-07. Forms EFCW 1.8-1, 1.8-2, and 1.8-3 are attached for your convenience.

Also we need the following PHR:

Name	Title	2006-07 PHR
Nava, Tobias	EOPS Counselor	$ 58.20

Thank you

KBP:te

06/07 Enrollment Fee Collection/Waiver- Productive Hourly Rate

Name	Title	Employment term	Productive Hours	Labor	Benefits	Total Salary	PHR
NAVA, TOBIAS B.	COUNSELOR	12-months	1800	79,261.7	26,752.57	106,014	58.90

12-12-07 10:31am From-Foothill De Anza CCD 650 941 1638 T-585 P.002/007 F-073

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Foothill-DeAnza Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE DEAN	$ 85.15	$ 92.12
	AVERAGE DIRECTOR	$ 80.97	$ 84.19
	AVERAGE EXECUTIVE ASSISTANT	$ 48.01	$ 57.84
	AVERAGE PRESIDENT		$ 155.09
	AVERAGE VICE PRESIDENT	$ 86.74	$ 102.31
ACED, SHAWNA	ASSOCIATE REGISTRAR		$ 55.19
ALMENDAREZ, SUSAN ELLEN	ADMISSIONS & RECORDS ASSISTANT		$ 39.72
ALFSEN, KAREN	DEAN, LANGUAGE ARTS	$ 89.21	$ 96.76
AMIT JR., ASTER ROLAND	ADMISSIONS & RECORDS ASSISTANT		$ 40.25
ANEJA, BURIGU	STUDENT EMPLOYEE		$ 10.15
APPELL, BRADLEY TOBIN	STUDENT EMPLOYEE		$ 14.52
AWOSANYA, OLUFEMI	CAMPUS SECURITY		14.16
BALDWIN, WILLIAM	PROGRAMMER ANALYST I	$ 53.59	59.26
BARR, ROBERT B	EXEC DIR, INST RESEARCH & PLAN		$ 96.36
BARTCH, JOHN W.	WORKSTATION & SYSTEMS SUPPORT TECH	$ 54.19	$ 59.96

Foothill-De Anza Community College District
308/95 Enrollment F Collection and Waivers
Fiscal Years: 19 0 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 7,010,023	$ 6,889,391	$ 7,428,945	$ 7,486,552	$ 12,177,874	$ 16,564,290	$ 16,664,790	$ 14,531,035
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 140,200	$ 137,788	$ 148,579	$ 149,731	$ 243,557	$ 331,286	$ 333,296	$ 290,621
		Note: The above collection revenue offsets were not used -- see above report from CCCCO's website.							
1.8-4 line 4A	Enrollment Fees Waived	$ 1,089,971	$ 1,038,000	$ 1,090,896	$ 1,294,220	$ 2,589,000	$ 4,021,121	$ 4,170,399	$ 3,577,143
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408	$ 71,543
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 76,298	For 00-01 through 04-05 - unit fee						
1.8-4 line 5	Summer								
	Fall								
	Winter/Interssion								
	Spring								
	Total # of credits	148,632	148,286	155,842	184,889	250,548	262,247	245,318	210,421
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239	$ 191,483
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 21,799	$ 20,760	$ 21,818	$ 25,884	$ 51,780	$ 80,422	$ 83,408	$ 71,543
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 76,298							
1.8-4 5	Credit Units Waived		$ 134,940	$ 141,816	$ 168,249	$ 227,999	$ 238,645	$ 223,239	$ 191,483
Total Offset Savings	**Forward to EFCW-1**	**$ 98,097**	**$ 155,700**	**$ 163,634**	**$ 194,133**	**$ 279,779**	**$ 319,067**	**$ 306,647**	**$ 263,026**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Foothill-DeAnza
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$79,479,677	$75,465,494	$-999,045	$74,466,449
ENROLL FEE ADMIN (2%)	83,949	77,233	6,716	83,949
APPRENTICE ALLOWANCE	1,994,427	1,839,113	155,314	1,994,427
BASIC SKILLS	75,350	0	75,350	75,350
S.F.A.A.	932,829	858,202	74,627	932,829
E.O.P.S.	1,863,275	1,709,758	153,517	1,863,275
C.A.R.E.	184,817	170,031	14,786	184,817
D.S.P.S.	4,304,019	3,959,698	344,321	4,304,019
STATE HOSPITALS	0	0	0	0
CALWORKS	501,042	426,381	74,661	501,042
MATRICULATION (CREDIT)	2,290,322	2,107,097	183,225	2,290,322
MATRIC. (NONCREDIT)	96,100	88,412	7,688	96,100
FAC.& STAFF DIVERSITY	29,937	27,542	2,395	29,937
PART-TIME FAC. ALLO.	1,475,772	1,357,711	118,061	1,475,772
PART-TIME FAC. OFF. HRS	269,434	0	269,434	269,434
PART-TIME FAC. INS.	62,776	0	62,776	62,776
TELECOMMUNICATIONS	93,916	67,523	26,393	93,916
PLANT & INSTRUCTIONAL	370,294	340,672	29,622	370,294
SCHDL. MAINT. & REPAIR	370,328	340,701	29,627	370,328
TANF	82,945	76,310	6,635	82,945
ECON. DEVELOPMENT	655,000	550,200	0	550,200
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	791,639	791,639	0	791,639
PRIOR YEAR CORRECTION	2,854,879	2,854,879	0	2,854,879
ONE TIME FUNDS				
TRANSITION PAYMENT	4,254,804	4,254,804	0	4,254,804
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	657,378	657,378	0	657,378
BASIC SKILLS -REAPPROP	162,792	162,792	0	162,792
CAR. TECH. TRAILER BIL	1,170,713	1,170,713	0	1,170,713
GEN. PUR. TRAILER BILL	2,290,332	2,290,332	0	2,290,332
INST. MATERIAL TRAILER	1,382,039	1,382,039	0	1,382,039
SCHLD.MAINT. TRAILER B	1,382,039	1,382,039	0	1,382,039
FACULTY STAFF DEV	147,119	147,119	0	147,119
TOTAL	$110,319,943	$104,565,812	$636,103	$105,201,915

FISCAL SERVICES:06/22/07 44055.636 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Foothill-De Anza Com[illegible]nity College District
308/95 Enrollment Fe[illegible]ections and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 771.04	$ 1,057.59	$ 941.40	$ 1,062.35	$ 1,551.25	$ 4,025.80	$ 3,615.30	$ 3,482.25
	EFCW-1 B. 1. b.		$ 853.65	$ 729.50	$ 960.98	$ 1,096.48	$ 2,594.75	$ 2,430.88	$ 2,363.45	$ 1,131.06
	EFCW-1 B. 2. a.		$ 12,965.44	$ 9,399.93	$ 7,650.25	$ 9,431.88	$ 17,526.08	$ 34,719.36	$ 20,497.55	$ 11,792.87
	EFCW-1 B. 2. b.		$ 39,563.09	$ 44,241.93	$ 48,993.81	$ 67,846.29	$ 81,016.00	$ 90,475.52	$ 105,072.91	$ 169,797.83
	EFCW-1 B. 2. c.		$ 4,315.70	$ 12,256.20	$ 10,232.20	$ 8,971.80	$ 10,209.95	$ 11,255.54	$ 11,218.07	$ 4,202.32
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 58,468.92	$ 67,685.15	$ 68,778.64	$ 88,408.80	$ 112,898.03	$ 142,907.10	$ 142,767.28	$ 190,406.33
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 98,097.00	$ 155,700.00	$ 163,634.00	$ 194,133.00	$ 279,779.00	$ 319,067.00	$ 306,647.00	$ 263,026.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (39,628.08)	$ (88,014.85)	$ (94,855.36)	$ (105,724.20)	$ (166,880.97)	$ (176,159.90)	$ (163,879.72)	$ (72,619.67)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 58,468.92**	**$ 67,685.15**	**$ 68,778.64**	**$ 88,408.80**	**$ 112,898.03**	**$ 142,907.10**	**$ 142,767.28**	**$ 190,406.33**

Print Date: 12/28/2007
FOOT EFCW 06-07array

SixTen and Associates
te 11/30/07

California Home Friday, May 18, 2012

Student Financial Aid Awards

Deanza College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 18, 2012 01:51:39

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	98	30,693
BOGW - Part A-2 based on SSI recipient status	385	160,934
BOGW - Part A-3 based on general assistance recipient status	1	150
BOGW - Part B based on income standards	2,071	580,609
BOGW - Part C based on financial need	4,483	1,770,435
Fee Waiver – Dependent child of deceased or disabled Veteran	10	4,075

Total Amount = $ 2,546,896

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California Home Friday, May 18, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Foothill College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 18, 2012 01:51:25

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	14	4,962
BOGW - Part A-2 based on SSI recipient status	16	3,440
BOGW - Part B based on income standards	1,361	358,957
BOGW - Part C based on financial need	1,831	642,725
Fee Waiver – Dependent child of deceased or disabled Veteran	16	3,817

Total Amount = $ 1,013,901

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Sixten and Associates
Mandate Reimbursement Services

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Claim File Copy

January 30, 2009

CERTIFIED MAIL #7006 3450 0000 3941 9007

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Foothill-DeAnza Community College District CC 43045

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Foothill-DeAnza Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC43045
(02) Claimant Name: Foothill-De Anza Community College District
County of Location: Santa Clara
Street Address or P.O. Box: 12345 El Monte Road
City: Los Altos Hills | State: CA | Zip Code: 94022

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,341,331
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 1,331,331
Due from State	(08)	(17) $ 1,331,331
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	465
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	967,742
(25) EFCW-1, (04)(B)(1)(a)(f)	3,482
(26) EFCW-1, (04)(B)(1)(b)(f)	1,131
(27) EFCW-1, (04)(B)(2)(a)(f)	11,793
(28) EFCW-1, (04)(B)(2)(b)(f)	169,798
(29) EFCW-1, (04)(B)(2)(c)(f)	4,202
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	457,073
(32) EFCW-1, (09)	83,949
(33) EFCW-1, (10)	190,406
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1-29-09

Andrew Dunn
Type or Print Name

Vice Chancellor, Business Services
Title

Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 1 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Foothill-De Anza Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2006-2007

(03) Leave Blank

Direct Costs	**Object Accounts**					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 465.12	$ -	$ -	$ -	$ -	$ 465.12
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 967,742.10	$ -	$ -	$ -	$ -	$ 967,742.10
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 3,482.25	$ -	$ -	$ -	$ -	$ 3,482.25
b. Staff training (One time per employee)	$ 1,131.06	$ -	$ -	$ -	$ -	$ 1,131.06
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 11,792.87	$ -	$ -	$ -	$ -	$ 11,792.87
b. Waiving student fees	$ 169,797.83	$ -	$ -	$ -	$ -	$ 169,797.83
c. Reporting BOG fee waiver data to CCC	$ 4,202.32	$ -	$ -	$ -	$ -	$ 4,202.32
(05) Total Direct Costs	$ 1,158,613.55	$ -	$ -	$ -	$ -	$ 1,158,613.55

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.69%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 343,992.36
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,502,605.91
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 83,949.00
(10) Enrollment Fee Waiver offsets		$ 190,406.33
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,228,250.58

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F[illegible]l-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Moberg, Kathleen Dean, Admissions & Outreach	$77.52	6.0	$ 465.12				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 465.12	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

ill-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$35.10	8,047.3	$ 282,460.23				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$35.10	5,120.9	$ 179,743.59				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$35.10	8,699.7	$ 305,359.47				
Up written and computer records for enrollment fee information Enrollment Office Staff Various	$35.10	4,567.3	$ 160,312.23				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$35.10	1,135.8	$ 39,866.58				
05) Total ☒ Subtotal ☐		Page 1 of 1	$ 967,742.10	$ -	$ -	$ -	$ -

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

Foothill-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Castillo, Cindy	Director, Financial Aid	$75.10	30.0	$ 2,253.00				
Chacon, Beatriz	Director, Financial Aid	$77.82	12.0	$ 933.84				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐				$ 3,482.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
F[illegible]l-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Castillo, Cindy	Director, Financial Aid	$75.10	3.0	$ 225.30				
Feldman, Joyce	Financial Aid Assistant	$47.38	10.0	$ 473.80				
Renteria, Matilda	Financial Aid Coordinator	$58.51	1.0	$ 58.51				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,131.06	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Foothill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bloom, Susan	Financial Aid Coordinator	$53.35	7.0	$ 373.45				
Chacon, Beatriz	Director, Financial Aid	$77.82	40.0	$ 3,112.80				
Collings, Lee	Webmaster	$78.17	10.0	$ 781.70				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	8.0	$ 886.96				
Pabros, Angelita	Division Assistant	$48.40	125.0	$ 6,050.00				
Renteria, Matilda	Financial Aid Coordinator	$58.51	6.0	$ 351.06				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 11,792.87	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
hill-De Anza Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$41.66	1,164.0	$ 48,492.24				
Receiving waiver applications Financial Aid Office Staff Various	$41.66	748.3	$ 31,174.18				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$41.66	873.0	$ 36,369.18				
I g students of additional documentation requirements and how to obtain information Financial Aid Office Staff Various	$41.66	94.1	$ 3,920.21				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$41.66	1,117.5	$ 46,555.05				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Various	$41.66	78.9	$ 3,286.97				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 169,797.83	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

ll-De Anza Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Bloom, Susan	Financial Aid Coordinator	$53.35	35.0	$ 1,867.25				
Chacon, Beatriz	Director, Financial Aid	$77.82	16.0	$ 1,245.12				
Feldman, Joyce	Financial Aid Assistant	$47.38	5.0	$ 236.90				
Johnson, Penelope	Dean, Counseling & Student Support	$110.87	4.0	$ 443.48				
Renteria, Matilda	Financial Aid Coordinator	$58.51	7.0	$ 409.57				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,202.32	$ -	$ -	$ -	$ -

New 04/06

Foothill-De Anza Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2007

Su...y Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$1,867.25	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Bloom, Susan	Financial Aid Coordinator	$53.35	$373.45	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	49.00	**Bloom, Susan Total**			$2,614.15		
06-07	30.00	Castillo, Cindy	Director, Financial Aid	$75.10	$2,253.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	3.00	Castillo, Cindy	Director, Financial Aid	$75.10	$225.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	33.00	**Castillo, Cindy Total**			$2,478.30		
06-07	40.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$3,112.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	16.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$1,245.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	12.00	Chacon, Beatriz	Director, Financial Aid	$77.82	$933.84	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	68.00	**Chacon, Beatriz Total**			$5,291.76		
2/10/2007	10.00	Collings, Lee	Webmaster	$78.17	$781.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining ...rds
	10.00	**Collings, Lee Total**			$781.70		
06-07	1,135.80	Enrollment Office Staff	Various	$35.10	$39,866.58	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	8,047.30	Enrollment Office Staff	Various	$35.10	$282,460.23	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	5,120.90	Enrollment Office Staff	Various	$35.10	$179,743.59	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	8,699.70	Enrollment Office Staff	Various	$35.10	$305,359.47	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	4,567.30	Enrollment Office Staff	Various	$35.10	$160,312.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,571.00	**Enrollment Office Staff Total**			$967,742.10		
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	5.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$236.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	10.00	Feldman, Joyce	Financial Aid Assistant	$47.38	$473.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	25.00	**Feldman, Joyce Total**			$1,164.50		
06-07	1,164.00	Financial Aid Office Staff	Various	$41.66	$48,492.24	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	748.30	Financial Aid Office Staff	Various	$41.66	$31,174.18	Receiving waiver applications	Waiving student fees
06-07	78.90	Financial Aid Office Staff	Various	$41.66	$3,286.97	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
06-07	873.00	Financial Aid Office Staff	Various	$41.66	$36,369.18	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	94.10	Financial Aid Office Staff	Various	$41.66	$3,920.21	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,117.50	Financial Aid Office Staff	Various	$41.66	$46,555.05	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,075.80	**Financial Aid Office Staff Total**			$169,797.83		
06-07	8.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$886.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining ...ds
06-07	4.00	Johnson, Penelope	Dean, Counseling & Student Support	$110.87	$443.48	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	12.00	**Johnson, Penelope Total**			$1,330.44		
06-07	6.00	Moberg, Kathleen	Dean, Admissions & Outreach	$77.52	$465.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	6.00	**Moberg, Kathleen Total**			$465.12		
06-07	125.00	Pabros, Angelita	Division Assistant	$48.40	$6,050.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	125.00	**Pabros, Angelita Total**			$6,050.00		
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	1.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$58.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$351.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	7.00	Renteria, Matilda	Financial Aid Coordinator	$58.51	$409.57	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	15.00	**Renteria, Matilda Total**			$877.65		
	31,989.80	**Grand Total**			$1,158,613.55		

06/07

3. **ACCOUNTS RECEIVABLE** (Continued)

Contributions Receivable

Contributions receivable with the Foundation as of June 30, 2007 consist of the following:

Due within one year	$ 544,456
Due within one to five years	1,459,034
Discount	(213,086)
Contributions receivable, net	$ 1,790,404

4. **CAPITAL ASSETS**

Capital asset activity consists of the following:

	Balance July 1, 2006	Additions	Reductions	Balance June 30, 2007
Land	$ 2,489,776			$ 2,489,776
Land improvements	33,391,245	$ 1,856,230		35,247,475
Building improvements	96,090,093	21,262,130		117,352,223
Portable buildings	5,237,527	35,533		5,273,060
Buildings	138,343,518	3,243,621		141,587,139
Equipment	19,980,649	2,059,194		22,039,843
Software	1,484,707	265,724		1,750,431
Construction work in progress	77,901,049	61,827,497	$ (26,859,232)	112,869,314
Total	374,918,564	90,549,929	(26,859,232)	438,609,261
Less accumulated depreciation:				
Land improvements	8,492,855	3,145,410		11,638,265
Building improvements	45,521,799	9,663,232		55,185,031
Portable buildings	1,476,369	350,353		1,826,722
Buildings	35,934,581	2,799,307		38,733,888
Equipment	16,269,026	1,120,654		17,389,680
Software	1,296,388	142,090		1,438,478
Total	108,991,018	17,221,046		126,212,064
Capital assets, net	$ 265,927,546	$ 73,328,883	$ (26,859,232)	$ 312,397,197

9,663,232
350,353
2,799,307
(a) $12,812,892

1,120,654
142,090
(b) $1,262,744

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	646,696	102,638	27,059	7,472		783,865
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300	469,206	42,831	12,900			524,937
Biological Sciences	0400	3,630,760	163,768	229,803	51,641		4,075,972
Business and Management	0500	4,204,336	159,242	26,692			4,390,270
Communications	0600	1,533,058	97,685	71,181	26,366		1,728,290
Information Technology	0700	3,924,858	596,415	108,052	3,109		4,632,434
Education	0800	6,593,345	897,448	466,154	57,620		8,014,567
Engineering and Industrial Tech.	0900	5,213,052	258,625	2,580,087	27,873		8,079,637
Fine and Applied Arts	1000	7,552,574	519,498	1,496,019	27,662		9,595,753
Foreign Language	1100	3,013,158	176,649	13,309			3,203,116
Health	1200	4,034,816	491,529	499,800	35,469		5,061,614
Family and Consumer Sciences	1300	801,537	213,032	29,379			1,043,948
Law	1400	313,013	22,973	13,831	9,315		359,132
Humanities (Letters)	1500	11,480,112	343,799	108,578	15,116		11,947,605
Library Science	1600	57,401					57,401
Mathematics	1700	7,807,746	350,981	12,157	65,891		8,236,775
Military Studies	1800						
sical Sciences	1900	3,966,736	194,450	165,688	18,215		4,345,089
Psychology	2000	1,641,186	37,696	7,723			1,686,605
Public and Protective Services	2100	297,832	10,282	128,018			436,132
Social Sciences	2200	7,802,338	330,727	150,891			8,283,956
Commercial Services	3000	345,682	6,781	15,896			368,359
Interdisciplinary Studies	4900	12,402,884	4,707,611	592,113	128,799		17,831,407
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	87,732,326	9,724,660	6,755,330	474,548		104686,864

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Foothill-DeAnza Community College District **420** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		8,289,340	1,507,936	79,780		9,877,056
Course and Curriculum Development	6020		233,119	4,006	20,106		257,231
Academic/Faculty Senate	6030		144,163	10,490			154,653
Other Instruct. Admin. & Instruct. Governance	6090		198,393	109,653	691		308,737
Subtotal - Instructional Administration	**6000**		8,865,015	1,632,085	100,577		10,597,677
Instructional Support Services (6100)							
Learning Center	6110	94,582	106,121	12,107	5,020		217,830
Library	6120		3,191,981	604,490	29,915		3,826,386
Media	6130		1,590,561	200,995	6,715		1,798,271
Museums and Galleries	6140		97,926	1,907			99,833
Academic Information Systems and Tech.	6150		556,773	121,567	17,011		695,351
Other Instructional Support Services	6190		247,554	23,592	55,407		326,553
Subtotal - Instructional Support Services	**6100**	94,582	5,790,916	964,658	114,068		6,964,224
Admissions and Records	**6200**		3,496,271	230,336	6,563		3,733,170
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		4,011,004	51,864	1,422		4,064,290
Matriculation and Student Assessment	6320		1,819,872	195,005	87,869		2,102,746
Transfer Programs	6330		283,032	5,000			288,032
Career Guidance	6340		293,528	15,201			308,729
Other Student Counseling and Guidance	6390		299,004	20,014	3,343		322,361
Subtotal - Student Counseling and Guidance	**6300**		6,706,440	287,084	92,634		7,086,158

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Foothill-DeAnza Community College District | 420 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		678,049	284,667	47,638		1,010,354
Extended Opportunity Prgms. & Services (EOPS)	6430		1,606,198	115,472	1,455		1,723,125
Health Services	6440		887,879	467,663	7,953		1,363,495
Student Personnel Administration	6450		270,305	11,567			281,872
Financial Aid Administration	6460		1,751,601	92,451			1,844,052
Job Placement Services	6470		215,924	748,401			964,325
Veterans Services	6480						
Miscellaneous Student Services	6490		758,721	126,021	3,745		888,487
Subtotal - Other Student Services	**6400**		6,168,677	1,846,242	60,791		8,075,710
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		3,789,818	553,882	407,333		4,751,033
Custodial Services	6530		2,695,173	1,426,660			4,121,833
Grounds Maintenance and Repairs	6550		1,723,073	170,426			1,893,499
Utilities	6570			2,207,939			2,207,939
Other Operation and Maintenance of Plant	6590		536,857	260,141	32,916		829,914
Subtotal - Operation and Maintenance of Plant	**6500**		8,744,921	4,619,048	440,249		13,804,218
Planning, Policymaking, and Coordination	**6600**		3,127,190	2,340,796	1,144,935		6,612,921

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Foothill-DeAnza Community College District | 420 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,281,566	472,265	17,452		1,771,283
Fiscal Operations	6720		2,341,622	(60,509)	79,122		2,360,235
Human Resources Management	6730		1,754,845	291,635	4,387		2,050,867
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		286,145	326,981			613,126
Staff Diversity	6760		180,330	24,928			205,258
Logistical Services	6770		3,307,048	4,134,882	156,292		7,598,222
Management Information Systems	6780		6,682,608	1,261,398	576,882		8,520,888
Other General Institutional Support Services	6790		568,025	865,352			1,433,377
Subtotal - General Institutional Support Services	**6700**		16,402,189	7,316,932	834,135		24,553,256
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		90,105	1,736,996			1,827,101
Community Service Classes	6820		933,971	658,591	62,595		1,655,157
Community Use Facilities	6830		400,916	175,882	9,484		586,282
Economic Development	6840		441,640	225,367			667,007
Other Community Svcs. & Economic Development	6890			1,883			1,883
Subtotal - Community Services	**6800**		1,866,632	2,798,719	72,079		4,737,430

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Foothill-DeAnza Community College District | 420 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,275,415	52,198			1,327,613
Student and Co-curricular Activities	6960		818,502	70,365			888,867
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		2,093,917	122,563			2,216,480
Auxiliary Operations (7000)							
Contract Education	7010		284,127	341,469	4,881		630,477
Other Auxiliary Operations	7090		3,537,489	846,157	63,460		4,447,106
Subtotal - Auxiliary Operations	**7000**		3,821,616	1,187,626	68,341		5,077,583
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
total - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					13,544,473	13,544,473
Student Aid	7320						
Other Outgo	7330					904,237	904,237
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					14,448,710	14,448,710
TOTAL EXPENDITURES and OTHER OUTGO	**391**	87,826,908	76,808,444	30,101,419	3,408,920	14,448,710	212,594,401

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Foothill-DeAnza Community College District **420** District Code No.

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$104,686,864		$104,686,864	$474,548	$104,212,316
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,877,056		9,877,056	79,780	9,797,276
Course and Curriculum Development	6020	257,231		257,231	20,106	237,125
Academic/Faculty Senate	6030	154,653		154,653		154,653
Other Instructional Administration & Instructional Governance	6090	308,737		308,737	691	308,046
Instructional Support Services	6100					
Learning Center	6110	217,830		217,830	5,020	212,810
Library	6120	3,826,386		3,826,386	29,915	3,796,471
Media	6130	1,798,271		1,798,271	6,715	1,791,556
Museums and Galleries	6140	99,833		99,833		99,833
Academic Information Systems and Technology	6150	695,351		695,351	17,011	678,340
Other Instructional Support Services	6190	326,553		326,553	55,407	271,146
Admissions and Records	6200	3,733,170		3,733,170	6,563	3,726,607
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	4,064,290		4,064,290	1,422	4,062,868
Matriculation and Student Assessment	6320	2,102,746		2,102,746	87,869	2,014,877
Transfer Programs	6330	288,032		288,032		288,032
Career Guidance	6340	308,729		308,729		308,729
Other Student Counseling and Guidance	6390	322,361		322,361	3,343	319,018
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,010,354		1,010,354	47,638	962,716
Subtotal		$134,078,447	$0	$134,078,447	$836,028	$133,242,419

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,723,125		$1,723,125	$1,455	$1,721,670
Health Services	6440	1,363,495		1,363,495	7,953	1,355,542
Student Personnel Admin.	6450	281,872		281,872		281,872
Financial Aid Administration	6460	1,844,052		1,844,052		1,844,052
Job Placement Services	6470	964,325		964,325		964,325
Veterans Services	6480					
Miscellaneous Student Services	6490	888,487		888,487	3,745	884,742
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	4,751,033		4,751,033	4,751,033	0
Custodial Services	6530	4,121,833		4,121,833	4,121,833	0
Grounds Maintenance and Repairs	6550	1,893,499		1,893,499	1,893,499	0
Utilities	6570	2,207,939		2,207,939	2,207,939	0
Other	6590	829,914		829,914	829,914	0
Planning, Policy Making, and Coordination	6600	6,612,921		6,612,921	6,612,921	0
General Inst. Support Services	6700					
Community Relations	6710	1,771,283		1,771,283	1,771,283	0
Fiscal Operations	6720	2,360,235		2,360,235	2,360,235	0
Human Resources Management	6730	2,050,867		2,050,867	2,050,867	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	613,126		613,126	613,126	0
Staff Diversity	6760	205,258		205,258	205,258	0
Logistical Services	6770	7,598,222		7,598,222	7,598,222	0
Management Information Systems	6780	8,520,888		8,520,888	8,520,888	0
Subtotal		$184,680,821	$0	$184,680,821	$44,386,199	$140,294,622

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Foothill-DeAnza Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,433,377		1,433,377	1,433,377	0
Community Services and Economic Development	6800					
Community Recreation	6810	1,827,101		1,827,101		1,827,101
Community Service Classes	6820	1,655,157		1,655,157	62,595	1,592,562
Community Use of Facilities	6830	586,282		586,282	9,484	576,798
Economic Development	6840	667,007		667,007		667,007
Other Community Services & Economic Development	6890	1,883		1,883		1,883
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,327,613		1,327,613		1,327,613
Student and Co-curricular Activities	6960	888,867		888,867		888,867
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	630,477		630,477	4,881	625,596
Other Auxiliary Operations	7090	4,447,106		4,447,106	63,460	4,383,646
Depreciation or Use Allowance - Building				(a)	12,812,892	
Depreciation or Use Allowance - Equipment				(b)	1,262,744	
(05) Total		$198,145,691	$0	$198,145,691	$60,035,632	$152,185,695
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				39.45%		
(07) Notes						

SixTen and Associates
Mandate Reimbursement Services

H B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Gavilan Community College District CC43060

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Gavilan Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC43060

(02) Claimant Name: Gavilan Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 5055 Santa Teresa Blvd

City: Gilroy | State: CA | Zip Code: 95020-9599

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 470,200	(13) $ 427,505
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 427,505
Due from State	(08) $ 470,200	(17) $ 427,505
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	1,389
(23) EFCW-1, (04)(A)(1)(b)(f)	869
(24) EFCW-1, (04)(A)(2)(a)(f)	327,451
(25) EFCW-1, (04)(B)(1)(a)(f)	105
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	14,789
(29) EFCW-1, (04)(B)(2)(c)(f)	1,564
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	117,332
(32) EFCW-1, (09)	19,536
(33) EFCW-1, (10)	16,457
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 7/11/06

Joseph D. Keeler
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 67	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Gavilan Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 1,388.54	$ -	$ -	$ -	$ -	$ 1,388.54
b. Staff training (One time per employee)	$ 868.80	$ -	$ -	$ -	$ -	$ 868.80
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 326,785.25	$ -	$ 666.20	$ -	$ -	$ 327,451.45
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 104.79	$ -	$ -	$ -	$ -	$ 104.79
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 14,788.52	$ -	$ -	$ -	$ -	$ 14,788.52
c. Reporting BOG fee waiver data to CCC	$ 1,563.84	$ -	$ -	$ -	$ -	$ 1,563.84
05) Total Direct Costs	$ 345,499.74	$ -	$ 666.20	$ -	$ -	$ 346,165.94

ndirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	33.96%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 117,331.71
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 463,497.65
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 19,536.00
0) L Enrollment Fee Waiver offsets		$ 16,457.15
1) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 427,504.50

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Allan Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Iba, Lilibeth Accountant	$43.44	30.0	$ 1,303.20				
Parker, Joy Director, Admissions & Records	$56.89	1.5	$ 85.34				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 1,388.54	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ilan Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Iba, Lilibeth Accountant	$43.44	20.0	$ 868.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 868.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ian Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Calculating total enrollment fee to be collected							
EPOS Corporation Contractor	$100.00	6.7			$ 666.20		
Various enrollment office staf Collecting fees	$35.22	3,656.4	$ 128,778.41				
Referencing student accounts and records							
Various enrollment office staf Collecting fees	$35.22	1,114.8	$ 39,263.26				
Answering student's questions regarding enrollment fee collection							
Various enrollment office staf Collecting fees	$35.22	1,560.7	$ 54,967.85				
ng written and computer records for enrollment fee information							
Various enrollment office staf Collecting fees	$35.22	2,898.4	$ 102,081.65				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Various enrollment office staf Collecting fees	$35.22	48.1	$ 1,694.08				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 326,785.25	$ -	$ 666.20	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Fuentes, Maria (Angeles) Director, Financial Aid	$43.86	2.0	$ 87.72				
Parker, Joy Director, Admissions & Records	$56.89	0.3	$ 17.07				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 104.79	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Entering approved application information into district records; providing student award letter Various financial office staff Waiving enrollment fees	$28.71	109.7	$ 3,149.49				
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Various financial office staff Waiving enrollment fees	$28.71	171.7	$ 4,929.51				
Receiving waiver applications Various financial office staff Waiving enrollment fees	$28.71	95.4	$ 2,738.93				
F ating waiver applications and verifying application documents Various financial office staff Waiving enrollment fees	$28.71	138.3	$ 3,970.59				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 14,788.52	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ian Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Iba, Lilibeth Accountant	$43.44	36.0	$ 1,563.84				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,563.84	$ -	$ -	$ -	$ -

Gavilan Comm[illegible]ity College District
308/95 ENROLLMEN[illegible] COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
2/1/2005	2.00	Fuentes, Maria (Angeles)	Director, Financial Aid	$43.86	$87.72	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	2.00	**Fuentes, Maria (Angeles) Total**			$87.72		
04-05	30.00	Iba, Lilibeth	Accountant	$43.44	$1,303.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	20.00	Iba, Lilibeth	Accountant	$43.44	$868.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	36.00	Iba, Lilibeth	Accountant	$43.44	$1,563.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	86.00	**Iba, Lilibeth Total**			$3,735.84		
04-05	1.50	Parker, Joy	Director, Admissions & Records	$56.89	$85.34	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	0.30	Parker, Joy	Director, Admissions & Records	$56.89	$17.07	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	1.80	**Parker, Joy Total**			$102.41		
04-05	6.66	EPOS Corporation	Contractor	$100.00	$666.20	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
	6.66	**EPOS Corporation Total**			$666.20		
04-05	1,114.80	Various enrollment office staff	Collecting fees	$35.22	$39,263.26	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	3,656.40	Various enrollment office staff	Collecting fees	$35.22	$128,778.41	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	1,560.70	Various enrollment office staff	Collecting fees	$35.22	$54,967.85	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	2,898.40	Various enrollment office staff	Collecting fees	$35.22	$102,081.65	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	48.10	Various enrollment office staff	Collecting fees	$35.22	$1,694.08	Providing refund of enrollment fees paid to students establishing fee waiver after enrollmen	Calculating and collecting enrollment fees
	9,278.40	**Various enrollment office staff Total**			$326,785.25		
04-05	171.70	Various financial office staff	Waiving enrollment fees	$28.71	$4,929.51	Answering student's questions regarding enrollment fee waivers/referring to appropriate pe	Waiving student fees
04-05	95.40	Various financial office staff	Waiving enrollment fees	$28.71	$2,738.93	Receiving waiver applications	Waiving student fees
04-05	138.30	Various financial office staff	Waiving enrollment fees	$28.71	$3,970.59	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	109.70	Various financial office staff	Waiving enrollment fees	$28.71	$3,149.49	Entering approved application information into district records; providing student award lett	Waiving student fees
	515.10	**Various financial office staff Total**			$14,788.52		
	9,889.96	**Grand Total**			$346,165.94		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$9,801,718		$9,801,718	$352,667	$9,449,051
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,217,962		2,217,962	135,357	2,082,605
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	46,422		46,422		46,422
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	207,425		207,425	263	207,162
Library	6120	517,802		517,802	40,370	477,432
Media	6130	120,127		120,127	6,207	113,920
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	221,640		221,640	1,962	219,678
Admissions and Records	6200	414,621		414,621	1,468	413,153
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	649,430		649,430	2,767	646,663
Matriculation and Student Assessment	6320	311,340		311,340	41,111	270,229
Transfer Programs	6330	31,111		31,111	198	30,913
Career Guidance	6340	30,917		30,917		30,917
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,632,178		1,632,178	4,306	1,627,872
Subtotal		$16,202,693	$0	$16,202,693	$586,676	$15,616,017

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$431,773		$431,773	$467	$431,306
Health Services	6440	75,779		75,779		75,779
Student Personnel Admin.	6450					
Financial Aid Administration	6460	521,016		521,016	18,546	502,470
Job Placement Services	6470	95,755		95,755		95,755
Veterans Services	6480					
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	601,189		601,189	601,189	0
Custodial Services	6530	286,221		286,221	286,221	0
Grounds Maintenance and Repairs	6550	163,742		163,742	163,742	0
Utilities	6570	868,036		868,036	868,036	0
Other	6590					
Planning, Policy Making, and Coordination	6600	562,314		562,314	562,314	0
General Inst. Support Services	6700					
Community Relations	6710	203,351		203,351	203,351	0
Fiscal Operations	6720	1,041,815		1,041,815	1,041,815	0
Human Resources Management	6730	265,759		265,759	265,759	0
Noninstructional Staff Benefits & Incentives	6740	283,895		283,895	283,895	0
Staff Development	6750	4,742		4,742	4,742	0
Staff Diversity	6760	10,802		10,802	10,802	0
Logistical Services	6770	535,581		535,581	535,581	0
Management Information Systems	6780	663,126		663,126	663,126	0
Subtotal		$22,817,589	$0	$22,817,589	$6,096,262	$16,721,327

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	134,708		134,708	134,708	0
Community Services and Economic Development	6800					
Community Recreation	6810	150,437		150,437	1,761	148,676
Community Service Classes	6820	280,634		280,634		280,634
Community Use of Facilities	6830	83,933		83,933		83,933
Economic Development	6840	441,735		441,735		441,735
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	146,353		146,353	7,860	138,493
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990	322,597		322,597		322,597
Auxiliary Operations	7000					
Contract Education	7010	276,753		276,753	9,895	266,858
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$24,654,739	$0	$24,654,739	$6,250,486	$18,404,253
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				33.96%		
(07) Notes						

CALIFORN... COMMUNITY COLLEGES
Annual ...ancial and Budget Report

Expe...itures by Activity

S10 C...eral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	210,739	5,447	16,819			233,005
Business and Management	0500	168,521	20,183	28,612	464		217,780
Communications	0600	42,107	297	4,153			46,557
Computer and Information Science	0700	519,464	205,478	211,106	312,470		1,248,518
Education	0800	545,097	205,651	147,617			898,365
Engineering and Related Industrial Tech.	0900	409,509	47,255	74,718	4,222		535,704
Fine and Applied Arts	1000	542,142	114,473	30,029	916		687,560
Foreign Language	1100	226,351	5,292	600			232,243
Health	1200	621,506	14,873	31,560	5,043		672,982
Consumer Education and Home Economics	1300	246,026	3,703	139			249,868
Law	1400						
Humanities (Letters)	1500	896,283	13,463	644			910,390
Library Science	1600						
Mathematics	1700	609,865	102,452	30,656	29,552		772,525
Military Studies	1800						
Physical Sciences	1900	206,636	54,646	3,893			265,175
Psychology	2000	113,787	1,363	118			115,268
Public Affairs and Services	2100	853,364	16,327	487			870,178
Social Sciences	2200	416,721	6,177	1,095			423,993
Commercial Services	3000	189,766	18,927	51,768			260,461
Interdisciplinary Studies	4900	964,619	67,055	8,624			1,040,298
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	120,848					120,848
Subtotal - Instructional Activities	**599**	7,903,351	903,062	642,638	352,667		9,801,718

* Salaries and Benefits of instructors and instructional aides in instructional assignments

** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,570,854	511,751	135,357		2,217,962
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		46,422				46,422
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		1,617,276	511,751	135,357		2,264,384
Instructional Support Services (6100)							
Learning Center	6110	145,167	53,338	8,657	263		207,425
Library	6120		455,958	21,474	40,370		517,802
Media	6130		96,184	17,736	6,207		120,127
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		156,036	63,642	1,962		221,640
Subtotal - Instructional Support Services	**6100**	145,167	761,516	111,509	48,802		1,066,994
Admissions and Records	**6200**		401,511	11,642	1,468		414,621
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		638,732	7,931	2,767		649,430
Matriculation and Student Assessment	6320		246,007	24,222	41,111		311,340
Transfer Programs	6330		27,253	3,660	198		31,111
Career Guidance	6340		27,254	3,663			30,917
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		939,246	39,476	44,076		1,022,798

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,526,524	101,348	4,306		1,632,178
Extended Opportunity Prgms. & Services (EOPS)	6430		413,341	17,965	467		431,773
Health Services	6440		49,162	26,617			75,779
Student Personnel Administration	6450						
Financial Aid Administration	6460		481,712	20,758	18,546		521,016
Job Placement Services	6470		91,698	4,057			95,755
Veterans Services	6480						
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,562,437	170,745	23,319		2,756,501
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		311,836	271,585	17,768		601,189
Custodial Services	6530		205,386	80,835			286,221
Grounds Maintenance and Repairs	6550		138,609	23,749	1,384		163,742
Utilities	6570			868,036			868,036
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		655,831	1,244,205	19,152		1,919,188
Planning, Policymaking, and Coordination	**6600**		375,120	187,194			562,314

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		101,273	100,688	1,390		203,351
Fiscal Operations	6720		875,249	153,493	13,073		1,041,815
Human Resources Management	6730		213,956	50,513	1,290		265,759
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		283,895				283,895
Staff Development	6750		392	4,350			4,742
Staff Diversity	6760			10,802			10,802
Logistical Services	6770		376,350	157,165	2,066		535,581
Management Information Systems	6780		236,111	261,378	165,637		663,126
Other General Institutional Support Services	6790			134,708			134,708
Subtotal - General Institutional Support Services	**6700**		2,087,226	873,097	183,456		3,143,779
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		115,315	33,361	1,761		150,437
Community Service Classes	6820	3,899	174,281	102,454			280,634
Community Use Facilities	6830		78,583	5,350			83,933
Economic Development	6840		294,280	147,455			441,735
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	3,899	662,459	288,620	1,761		956,739

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		100,455	38,038	7,860		146,353
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990		125,393	197,204			322,597
Subtotal - Ancillary Services	**6900**		225,848	235,242	7,860		468,950
Auxiliary Operations (7000)							
Contract Education	7010	6,799	232,221	27,838	9,895		276,753
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	6,799	232,221	27,838	9,895		276,753
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					466,059	466,059
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					466,059	466,059
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,811,241	1,811,241
Student Aid	7320					445,259	445,259
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,256,500	2,256,500
TOTAL EXPENDITURES and OTHER OUTGO	**391**	8,059,216	11,423,753	4,343,957	827,813	2,722,559	27,377,298

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	13,377
Avg. time p/account	5.0
Total Time (in minutes)	66885
Per Hour	60
Hours Worked (** **Activity 11**)	**1114.8**
***EFC 2**	13,377
Avg. time p/student	16.4
Total Time (in minutes)	219383
Per Hour	60
Hours Worked (** **Activity 12**)	**3656.4**
***EFC 1**	13,377
Avg. time p/question	7
Total Time (in minutes)	93639
Per Hour	60
Hours Worked (** **Activity 13**)	**1560.7**
***EFC 2**	13,377
Avg. time p/file	13
Total Time (in minutes)	173901
Per Hour	60
Hours Worked (** **Activity 14**)	**2898.4**
***EFC 4**	0
Avg. time p/account	23.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 15**)	**0.0**
***EFC 5**	145
Avg. time p/student	19.9
Total Time (in minutes)	2886
Per Hour	60
Hours Worked (** **Activity 16**)	**48.1**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	2,862
Avg. time p/question	3.6
Total Time (in minutes)	10303
Per Hour	60
Hours Worked (** **Activity 21**)	**171.7**
***EFW 6**	2,862
Avg. time p/application	2.0
Total Time (in minutes)	5724
Per Hour	60
Hours Worked (** **Activity 22**)	**95.4**
***EFW 6**	2,862
Avg. time p/evaluation	2.9
Total Time (in minutes)	8300
Per Hour	60
Hours Worked (** **Activity 23**)	**138.3**
***EFW 8**	
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 24**)	**0.0**
***EFW 7**	2,862
Avg. time p/application	2.3
Total Time (in minutes)	6583
Per Hour	60
Hours Worked (** **Activity 25**)	**109.7**
***EFW 8**	
Avg. time p/application	1.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Connie Campos	Accounting Assistant	5	5	2		10	2
Esther Castaneda	Student Records Technician	5	25	5	5	25	5
Angelica Garcia	Student Records Technician	5	25	5	5	25	60
Lilibeth Iba	Accountant	5	5	2		15	2
Maria Martinez	Student Records Technician	5	25	5	5	25	5
Janice Peters	Student Records Technician	5	25	25	25	5	60
Roslyn Rawlins	Student Records Technician	5	5	5	25	60	5
Average		**5.0**	**16.4**	**7.0**	**13.0**	**23.6**	**19.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2 A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		1	2	1	2	4	5	
		**Activity Codes						04-05
Staff	Title	11	12	13	14	15	16	PHR'S
Connie Campos	Accounting Assistant	5	5	2		10	2	32.96
Esther Castaneda	Student Records Technician	5	25	5	5	25	5	34.03
Angelica Garcia	Student Records Technician	5	25	5	5	25	60	34.03
Lilibeth Iba	Accountant	5	5	2		15	2	43.44
Maria Martinez	Student Records Technician	5	25	5	5	25	5	34.03
Janice Peters	Student Records Technician	5	25	25	25	5	60	34.03
Roslyn Rawlins	Student Records Technician	5	5	5	25	60	5	34.03
Average		**5.0**	**16.4**	**7.0**	**13.0**	**23.6**	**19.9**	**35.22**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Martha R. de Reza	Senior Program Specialist	5	2	5	5	1	1
Dena Kehler	Program Services Specialist	3	3	1		3	2
Veronica Martinez	Director	5	2	1	2	2	1
Yray Nice	Financial Aid Technician	1.5	1	2	1.5	3	1.5
Sandra Talavera	Senior Program Specialist	5	2	5	5	1	1
Anabel Villagomez	Financial Aid Technician 1	2	2	3.5	4	4	1
Average		**3.6**	**2.0**	**2.9**	**3.5**	**2.3**	**1.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier						
		6	6	6	8	7	8	
		**Activity Codes						04-05
Staff	Title	21	22	23	24	25	26	PHR'S
Martha R. de Reza	Senior Program Specialist	5	2	5	5	1	1	28.75
Dena Kehler	Program Services Specialist	3	3	1		3	2	33.89
Veronica Martinez	Director	5	2	1	2	2	1	31.26
Nice Yray	Financial Aid Technician	1.5	1	2	1.5	3	1.5	15.97
Sandra Talavera	Senior Program Specialist	5	2	5	5	1	1	40.26
Anabel Villagomez	Financial Aid Technician 1	2	2	3.5	4	4	1	22.11
Average		**3.6**	**2.0**	**2.9**	**3.5**	**2.3**	**1.3**	**28.71**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	12,267	12,673	15,413	14,295	14,164	12,271	**14,180
EFC 2	1.8-1	2.	Paid Enrollment fees	12,267	12,548	15,282	14,188	14,097	12,271	13,377
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)							
EFC 4	1.8-2	1.	Delinquencies collections	1849	1,575	2,622	2,994	902	799	0
EFC 5	1.8-2	2.	Refunds							145
EFW 6	1.8-3	1.	Waivers Requested	X	1,693	1,697	1,976	2,439	2,398	2,862
EFW 7	1.8-3	2.	Waivers Approved	X	1,693	1,697	1,976	2,439	2,398	2,862
EFW 8	1.8-3 (1-2)		Waivers Denied	X						

Conclusion: Findings will go forward to the Schedule 1A and 1B.
**Per Sergio: Use paid fee numbers for enrolled students if CCCCD's report is less than Gavilan's paid fee numbers.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2004 Summer Term

Data Current As Of July 06, 2006 03:39:26

Total Headcount	2,020

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2004 Fall Term

Data Current As Of July 06, 2006 03:39:13

Total Headcount	5,079

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2005 Spring Semester

Data Current As Of July 06, 2006 03:38:14

Total Headcount	5,984

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Gavilan College Fiscal Year: FY 04-05

Angeles Fuentes*
Employee Name

Director, Financial Aid.
Exact Position Title

Financial Aid office N/A
Department/Location Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
02/01/05	1A (1B) 2A 2B 3 4	Prepare Cost beg info for Summer & Fall 05 class schedule	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature *Veronica Martinez Date 05-24-06

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY April 7; TO Nancy Bailey

*Angeles Fuentes is no longer with district, signing as Manager.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Gavilan College

Lilibeth Iba — Employee Name

Accountant — Exact Position Title

Gavilan / Business office — College/Department/Location

408-846-4970 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					30	30	30	30
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					20	20	20	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					36	36	36	36
TOTALS:					86	86	86	106

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilibeth Iba Date 4/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Gavilan College Fiscal Year: FY 04-05

JOY PARKER
Employee Name

DIRECTOR, ADMISSIONS & RECORDS
Exact Position Title

ADM & REC. OFFICE
Department/Location

408 848 4754
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/2/04	(1A) 1B 2A 2B 3 4	PREP OF MATERIAL FOR FALL SCHEDULE	2
4/8/04	1A 1B (2A) 2B 3 4	ADVISING REG STAFF OF FEE CHGS.	1/2
/ /	1A 1B 2A 2B 3 4		
10/18/04	(1A) 1B 2A 2B 3 4	PREP OF MATERIAL FOR SPRING SCHED	1 1/2
11/5/04	1A (1B) 2A 2B 3 4	ADVISING REG STAFF OF FEE COLLECTION	1/4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data, or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/20/06

If you have any questions, please contact JOY PARKER, at 408 848 4754

PLEASE SUBMIT THIS INFORMATION BY April 7; TO Nancy Bailey

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Business Office
Department/Location

Connie Campos
Employee Name

Accounting Assistant
Exact Position Title

408-848-4714
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~0~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Connie Campos Date 4-5-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Esther Castaneda
Employee Name

Student Records Technician
Exact Position Title

408 848 4751
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Castaneda Date 4/20/06

If you have any questions, please contact Esther Castaneda, at 408 848 4751

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Angelica Garcia
Employee Name

Student Records Technician
Exact Position Title

408 848 4737
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.00					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A Garcia Date 4/20/06

If you have any questions, please contact Angelica Garcia, at 408 848 4737

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cañada College
District

Business office
Department/Location

LILIBETH IBA
Employee Name

Accountant
Exact Position Title

408-846-4970
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~0~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilibeth Iba Date 4/5/06

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Maria Martinez
Employee Name

Student Records Technician
Exact Position Title

408 848 4735
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Maria N. Martinez Date 4/20/06

If you have any questions, please contact Maria Martinez, at 408 848 4735

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions & Records Office
Department/Location

Janice Peters
Employee Name

Student Records Technician
Exact Position Title

408 848 4733
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.25					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.25					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.00					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice Peters Date 4/20/06

If you have any questions, please contact Janice Peters, at 408 848 4733

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Roslyn Rawlins
Employee Name

Student Records Technician
Exact Position Title

408 848 4736
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.25					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.00					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Roslyn Rawlins Date 4/20/06

If you have any questions, please contact Roz Rawlins, at 408 848 4737

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District
Fin. Aid office — Department/Location
Marina R. DeRoza — Employee Name
Senior Program Specialist — Exact Position Title
(408) 848-4727 ext 4272 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marina R. DeRoza — Date 5/24/06

If you have any questions, please contact (408) 848-4727 ext 4272, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid — Department/Location

Dena M. Kehler — Employee Name

Program Services Specialist — Exact Position Title

(408)848-4763 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	up to 1 month				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dena M. Kehler — Date 5/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid Office — Department/Location

Veronica Martinez. — Employee Name

Director — Exact Position Title

408-848-4725 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Martinez — Date 5/24/06

If you have any questions, please contact me, at 408-848-4725

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District
F.A. — Department/Location
Gray, Dick — Employee Name
F.A. Tech — Exact Position Title
408 848-4728 — Telephone #
12mo/11mo/10mo/hrly (12mo) — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid Office — Department/Location

Sandra Talavera — Employee Name

Senior Program Specialist — Exact Position Title

848-4727 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Talavera Date 5-24-06

If you have any questions, please contact me, at 408-848-4727.

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Employee AVERAGE Time Record for Mandated Costs
308/98 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid — Department/Location

Anabel Villagomez — Employee Name

Financial Aid Technician I — Exact Position Title

408-848-4727 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3-4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anabel Villagomez Date 5/24/06

If you have any questions, please contact Anabel Villagomez at 408-848-4727

PLEASE SUBMIT THIS INFORMATION BY April 7 ; TO Nancy

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

EFCW 1.8-1

District: CAVILAN COMMUNITY COLLEGE DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	~~98-9~~	~~99-0~~	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	2098	2310	2845	2724	2415	2422	2276	2414
Fall	5447	6227	6662	6416	6878	5429	5554	5876
Winter/ Intersession								
Spring	6413	5279	7267	6589	6338	5344	6350	6223
Total	13,958	13816	16774	15729	15631	13195	14180	14513
2. Number of students who paid enrollment fees:								
Summer	1675	2058	2512	2330	2001	2136	2095	2201
Fall	4619	5628	6078	5774	6294	5035	5200	5397
Winter/ Intersession								
Spring	6013	4862	6692	6084	5802	5100	6082	5377
Total	12267	12548	15282	14188	14097	12271	13377	13075
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

per email take #'s from Chancellor's Report

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Nancy Bailey

Employee Name: (print) NANCY BAILEY

Date 5/30/06

Position or Title ADMIN ASST

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.8-1
#1

Number of students enroll each fiscal ye

Number of Students Applied = Application Completed

Term	# of students	Annual (duplicated)
1998 summer	2,098	
1998 fall	5,447	
1999 spring	6,413	
total	13,958	1998-1999
1999 summer	2,310	
1999 fall	6,227	
2000 spring	5,279	
total	13,816	1999-2000
2000 summer	2,845	
2000 fall	6,662	
2001 spring	7,267	
total	16,774	2000-2001
2001 summer	2,724	
2001 fall	6,416	
2002 spring	6,589	
total	15,729	2001-2002
2002 summer	2,415	
2002 fall	6,878	
2003 spring	6,338	
total	15,631	2002-2003
2003 summer	2,422	
2003 fall	5,429	
2004 spring	5,344	
totatl	13,195	2003-2004
2004 summer	2,276	
2004 fall	5,554	
2005 spring	6,350	
total	14,180	2004-2005
2005 summer	2,414	
2005 fall	5,876	
2006 spring	6,223	
total	14,513	2005-2006

1.8-1
#2

= Paid

Number of Students who paid enrollment fees per

Number of Students Enrolled

Term	# of students	Annual (duplicated)
1998 summer	1,635	
1998 fall	4,619	
1999 spring	6,013	
total	12,267	1998-1999
1999 summer	2,058	
1999 fall	5,628	
2000 spring	4,862	
total	12,548	1999-2000
2000 summer	2,512	
2000 fall	6,078	
2001 spring	6,692	
total	15,282	2000-2001
2001 summer	2,330	
2001 fall	5,774	
2002 spring	6,084	
total	14,188	2001-2002
2002 summer	2,001	
2002 fall	6,294	
2003 spring	5,802	
total	14,097	2002-2003
2003 summer	2,136	
2003 fall	5,035	
2004 spring	5,100	
totatl	12,271	2003-2004
2004 summer	2,095	
2004 fall	5,200	
2005 spring	6,082	
total	13,377	2004-2005
2005 summer	2,201	
2005 fall	5,497	
2006 spring	5,377	
total	13,075	2005-2006

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
1 Page(s) attachment

FAX TRANSMITTAL

DATE: July 7, 2006

FAX TO: Nancy Bailey
Gavilan Community College District
408-846-4994

CC: John Hendrickson

FROM: Sergio M. Perez

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2004-2005

PLEASE RESPOND BY: July 11, 2006

In comparing enrollment data available on the Chancellor's Office website for your district with data submitted by you, we noted some significant differences. We will need clarification on these differences before we can continue to process your claims. Attached is a comparison sheet for your review.

The reported number of students enrolled is higher than the count from the Chancellor's Office website. Normally the Chancellor's numbers are higher than the colleges numbers, due to the Chancellor's numbers including non-resident students and non-credited students. Please explain the difference for each year.

If we do not get a response from you by the date noted above, we will have to use the numbers from the Chancellor's report to prepare the claims.

Thank you.

SMP:te

Gavilan Community College District
Comparison
Fiscal Years 1998-99 through 2004-05

Students Enrolled

	98-99		99-00		00-01		01-02		02-03		03-04		04-05	
Period	GAVILAN	CCCCO	GAVILAN	CCCCO	GAVILAN	CCCCO	GAVILAN	CCCCO	GAVILAN	CCCCO	GAVILAN	CCCCO	GAVILAN	CCCCO
Summer	2,098	1,552	2,310	2,069	2,845	2,530	2,724	2,374	2,415	2,089	2,422	2,023	2,276	2,020
Fall	5,447	4,501	6,227	5,776	6,662	6,153	6,416	5,797	6,878	6,283	5,429	4,922	5,554	5,079
Spring	6,413	5,956	5,279	4,828	7,267	6,730	6,589	6,124	6,338	5,792	5,344	4,990	6,350	5,984
	13,958	12,009	13,816	12,673	16,774	15,413	15,729	14,295	15,631	14,164	13,195	11,935	14,180	13,083

Subj: **Enrollment data**
Date: 7/10/2006 9:02:59 AM Pacific Standard Time
From: nbailey@gavilan.edu
To: smpsixten@aol.com

In response to your fax.

I spoke to our MIS Director. Please use the Chancellor's office data.

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Gavilan Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	1849	1575	2622	2994	902	799	0	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lilibeth Iba Date 6/28/06

LILIBETH IBA Accountant

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Gavilan College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer							31	24
Fall							71	76
Winter/Intersession								
Spring							37	53
Total							145	153.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 7-3-2006

Veronica Martinez
Employee Name: (print)

Director, Financial Aid
Position or Title

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Dan Nancy [illegible] - only have draft for

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Gavilan College.

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	1630	1693	1697	1976	2439	2398	2862	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 07-03-06

Veronica Martinez Director, Fin. Aid.

Employee Name: (print) Position or Title

If you have any questions, please contact Veronica Martinez at 408-848-4725.

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Gavilan Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							Budget
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 555,260	$ 556,575	$ 577,606	$ 587,529	$ 612,345	$ 882,263	$ 1,267,262	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 262,181	$ 259,591	$ 232,312	$ 384,475	$ 416,501	$ 596,891	$ 1,172,094	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 5,192	$ 4,646	$ 7,690	$ 8,330	$ 11,937	$ 23,441	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$ 18,172						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
~~Winter/Intersession~~								
~~Spring~~ TOTAL CREDITS CLAIMED FOR ENROLLMENT FEE			21,574	38,957	37,864	38,930	74,797	
TOTAL x $0.91 per credit			19,632	31,806	34,456	34,662	68,065	
ENROLLMENT FEE USED IN CALCULATION			$11	$11	$11	$15.67	$18.24	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Elizabeth Hoa Date 7/5/06

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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* FY 03-04 - PER UNIT (11+18+18)/3 = 15.67

** FY 04-05 - PER UNIT (18+26+26)/2 = 18.24

MANDATE REIMBURSEMENT SERVICES

Name	Title	03-04	04-05
BELTRAN, BRENDA	SR PROGRAM SPECIALIST	$ 38.13	$ -
BERNSTEIN CHARGIN, JAN	PIO	$ -	$ 58.99
BISHOP,SHANNON	SR. PROGRAM SPEC	$ 35.90	$ 38.20
BOTTO, STAN	CSEA PRESIDENT	$ 31.65	$ 30.83
BRUNSON, CARL	CUSTODIAN	$ -	$ 22.72
BULLE, SUZANNE	SECRETARY TO THE PRESIDENT	$ 45.95	$ 43.27
CARDINALI, GRACE	ADMIN ASSISTANT	$ -	$ 48.17
CARR-RAMOS, SHARREAN	INTERIM VP		$ 82.47
CHARGIN, JAN	PIO	$ 55.21	$ 58.98
CONAWAY, PILAR	HR TECH	$ 40.42	$ 40.79
CONNAL, DAVE	AVIATION FACULTY	$ 72.39	$ 74.33
DeLEON, LUIS (DOT 12/1/03)	GROUNSKEEPER	$ 26.70	N/A
FILICE, LIDIA	SR. ACCOUNTANT	$ -	$ 49.72
FISCHER, BEVERLY	DEPT ASSIST	$ -	$ 15.97
FORTIN, LOUISE	HR TECH	$ -	$ 34.29
FRANCO, RAY	CUSTODIAN	$ 28.44	$ 14.45
FRANKLIN, LISA	DSPS, FACULTY	$ 42.90	$ -
FUENTES, MARIA (ANGELES)	DIR. FINANCIAL AID	$ -	$ 43.86
GARCIA, ROGER	MAINT. LEADPERSON	$ 43.01	$ 39.64

MANDATE REIMBURSEMENT SERVICES

Name	Title	03-04	04-05
GEARY, GREG	COORD, SAFETY PROG	$ 41.41	$ 43.35
GILLIS, RICH	ASSOC DEAN, BUS. DEV	$ 54.69	$ 58.17
GONZALEZ, FABIO	DIR TRIO	$ -	$ 44.92
HANNON, RON (DOH 11/01)	ATHLETIC DIR	$ 61.36	$ 67.63
HIPOL, ANA	DIR SUPPORT SVCS	$ 53.55	
HIPOL, ANA	DIR SECURITY	$ 55.20	$ 56.61
HIPOL, ANA	DIR SUPPORT SVCS		$ 27.36
HOWLE, PAT	HUMAN RESOURCES	$ 68.89	$ 16.70
IBA, LILIBETH	ACCOUNTANT		$ 43.76
JOHNSON, MARTIN	VP OF INSTRUCTIONAL SERVICES	$ 78.68	
KEELER, JOSEPH	VP	$ 85.23	$ 91.64
KERR, ART	FACILITIES DIR	$ 62.52	$ 65.66
KERR, LYNDA	DIR COMM ED	$ -	$ 54.82
KINSELLA, STEVE	PRESIDENT	$ -	$ 118.35
LOPEZ, FRAN	DEAN, TECH & VOCATION	$ -	$ 57.71
LOZANO, FRAN	DEAN, LIBERAL ARTS	$ 69.32	$ 78.16
MALDANO, DIANE	PAYROLL OFFICER	$ -	$ 35.76
MAQUINALES, DAN	FACILITIES MAINT WKR II	$ 40.39	$ 36.13
MILLER, ERIC	CUSTODIAN		$ 22.72

MANDATE REIMBURSEMENT SERVICES

Name	Title	03-04	04-05
MILLER, KEN	FACULTY		$ 72.42
MORALES, JOSE	CUSTODIAN	$ 20.23	$ 21.61
MORENO, SOFIA	REPROGRAPHICS OPER	$ 31.70	$ 32.94
MORRIS, AUDREN	DIR FINANCIAL AID	$ 52.26	$ 53.44
NOLAN-KERR, LYNDA	SR. PROGRAM SPEC	$ 45.15	
NOLAN-KERR, LYNDA	DIR COMMUNICATION ED		$ 54.82
OROPEZA, ANGIE	ADMIN ASSISTANT	$ 47.13	$ 48.93
PARKER, JOY	DIR ADMISSIONS & RECORDS	$ -	$ 56.89
PEDREGON, MIKE	GROUNDSKEEPER	$ 37.77	$ 30.64
PERALES, SONY	CUSTODIAN	$ 27.87	$ 28.38
PEREZ, RACHEL	DIR COMMUNITY EDUCATION	$ 65.41	$ 68.68
PEREZ, SAL	CUSTODIAN	$ 25.40	$ 27.05
PFENNING, RHONDA	DIR, BUSINESS OFFICE	$ -	$ 71.34
QUIROZ-RODRIGUEZ, MONICA	PAST CSEA PRESIDENT	$ 34.91	$ 38.27
RATTO, ANNE	ASSOCIATE DEAN	$ 47.37	$ 50.76
REGALADO-RODRIGUEZ, MARGERY	DEAN OF ENROLLMENT	$ 69.52	$ 78.97
RODRIGUEZ, JUDY	HOLLISTER SITE MGR	$ 37.89	$ 38.20
SHARBONEAU, ROSA	INTERIM DEAN STUDENT SVCS	$ -	85.3078.9
SKELTON, PAUL	THEATER TECH	$ 28.23	$ 28.71

Gavilan CCD
ENROLLMENT FEE LECTION AND WAVIERS
Productive Hourly Rates
FY 1998-99 to 2005-06

Employee Name	Title/Job Class	PRODUCTIVE HOURLY RATES							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
K Degn	Dir . Fin Aid		$ 34.58	$ 35.45					
A Morris	Dir . Fin Aid				$ 35.58	$ 48.09	$ 52.25	$ 54.04	
V Martinez	Dir Fin Aid (starting 12/05)								$ 41.80
V Martinez	Sr Program Specialist (starting 1/04)							$ 31.26	$ 34.35
M DeReza	Sr Prog Specialist							$ 28.75	$ 30.82
D Kehler	Program Services Specialist							$ 33.89	$ 3[illegible]
S Talavera	Sr Program Specialist							$ 40.26	$ 44.03
A Villagomez	Fin Aid Technician I (starting 9/04)							[illegible]	$ 19.86
N Yray	Fin Aid Technician II (starting 7/04)							$ 15.97	$ 27.89
A Fuentes	Dir Fin Aid (4/05 - 12/05)								$ 48.31
	Mid Program Spec				$ 24.45	$ 30.56	$ 34.38	$ 36.72	$ 39.09
	Mid Fincial Aid Tech		$ 21.86	$ 23.36	$ 23.22	$ 26.11	$ 29.13	$ 22.11	$ 36.55
	Nancy Bailey								$ 45.72
C Campos	Cashier/Acctg Assistant	$ 18.11	$ 20.92	$ 21.74	$ 22.13	$ 28.27	$ 32.15	$ 32.96	$ 34.94
L Iba	Accountant				$ 24.22	$ 28.39	$ 40.67	$ 43.44	$ 47.15
L Filice	Sr. Accountant		$ 22.57	$ 26.75	$ 27.10	$ 31.69	$ 48.08	$ 49.16	$ 51.40
	Mid Level Acct		$ 22.57	$ 26.75	$ 25.66	$ 30.04	$ 32.62	$ 34.02	$ 36.[illegible]
M Arvizu	Dir, MIS	$ 37.24	$ 38.71	$ 39.60	$ 46.32	$ 50.09	$ 57.15	$ 58.28	$ 60.73
D Phillips	Ass't Dir MIS					$ 43.19	$ 55.14	$ 56.44	$ 58.62
D Phillips	worked as contract empl 7/98-02								
J Parker	Dir A&R	$ 34.91	$ 36.24	$ 38.12	$ 43.63	$ 52.00	$ 55.94	$ 56.89	$ 58.94
	Mid Level Student Records Tech	$ 21.67	$ 23.05	$ 25.12	$ 25.54	$ 30.54	$ 32.10	$ 34.03	$ 35.64

Schedule 6
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2004-2005
Invoice Summary

Purpose: To calculate the costs for supplies.
Source: Gavilan College purchase orders to EPOS Corp..
Findings:

Date	Total
5/26/2005	$ 666.20
	$ 666.20

Conclusion: Findings go forward to EFCW-2.

GAVILAN COLLEGE
5055 SANTA TE. .SA BLVD.
GILROY, CA 95020
(408) 848-4802

PURCHASE ORDER NO. GAV06505

This "PURCHASE ORDER" number must appear on all invoices, packing slips, delivery receipts, any correspondence, and all packages.

PURCHASE ORDER DATE: 05/25/05

Purchase Order To: EPOS CORPORATION Vendor Number: V02868 Deliver To:

EPOS CORPORATION
177 TECHNOLOGY PARKWAY
PO BOX 3140
AUBURN, AL 36831-3140

Requisitioner	Requisition Number	Delivery Date Required	Terms of Payment	This "PURCHASE ORDER" is issued pursuant to bid or quote no
IMI A	786204			

Received	Item No.	Quantity	Unit	Description / Manufacturer's Part Number	Unit Price	TOTAL PRICE
	0001	1	EACH	ANNUAL IVR MAINTENANCE FOR THE PERIOD FROM 5/1/05 THRU 4/30/06 PER ATTACHED INVOICE:	6,155.00	6,155.
				Tax		507.

CollegeBoard
connect to college success
Education Loan Program
loans.collegeboard.com

Software support for phone registration credit card fees processing - approx 10%.

Additional Comments

PURCHASE ORDER TOTAL → 6,662

INSTRUCTIONS

1. Submit invoices in duplicate for each purchase order.
2. Prepay all transportation charges and state separately on invoice.
3. Packing slips must accompany all shipments - partial shipments will be accepted.
4. Make no substitutions unless authorized in writing.
5. Federal excise tax exemption certificates will be furnished on request.
6. Ship all shipments F.O.B. destination - prepay and add.
7. Please direct all inquiries to purchasing office.

ACCOUNT

600524 5636

PURCHASING SIGNATURE

GAVILAN COLLEGE

MEMORANDUM

DATE: June 21, 2006

TO: Nancy

FROM: Mimi Arvizu, Director, MIS

RE: **EPOS Corporation**

I estimate that 10 percent of the costs paid to EPOS Corporation can be attributed to software support for phone registration credit card and fee processing. See attached documents.

Mimi Arvizu, Director, MIS

Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 556,575	$ 577,606	$ 587,524	$ 612,345	$ 882,263	$ 1,267,212
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 11,132	$ 11,552	$ 11,750	$ 12,247	$ 17,645	$ 25,344
1.8-4 line 4A	Enrollment Fees Waived	$ 259,591	$ 237,312	$ 384,475	$ 416,501	$ 596,871	$ 1,172,074
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 18,171	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		21,573	34,952	37,863	38,090	50,217
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 18,171					
1.8-4 5.	Credit Units Waived		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 23,363**	**$ 24,377**	**$ 39,496**	**$ 42,785**	**$ 46,599**	**$ 69,138**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Gavilan
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$6,093,911	$5,630,665	$-77,519	$5,553,146
ENROLL FEE ADMIN (2%)	19,536	16,801	2,735	19,536
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	780,237	671,004	109,233	780,237
S.F.A.A.	204,998	175,008	29,990	204,998
E.O.P.S.	447,027	383,656	63,371	447,027
C.A.R.E.	114,505	96,659	17,846	114,505
D.S.P.S.	649,574	555,903	93,671	649,574
STATE HOSPITALS	0	0	0	0
CALWORKS	84,318	71,653	12,665	84,318
MATRICULATION (CREDIT)	236,187	195,205	40,982	236,187
MATRIC. (NONCREDIT)	15,190	13,063	2,127	15,190
FAC. & STAFF DIVERSITY	10,619	7,549	3,070	10,619
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	206,293	177,412	28,881	206,293
BLOCK GRANT (ONE-TIME)	98,812	84,978	13,834	98,812
ECON. DEVELOPMENT	319,425	274,706	-6,389	268,317
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	19,045	16,379	2,666	19,045
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	13,416	29,928	43,344
VTEA TITLE I C	122,727	23,931	79,160	103,091
PLANT & INSTRUCTIONAL	110,833	95,317	15,516	110,833
PRIOR YEAR CORRECTION	-497,745	-506,333	8,588	-497,745
TOTAL	$9,140,195	$8,028,532	$491,898	$8,520,430

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sched A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 172.90	$ 177.25	$ 177.90	$ 240.45	$ 261.25	$ 104.79
2	Staff Training	(04)(B)(1)(b)						
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 1,659.84	$ 1,701.60	$ 1,707.84	$ 2,308.32	$ 2,508.00	
4	Waiving student fees	(04)(B)(2)(b)	$ 8,018.25	$ 8,589.47	$ 10,469.51	$ 16,154.02	$ 16,488.64	$ 14,788.52
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,510.44	$ 1,532.81	$ 1,410.66	$ 1,788.95	$ 2,060.23	$ 1,563.84
6	EFCW - Fee Waiver Costs	Total	$ 11,361.43	$ 12,001.13	$ 13,765.91	$ 20,491.74	$ 21,318.12	$ 16,457.15
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 23,363.00	$ 24,377.00	$ 39,496.00	$ 42,785.00	$ 46,599.00	$ 69,138.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (12,001.57)	$ (12,375.87)	$ (25,730.09)	$ (22,293.26)	$ (25,280.88)	$ (52,680.85)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 11,361.43**	**$ 12,001.13**	**$ 13,765.91**	**$ 20,491.74**	**$ 21,318.12**	**$ 16,457.15**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Thursday, April

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Gavilan College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of April 20, 2006 09:39:21

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	137	76,727
BOGW - Part A-2 based on SSI recipient status	98	30,576
BOGW - Part A-3 based on general assistance recipient status	6	2,720
BOGW - Part A-4 based on Veteran's or National Guard dependent status	16	7,914
BOGW - Part A basis unreported	585	264,682
BOGW - Part B based on income standards	2,020	789,455

Total Unduplicated Count = 2,862
Total Amount = $ 1,172,074

= 1.8-3 = 2-BOGA
= 1.8-4 = 4/A-BOGA

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 16, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Gavilan Community College District CC43060

Dear Ms. Brummels:

Enclosed please find the original claim and extra copies of the FAM-27 for Gavilan Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Keith Bramwell

for Keith B. Petersen, President

State Controller's Office

File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC43060

(02) Claimant Name: Gavilan Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 5055 Santa Teresa Boulevard

City: Gilroy | State: CA | Zip Code: 95020-9599

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 495,800	(13) $ 450,729
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 450,729
Due from State	(08) $ 495,800	(17) $ 450,729
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	1,245
(23) EFCW-1, (04)(A)(1)(b)(f)	1,660
(24) EFCW-1, (04)(A)(2)(a)(f)	334,598
(25) EFCW-1, (04)(B)(1)(a)(f)	84
(26) EFCW-1, (04)(B)(1)(b)(f)	42
(27) EFCW-1, (04)(B)(2)(a)(f)	35
(28) EFCW-1, (04)(B)(2)(b)(f)	17,415
(29) EFCW-1, (04)(B)(2)(c)(f)	1,897
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	131,795
(32) EFCW-1, (09)	18,570
(33) EFCW-1, (10)	19,472
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

Joseph D Keeler — 1/9/07

Joseph D. Keeler
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Gavilan Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 1,245.00	$ -	$ -	$ -	$ -	$ 1,245.00
b. Staff training (One time per employee)	$ 1,660.00	$ -	$ -	$ -	$ -	$ 1,660.00
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 334,598.48	$ -	$ -	$ -	$ -	$ 334,598.48
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 83.60	$ -	$ -	$ -	$ -	$ 83.60
b. Staff training (One time per employee)	$ 41.80	$ -	$ -	$ -	$ -	$ 41.80
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 34.69	$ -	$ -	$ -	$ -	$ 34.69
b. Waiving student fees	$ 17,414.67	$ -	$ -	$ -	$ -	$ 17,414.67
c. Reporting BOG fee waiver data to CCC	$ 1,897.46	$ -	$ -	$ -	$ -	$ 1,897.46
(05) Total Direct Costs	$ 356,975.70	$ -	$ -	$ -	$ -	$ 356,975.70

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.92%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 131,795.43
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 488,771.13
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 18,570.00
(10) Less: Enrollment Fee Waiver offsets		$ 19,472.22
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 450,728.91

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ian Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Iba, Lilibeth Accountant	$41.50	30.0	$ 1,245.00				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 1,245.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ian Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Iba, Lilibeth Accountant	$41.50	40.0	$ 1,660.00				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,660.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office St Collecting Fees	$33.22	1,206.6	$ 40,083.25				
Calculating total enrollment fee to be collected Various Enrollment Office St Collecting Fees	$33.22	3,573.8	$ 118,721.64				
Answering student's questions regarding enrollment fee collection Various Enrollment Office St Collecting Fees	$33.22	1,689.2	$ 56,115.22				
ting written and computer records for enrollment fee information Various Enrollment Office St Collecting Fees	$33.22	2,832.9	$ 94,108.94				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office St Collecting Fees	$33.22	719.0	$ 23,885.18				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office St Collecting Fees	$33.22	50.7	$ 1,684.25				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 334,598.48	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Martinez, Veronica Director, Financial Aid	$41.80	2.0	$ 83.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 83.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Martinez, Veronica Director, Financial Aid	$41.80	1.0	$ 41.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 41.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Kehler, Dena Program Services Specialist	$34.69	1.0	$ 34.69				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 34.69	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Various Financial Office Staf Waiving Enrollment Fees	$33.07	174.4	$ 5,767.41				
Receiving waiver applications Various Financial Office Staf Waiving Enrollment Fees	$33.07	96.9	$ 3,204.48				
Evaluating waiver applications and verifying application documents Various Financial Office Staf Waiving Enrollment Fees	$33.07	140.5	$ 4,646.34				
ying students of additional documentation requirements and how to obtain information Various Financial Office Staf Waiving Enrollment Fees	$33.07	4.7	$ 155.43				
Entering approved application information into district records; providing student award letter Various Financial Office Staf Waiving Enrollment Fees	$33.07	108.3	$ 3,581.48				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Various Financial Office Staf Waiving Enrollment Fees	$33.07	1.8	$ 59.53				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 17,414.67	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
an Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Arvizu, Mimi	Director, MIS	$60.98	2.0	$ 121.96				
Fuentes, Maria (Angeles)	Director, Financial Aid	$22.33	2.0	$ 44.66				
Iba, Lilibeth	Accountant	$41.50	36.0	$ 1,494.00				
Phillips, Dave	Assistant Director, MIS	$59.21	4.0	$ 236.84				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,897.46	$ -	$ -	$ -	$ -

New 04/06

Gavilan Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
10/21/2005	1.00	Arvizu, Mimi	Director, MIS	$60.98	$60.98	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
10/24/2005	0.50	Arvizu, Mimi	Director, MIS	$60.98	$30.49	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
10/25/2005	0.50	Arvizu, Mimi	Director, MIS	$60.98	$30.49	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	2.00	**Arvizu, Mimi Total**			$121.96		
8/1/2005	2.00	Fuentes, Maria (Angeles)	Director, Financial Aid	$22.33	$44.66	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	2.00	**Fuentes, Maria (Angeles) Total**			$44.66		
05-06	30.00	Iba, Lilibeth	Accountant	$41.50	$1,245.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Iba, Lilibeth	Accountant	$41.50	$1,660.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	36.00	Iba, Lilibeth	Accountant	$41.50	$1,494.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	106.00	**Iba, Lilibeth Total**			$4,399.00		
6/27/2006	1.00	Kehler, Dena	Program Services Specialist	$34.69	$34.69	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	1.00	**Kehler, Dena Total**			$34.69		
4/1/2006	2.00	Martinez, Veronica	Director, Financial Aid	$41.80	$83.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
5/1/2006	1.00	Martinez, Veronica	Director, Financial Aid	$41.80	$41.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	3.00	**Martinez, Veronica Total**			$125.40		
10/21/2005	2.00	Phillips, Dave	Assistant Director, MIS	$59.21	$118.42	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
10/24/2005	1.00	Phillips, Dave	Assistant Director, MIS	$59.21	$59.21	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
10/25/2005	1.00	Phillips, Dave	Assistant Director, MIS	$59.21	$59.21	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	4.00	**Phillips, Dave Total**			$236.84		
05-06	1,206.60	Various Enrollment Office Staff	Collecting Fees	$33.22	$40,083.25	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,573.80	Various Enrollment Office Staff	Collecting Fees	$33.22	$118,721.64	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	1,689.20	Various Enrollment Office Staff	Collecting Fees	$33.22	$56,115.22	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,832.90	Various Enrollment Office Staff	Collecting Fees	$33.22	$94,108.94	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	719.00	Various Enrollment Office Staff	Collecting Fees	$33.22	$23,885.18	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	50.70	Various Enrollment Office Staff	Collecting Fees	$33.22	$1,684.25	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	10,072.20	**Various Enrollment Office Staff Total**			$334,598.48		
05-06	174.40	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$5,767.41	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	96.90	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$3,204.48	Receiving waiver applications	Waiving student fees
05-06	140.50	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$4,646.34	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	4.70	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$155.43	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	108.30	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$3,581.48	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	1.80	Various Financial Office Staff	Waiving Enrollment Fees	$33.07	$59.53	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	526.60	**Various Financial Office Staff Total**			$17,414.67		
	10,716.80	**Grand Total**			$356,975.70		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$10,175,110		$10,175,110	$273,362	$9,901,748
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,221,832		2,221,832	185,323	2,036,509
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	60,480		60,480		60,480
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	200,742		200,742		200,742
Library	6120	477,682		477,682	47,468	430,214
Media	6130	121,954		121,954	5,380	116,574
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	346,976		346,976	42,562	304,414
Admissions and Records	6200	435,813		435,813		435,813
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	624,790		624,790		624,790
Matriculation and Student Assessment	6320	280,184		280,184	12,134	268,050
Transfer Programs	6330	64,795		64,795	2,991	61,804
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,785,742		1,785,742	66,273	1,719,469
Subtotal		$16,796,100	$0	$16,796,100	$635,493	$16,160,607

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$447,026		$447,026	$8,950	$438,076
Health Services	6440	82,860		82,860		82,860
Student Personnel Admin.	6450					
Financial Aid Administration	6460	698,452		698,452	94,821	603,631
Job Placement Services	6470	86,701		86,701		86,701
Veterans Services	6480					
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	649,666		649,666	649,666	0
Custodial Services	6530	263,406		263,406	263,406	0
Grounds Maintenance and Repairs	6550	220,229		220,229	220,229	0
Utilities	6570	863,547		863,547	863,547	0
Other	6590					
Planning, Policy Making, and Coordination	6600	835,544		835,544	835,544	0
General Inst. Support Services	6700					
Community Relations	6710	264,785		264,785	264,785	0
Fiscal Operations	6720	1,002,636		1,002,636	1,002,636	0
Human Resources Management	6730	362,545		362,545	362,545	0
Noninstructional Staff Benefits & Incentives	6740	205,088		205,088	205,088	0
Staff Development	6750	3,556		3,556	3,556	0
Staff Diversity	6760	19,207		19,207	19,207	0
Logistical Services	6770	532,836		532,836	532,836	0
Management Information Systems	6780	814,634		814,634	814,634	0
Subtotal		$24,148,818	$0	$24,148,818	$6,776,943	$17,371,875

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	186,301		186,301	186,301	0
Community Services and Economic Development	6800					
Community Recreation	6810	162,532		162,532	4,198	158,334
Community Service Classes	6820	214,622		214,622	3,089	211,533
Community Use of Facilities	6830	76,004		76,004		76,004
Economic Development	6840	650,429		650,429	18,946	631,483
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	145,199		145,199	13,364	131,835
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990	212,677		212,677		212,677
Auxiliary Operations	7000					
Contract Education	7010	245,028		245,028	19,685	225,343
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$26,041,610	$0	$26,041,610	$7,022,526	$19,019,084
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.92%		
(07) Notes						

Expenditures by Activity

S10 Gen...l Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	228,177		15,308			243,485
Business and Management	0500	180,141	18,624	19,918	936		219,619
Communications	0600	49,579		8,592	464		58,635
Computer and Information Science	0700	658,918	133,660	124,750	166,452		1,083,780
Education	0800	513,439	194,206	156,940	8,820		873,405
Engineering and Related Industrial Tech.	0900	353,612	42,648	74,057	15,549		485,866
Fine and Applied Arts	1000	612,807	83,488	13,343	1,500		711,138
Foreign Language	1100	252,804	3,168	1,253			257,225
Health	1200	602,636	28,227	33,356	58,310		722,529
Consumer Education and Home Economics	1300	278,203		4,430			282,633
Law	1400						
Humanities (Letters)	1500	958,799		2,618	348		961,765
Library Science	1600						
Mathematics	1700	642,404	123,765	29,937	20,533		816,639
Military Studies	1800						
Physical Sciences	1900	230,492	47,493	3,386			281,371
Psychology	2000	39,471		25			39,496
Public Affairs and Services	2100	1,187,965	11,135				1,199,100
Social Sciences	2200	443,618		3,594			447,212
Commercial Services	3000	202,788	19,224	46,174			268,186
nterdisciplinary Studies	4900	944,932	37,760	13,515	450		996,657
nstruct. Staff-Retir's Bnfts & Retire. Incents	5900	226,369					226,369
Subtotal - Instructional Activities	**599**	8,607,154	743,398	551,196	273,362		10,175,110

Salaries and Benefits of instructors and instructional aides in instructional assignments
Salaries and Benefits of staff in noninstructional assignments

Expenditures by Activity

S1( )eneral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,494,084	542,425	185,323		2,221,832
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		59,294	1,186			60,480
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		1,553,378	543,611	185,323		2,282,312
Instructional Support Services (6100)							
Learning Center	6110	133,426	59,286	8,030			200,742
Library	6120		406,538	23,676	47,468		477,682
Media	6130		101,232	15,342	5,380		121,954
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		251,837	52,577	42,562		346,976
Subtotal - Instructional Support Services	**6100**	133,426	818,893	99,625	95,410		1,147,354
Admissions and Records	**6200**		420,004	15,809			435,813
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		611,042	13,748			624,790
Matriculation and Student Assessment	6320		238,484	29,566	12,134		280,184
Transfer Programs	6330		54,195	7,609	2,991		64,795
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		903,721	50,923	15,125		969,769

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Annual Financial and Budget Report

Expenditures by Activity

S10 Ge[illegible]l Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420						
Extended Opportunity Prgms. & Services (EOPS)	6430		1,601,907	117,562	66,273		1,785,742
Health Services	6440		417,599	20,477	8,950		447,026
Student Personnel Administration	6450		53,073	29,787			82,860
Financial Aid Administration	6460						
Job Placement Services	6470		569,401	34,230	94,821		698,452
Veterans Services	6480		82,968	3,733			86,701
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,724,948	205,789	170,044		3,100,781
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		321,613	316,439	11,614		649,666
Custodial Services	6530		206,710	56,696			263,406
Grounds Maintenance and Repairs	6550		152,844	67,385			220,229
Utilities	6570			863,547			863,547
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		681,167	1,304,067	11,614		1,996,848
Planning, Policymaking, and Coordination	**6600**		460,899	371,225	3,420		835,544

Salaries and Benefits of instructors and instructional aides in instructional assignments
Salaries and Benefits of staff in noninstructional assignments

Annual Financial and Budget Report

Expenditures by Activity

S General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		108,017	156,243	525		264,785
Fiscal Operations	6720		856,030	140,788	5,818		1,002,636
Human Resources Management	6730		289,850	70,250	2,445		362,545
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		205,088				205,088
Staff Development	6750		73	3,483			3,556
Staff Diversity	6760			19,207			19,207
Logistical Services	6770		380,881	148,277	3,678		532,836
Management Information Systems	6780		477,097	228,489	109,048		814,634
Other General Institutional Support Services	6790			174,760	11,541		186,301
Subtotal - General Institutional Support Services	**6700**		2,317,036	941,497	133,055		3,391,588
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		114,725	43,609	4,198		162,532
Community Service Classes	6820	15,726	131,661	64,146	3,089		214,622
Community Use Facilities	6830		71,504	4,500			76,004
Economic Development	6840		283,024	348,459	18,946		650,429
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	15,726	600,914	460,714	26,233		1,103,587

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 Gene Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		115,209	16,626	13,364		145,199
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990		47,946	164,731			212,677
Subtotal - Ancillary Services	**6900**		163,155	181,357	13,364		357,876
Auxiliary Operations (7000)							
Contract Education	7010	15,748	190,159	19,436	19,685		245,028
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	15,748	190,159	19,436	19,685		245,028
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					1,625,685	1,625,685
Other Outgo	7330					464,406	464,406
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	8,772,054	11,577,672	4,745,249	946,635	2,090,091	28,131,701

Salaries and Benefits of instructors and instructional aides in instructional assignments
Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	14,479
Avg. time p/account	5.0
Total Time (in minutes)	72395
Per Hour	60
Hours Worked **(** Activity 11)**	**1206.6**
***EFC 2**	13,075
Avg. time p/student	16.4
Total Time (in minutes)	214430
Per Hour	60
Hours Worked **(** Activity 12)**	**3573.8**
***EFC 1**	14,479
Avg. time p/question	7.0
Total Time (in minutes)	101353
Per Hour	60
Hours Worked **(** Activity 13)**	**1689.2**
***EFC 2**	13,075
Avg. time p/file	13.0
Total Time (in minutes)	169975
Per Hour	60
Hours Worked **(** Activity 14)**	**2832.9**
***EFC 4**	1,828
Avg. time p/account	23.6
Total Time (in minutes)	43141
Per Hour	60
Hours Worked **(** Activity 15)**	**719.0**
***EFC 5**	153
Avg. time p/student	19.9
Total Time (in minutes)	3045
Per Hour	60
Hours Worked **(** Activity 16)**	**50.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	2,906
Avg. time p/question	3.6
Total Time (in minutes)	10462
Per Hour	60
Hours Worked **(** Activity 21)**	**174.4**
***EFW 6**	2,906
Avg. time p/application	2.0
Total Time (in minutes)	5812
Per Hour	60
Hours Worked **(** Activity 22)**	**96.9**
***EFW 6**	2,906
Avg. time p/evaluation	2.9
Total Time (in minutes)	8427
Per Hour	60
Hours Worked **(** Activity 23)**	**140.5**
***EFW 8**	81
Avg. time p/application	3.5
Total Time (in minutes)	284
Per Hour	60
Hours Worked **(** Activity 24)**	**4.7**
***EFW 7**	2,825
Avg. time p/application	2.3
Total Time (in minutes)	6498
Per Hour	60
Hours Worked **(** Activity 25)**	**108.3**
***EFW 8**	81
Avg. time p/application	1.3
Total Time (in minutes)	105
Per Hour	60
Hours Worked **(** Activity 26)**	**1.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Connie Campos	Accounting Assistant	5	5	2		10	2
Esther Castaneda	Student Records Technician	5	25	5	5	25	5
Angelica Garcia	Student Records Technician	5	25	5	5	25	60
Lilibeth Iba	Accountant	5	5	2		15	2
Maria Martinez	Student Records Technician	5	25	5	5	25	5
Janice Peters	Student Records Technician	5	25	25	25	5	60
Roslyn Rawlins	Student Records Technician	5	5	5	25	60	5
Average		**5.0**	**16.4**	**7.0**	**13.0**	**23.6**	**19.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2 A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier							
		1	2	1	2	4	5		
		**Activity Codes						04-05	05-06
Staff	Title	11	12	13	14	15	16	PHR'S	PHR's
Connie Campos	Accounting Assistant	5	5	2		10	2	32.96	34.94
Esther Castaneda	Student Records Technician	5	25	5	5	25	5	34.03	35.20
Angelica Garcia	Student Records Technician	5	25	5	5	25	60	34.03	35.12
Lilibeth Iba	Accountant	5	5	2		15	2	43.44	47.15
Maria Martinez	Student Records Technician	5	25	5	5	25	5	34.03	30.94
Janice Peters	Student Records Technician	5	25	25	25	5	60	34.03	23.25
Roslyn Rawlins	Student Records Technician	5	5	5	25	60	5	34.03	25.96
Average		**5.0**	**16.4**	**7.0**	**13.0**	**23.6**	**19.9**	**35.22**	**33.22**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Martha R. de Reza	Senior Program Specialist	5	2	5	5	1	1
Dena Kehler	Program Services Specialist	3	3	1		3	2
Veronica Martinez	Director	5	2	1	2	2	1
Sandra Talavera	Senior Program Specialist	5	2	5	5	1	1
Anabel Villagomez	Financial Aid Technician 1	2	2	3.5	4	4	1
Yray Nice	Financial Aid Technician	1.5	1	2	1.5	3	1.5
Average		**3.6**	**2.0**	**2.9**	**3.5**	**2.3**	**1.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						04-05 PHR'S	05-06 PHR's
		6			8	7	8		
		**Activity Codes							
		21	22	23	24	25	26		
Martha R. de Reza	Senior Program Specialist	5.0	2.0	5.0	5.0	1.0	1.0	28.75	30.82
Dena Kehler	Program Services Specialist	3.0	3.0	1.0		3.0	2.0	33.89	33.99
Veronica Martinez	Director	5.0	2.0	1.0	2.0	2.0	1.0	31.26	41.80
Sandra Talavera	Senior Program Specialist	5.0	2.0	5.0	5.0	1.0	1.0	40.26	44.03
Anabel Villagomez	Financial Aid Technician 1	2.0	2.0	3.5	4.0	4.0	1.0	22.11	19.86
Nice Yray	Financial Aid Technician	1.5	1.0	2.0	1.5	3.0	1.5		27.89
Average		**3.6**	**2.0**	**2.9**	**3.5**	**2.3**	**1.3**	**31.25**	**33.07**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and the Chancellor's website.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	12,267	12,673	15,413	14,295	14,164	12,271	**14,180	**14,479
EFC 2	1.8-1	2.	Paid Enrollment fees	12,267	12,548	15,282	14,188	14,097	12,271	13,377	13,075
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)								2,825
EFC 4	1.8-2	1.	Delinquencies collections	1849	1,575	2,622	2,994	902	799	0	1,828
EFC 5	1.8-2	2.	Refunds							145	153
EFW 6	1.8-3	1.	Waivers Requested	X	1,693	1,697	1,976	2,439	2,398	2,862	2,906
EFW 7	1.8-3	2.	Waivers Approved	X	1,693	1,697	1,976	2,439	2,398	2,862	***2,825
EFW 8	1.8-3 (1-2)		Waivers Denied	X							81

Conclusion: Findings will go forward to the Schedule 1A and 1B.
**Per Sergio: Use paid fee numbers for enrolled students if CCCCD's report is less than Gavilan's paid fee numbers.
***Used numbers reported on Chancellor's website.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2005 Summer Term

Data Current As Of November 04, 2006 12:56:59

Total Headcount	2,098

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0 C
2098 +
333 +
048 +
479 *

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2005 Fall Term

Data Current As Of November 04, 2006 12:57:12

Total Headcount	5,333

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2006 Spring Semester

Data Current As Of November 04, 2006 12:57:30

Total Headcount	7,048

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Gavilan College Fiscal Year: ~~FY 04-05~~ 05-06

MIMI ARVIZU MIS DIRECTOR
Employee Name Exact Position Title

MIS 408-848-4840 12mo/11mo/10mo/hrly
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/25/05	1A 1B 2A 2B 3 (4)	Submit data to state & corrections	1.0
10/26/05	1A 1B 2A 2B 3 (4)	Resubmit data to state & corrections	.5
10/27/05	1A 1B 2A 2B 3 (4)	Transmit financial aid files to state	.5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/7/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY April 7 ; TO Nancy Bailey

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Gavilan College — Fiscal Year: FY 05-06

Angeles Fuentes — Employee Name

Director, Financial Aid — Exact Position Title

Financial Aid Office — Department/Location

N/A — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
8/01/05	1A 1B 2A 2B 3 (4)	Review BOGG data before it was	2
/ /	1A 1B 2A 2B 3 4	sent to Chancellor's Office.	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Martinez — Date 5/24/06

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY July 10, 06 ; TO Nancy Bailey

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Gavilan College

Lilibeth Iba — Employee Name

Accountant — Exact Position Title

Gavilan / Business Office — College/Department/Location

408 846-4970 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					30	30	30	30
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					20	20	20	40
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					36	36	36	36
TOTALS:					86	86	86	106

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilibeth Iba Date 4/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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MRP 1.6a

Employee Time Record Sheet for Mandated Costs of 486/75 Mandate Reimbursement Process

Annual Reimbursement Claims

District: Gavilan Jt. Comm. College Fiscal Year: 05/06

DENA M. KEHLER — Program Services Specialist
Employee Name — Exact Position Title

Gavilan College - Financial Aid — (408) 848-4763 — 11 months
School/Department/Location — Telephone # — Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- Code 1 Staff time to collect and organize data to be used for claim preparation.
- Code 2 Staff time and/or consultant cost to prepare state claim forms.
- Code 3 Staff time and/or consultant cost for district inservice mandate reimbursement training.
- Code 4 Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- Code 5 Staff time to resolve payment disputes with the State Controller's Office.
- Code 6 Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs, Exp
5/24/06	1 (2) 3 4 5 6	completing the form	EFCW	1 min.	Ø
6/27/06	1 (2) 3 4 5 6	collecting refund data	EFCW	1 hr.	Ø
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

1RP

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Dena M. Kehler Date 5/24/06

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO Nancy Bailey.

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Gavilan College Fiscal Year: FY 05-06

Veronica Martinez
Employee Name

Director, Financial Aid
Exact Position Title

Financial Aid Office 408-848-4725 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/01/06	1A (1B) 2A 2B 3 4	Prepare BOG guidelines/info for Sum & Fall Class schedule.	2
05/01/06	1A 1B 2A (2B) 3 4	Train staff on new bogg guidelines	1
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Martinez Date 5/24/06

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY July 10, 06; TO Nancy Bailey

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Gavilan College Fiscal Year: FY ~~04-05~~ 05-06

DAVE PHILLIPS
Employee Name

ASSISTANT MIS DIRECTOR
Exact Position Title

MIS
Department/Location

408-846-4901
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/21/05	1A 1B 2A 2B 3 (4)	Submit original data	2
10/24/05	1A 1B 2A 2B 3 (4)	Re-submit & correct errors	1
10/25/05	1A 1B 2A 2B 3 (4)	" " " "	1
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dave Phillips Date 4/7/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY April 7; TO Nancy Bailey

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Business Office
Department/Location

Connie Campos
Employee Name

Accounting Assistant
Exact Position Title

408-848-4714
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Connie Campos Date 4-5-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Esther Castaneda
Employee Name

Student Records Technician
Exact Position Title

408 848 4751
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Castaneda Date 4/20/06

If you have any questions, please contact Esther Castaneda, at 408 848 4751

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Angelica Garcia
Employee Name

Student Records Technician
Exact Position Title

408 848 4737
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.00					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature AGarcia Date 4/20/06

If you have any questions, please contact Angelica Garcia, at 408 848 4737

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan College
District

Business office
Department/Location

LILIBETH IBA
Employee Name

Accountant
Exact Position Title

408-846-4970
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~0~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilibeth Iba Date 4/5/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Maria Martinez
Employee Name

Student Records Technician
Exact Position Title

408 848 4735
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.25					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria C. Martinez Date 4/20/06

If you have any questions, please contact Maria Martinez, at 408 848 4735

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions & Records Office
Department/Location

Janice Peters
Employee Name

Student Records Technician
Exact Position Title

408 848 4733
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: ~~Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.25					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.25					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.25					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.00					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice Peters Date 4/20/06

If you have any questions, please contact Janice Peters, at 408 848 4733

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College
District

Admissions and Records Office
Department/Location

Roslyn Rawlins
Employee Name

Student Records Technician
Exact Position Title

408 848 4736
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
~~Step 2: Select the appropriate workload multiplier from Form 1.7-1~~

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	.5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	.5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.25					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.00					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost-accounting purposes only. PLEASE USE BLUE INK

Employee Signature Roslyn Rawlins Date 4/20/06

If you have any questions, please contact Roz Rawlins, at 408 848 4737

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District
Fin. Aid office — Department/Location
Martha R. DeRoza — Employee Name
Senior Program Specialist — Exact Position Title
(408) 848-4727 ext. 4272 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Martha R. DeRoza — Date 5/24/06

If you have any questions, please contact mra (408) 848-4727 ext. 4272, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District
Financial Aid — Department/Location

Dena M. Kehler — Employee Name
Program Services Specialist — Exact Position Title

(408) 848-4763 — Telephone #
12mo/11mo/10mo/hrly — Work year length (circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	up to 1 month				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid Office — Department/Location

Veronica Martinez. — Employee Name

Director — Exact Position Title

408-848-4725 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Veronica Martinez — Date 5/24/06

If you have any questions, please contact me, at 408-848-4725

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

F.A. — Department/Location

GRAY, Nick — Employee Name

F.A. Tech — Exact Position Title

407 949-4728 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid Office — Department/Location

Sandra Talavera — Employee Name

Senior Program Specialist — Exact Position Title

848-4727 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Talavera Date 5-24-06

If you have any questions, please contact me, at 408-848-4727.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Jt. Community College District — District

Financial Aid — Department/Location

Anabel Villagomez — Employee Name

Financial Aid Technician I — Exact Position Title

408-848-4727 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3-4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anabel Villagomez Date 5/24/06

If you have any questions, please contact Anabel Villagomez at 408-848-4727

PLEASE SUBMIT THIS INFORMATION BY April 7 ; TO Nancy

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1.8-1
#2

Number of Students Enrolled

= Paid

Number of students who paid enrollment fees - see

Term	# of students	Annual (duplicated)
1998 summer	1,635	
1998 fall	4,619	
1999 spring	6,013	
total	12,267	1998-1999
1999 summer	2,058	
1999 fall	5,628	
2000 spring	4,862	
total	12,548	1999-2000
2000 summer	2,512	
2000 fall	6,078	
2001 spring	6,692	
total	15,282	2000-2001
2001 summer	2,330	
2001 fall	5,774	
2002 spring	6,084	
total	14,188	2001-2002
002 summer	2,001	
2002 fall	6,294	
2003 spring	5,802	
total	14,097	2002-2003
2003 summer	2,136	
2003 fall	5,035	
2004 spring	5,100	
totatl	12,271	2003-2004
2004 summer	2,095	
2004 fall	5,200	
2005 spring	6,082	
total	13,377	2004-2005
2005 summer	2,201	
2005 fall	5,497	
2006 spring	5,377	
total	13,075	2005-2006

0• C

2,201• +
5,497• +
5,377• +
13,075• *

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Gavilan Joint Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								1828
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lilibeth Iba Date 11/9/06

LILIBETH IBA
Employee Name: (print) Position or Title Accountant

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Gavilan Joint Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	~~05-6~~
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								2825

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 12/7/06

Veronica Martinez
Employee Name: (print) Position or Title Director, Financial Aid

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Gavilan College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer							31	24
Fall							77	76
Winter/Intersession								
Spring							37	53
Total							145	153

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 7-3-2006

Veronica Martinez. Director, Financial Aid.

Employee Name: (print) Position or Title

If you have any questions, please contact Veronica Martinez, at 408-848-4725

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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MEMO

1.8-3 #1

Date: July 3, 2006

To: Nancy Bailey

From: Veronica Martinez

RE: Mandated Costs Claims for: Enrollment Fee Collection and Waivers

---

Attached are the following completed forms:

MPR 1.6a Forms which have been updated for Dena Kehler and I.

EFCW 1.8-2 Form, which lists the number of refunds processed as a result of change in waiver eligibility. We have data on refunds going back only two years.

EFCW 1.8-3 Form which lists data on the number of enrolled fee waivers approved. The 05-06 box is blank as I am waiting for Dave Phillips to provide me with this data. He returns on Wednesday 7/5; I'll contact him for this data and will contact you as soon as I have it.

For the number of enrollment fee waivers requested, we have data only for 05-06. There were roughly 81 students who were denied a waiver. I was going to add 81 to 2005-06 approved number for this section. For the other years, we do not have this data.

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Gavilan Community College District

		Fiscal Years:	
Name	**Title**	**04-05**	**05-06**
	AVERAGE ADMINISTRATIVE ASSISTANT		$ 39.64
	AVERAGE DEAN		$ 71.21
	AVERAGE DIRECTOR		$ 50.17
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY MEMBER		$ 75.98
	AVERAGE SECRETARY		
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		$ 83.63
ALONZO, SUSAN	DIRECTOR, CHILD DEV CENTER	$ 58.22	$ 52.69
ANDRADE, ANGEL	CUSTODIAN	$ 24.66	$ 25.33
ARVIZU, MIMI	DIRECTOR, MIS	$ 58.28	$ 60.98
AU YEUNG, SHUK	LIBRARIAN	$ 70.43	$ 114.56
AYALA, LUIS	GROUNDSKEEPER	$ 25.61	$ 28.36
BAILEY, NANCY	ADMIN ASSISTANT	$ 44.64	$ 45.72
BAKER, JOHN	VP OF STUDENT SERVICES	$ -	

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
BEDELL, KAYE	FACULTY		$ 92.80
BERNSTEIN CHARGIN, JAN	PIO	$ 58.99	
BISHOP,SHANNON	SR. PROGRAM SPEC	$ 38.20	
BOTTO, STAN	CSEA PRESIDENT	$ 30.83	$ 27.91
BRUNSON, CARL	CUSTODIAN	$ 22.72	$ 26.27
BULLE, SUZANNE	SECRETARY TO THE PRESIDENT	$ 43.27	$ 40.67
CAMPOS, CONNIE	ACCOUNTING ASSISTANT		$ 34.94
CARDINALI, GRACE	ADMIN ASSISTANT	$ 48.17	$ 32.83
CARR-RAMOS, SHERREAN	INTERIM VP	$ 82.47	$ 79.28
CASTENEDA, ESTHER	STUDENT RECORDS TECHNICIAN		$ 35.20
CHARGIN, JAN	PIO	$ 58.98	
CONAWAY, PILAR	HR TECH	$ 40.79	$ 36.90
CONNAL, DAVE	AVIATION FACULTY	$ 74.33	
de REZA, MARTHA R	SENIOR PROGRAM SPECIALIST		$ 41.94
DeLEON, LUIS (DOT 12/1/03)	GROUNSKEEPER		
FILICE, LIDIA	SR. ACCOUNTANT	$ 49.72	$ 51.40
FISCHER, BEVERLY	DEPT ASSIST	$ 15.97	
FORTIN, LOUISE	HR TECH	$ 34.29	$ 28.71
FRANCO, RAY	CUSTODIAN	$ 14.45	$ 27.85

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
FRANKLIN, LISA	DSPS, FACULTY	$ -	
FRIEDMAN, MARK	FACULTY/FACULTY REPRESENTATIVE		$ 69.34
FUENTES, MARIA (ANGELES)	DIR. FINANCIAL AID	$ 43.86	$ 48.31
GARCIA, ANGELICA	STUDENT RECORDS TECHNICIAN		$ 35.12
GARCIA, ROGER	MAINT. LEADPERSON	$ 39.64	$ 43.78
GEARY, GREG	COORD, SAFETY PROG	$ 43.35	
GILLIS, RICH	ASSOC DEAN, BUS. DEV	$ 58.17	
GONZALEZ, FABIO	DIR TRIO	$ 44.92	
HANNON, RON (DOH 11/01)	ATHLETIC DIR	$ 67.63	$ 54.87
HARMON, JANE	VP OF INSTRUCTIONAL SERVICES		$ 88.14
HIPOL, ANA	DIR SUPPORT SVCS	$ 56.61	$ 50.66
HOWLE, PAT	HUMAN RESOURCES	$ 16.70	
IBA, LILIBETH	ACCOUNTANT	$ 43.76	$ 47.15
JOHNSON, MARTIN	VP OF INSTRUCTIONAL SERVICES		
KEELER, JOSEPH	VP	$ 91.64	$ 83.47
KEHLER, DENA	PROGRAM SERVICES SPECIALIST		$ 33.99
KERR, ART	FACILITIES DIR	$ 65.66	$ 58.59
KERR, LYNDA	DIR COMM ED	$ 54.82	
KINSELLA, STEVE	PRESIDENT	$ 118.35	$ 118.66

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
LOESER, ED			$ 31.10
LOPEZ, FRAN	DEAN, TECH & VOCATION	$ 57.71	$ 55.18
LOZANO, FRAN	DEAN, LIBERAL ARTS	$ 78.16	$ 75.17
MALDANO, DIANE	PAYROLL OFFICER	$ 35.76	
MAQUINALES, DAN	FACILITIES MAINT WKR II	$ 36.13	$ 38.65
MARTINEZ, MARIA	STUDENT RECORDS TECHNICIAN		$ 30.94
MARTINEZ, VERONICA	DIRECTOR, FINANCIAL AID (Starting 12/05)	$ 34.85	$ 41.80
MARTINEZ, VERONICA	SR. PROGRAM SPECIALIST (Starting 01/04)	$ 34.85	
McEWAN, CAROL	PAYROLL OFFICER		$ 33.04
MILLER, ERIC	CUSTODIAN	$ 22.72	
MILLER, KEN	FACULTY	$ 72.42	$ 71.88
MOELLER, LARRY	GCFA PRESIDENT/FACULTY		$ 67.89
MORALES, JOSE	CUSTODIAN	$ 21.61	$ 21.94
MORENO, SOFIA	REPROGRAPHICS OPER	$ 32.94	$ 25.95
MORRIS, AUDREN	DIR FINANCIAL AID	$ 53.44	
NICE, YRAY	FINANCIAL AID TECHNICIAN		
NOLAN-KERR, LYNDA	DIR COMMUNICATION ED	$ 54.82	
OROPEZA, ANGIE	ADMIN ASSISTANT	$ 48.93	$ 44.59

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
PARKER, JOY	DIR ADMISSIONS & RECORDS	$ 56.89	$ 58.94
PEDREGON, MIKE	GROUNDSKEEPER	$ 30.64	$ 29.29
PERALES, SONY	CUSTODIAN	$ 28.38	$ 24.75
PEREZ, RACHEL	DIR COMMUNITY EDUCATION	$ 68.68	
PEREZ, SAL	CUSTODIAN	$ 27.05	$ 27.04
PETERS, JANICE	STUDENT RECORDS TECHNICIAN		$ 23.25
PFENNING, RHONDA	DIR, BUSINESS OFFICE	$ 71.34	$ 64.25
PHILLIPS, D	ASSISTANT DIRECTOR MIS		$ 58.62
QUIROZ-RODRIGUEZ, MONICA	PAST CSEA PRESIDENT	$ 38.27	
RATTO, ANNE	ASSOCIATE DEAN	$ 50.76	$ 47.45
RAWLINS, ROSLYN	STUDENT RECORDS TECHNICIAN		$ 25.96
REGALADO-RODRIGUEZ, MARGERY	DEAN OF ENROLLMENT	$ 78.97	
RODRIGUEZ, JUDY	HOLLISTER SITE MGR	$ 38.20	
RODRIGUEZ, ROSE			$ 27.85
SEELIE, DIANA			$ 34.18
SHARBONEAU, ROSA	INTERIM DEAN STUDENT SVCS	$ 85.31	$ 83.27
SKELTON, PAUL	THEATER TECH	$ 28.71	
SMALL, ALAN	PAYROLL OFFICER		
SMITH, STEVE	FACULTY (ON SABBATICAL LEAVE 2006)		$ 74.20

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
STEWART, DUANE	GROUNDSKEEPER	$ 27.45	$ 25.60
SWEENEY, SUSAN	DIRECTOR, CAL WORKS		$ 44.70
TALAVERA, SANDRA	SENIOR PROGRAM SPECIALIST		$ 44.03
THOMPSON, KELLY	DEPT ASSIST		
VALDEZ, JERRY	CUSTODIAN		
VASQUEZ, EDDIE	WAREHOUSE/INVENTORY CONTROL TECH	$ 33.94	
VILLAGOMEZ, ANABEL	FINANCIAL AID TECHNICIAN		$ 19.86
WAGMAN, KEN	FACULTY	$ 76.27	$ 79.77
WELK, LORRAINE	MORGAN HILL SITE MGR	$ 36.26	$ 33.02

Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 556,575	$ 577,606	$ 587,524	$ 612,345	$ 882,263	$ 1,267,212	
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 11,132	$ 11,552	$ 11,750	$ 12,247	$ 17,645	$ 25,344	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 259,591	$ 237,312	$ 384,475	$ 416,501	$ 596,871	$ 1,172,074	$ 1,159,795
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441	$ 23,196
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 18,171	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		21,573	34,952	37,863	38,090	50,217	44,607
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697	$ 40,592
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441	$ 23,196
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 18,171						
1.8-4 5.	Credit Units Waived		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697	$ 40,592
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 23,363**	**$ 24,377**	**$ 39,496**	**$ 42,785**	**$ 46,599**	**$ 69,138**	**$ 63,788**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Gavilan
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$7,286,776	$7,141,662	$-436,395	$6,705,267
EQUALIZATION	62,798	57,775	5,023	62,798
ENROLL FEE ADMIN (2%)	18,570	17,086	1,484	18,570
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	130,927	120,452	10,475	130,927
S.F.A.A.	197,633	180,747	16,886	197,633
E.O.P.S.	461,801	424,857	36,944	461,801
C.A.R.E.	130,075	117,796	12,279	130,075
D.S.P.S.	681,098	626,611	54,487	681,098
STATE HOSPITALS	0	0	0	0
CALWORKS	94,518	76,651	17,867	94,518
MATRICULATION (CREDIT)	262,750	241,730	21,020	262,750
MATRIC. (NONCREDIT)	14,334	13,188	1,146	14,334
FAC.& STAFF DIVERSITY	11,392	9,634	1,758	11,392
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	206,293	189,788	16,505	206,293
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	112,005	103,043	8,962	112,005
ECON. DEVELOPMENT	319,425	268,317	0	268,317
TANF	19,045	17,523	1,522	19,045
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	56,437	15,802	31,605	47,407
VTEA TITLE I C	81,505	22,820	45,644	68,464
NURSING CARE	179,487	0	179,487	179,487
PRIOR YEAR CORRECTION	-1,370,362	-1,370,362	0	-1,370,362
TOTAL	$9,008,839	$8,308,882	$45,269	$8,354,151

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

S ule 5A
Gavilan Com ity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 172.90	$ 177.25	$ 177.90	$ 240.45	$ 261.25	$ 104.79	$ 83.60
2	Staff Training	(04)(B)(1)(b)							$ 41.80
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 1,659.84	$ 1,701.60	$ 1,707.84	$ 2,308.32	$ 2,508.00		$ 34.69
4	Waiving student fees	(04)(B)(2)(b)	$ 8,018.25	$ 8,589.47	$ 10,469.51	$ 16,154.02	$ 16,488.64	$ 14,788.52	$ 17,414.67
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,510.44	$ 1,532.81	$ 1,410.66	$ 1,788.95	$ 2,060.23	$ 1,563.84	$ 1,897.46
6	EFCW - Fee Waiver Costs	Total	$ 11,361.43	$ 12,001.13	$ 13,765.91	$ 20,491.74	$ 21,318.12	$ 16,457.15	$ 19,472.22
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 23,363.00	$ 24,377.00	$ 39,496.00	$ 42,785.00	$ 46,599.00	$ 69,138.00	$ 63,788.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (12,001.57)	$ (12,375.87)	$ (25,730.09)	$ (22,293.26)	$ (25,280.88)	$ (52,680.85)	$ (44,315.78)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 11,361.43**	**$ 12,001.13**	**$ 13,765.91**	**$ 20,491.74**	**$ 21,318.12**	**$ 16,457.15**	**$ 19,472.22**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Gavilan College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 04, 2006 12:57:50

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	77	36,660
BOGW - Part A-2 based on SSI recipient status	116	32,539
BOGW - Part A-3 based on general assistance recipient status	4	1,937
BOGW - Part A-4 based on Veteran's or National Guard dependent status	11	5,928
BOGW - Part B based on income standards	1,980	783,523
BOGW - Part C based on financial need	637	299,208

Total Unduplicated Count = 2,825
Total Amount = $ 1,159,795

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04-05

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 25, 2008

CERTIFIED MAIL # 7006 3450 0000 3941 8703

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Gavilan Community College District CC43060

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Gavilan Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43060

(02) Claimant Name: Gavilan Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 5055 Santa Teresa Boulevard

City: Gilroy | State: CA | Zip Code: 95020-9599

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 189,400	(13) $ 172,270
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 172,270
Due from State	(08) $ 189,400	(17) $ 172,270
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	125,693
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	68,272
(29) EFCW-1, (04)(B)(2)(c)(f)	1,201
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	71,138
(32) EFCW-1, (09)	24,561
(33) EFCW-1, (10)	69,473
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**

Joseph D Keeler — 1-21-09

Joseph D. Keeler
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

S[illegible]en and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Gavilan Community College District	Reimbursement	X	2006-2007
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 125,693.00	$ -	$ -	$ -	$ -	$ 125,693.00
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 68,271.96	$ -	$ -	$ -	$ -	$ 68,271.96
c. Reporting BOG fee waiver data to CCC	$ 1,201.44	$ -	$ -	$ -	$ -	$ 1,201.44
(05) Total Direct Costs	$ 195,166.40	$ -	$ -	$ -	$ -	$ 195,166.40

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.45%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 71,138.15
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 266,304.55
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 24,561.00
(10) Less: Enrollment Fee Waiver offsets		$ 69,473.40
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 172,270.15

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ıvilan Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$38.43	1,020.0	$ 39,196.60				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Enrollment Fees	$38.43	977.0	$ 37,546.11				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$38.43	728.5	$ 27,996.26				
lating written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$38.43	407.1	$ 15,644.85				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Enrollment Fees	$38.43	138.1	$ 5,307.18				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 125,693.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: vilan Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	551.5	$ 20,041.51				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	299.8	$ 10,894.73				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	611.5	$ 22,221.91				
lying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	40.3	$ 1,464.50				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	328.7	$ 11,944.96				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Waiving Enrollment Fees	$36.34	46.9	$ 1,704.35				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 68,271.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ıvilan Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Martinez, Veronica Director, Financial Aid	$50.06	24.0	$ 1,201.44				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,201.44	$ -	$ -	$ -	$ -

Gavilan Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	1,020.00	Enrollment Office Staff	Collecting Enrollment Fees	$38.43	$39,198.60	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	977.00	Enrollment Office Staff	Collecting Enrollment Fees	$38.43	$37,546.11	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	728.50	Enrollment Office Staff	Collecting Enrollment Fees	$38.43	$27,996.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	407.10	Enrollment Office Staff	Collecting Enrollment Fees	$38.43	$15,644.85	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	138.10	Enrollment Office Staff	Collecting Enrollment Fees	$38.43	$5,307.18	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	3,270.70	**Enrollment Office Staff Total**			$125,693.00		
06-07	551.50	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$20,041.51	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	299.80	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$10,894.73	Receiving waiver applications	Waiving student fees
06-07	611.50	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$22,221.91	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	40.30	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$1,464.50	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	328.70	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$11,944.96	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	46.90	Financial Aid Office Staf	Waiving Enrollment Fees	$36.34	$1,704.35	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	1,878.70	**Financial Aid Office Staff Total**			$68,271.96		
06-07	24.00	Martinez, Veronica	Director, Financial Aid	$50.06	$1,201.44	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	24.00	**Martinez, Veronica Total**			$1,201.44		
	5,173.40	**Grand Total**			$195,166.40		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$11,186,735		$11,186,735	$436,725	$10,750,010
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,232,721		2,232,721	137,051	2,095,670
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	53,857		53,857		53,857
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	205,464		205,464	356	205,108
Library	6120	486,516		486,516		486,516
Media	6130	149,954		149,954	8,274	141,680
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	215,184		215,184	11,087	204,097
Admissions and Records	6200	469,310		469,310	10,537	458,773
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	796,341		796,341	1,049	795,292
Matriculation and Student Assessment	6320	262,750		262,750		262,750
Transfer Programs	6330	64,549		64,549		64,549
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,804,000		1,804,000	49,819	1,754,181
Subtotal		$17,927,381	$0	$17,927,381	$654,898	$17,272,483

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$480,459		$480,459		$480,459
Health Services	6440	88,370		88,370		88,370
Student Personnel Admin.	6450					
Financial Aid Administration	6460	534,228		534,228	15,383	518,845
Job Placement Services	6470	105,855		105,855		105,855
Veterans Services	6480					
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	619,149		619,149	619,149	0
Custodial Services	6530	335,095		335,095	335,095	0
Grounds Maintenance and Repairs	6550	281,201		281,201	281,201	0
Utilities	6570	904,646		904,646	904,646	0
Other	6590					
Planning, Policy Making, and Coordination	6600	783,533		783,533	783,533	0
General Inst. Support Services	6700					
Community Relations	6710	310,136		310,136	310,136	0
Fiscal Operations	6720	1,135,493		1,135,493	1,135,493	0
Human Resources Management	6730	400,398		400,398	400,398	0
Noninstructional Staff Benefits & Incentives	6740	230,062		230,062	230,062	0
Staff Development	6750	1,384		1,384	1,384	0
Staff Diversity	6760	11,392		11,392	11,392	0
Logistical Services	6770	599,457		599,457	599,457	0
Management Information Systems	6780	781,016		781,016	781,016	0
Subtotal		$25,529,255	$0	$25,529,255	$7,063,243	$18,466,012

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Gavilan Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	120,863		120,863	120,863	0
Community Services and Economic Development	6800					
Community Recreation	6810	88,777		88,777		88,777
Community Service Classes	6820	235,931		235,931	8,862	227,069
Community Use of Facilities	6830	77,523		77,523		77,523
Economic Development	6840	502,327		502,327	216	502,111
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	154,565		154,565	31,168	123,397
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990	127,694		127,694		127,694
Auxiliary Operations	7000					
Contract Education	7010	261,187		261,187	14,190	246,997
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$27,098,122	$0	$27,098,122	$7,238,542	$19,859,580
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.45%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	243,642		21,430			265,072
Business and Management	0500	188,727	22,337	16,242			227,306
Communications	0600	58,010		6,138	2,373		66,521
Information Technology	0700	703,718	55,631	120,166	337,423		1,216,938
Education	0800	473,350	218,485	162,095	10,726		864,656
Engineering and Industrial Tech.	0900	389,956	49,422	86,534	12,721		538,633
Fine and Applied Arts	1000	631,227	80,772	37,208	54,490		803,697
Foreign Language	1100	272,509	3,169	289			275,967
Health	1200	657,327	50,839	43,170	16,315		767,651
Family and Consumer Sciences	1300	298,174		1,409			299,583
Law	1400						
Humanities (Letters)	1500	971,500		2,837			974,337
Library Science	1600						
Mathematics	1700	722,753	102,126	53,001	958		878,838
Military Studies	1800						
Physical Sciences	1900	254,475	51,021	3,807	875		310,178
Psychology	2000	73,470		97			73,567
Public and Protective Services	2100	1,372,858	52,220	905			1,425,983
Social Sciences	2200	500,200		575			500,775
Commercial Services	3000	243,920	20,363	60,323	203		324,809
Interdisciplinary Studies	4900	1,036,077	91,663	11,587	641		1,139,968
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	232,256					232,256
Subtotal - Instructional Activities	**599**	9,324,149	798,048	627,813	436,725		11,186,735

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,573,234	522,436	[illegible]		2,232,721
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		53,666	191			53,857
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		1,626,900	522,627	137,051		2,286,578
Instructional Support Services (6100)							
Learning Center	6110	140,639	58,321	6,148	[illegible]		205,464
Library	6120		433,003	53,513			486,516
Media	6130		120,252	21,428	[illegible]		149,954
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		162,010	42,087	[illegible]		215,184
Subtotal - Instructional Support Services	**6100**	140,639	773,586	123,176	19,717		1,057,118
Admissions and Records	**6200**		443,094	15,679	[illegible]		469,310
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		779,858	15,434	[illegible]		796,341
Matriculation and Student Assessment	6320		253,198	9,552			262,750
Transfer Programs	6330		54,031	10,518			64,549
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		1,087,087	35,504	1,049		1,123,640

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Gavilan Community College District | 440 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,660,523	93,658	[illegible]		1,804,000
Extended Opportunity Prgms. & Services (EOPS)	6430		441,900	38,559			480,459
Health Services	6440		56,473	31,897			88,370
Student Personnel Administration	6450						
Financial Aid Administration	6460		476,630	42,215	[illegible]		534,228
Job Placement Services	6470		101,261	4,594			105,855
Veterans Services	6480						
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,736,787	210,923	65,202		3,012,912
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		332,313	277,296	9,540		619,149
Custodial Services	6530		278,178	54,160	2,757		335,095
Grounds Maintenance and Repairs	6550		180,352	99,810	1,039		281,201
Utilities	6570			904,646			904,646
Other Operation and Maintenance of Plant	6590						
Total - Operation and Maintenance of Plant	**6500**		790,843	1,335,912	13,336		2,140,091
Planning, Policymaking, and Coordination	**6600**		498,853	283,106	1,574		783,533

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		117,468	192,668			310,136
Fiscal Operations	6720		937,867	183,772	13,854		1,135,493
Human Resources Management	6730		289,145	111,253			400,398
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		230,062				230,062
Staff Development	6750			1,384			1,384
Staff Diversity	6760			11,392			11,392
Logistical Services	6770		426,089	149,067	24,301		599,457
Management Information Systems	6780		473,626	256,069	51,321		781,016
Other General Institutional Support Services	6790			105,983	14,880		120,863
Subtotal - General Institutional Support Services	**6700**		2,474,257	1,011,588	104,356		3,590,201
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		62,601	26,176			88,777
Community Service Classes	6820		117,529	109,540	[illegible]		235,931
Community Use Facilities	6830		73,290	4,233			77,523
Economic Development	6840		328,121	173,990	[illegible]		502,327
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		581,541	313,939	9,078		904,558

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		116,539	6,858	[illegible]		154,565
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990		16,906	110,788			127,694
Subtotal - Ancillary Services	**6900**		133,445	117,646	31,168		282,259
Auxiliary Operations (7000)							
Contract Education	7010	483	215,900	30,614	[illegible]		261,187
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	483	215,900	30,614	14,190		261,187
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,575,204	1,575,204
Student Aid	7320					460,180	460,180
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,035,384	2,035,384
TOTAL EXPENDITURES and OTHER OUTGO	**391**	9,465,271	12,160,341	4,628,527	843,983	2,035,384	29,133,506

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	17,485
Avg. time p/account	3.5
Total Time (in minutes)	61198
Per Hour	60
Hours Worked **(** Activity 11)**	**1020.0**
***EFC 2**	9,770
Avg. time p/student	6.0
Total Time (in minutes)	58620
Per Hour	60
Hours Worked **(** Activity 12)**	**977.0**
***EFC 1**	17,485
Avg. time p/question	2.5
Total Time (in minutes)	43713
Per Hour	60
Hours Worked **(** Activity 13)**	**728.5**
***EFC 2**	9,770
Avg. time p/file	2.5
Total Time (in minutes)	24425
Per Hour	60
Hours Worked **(** Activity 14)**	**407.1**
***EFC 4**	663
Avg. time p/account	12.5
Total Time (in minutes)	8288
Per Hour	60
Hours Worked **(** Activity 15)**	**138.1**
***EFC 5**	
Avg. time p/student	8.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	3,597
Avg. time p/question	9.2
Total Time (in minutes)	33092
Per Hour	60
Hours Worked **(** Activity 21)**	**551.5**
***EFW 6**	3,597
Avg. time p/application	5.0
Total Time (in minutes)	17985
Per Hour	60
Hours Worked **(** Activity 22)**	**299.8**
***EFW 6**	3,597
Avg. time p/evaluation	10.2
Total Time (in minutes)	36689
Per Hour	60
Hours Worked **(** Activity 23)**	**611.5**
***EFW 8**	563
Avg. time p/application	4.3
Total Time (in minutes)	2421
Per Hour	60
Hours Worked **(** Activity 24)**	**40.3**
***EFW 7**	3,034
Avg. time p/application	6.5
Total Time (in minutes)	19721
Per Hour	60
Hours Worked **(** Activity 25)**	**328.7**
***EFW 8**	563
Avg. time p/application	5.0
Total Time (in minutes)	2815
Per Hour	60
Hours Worked **(** Activity 26)**	**46.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Campos, Connie	Accounting Assistant	5.0	7.0	2.0	3.0	10.0	8.0
Hampton, Dina	Accounting Assistant						***480
Iba, Lilibeth	Accountant	2.0	5.0	3.0	2.0	15.0	
Average		**3.5**	**6.0**	**2.5**	**2.5**	**12.5**	**8.0**

***Not used, semester total.

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2 A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	06-07 PHR's
Campos, Connie	Accounting Assistant	33.80
Hampton, Dina	Accounting Assistant	33.80
Iba, Lilibeth	Accountant	47.68
Average		**38.43**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and r

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of pay and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student a and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answe
14 - Updating Student File for the enrollment fee information, and providing a copy to th
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course chang explain the process, and update student account/record.

Schedule 3
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
de Reza, Martha	Senior Program Specialist	10.0	5.0	15.0	5.0	7.0	5.0
Martinez, Veronica	Financial Aid Director	10.0	5.0	3.0	3.0	5.0	5.0
Villagomez, Anabel	Financial Aid Technician	7.5	5.0	12.5	5.0	7.5	5.0
Average		**9.2**	**5.0**	**10.2**	**4.3**	**6.5**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	06-07 PHR's
de Reza, Martha	Senior Program Specialist	33.42
Martinez, Veronica	Financial Aid Director	50.06
Villagomez, Anabel	Financial Aid Technician	25.55
Average		**36.34**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate pe
22 - Receive Applications from students by mail, fax, computer online access, or in
eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for comp
24 - Incomplete Applications: Notifying the student of the additional required inform
in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. I
Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when deni
notification to student of final eligibility status.

Schedule 4
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	12,267	12,673	15,413	14,295	14,164	12,271	**14,180	**14,479	17,485
EFC 2	1.8-1	2.	Paid Enrollment fees	12,267	12,548	15,282	14,188	14,097	12,271	13,377	13,075	9,770
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)								2,825	5,546
EFC 4	1.8-2	1.	Delinquencies collections	1849	1,575	2,622	2,994	902	799	0	1,828	663
EFC 5	1.8-2	2.	Refunds							145	153	
EFW 6	1.8-3	1.	Waivers Requested	X	1,693	1,697	1,976	2,439	2,398	2,862	2,906	3,597
EFW 7	1.8-3	2.	Waivers Approved	X	1,693	1,697	1,976	2,439	2,398	2,862	***2,825	3,034
EFW 8	1.8-3	(1-2)	Waivers Denied	X							81	563

Conclusion: Findings will go forward to the Schedule 1A and 1B.
**Per Sergio: Use paid fee numbers for enrolled students if CCCCD's report is less than Gavilan's paid fee numbers.
***Used numbers reported on Chancellor's website.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2006 Summer Term

Data Current As Of November 30, 2007 02:26:16

Total Headcount	2,069

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California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2006 Fall Term

Data Current As Of November 30, 2007 02:26:08

Total Headcount	5,776

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Gavilan
For 2007 Spring Semester

Data Current As Of November 30, 2007 02:25:57

Total Headcount	8,083

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8083
5,776
2,069
15928

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Gavilan Joint Community College District

Veronica Martinez
Employee Name

Director, Financial Aid
Exact Position Title

Financial Aid Dept
College/Department/Location

408-848-4725
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		24	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Veronica Martinez Date 11/21/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY NOVEMEBER 2, 2007 ; TO NANCY BAILEY

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District — District
Business Services — Department/Location
Connie Campos — Employee Name
Accounting Assistant — Exact Position Title
_____ — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Connie Campos Date 11/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 11/13/07 ; TO Nancy Bailey

RECEIVED
NOV 16 2007
BY: _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District — District
Business Services — Department/Location

Dina Hampton — Employee Name
Exact Position Title

Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	480 per Semester					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

RECEIVED
NOV 16 2007
BY: _____

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Revised July 2007

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District
District

Business Services
Department/Location

LILIBETH IBA
Employee Name

Accountant
Exact Position Title

408-846-4970
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lilibeth Iba Date 11/13/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

RECEIVED
NOV 16 2007
BY: _____

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Revised July 2007

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District
District

Financial Aid Department
Department/Location

Martha de Reza
Employee Name

Senior Program Specialist
Exact Position Title

(408) 848-4727 ext 4272
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE **BLUE** INK

Employee Signature Martha de Reza Date 11/21/07

If you have any questions, please contact Nancy Bailey, at _____

PLEASE SUBMIT THIS INFORMATION BY Nov 2nd, 2007; TO Nancy Bailey .

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District
District

Financial Aid Department
Department/Location

Veronica Martinez
Employee Name

Financial aid Director
Exact Position Title

848-4725
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE **BLUE** INK

Employee Signature Veronica Martinez Date 11/21/07

If you have any questions, please contact Nancy Bailey, at _____

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RECEIVED NOV 30 2007

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Gavilan Joint Community College District
District

Financial Aid Department
Department/Location

Anabel Villagomez
Employee Name

Financial Aid. Tech II
Exact Position Title

408-710-3726
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-15			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5-10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE **BLUE** INK

Employee Signature Anabel Villagomez Date 11/21/07

If you have any questions, please contact Nancy Bailey, at _____

PLEASE SUBMIT THIS INFORMATION BY Nov 2nd, 2007; TO Nancy Bailey .

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Gavilan College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer	2414	2648	3230
Fall	5871	6299	7623
Winter/ Intersession		included in Spring	
Spring	7401	8538	
Total		17485	
2. Number of students who paid enrollment fees:			
Summer		1370	
Fall		3184	
Winter/ Intersession		included in Spring	
Spring		5216	
Total		9770	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer		932	
Fall		2358	
Winter/ Intersession		included in Spring	
Spring		2256	
Total		5546	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Mimi Arvizu Date 12/10/07

Employee Name: (print) MIMI ARVIZU Position or Title MIS DIRECTOR

If you have any questions, please contact _____, at _____

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: GAVILAN JOINT COMMUNITY COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		663	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lilibeth Iba Date 12/27/07

LILIBETH IBA (Employee Name: (print)) ACCOUNTANT (Position or Title)

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Gavilan College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		3597	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		3034	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 11-21-07

Veronica Martinez
Employee Name: (print)

Financial Aid Director
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Gavilan Joint Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data As per attached report	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Veronica Martinez Date 11/21/07

Veronica Martinez
Employee Name: (print)

Director, Financial Aid
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Additional Information

Staffing Summary FY 06-07

FTE	Authorized	Actual
Perm Classified	6.25	5.63
Perm Certificated		
Temp Classified	0.88	0.88
TempCertificated		
Students	1.00	1.00

Total R2T4 Liabilities annually for 2006-07

FY 06-07	

ISIR 's Processed annually for 2006-07

FY 06-07	$	3,462

Inreach/Outreach Event Information FY 06-07

Number of inreach events on campus	9	# Served	366				
Number of outreach events off-campus	39	# Served	5,141				
# Multi lingual events	24	# Served	2,754	Language(s)		select one	if other, please enter
# Multi lingual events		# Served		Language(s)		Spanish	
# Multi lingual events		# Served		Language(s)			
# Multi lingual events		# Served		Language(s)			

SFA Program Data Validation

Program	School Based Data 06-07	
	Awards	Dollars
Pell	1,578	$ 2,071,771
SEOG	212	$ 21,200
Cal Grant B	399	$ 278,606
Cal Grant C	31	$ 7,704
BOG Fee Waivers	3,597	$ 1,500,085
Perkins		
Stafford - Subsidized	309	$ 509,569
Direct - Subsidized		
Stafford - Unsubsidized		
Direct - Unsubsidized		
Parent Loans - PLUS		
Federal Work Study	135	$ 125,332
College Scholarships	183	$ 25,150
Private Scholarships	40	$ 30,000

2006-07 BFAP SFAA Form 3 Annual Report
Signature Page and Summary of Spending Report by Object Code:

District Gavilan Community College **College:** Gavilan College

Budget Categories Object Codes		2006-07 Source of Funding (July 1, 2006 to June 30, 2007)				Total Budgeted for FA
		District General Funds	All Other Sources	BFAP SFAA Base Allocation	BFAP SFAA Augmentation	
1000	Certificated Salaries	$ -	$ -	$ -	$ -	$ -
2000	Classified Salaries	$ 165,659	$ -	$ -	$ 134,318	$ 299,977
3000	Employee Benefits	$ 80,617	$ -	$ 40,609	$ 16,575	$ 137,801
4000	Supplies/Equipment	$ 4,500	$ -	$ -	$ 248	$ 4,748
5000	Operating Expense	$ 10,041	$ -	$ -	$ 15,278	$ 25,319
6000	Capital Outlay	$ 433	$ -	$ -	$ 515	$ 948
Total		$ 261,250	$ -	$ 40,609	$ 166,934	$ 468,793
Enter your colleges MOE, and P-2 Allocations for 2006-07 BFAP-SFAA Base and Augmentation		$ 184,709		$ 40,609	$ 166,934	
If results are negative (-) your college may be subject to penalties to your BFAP 2% or BFAP SFAA for 2008-09.		$ 76,541		$ -	$ (0)	

Certification of Compliance:

I hereby certify that funds allocated for the administration of the Board Financial Assistance Program have been spent in accordance with the 2006-07 Budget Act, and the Chancellor's Office Guidelines for Expenditure of the Board Financial Assistance Program Administrative Allowance. I understand that failure to meet Maintenance of Effort requirements may result in a penalty. I also understand that failure to spend the allocation or identify and deobligate any portion of the allocation prior to the end of the Authorized spending period may result in a penalty.

Required Signatures:

Veronica M. Martinez 10/19/07

Type Name: Veronica M. Martinez
Financial Aid Director — Date

John Pruitt

Type Name: John Pruitt
Chief Student Services Officer — Date

Type Name: Dr. Steve M. Kinsella
Chief Executive Officer — Date

10/22/07

Type Name: Joseph D. Keeler
Chief Business Officer — Date

Please Return this signature page to the System Office by October 19, 2007

California Community College System Office
SFA Programs Unit
1102 Q Street Third Floor
Sacramento, CA, 95811
Attention: Eric Thorson

Email: ethorson@cccco.edu
Phone: 916-322-7412
Fax: 916-324-8486

Additional Information

Staffing Summary FY 06-07

FTE	Authorized	Actual
Perm Classified	6.25	5.63
Perm Certificated	-	-
Temp Classified	0.88	0.88
TempCertificated	-	-
Students	1.00	1.00

Total R2T4 Liabilities annually for 2006-07	
FY 06-07	$ -

ISIR's Processed annually for 2006-07	
FY 06-07	$ 3,462.00

Inreach/Outreach Event Information FY 06-07

Number of inreach events on campus	9	# Served	366				
Number of outreach events off-campus	39	# Served	5,141			select one	If other, please enter
# Multi lingual events	24	# Served	2,754	Language(s)		Spanish	
# Multi lingual events	-	# Served	-	Language(s)			
# Multi lingual events	-	# Served	-	Language(s)			
# Multi lingual events	-	# Served	-	Language(s)			

SFA Program Data Validation:

Program	School Based Data 06-07	
	Awards	Dollars
Pell	1,578	2,071,771
SEOG	212	21,200
Cal Grant B	399	278,606
Cal Grant C	31	7,704
BOG Fee Waivers	3,597	150,085
Perkins		
Stafford - Subsidized	309	509,569
Direct - Subsidized		
Stafford - Unsubsidized		
Direct - Unsubsidized		
Parent Loans - PLUS		
Federal Work Study	135	125,332
College Scholarships	183	25,150
Private Scholarships	40	30,000

Acknowledgement:

I have compiled and reviewed the data submitted in the additional information section of this report and believe it fairly and accurately represents the information as it is maintianed in the Financial Aid office records.

Type name: Veronica M Martinez 10/22/07

Financial Aid Director *Date*

District:		Gavilan Community College				College:	Gavilan College
Budget Categories Object Codes		2006-07 Source of Funding for FA Operations (July 1, 2006 to June 30, 2007)				Total Budgeted for FA	Strategy
		Dist. Gen. Funds	All Other Sources	BFAP SFAA Base Allocation	BFAP SFAA Augmentation		
	1000						
#	Certificated Comp					$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ -	$ -	$ -	$ -	$ -	
	2000						
#	Classified Comp	$ 165,659				$ 165,659	
1	Senior Program Specialist				$ 39,875	$ 39,875	Staffing for processing & admin
1	Program Services Specialist				$ 43,141	$ 43,141	Staffing for processing & admin
1	Financial Aid Technician II				$ 39,804	$ 39,804	Staffing for processing & admin
1	Temporary Senior Program Spec				$ 11,498	$ 11,498	Staffing for processing & admin
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ 165,659	$ -	$ -	$ 134,318	$ 299,977	
	3000						
#	Employ Benefits	$ 80,617		$ 40,609		$ 121,226	
	Employ Benefits				$ 16,575	$ 16,575	Staffing other
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ 80,617	$ -	$ 40,609	$ 16,575	$ 137,801	

Budget Categories Object Codes		2006-07 Source of Funding for FA Operations (July 1, 2006 to June 30, 2007)				Total Budgeted for FA	Strategy
		Dist. Gen. Funds	All Other Sources	BFAP SFAA Base Allocation	BFAP SFAA Augmentation		
	4000						
#	Supplies/Equipment	$ 4,500				$ 4,500	
					$ 248	$ 248	Direct costs associated with FA staffing
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ 4,500	$ -	$ -	$ 248	$ 4,748	
	5000						
#	Other Operating Exp	$ 10,041				$ 10,041	
					$ 7,113	$ 7,113	Develop/produce FA materials & publications
					$ 8,165	$ 8,165	Staff development and training
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ 10,041	$ -	$ -	$ 15,278	$ 25,319	
	6000						
#	Capital Outlay	$ 433				$ 433	
					$ 515	$ 515	
						$ -	
						$ -	
						$ -	
						$ -	
						$ -	
	Subtotal	$ 433	$ -	$ -	$ 515	$ 948	

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
BEDELL, KAYE	FACULTY/GCFA REP	$ 92.80	144.35
BOTTO, STAN	CSEA PRESIDENT	$ 27.91	$ 29.89
BRUNSON, CARL	CUSTODIAN LEFT D	$ 26.27	$ 31.98
BULLE, SUZANNE	SECRETARY TO THE PRESIDENT	$ 40.67	$ 42.80
CAMPOS, CONNIE HAMPTON DI	ACCOUNTING ASSISTANT	$ 34.94	33.8
CARDINALI, GRACE	ADMIN ASSISTANT	$ 32.83	$ 35.94
CARR, SHERREAN	DEAN, TECHNICIAL & PUBLIC SERVICE	$ 79.28	$ 80.02
CASTENEDA, ESTHER	STUDENT RECORDS TECHNICIAN	$ 35.20	37.39
CASTENEDA, JOSE	CUSTODIAN		18.78
CHEU, SUSAN	HR TECH		57.65
CONAWAY, PILAR	HR TECH	$ 36.90	$ 36.86
CONLIN, MARTHA	GROUNDSKEEPER		$ 10.88
DAY, KATIE	SR DEPT ASSISTANT		$ 36.75
de REZA, MARTHA R	SENIOR PROGRAM SPECIALIST	$ 41.94	33.42
DONIOVAN, BONNIE	CSEA PRESIDENT		35.58
FILICE, LIDIA	SR. ACCOUNTANT	$ 51.40	$ 38.07
FORTIN, LOUISE	HR TECH	$ 28.71	
FRANCO, RAY	CUSTODIAN	$ 27.85	$ 29.31
FRIEDMAN, MARK	FACULTY/FACULTY REPRESENTATIVE	$ 69.34	99.59

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
FUENTES, MARIA (ANGELES)	DIR. FINANCIAL AID	$ 48.31	
GALVEZ, MARIBEL	DEPARTMENT SECRETARY		$ 20.31
GARCIA, ANGELICA	STUDENT RECORDS TECHNICIAN	$ 35.12	37.36
GARCIA, ROGER	MAINT. LEADPERSON	$ 43.78	$ 43.81
HALPER, LEAH	FACULTY REPRESENTATIVE		$ 93.22
HANNON, RON	ATHLETIC DIR	$ 54.87	$ 70.46
HARMON, JANE	VP OF INSTRUCTIONAL SERVICES	$ 88.14	
HIPOL, ANA	DIR SUPPORT SVCS	$ 50.66	$ 52.81
IBA, LILIBETH	ACCOUNTANT	$ 47.15	$ 47.68
INGRASSIA, ERIC	LEAD MAINTENNACE		$ 31.00
JIMENEZ, ANA	CUSTODIAN		$ 25.53
KEELER, JOSEPH	VP	$ 83.47	$ 85.97
KEHLER, DENA	PROGRAM SERVICES SPECIALIST	$ 33.99	34.11
KERR, ART	FACILITIES DIR	$ 58.59	$ 61.17
KERR, LYNDA	DIR COMM ED		
KINSELLA, STEVE	PRESIDENT	$ 118.66	$ 125.50
LOESER, ED	MULTIMEDIA TECHNICIAN RETIRED 5/07	$ 31.10	38.01
LOPEZ, FRAN	DEAN, TECH & VOCATION	$ 55.18	$ 57.88
LOZANO, FRAN	DEAN, LIBERAL ARTS	$ 75.17	$ 76.09

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
MAQUINALES, DAN	FACILITIES MAINT WKR II RETIRED 5/07	$ 38.65	$ 38.02
MARTINEZ, MARIA	STUDENT RECORDS TECHNICIAN	$ 30.94	33.02
MARTINEZ, VERONICA	DIRECTOR, FINANCIAL AID	$ 41.80	$ 50.06
MARTINEZ, MARIA	STUDENT RECORDS TECHNICIAN		$ 33.02
MARTINEZ, RITA	SHORT TERM HR TECHNICIAN		$ 13.86
McEWAN, CAROL	PAYROLL OFFICER	$ 33.04	41.54
MILLER, KEN	FACULTY	$ 71.88	$ 101.79
MOELLER, LARRY	GCFA PRESIDENT/FACULTY	$ 67.89	97.04
MORALES, JOSE	CUSTODIAN	$ 21.94	$ 26.91
MORENO, SOFIA	REPROGRAPHICS OPER	$ 25.95	$ 32.51
OROPEZA, ANGIE	ADMIN ASSISTANT	$ 44.59	$ 46.66
PARKER, JOY	DIR ADMISSIONS & RECORDS	$ 58.94	$ 55.70
PEDREGON, MIKE	GROUNDSKEEPER	$ 29.29	$ 29.46
PERALES, SONY	CUSTODIAN	$ 24.75	$ 26.28
PEREZ, RACHEL	ASSOC. DEAN COMM. OUTREACH/ GRANTS MGT.		$ 68.22
PEREZ, SAL	CUSTODIAN	$ 27.04	$ 28.98
PETERS, JANICE	STUDENT RECORDS TECHNICIAN	$ 23.25	25.76
PFENNING, RHONDA	DIR, BUSINESS OFFICE	$ 64.25	
PHILLIPS, D	ASSISTANT DIRECTOR MIS	$ 58.62	

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
PRUITT, JOHN	VP OF STUDENT SERVICES		$ 64.00
RATTO, ANNE	ASSOCIATE DEAN	$ 47.45	$ 57.86
RAWLINS, ROSLYN	STUDENT RECORDS TECHNICIAN	$ 25.96	23.95
RIVERSA-SHARBONEAU, ROSA	FACULTY/GCFA REP	$ 83.27	$ 114.01
RODRIGUEZ, ROSE	DIRECTOR, SECURITY RETIRED 0	$ 27.85	29.53
SEELIE, DIANA	COMPUTER TECHNICIAN	$ 34.18	34.78
STEWART, DUANE	GROUNDSKEEPER	$ 25.60	$ 27.35
SWEENEY, SUSAN	DIRECTOR, CAL WORKS	$ 44.70	49.43
TALAVERA, SANDRA	SENIOR PROGRAM SPECIALIST	$ 44.03	41.19
TENNY, LESLIE	FACULTY / GRIEVANCE OFFICER IN TRAINING		$ 84.24
TURNER, SUSAN	FACULTY		$ 91.40
VILLAGOMEZ, ANABELLE	FINANCIAL AID TECHNICIAN	$ 19.86	25.55
WAGMAN, KEN	FACULTY	$ 79.77	$ 119.25
WELK, LORRAINE	MORGAN HILL SITE MGR	$ 33.02	$ 34.30
WILLIAMS, SHAIRON	DIRECTOR, HR	$ 62.01	$ 67.25
YRAY, N	FINANCIAL AID TECHNICIAN	$ 27.89	

Schedule 5
Gavilan Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office and Chancellor's website. 06-07 Enrollment Fees Waived taken from Gavilan's BFAP report.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 556,575	$ 577,606	$ 587,524	$ 612,345	$ 882,263	$ 1,267,212		
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 11,132	$ 11,552	$ 11,750	$ 12,247	$ 17,645	$ 25,344	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 259,591	$ 237,312	$ 384,475	$ 416,501	$ 596,871	$ 1,172,074	$ 1,159,795	$ 1,500,085
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441	$ 23,196	$ 30,002
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 18,171	For 00-01 through 05-06 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 24.00
Total # of credits	Line 4A divided by unit fee		21,573	34,952	37,863	38,090	50,217	44,607	62,503
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697	$ 40,592	$ 56,878
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 5,192	$ 4,746	$ 7,690	$ 8,330	$ 11,937	$ 23,441	$ 23,196	$ 30,002
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 18,171							
1.8-4 5.	Credit Units Waived		$ 19,631	$ 31,806	$ 34,455	$ 34,662	$ 45,697	$ 40,592	$ 56,878
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 23,363**	**$ 24,377**	**$ 39,496**	**$ 42,785**	**$ 46,599**	**$ 69,138**	**$ 63,788**	**$ 86,880**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00
FY 2006-07 Fall and Winter $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Gavilan
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$9,943,088	$9,147,935	$167,987	$9,315,922
ENROLL FEE ADMIN (2%)	24,561	22,596	1,965	24,561
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	131,004	0	131,004	131,004
S.F.A.A.	207,543	190,939	16,604	207,543
E.O.P.S.	494,685	455,111	39,574	494,685
C.A.R.E.	133,336	118,531	14,805	133,336
D.S.P.S.	713,573	656,487	57,086	713,573
STATE HOSPITALS	0	0	0	0
CALWORKS	344,178	208,083	136,095	344,178
MATRICULATION (CREDIT)	407,217	374,639	32,578	407,217
MATRIC. (NONCREDIT)	20,146	18,535	1,611	20,146
FAC.& STAFF DIVERSITY	10,653	9,800	853	10,653
PART-TIME FAC. ALLO.	206,293	189,789	16,504	206,293
PART-TIME FAC. OFF. HRS	4,075	0	4,075	4,075
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	100,000	92,000	8,000	100,000
SCHDL. MAINT. & REPAIR	100,000	92,000	8,000	100,000
TANF	24,829	22,842	1,987	24,829
ECON. DEVELOPMENT	205,000	172,200	0	172,200
NURSING EDUCATION	105,345	46,662	58,683	105,345
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	40,205	40,205	0	40,205
PRIOR YEAR CORRECTION	-462,918	-462,918	0	-462,918
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	95,211	95,211	0	95,211
BASIC SKILLS -REAPPROP	105,198	105,198	0	105,198
CAR. TECH. TRAILER BIL	169,559	169,559	0	169,559
GEN. PUR. TRAILER BILL	331,719	331,719	0	331,719
INST. MATERIAL TRAILER	200,167	200,167	0	200,167
SCHLD.MAINT. TRAILER B	200,167	200,167	0	200,167
FACULTY STAFF DEV	21,308	21,308	0	21,308
TOTAL	$13,928,100	$12,557,527	$710,607	$13,268,134

FISCAL SERVICES:06/22/07 44055.636 12:14 PM:EM
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Sche[illegible]5A
Gavilan Comm[illegible]ollege District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 172.90	$ 177.25	$ 177.90	$ 240.45	$ 261.25	$ 104.79	$ 83.60	
2	Staff Training	(04)(B)(1)(b)							$ 41.80	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 1,659.84	$ 1,701.60	$ 1,707.84	$ 2,308.32	$ 2,508.00		$ 34.69	
4	Waiving student fees	(04)(B)(2)(b)	$ 8,018.25	$ 8,589.47	$ 10,469.51	$ 16,154.02	$ 16,488.64	$ 14,788.52	$ 17,414.67	$ 68,271.96
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,510.44	$ 1,532.81	$ 1,410.66	$ 1,788.95	$ 2,060.23	$ 1,563.84	$ 1,897.46	$ 1,201.44
6	EFCW - Fee Waiver Costs	Total	$ 11,361.43	$ 12,001.13	$ 13,765.91	$ 20,491.74	$ 21,318.12	$ 16,457.15	$ 19,472.22	$ 69,473.40
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 23,363.00	$ 24,377.00	$ 39,496.00	$ 42,785.00	$ 46,599.00	$ 69,138.00	$ 63,788.00	$ 86,880.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (12,001.57)	$ (12,375.87)	$ (25,730.09)	$ (22,293.26)	$ (25,280.88)	$ (52,680.85)	$ (44,315.78)	$ (17,406.60)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 11,361.43**	**$ 12,001.13**	**$ 13,765.91**	**$ 20,491.74**	**$ 21,318.12**	**$ 16,457.15**	**$ 19,472.22**	**$ 69,473.40**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Gavilan College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 30, 2007 02:27:08

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	133	67,466
BOGW - Part A-2 based on SSI recipient status	81	24,092
BOGW - Part A-3 based on general assistance recipient status	9	5,024
BOGW - Part B based on income standards	2,103	746,857
BOGW - Part C based on financial need	694	278,235

Total Amount = $ 1,121,674

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

EITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

July 21, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Kern Community College District CC15095

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Kern Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC15095

(02) Claimant Name: Kern Community College District

County of Location: Kern

Street Address or P.O. Box: 2100 Chester Avenue

City: Bakersfield | State: CA | Zip Code: 93301

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [x]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 393,500	(13) $ 357,803
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 357,803
Due from State	(08) $ 393,500	(17) $ 357,803
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	254,577
(25) EFCW-1, (04)(B)(1)(a)(f)	839
(26) EFCW-1, (04)(B)(1)(b)(f)	1,885
(27) EFCW-1, (04)(B)(2)(a)(f)	1,678
(28) EFCW-1, (04)(B)(2)(b)(f)	301,359
(29) EFCW-1, (04)(B)(2)(c)(f)	5,322
(30) EFCW-1, (06)	43
(31) EFCW-1, (07)	242,612
(32) EFCW-1, (09)	139,386
(33) EFCW-1, (10)	311,083
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Date

July 17, 2006

John Griffith
Type or Print Name

Director, Budget and Payroll Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 67	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Kern Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 254,577.01	$ -	$ -	$ -	$ -	$ 254,577.01
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 839.25	$ -	$ -	$ -	$ -	$ 839.25
b. Staff training (One time per employee)	$ 1,884.70	$ -	$ -	$ -	$ -	$ 1,884.70
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 1,678.33	$ -	$ -	$ -	$ -	$ 1,678.33
b. Waiving student fees	$ 301,359.00	$ -	$ -	$ -	$ -	$ 301,359.00
c. Reporting BOG fee waiver data to CCC	$ 5,321.68	$ -	$ -	$ -	$ -	$ 5,321.68
(05) Total Direct Costs	$ 565,659.97	$ -	$ -	$ -	$ -	$ 565,659.97

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	42.89%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 242,611.56
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 808,271.53

Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 139,389.00
(10) Less: Enrollment Fee Waiver offsets		$ 311,082.96
(11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 357,802.57

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office Staff Collecting Fees	$35.03	1,032.4	$ 36,164.97				
Calculating total enrollment fee to be collected Various Enrollment Office Staff Collecting Fees	$35.03	1,032.4	$ 36,164.97				
Answering student's questions regarding enrollment fee collection Various Enrollment Office Staff Collecting Fees	$35.03	3,933.3	$ 137,783.50				
[illegible]g written and computer records for enrollment fee information Various Enrollment Office Staff Collecting Fees	$35.03	695.7	$ 24,370.37				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office Staff Collecting Fees	$35.03	499.8	$ 17,507.99				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office Staff Collecting Fees	$35.03	73.8	$ 2,585.21				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 254,577.01	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
m Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Spiller, Joann	Asst. Director/Financial Aid	$48.87	5.0	$ 244.35				
Weisenthal, Bob	Director of Student Aid	$53.49	5.0	$ 267.45				
Olmedo, Maria	Financial Aid Asst. Director	$52.34	5.0	$ 261.70				
de la Fontaine, Dianne	Financial Aid Tech	$43.83	1.5	$ 65.75				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 839.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
n Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Clark, Kim	Financial Aid Asst.	$17.56	4.0	$ 70.24				
Danielson, Anastasia	Financial Aid Asst.	$16.48	4.0	$ 65.92				
Hunter, Gina	Financial Aid Tech	$39.70	1.0	$ 39.70				
Kost, Kim	Financial Aid Asst.	$16.48	4.0	$ 65.92				
Lara, Evette	Financial Aid Tech	$15.45	1.0	$ 15.45				
Lopez, Daniel	Financial Aid Tech	$10.20	4.0	$ 40.80				
Lowe, Kristi	Program Manager	$49.87	4.0	$ 199.48				
Palen, Kathleen	Department Asst. 3	$31.78	4.0	$ 127.12				
Patino, Karen	Financial Aid Asst.	$11.37	4.0	$ 45.48				
Peacock, Elaine	Financial Aid Asst.	$17.16	4.0	$ 68.64				
Pearson, Melissa	Dpartment Asst. 1	$16.99	4.0	$ 67.96				
Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79	1.0	$ 48.79				
Skibinski, Heather	Financial Aid Asst.	$25.19	1.0	$ 25.19				
Spiller, Joann	Asst. Director/Financial Aid	$48.87	4.0	$ 195.48				
Sutton, Rochelle	Financial AidTech/Scholarships	$38.05	4.0	$ 152.20				
Villasenor, Sarah	Department Asst. 2	$39.62	1.0	$ 39.62				
Ward, Mary	Financial Aid Tech.	$41.30	1.0	$ 41.30				
Weisenthal, Bob	Director of Student Aid	$53.49	4.0	$ 213.96				
Williams, Angela	Financial Aid Tech.	$39.70	1.0	$ 39.70				
Wise, Angela	Financial Aid Asst.	$11.69	4.0	$ 46.76				
Olmedo, Maria	Financial Aid Asst. Director	$52.34	2.0	$ 104.68				
de la Fontaine, Dianne	Financial Aid Tech	$43.83	1.0	$ 43.83				
Olsen, Ingeborg	Department Asst. 2	$31.62	4.0	$ 126.48				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,884.70	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
m Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Jensen, Gilda	Financial Aid Tech	$42.25	1.0	$ 42.25				
Tully, Brian	Programmer/System Analayst 2	$50.40	20.0	$ 1,008.00				
Olmedo, Maria	Financial Aid Asst. Director	$52.34	12.0	$ 628.08				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,678.33	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staff Waiving Enrollment Fees	$34.00	2,452.8	$ 83,395.20				
Receiving waiver applications							
Various Financial Office Staff Waiving Enrollment Fees	$34.00	1,839.6	$ 62,546.40				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staff Waiving Enrollment Fees	$34.00	1,672.4	$ 56,861.60				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staff Waiving Enrollment Fees	$34.00	2,898.7	$ 98,555.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 301,359.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Lara, Evette	Financial Aid Tech	$15.45	155.0	$ 2,394.75				
Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79	3.0	$ 146.37				
Spiller, Joann	Asst. Director/Financial Aid	$48.87	3.0	$ 146.61				
Sutton, Rochelle	Financial AidTech/Scholarships	$38.05	9.0	$ 342.45				
Tully, Brian	Programmer/System Analayst 2	$50.40	16.0	$ 806.40				
Olmedo, Maria	Financial Aid Asst. Director	$52.34	20.0	$ 1,046.80				
de la Fontaine, Dianne	Financial Aid Tech	$43.63	10.0	$ 438.30				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,321.68	$ -	$ -	$ -	$ -

New 04/06

Kern Commu[illegible] College District
308/95 ENROLLMENT [illegible] COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	4.00	Clark, Kim	Financial Aid Asst.	$17.56	$70.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Clark, Kim Total**			$70.24		
04-05	4.00	Danielson, Anastasia	Financial Aid Asst.	$16.48	$65.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Danielson, Anastasia Total**			$65.92		
04-05	1.50	de la Fontaine, Dianne	Financial Aid Tech	$43.83	$65.75	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	1.00	de la Fontaine, Dianne	Financial Aid Tech	$43.83	$43.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	10.00	de la Fontaine, Dianne	Financial Aid Tech	$43.83	$438.30	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	12.50	**de la Fontaine, Dianne Total**			$547.88		
04-05	1.00	Hunter, Gina	Financial Aid Tech	$39.70	$39.70	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.00	**Hunter, Gina Total**			$39.70		
04-05	1.00	Jensen, Gilda	Financial Aid Tech	$42.25	$42.25	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	1.00	**Jensen, Gilda Total**			$42.25		
04-05	4.00	Kost, Kim	Financial Aid Asst.	$16.48	$65.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Kost, Kim Total**			$65.92		
04-05	1.00	Lara, Evette	Financial Aid Tech	$15.45	$15.45	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	155.00	Lara, Evette	Financial Aid Tech	$15.45	$2,394.75	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	156.00	**Lara, Evette Total**			$2,410.20		
04-05	4.00	Lopez, Daniel	Financial Aid Tech	$10.20	$40.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Lopez, Daniel Total**			$40.80		
04-05	4.00	Lowe, Kristi	Program Manager	$49.87	$199.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Lowe, Kristi Total**			$199.48		
04-05	5.00	Olmedo, Maria	Financial Aid Asst. Director	$52.34	$261.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Olmedo, Maria	Financial Aid Asst. Director	$52.34	$104.68	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	12.00	Olmedo, Maria	Financial Aid Asst. Director	$52.34	$628.08	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	20.00	Olmedo, Maria	Financial Aid Asst. Director	$52.34	$1,046.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	39.00	**Olmedo, Maria Total**			$2,041.26		
04-05	4.00	Olsen, Ingeborg	Department Asst. 2	$31.62	$126.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Olsen, Ingeborg Total**			$126.48		
04-05	4.00	Palen, Kathleen	Department Asst. 3	$31.78	$127.12	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Palen, Kathleen Total**			$127.12		
04-05	4.00	Patino, Karen	Financial Aid Asst.	$11.37	$45.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Patino, Karen Total**			$45.48		
04-05	4.00	Peacock, Elaine	Financial Aid Asst.	$17.16	$68.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Peacock, Elaine Total**			$68.64		
04-05	4.00	Pearson, Mellissa	Dpartment Asst. 1	$16.99	$67.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Pearson, Mellissa Total**			$67.96		
04-05	1.00	Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79	$48.79	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	3.00	Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79	$146.37	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	4.00	**Perez-Dykes, Lucy Total**			$195.16		
04-05	1.00	Skibinski, Heather	Financial Aid Asst.	$25.19	$25.19	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.00	**Skibinski, Heather Total**			$25.19		
04-05	5.00	Spiller, Joann	Asst. Director/Financial Aid	$48.87	$244.35	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	4.00	Spiller, Joann	Asst. Director/Financial Aid	$48.87	$195.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	3.00	Spiller, Joann	Asst. Director/Financial Aid	$48.87	$146.61	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC

Kern Commu[illegible] College District
308/95 ENROLLMENT [illegible] OLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	12.00	**Spiller, Joann Total**			$586.44		
04-05	4.00	Sutton, Rochelle	Financial AidTech/Scholarships	$38.05	$152.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	9.00	Sutton, Rochelle	Financial AidTech/Scholarships	$38.05	$342.45	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	13.00	**Sutton, Rochelle Total**			$494.65		
04-05	20.00	Tully, Brian	Programmer/System Analayst 2	$50.40	$1,008.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	16.00	Tully, Brian	Programmer/System Analayst 2	$50.40	$806.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	36.00	**Tully, Brian Total**			$1,814.40		
04-05	1,032.40	Various Enrollment Office St	Collecting Fees	$35.03	$36,164.97	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	1,032.40	Various Enrollment Office St	Collecting Fees	$35.03	$36,164.97	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,933.30	Various Enrollment Office St	Collecting Fees	$35.03	$137,783.50	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	695.70	Various Enrollment Office St	Collecting Fees	$35.03	$24,370.37	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	499.80	Various Enrollment Office St	Collecting Fees	$35.03	$17,507.99	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	73.80	Various Enrollment Office St	Collecting Fees	$35.03	$2,585.21	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	7,267.40	**Various Enrollment Office Staff Total**			$254,577.01		
04-05	2,452.80	Various Financial Office Staf	Waiving Enrollment Fees	$34.00	$83,395.20	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	1,839.60	Various Financial Office Staf	Waiving Enrollment Fees	$34.00	$62,546.40	Receiving waiver applications	Waiving student fees
04-05	1,672.40	Various Financial Office Staf	Waiving Enrollment Fees	$34.00	$56,861.60	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	2,898.70	Various Financial Office Staf	Waiving Enrollment Fees	$34.00	$98,555.80	Entering approved application information into district records; providing student award letter	Waiving student fees
	8,863.50	**Various Financial Office Staff Total**			$301,359.00		
04-05	1.00	Villasenor, Sarah	Department Asst. 2	$39.62	$39.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.00	**Villasenor, Sarah Total**			$39.62		
04-05	1.00	Ward, Mary	Financial Aid Tech.	$41.30	$41.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.00	**Ward, Mary Total**			$41.30		
04-05	5.00	Weisenthal, Bob	Director of Student Aid	$53.49	$267.45	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	4.00	Weisenthal, Bob	Director of Student Aid	$53.49	$213.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	9.00	**Weisenthal, Bob Total**			$481.41		
04-05	1.00	Williams, Angela	Financial Aid Tech.	$39.70	$39.70	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.00	**Williams, Angela Total**			$39.70		
04-05	4.00	Wise, Angela	Financial Aid Asst.	$11.69	$46.76	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Wise, Angela Total**			$46.76		
	16,462.40	**Grand Total**			$565,659.97		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$45,390,774		$45,390,774	$458,706	$44,932,068
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	6,164,173		6,164,173	822,496	5,341,677
Course and Curriculum Development	6020	1,366,657		1,366,657	26,563	1,340,094
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	319,111		319,111		319,111
Library	6120	1,427,501		1,427,501	136,299	1,291,202
Media	6130	396,458		396,458		396,458
Museums and Galleries	6140	57,665		57,665	50,018	7,647
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,243,836		1,243,836	3,130	1,240,706
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,627,003		2,627,003	130	2,626,873
Matriculation and Student Assessment	6320					
Transfer Programs	6330	5,783		5,783		5,783
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,028,022	20,686	2,007,336	214,334	1,793,002
Subtotal		$61,026,983	$20,686	$61,006,297	$1,711,676	$59,294,621

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$2,533,043	$1,212,373	$1,320,670	$20,265	$1,300,405
Health Services	6440	297,842		297,842	6,282	291,560
Student Personnel Admin.	6450	564,963		564,963	6,303	558,660
Financial Aid Administration	6460	2,297,172		2,297,172	180,503	2,116,669
Job Placement Services	6470	73,354		73,354		73,354
Veterans Services	6480	52,225		52,225		52,225
Miscellaneous Student Services	6490	542,936		542,936	5,050	537,886
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,682,759		1,682,759	1,682,759	0
Custodial Services	6530	1,654,701		1,654,701	1,654,701	0
Grounds Maintenance and Repairs	6550	1,001,289		1,001,289	1,001,289	0
Utilities	6570	2,765,968		2,765,968	2,765,968	0
Other	6590	75,544		75,544	75,544	0
Planning, Policy Making, and Coordination	6600	2,639,259		2,639,259	2,639,259	0
General Inst. Support Services	6700					
Community Relations	6710	406,738		406,738	406,738	0
Fiscal Operations	6720	4,559,748		4,559,748	4,559,748	0
Human Resources Management	6730	1,658,910		1,658,910	1,658,910	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	3,004		3,004	3,004	0
Staff Diversity	6760	21,122		21,122	21,122	0
Logistical Services	6770	1,679,689		1,679,689	1,679,689	0
Management Information Systems	6780	5,162,841		5,162,841	5,162,841	0
Subtotal		$90,700,090	$1,233,059	$89,467,031	$25,241,651	$64,225,380

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,501,061		2,501,061	2,501,061	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	165,644		165,644		165,644
Community Use of Facilities	6830	20,190		20,190		20,190
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	-18,936		-18,936		-18,936
Farm Operations	6930					
Food Services	6940	7,995		7,995		7,995
Parking	6950	306,208		306,208		306,208
Student and Co-curricular Activities	6960	273,889		273,889	2,412	271,477
Student Housing	6970	2,482		2,482		2,482
Other	6990	1,156,319		1,156,319	13,515	1,142,804
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	30,393		30,393		30,393
Physical Property Acquisitions	7100	616,267		616,267	616,267	0
(05) Total		$95,761,602	$1,233,059	$94,528,543	$28,374,906	$66,153,637
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				42.89%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional*	Noninstructional**				
		(1)	(2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	721,793	56,507	40,139	6,544		824,983
Architecture and Environmental Design	0200	143,610		2,143			145,753
Biological Sciences	0400	1,715,848	16,872	36,489	1,569		1,770,778
Business and Management	0500	1,319,415	55,778	13,937			1,389,130
Communications	0600	774,841	44,277	27,065	3,432		849,615
Computer and Information Science	0700	1,563,873	102,328	26,223	81,019		1,773,443
Education	0800	4,002,637	663,623	323,009	22,742		5,012,011
Engineering and Related Industrial Tech.	0900	1,945,076	123,288	355,111	52,386		2,475,861
Fine and Applied Arts	1000	2,739,990	87,082	183,998	5,941		3,017,011
Foreign Language	1100	1,100,224		1,078			1,101,302
Health	1200	3,716,491	492,868	166,228	242,062		4,617,649
Consumer Education and Home Economics	1300	1,334,185	180,501	86,884	7,895		1,609,465
Law	1400						
Humanities (Letters)	1500	5,149,051	46,651	13,266			5,208,968
Library Science	1600						
Mathematics	1700	3,539,441	56,735	19,068			3,615,244
Military Studies	1800						
Physical Sciences	1900	1,567,172	16,771	19,608			1,603,551
Psychology	2000	1,012,767		3,228			1,015,995
Public Affairs and Services	2100	1,290,859	190,958	169,878	35,116		1,686,811
Social Sciences	2200	3,109,588		1,951			3,111,539
Commercial Services	3000	292	2,468	9,606			12,366
Interdisciplinary Studies	4900	2,255,914	229,294	17,427			2,502,635
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,046,664					2,046,664
Subtotal - Instructional Activities	**599**	41,049,731	2,366,001	1,516,336	458,706		45,390,774

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,524,564	817,113	822,496		6,164,173
Course and Curriculum Development	6020		965,490	374,604	26,563		1,366,657
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	6000		5,490,054	1,191,717	849,059		7,530,830
Instructional Support Services (6100)							
Learning Center	6110	237,592	78,644	2,875			319,111
Library	6120		1,146,682	144,520	136,299		1,427,501
Media	6130		390,368	6,090			396,458
Museums and Galleries	6140			7,647	50,018		57,665
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	6100	237,592	1,615,694	161,132	186,317		2,200,735
Admissions and Records	6200		1,211,949	28,757	3,130		1,243,836
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,570,159	56,714	130		2,627,003
Matriculation and Student Assessment	6320						
Transfer Programs	6330		5,783				5,783
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	6300		2,575,942	56,714	130		2,632,786

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,635,263	157,739	214,334	20,686	2,028,022
Extended Opportunity Prgms. & Services (EOPS)	6430		1,247,818	52,587	20,265	1,212,373	2,533,043
Health Services	6440		197,775	93,785	6,282		297,842
Student Personnel Administration	6450		526,495	32,165	6,303		564,963
Financial Aid Administration	6460		2,036,367	80,302	180,503		2,297,172
Job Placement Services	6470		71,015	2,339			73,354
Veterans Services	6480		52,225				52,225
Miscellaneous Student Services	6490		484,127	53,759	5,050		542,936
Subtotal - Other Student Services	**6400**		6,251,085	472,676	432,737	1,233,059	8,389,557
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,153,906	524,103	4,750		1,682,759
Custodial Services	6530		1,486,490	166,878	1,333		1,654,701
Grounds Maintenance and Repairs	6550		775,815	136,452	89,022		1,001,289
Utilities	6570			2,765,968			2,765,968
Other Operation and Maintenance of Plant	6590		29,743	48,231	(2,430)		75,544
Subtotal - Operation and Maintenance of Plant	**6500**		3,445,954	3,641,632	92,675		7,180,261
Planning, Policymaking, and Coordination	**6600**		1,954,931	602,562	81,766		2,639,259

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		250,154	154,758	1,826		406,738
Fiscal Operations	6720		2,853,018	1,687,213	19,517		4,559,748
Human Resources Management	6730		1,181,892	476,272	746		1,658,910
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750			3,004			3,004
Staff Diversity	6760		13,200	7,922			21,122
Logistical Services	6770		855,158	587,075	237,456		1,679,689
Management Information Systems	6780		3,280,968	1,443,486	438,387		5,162,841
Other General Institutional Support Services	6790		2,117,513	364,547	19,001		2,501,061
Subtotal - General Institutional Support Services	**6700**		10,551,903	4,724,277	716,933		15,993,113
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	66,145	77,924	21,575			165,644
Community Use Facilities	6830		20,190				20,190
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	66,145	98,114	21,575			185,834

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		1,088	(20,024)			(18,936)
Farm Operations	6930						
Food Services	6940		7,995				7,995
Parking	6950		303,491	2,717			306,208
Student and Co-curricular Activities	6960		173,000	98,477	2,412		273,889
Student Housing	6970			2,482			2,482
Other Ancillary Services	6990		893,179	249,625	13,515		1,156,319
Subtotal - Ancillary Services	6900		1,378,753	333,277	15,927		1,727,957
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090		30,393				30,393
Subtotal - Auxiliary Operations	7000		30,393				30,393
Physical Property and Related Acquisitions (7100)	7100		270,380	117,918	227,969		616,267
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					3,272,534	3,272,534
Student Aid	7320					481,619	481,619
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	7300					3,754,153	3,754,153
TOTAL EXPENDITURES and OTHER OUTGO	391	41,353,468	37,241,153	12,868,573	3,065,349	4,987,212	99,515,755

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 2**	13,466
Avg. time p/account	4.6
Total Time (in minutes)	61944
Per Hour	60
Hours Worked **(** Activity 11)**	**1,032.4**
***EFC 2**	13,466
Avg. time p/student	4.6
Total Time (in minutes)	61944
Per Hour	60
Hours Worked **(** Activity 12)**	**1,032.4**
***EFC 1**	59,000
Avg. time p/question	4.0
Total Time (in minutes)	236000
Per Hour	60
Hours Worked **(** Activity 13)**	**3,933.3**
***EFC 2 (default)**	13,466
Avg. time p/file	3.1
Total Time (in minutes)	41745
Per Hour	60
Hours Worked **(** Activity 14)**	**695.7**
***EFC 4**	5,767
Avg. time p/account	5.2
Total Time (in minutes)	29988
Per Hour	60
Hours Worked **(** Activity 15)**	**499.8**
***EFC 5 (default)**	703
Avg. time p/student	6.3
Total Time (in minutes)	4429
Per Hour	60
Hours Worked **(** Activity 16)**	**73.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out *receipt/course list/other report.*
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	33,447
Avg. time p/question	4.4
Total Time (in minutes)	147167
Per Hour	60
Hours Worked **(** Activity 21)**	**2,452.8**
***EFW 6**	33,447
Avg. time p/application	3.3
Total Time (in minutes)	110375
Per Hour	60
Hours Worked **(** Activity 22)**	**1,839.6**
***EFW 6**	33,447
Avg. time p/evaluation	3.0
Total Time (in minutes)	100341
Per Hour	60
Hours Worked **(** Activity 23)**	**1,672.4**
***EFW 8 (default)**	0
Avg. time p/application	4.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	33,447
Avg. time p/application	5.2
Total Time (in minutes)	173924
Per Hour	60
Hours Worked **(** Activity 25)**	**2,898.7**
***EFW 8**	0
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		2		1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Allday, Linda	Admin. And Records Tech.1	2	2	2	3	5	
Bozarth-Gonzalez, Lois	Admin. And Records Supervisor	9	8	5	7	5	5
Candalaria, Roselee	Admin. Asst.	2	2	1	1		
Cox, Dorothy	Billing/Cashier Tech. 2		1	2		3	2.5
Dargatz, Becky	Business Services Specialist	4	3	4	2	5	6
Estrada, Juan	A&R Asst. FLB	1	1	2	1		
Fidel, Dawn	A&R Tech 1	10	14	5	5	12	8
Jackson, Christy	Admissions Tech	5.0		5.0			
James, May	Billing/Cashier Tech 1	3	2	2		2	5
Martell, Deborah	Dept. Asst. 2	5	12	5	5	2	3
Odermann, Shawn	Accounting Tech 2	2.5	3.5	3	2	2	2.5
Olivera, Lori	Program Manager	8	7	8	5	3	6
Pafford, Janet	A&R Asst. LB	2	2	2	1		
Puget, Lynne	Admissions Tech.	5.0		5.0			
Rauser, Edwina	Accounting Supervisor	8		9		15	20
Shaw, Diane	A&R tch. 1	2	2	3	2	3	
Stracener, Martha	Payroll Tech.	4.5	4.5	4.5			4.5
Average		**4.6**	**4.6**	**4.0**	**3.1**	**5.2**	

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and PHR lists provided by client.
Findings:

Staff	Title	04-05
Allday, Linda	Admin. And Records Tech.1	$31.84
Bozarth-Gonzalez, Lois	Admin. And Records Supervisor	
Candalaria, Roselee	Admin. Asst.	
Cox, Dorothy	Billing/Cashier Tech. 2	$33.91
Dargatz, Becky	Business Services Specialist	$48.41
Estrada, Juan	A&R Asst. FLB	
Fidel, Dawn	A&R Tech 1	$30.26
Jackson, Christy	Admissions Tech	$34.54
James, May	Billing/Cashier Tech 1	$33.40
Martell, Deborah	Dept. Asst. 2	$29.40
Sharon Odermann	Accounting Tech 1	
Olivera, Lori	Program Manager	$47.46
Pafford, Janet	A&R Asst. LB	$15.64
Puget, Lynne	Admissions Tech.	$32.69
Rauser, Edwina	Accounting Supervisor	$50.92
Shaw, Diane	A&R tch. 1	$34.54
Stracener, Martha	Payroll Tech.	$32.41
Average PHR		**$35.03**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Cha, Vieng	Financial Aid Tech	10	8	6	10	15	5
Clark, Kim	Financial Aid Asst.	2.5	2.5	2.5	10	4	4
Cruz, Erin	Financial Aid Tech.	10	6	5	9	8	5
Danielson, Anastasia	Financial Aid Asst.	2.5	2.5	2.5	2.5	4	4
De La Fontaine, Diane	Financial Aid Tech.	1.5	0.5	2.0	1.5	2.0	2.0
Dykes, Perez-Lucy	Asst. Director of Financial Aid	3.0	0.5	1.0	1.5	3.0	1.0
Fidel, Dawn	A&R Tech 1	10	14	5	5	12	8
Hunter, Gina	Financial Aid Asst.	5	1	1	1	1	1
Jensen, Gilda	Financial Aid Tech.	2.5	0.5	2.0	0.5	2.5	1.5
Kost, Kim	Financial Aid Asst.	2.5	2.5	2.5	2.5	4	4
Evette, Lara	Financial Aid Asst.	5	2	2	1	2	2
Lopez, Daniel	Financial Aid Asst.	2.5	2.5	2.5	5	4	4
Lowe, Kristi	Program Manager	2	2.5	2.5	2.5	2	2
Olmedo, Maria	Financial Aid Asst. Director	8	7	5	9	10	4
Olsen, Inge	Department Asst. 2	2.5	2.5	2.5	6	4	4
Ortega, John	Financial Aid Tech.	13	8	8	12	12	6
Palen, Kathleen	Dept. Asst. 3	2	2.5	2.5	5	2	2
Patino, Karen	Financial Aid Asst.	2.5	2.5	2.5	4.5	4	4
Peacock, Elaine	Financial Aid Asst.	2.5	2.5	2.5	2.5	4	4
Pearson, Mellissa	Financial Aid Asst.	2.5	2.5	2.5	10	4	4
Skibinski, Heather	Payroll Tech.	5	2	2	1	2	2
Spiller, Joann	Asst. Director of Financial Aid	2.5	2.5	2.5		4	4
Sutton, Rochelle	Financial Aid Tech/Scholarships	2.5	2.5	2.5	10	4	4
Villasenor, Sarah	Educational Advisor	10	5	5	10	20	10
Ward, Mary	Financial Aid Tech.	2	1	3	0.5	2	1.5
Weisenthal, Bob	Associate Dean of Student Lifw	2.5	2.5	2.5		4	4
Williams, Angela	Financial Aid Tech.	3	2	3	3	3	3
Wise, Angela	Financial Aid Asst.	2.5	2.5	2.5	2.5	4	4
Average		**4.4**	**3.3**	**3.0**	**4.9**	**5.2**	**3.7**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-05
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and PHR lists provided by client.
Findings:

Staff	Title	04-05
Cha, Vieng	Financial Aid Tech	$37.11
Clark, Kim	Financial Aid Asst.	$17.56
Cruz, Erin	Financial Aid Tech.	$41.08
Danielson, Anastasia	Financial Aid Asst.	$16.48
De La Fontaine, Diane	Financial Aid Tech.	$43.83
Fidel, Dawn	A&R Tech 1	$30.26
Hunter, Gina	Financial Aid Asst.	$39.70
Jensen, Gilda	Financial Aid Tech.	$42.25
Kost, Kim	Financial Aid Asst.	$16.48
Evette, Lara	Financial Aid Asst.	
Lopez, Daniel	Financial Aid Asst.	$10.20
Lowe, Kristi	Program Manager	$49.87
Olmedo, Maria	Financial Aid Asst. Director	$52.34
Olsen, Ingeborg	Department Asst. 2	$31.62
Ortega, John	Financial Aid Tech.	$42.82
Palen, Kathleen	Dept. Asst. 3	$31.78
Patino, Karen	Financial Aid Asst.	$11.37
Peacock, Elaine	Financial Aid Asst.	$17.16
Pearson, Mellissa	Financial Aid Asst.	$16.99
Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79
Skibinski, Heather	Payroll Tech.	$25.19
Spiller, Joann	Asst. Director of Financial Aid	$48.87
Sutton, Rochelle	Financial Aid Tech/Scholarships	$38.05
Villasenor, Sarah	Educational Advisor	$39.62
Ward, Mary	Financial Aid Tech.	$41.29
Weisenthal, Bob	Associate Dean of Student Lifw	$53.49
Williams, Angela	Financial Aid Tech.	$39.70
Wise, Angela	Financial Aid Asst.	
Average PHR		**$34.00**

Conclusion: Findings go forward to EFCW -2.

Schedule 4
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	54,779	60,309	59,243	63,563	63,518	61,562	59,000
EFC 2	1.8-1 2.	Paid Enrollment fees	16,349	19,707	19,568	18,543	17,893	16,332	13,466
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	17,429	20,227	22,351	25,391	27,308	28,441	30,667
EFC 4	1.8-2 1.	Delinquencies collections	900	3,650	3,000	7,377	2,870	3,574	5,767
EFC 5	1.8-2 2.	Refunds	248	373	435	471	570	645	703
EFW 6	1.8-3 1.	Waivers Requested	19,433	20,289	25,981	27,898	29,588	31,568	33,447
EFW 7	1.8-3 2.	Waivers Approved	19,433	20,289	25,981	27,898	29,588	31,568	33,447
EFW 8	1.8-3 (1-2)	Waivers Denied	0	0	0	0	0	0	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Kern CCD
For 2004 Summer Term

Data Current As Of July 13, 2006 09:43:25

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	9,413

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9,413
24,536
25,051
59,000

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Kern CCD
For 2004 Fall Term

Data Current As Of July 13, 2006 09:43:32

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	24,536

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Kern CCD
For 2005 Spring Semester

Data Current As Of July 13, 2006 09:43:47

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	25,051

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Kim Clark	Financial Aid Assistant
Employee Name	Exact Position Title

CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:					4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Clark Date 5/1/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Anastasia Danielson	Financial Aid Assistant	
Employee Name	Exact Position Title	
CCCC/FA/ESCC/Mammoth	(760) 9342875	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	98-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B) Enrollment Waiver Process:						4	4	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anastasia Danielson by JSpiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Dianne L. de la Fontaine — Employee Name
Financial Aid Technician — Exact Position Title

Bakersfield College — College/Department/Location
(661) 395-4429 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			2	2	1.5	1.5	1.5	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						1		
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	35	35	30	30	25	10	10	
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dianne L. de la Fontaine Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Gina Hunter — Employee Name

financial Aid Technician — Exact Position Title

Bakersfield College — College/Department/Location

financial aid 395-4480 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	~~05-06~~
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							8	4
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	150 X	135 X	88 X	95 X	99 X			
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gina Hunter — Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: KCCD

GILDA JENSEN — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

FINANCIAL AID — College/Department/Location

3954418 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ 28 18 13 ____ ____ ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gilda Jensen Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Kim Kost	Financial Aid Assistant	
Employee Name	Exact Position Title	
CCCC/FA/ESCC/Bishop	(760) 872-1565	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Kost by JoAnn Spiller Date 4-28-06

If you have any questions, please contact JoAnn Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Evette Lara — Employee Name

Financial Technician — Exact Position Title

BC Financial Aid — College/Department/Location

395-4721 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						144	155	
TOTALS:						144	155	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evette Lara — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Daniel Lopez — Employee Name

Financial Aid Assistant — Exact Position Title

CCCC/FA/KRV campus — College/Department/Location

(760) 379-5501 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						4	4	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Lopez by yspiller Date 4-28-06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College Dist

Kristi Lowe — Employee Name

Program Manager — Exact Position Title

Cerro Coso/South Kern — College/Department/Location

661-259-8644 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	4	4	4	4	4	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristi Lowe (signed) Date 4/28/06

If you have any questions, please contact JoAnn Spiller, at (760) 384-6344

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: KERN COMMUNITY COLLEGE DISTRICT Fiscal Year: 04-05

MARIA PERLA OLMEDO
Employee Name

FINANCIAL AID ASSISTANT DIRECTOR
Exact Position Title

PORTERVILLE COLLEGE FINANCIAL AID DEPT (559) 791-2223 (559) 791-2250
Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B 3 4	Updated Procedures & Policies to determine eligibility for waivers	5
/ /	1A 1B 2A 2B 3 4	Trained staff on eligibility for eligibility for student to receive fee waivers.	2
/ /	1A 1B 2A 2B 3 4	Recording of FAFSA & Fee Waiver applications	12
/ /	1A 1B 2A 2B 3 4	Reporting of Data for State Reports.	20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/28/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Inge Olsen — Employee Name

Department Assistant II — Exact Position Title

CCCC/FA/KRV campus — College/Department/Location

(760) 379-5501 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	4

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

TOTALS:	4	4	4	4	4	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen — Date 4-20-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Kathleen Palen — Employee Name

Dept. Assistant III — Exact Position Title

Cerro Coso Financial Aid / So. Kern — College/Department/Location

661.258.8644 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	FISCAL YEARS- Report time in hours							
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	4	4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	4	4	4	4	4	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Palen Date 4/28/06

If you have any questions, please contact Jolene Spiller, at 760.384.6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Karen Patino — Employee Name
Financial Aid Assistant — Exact Position Title

CCCC/FA/KRV campus — College/Department/Location
(760) 379-5501 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:							4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Patino Date 4/28/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Elaine Peacock — Employee Name
Financial Aid Assistant — Exact Position Title

CCCC/FA/South Kern campus — College/Department/Location
(661) 256-8644 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process: 4 4

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

TOTALS: 4 4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Peacock by JSpiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Mellissa Pearson	Department Assistant I
Employee Name	Exact Position Title

CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mellissa Pearson Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

98-99: Financial Aid Technician

Lucy Perez-Dykes

99-05 Asst. Director of Financial Aid

Employee Name / Exact Position Title

Bakersfield College-Financial Aid (661)395-4423 (12mo/11mo/10mo/hrly)

College/Department/Location / Telephone # / Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	35	25	15	5	5	3	
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Perez-Dykes Date 4.26.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Heather Skibinski — Financial Aid Asst.

Employee Name — Exact Position Title

BC Financial Aid — 395-4020 — (12mo/11mo/10mo/hrly) ~~Work~~ year length

College/Department/Location — Telephone #

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	2010	6	10					
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Heather Skibinski — Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Joann Spiller — Employee Name

Assistant Director/Financial Aid — Exact Position Title

CCCC/FA/IWV campus — College/Department/Location

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
(B) Enrollment Waiver Process:	5	5	5	5	5	5	5	5 - jp
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	4	4	4	4	4	4	4	jp - 4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	3	3	3	3	3	3	3	9 - jp
TOTALS:	12	12	12	12	12	12	12	18

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joann S. Spiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Rochelle Sutton — Employee Name

Financial Aid Technician/Scholarships — Exact Position Title

CCCC/FA/IWV campus — College/Department/Location

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:		4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.		9	9	9	9	9	9	0
TOTALS:		91	91	91	91	91	91	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rochelle Sutton Date 4/28/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District Fiscal Year: 2004-2005

Brian Tully
Employee Name

Programmer / Systems Analyst II
Exact Position Title

Learning Services Center - IT
Department/Location

661 336 5098
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A 2B (3) 4	Processing BOGWC as part of Record Load processing	20
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 (4)	Reporting to CCCCO	16
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brian Tully Date 2006-May-1

If you have any questions, please contact _____, at _____

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MAY 0 3 2006

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College Dist.

Sarah Villaseñor — Employee Name

Department Assistant II — Exact Position Title

BC/ Financial Aid — College/Department/Location

395-4582 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		8			16			
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College Dist.

MARY E. WARD — Employee Name

FINANCIAL AID TECH I — Exact Position Title

FINANCIAL AID — College/Department/Location

395-4448 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
✓ **Code 4** State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	37	35	29					
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary E. Ward — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Bob Weisenthal	Director of Student Aid
Employee Name	Exact Position Title

CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	5	5	5	5	5	5	5	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	4	4	4	4	4	4	4	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	9	9	9	9		9	9	9

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bob Weisenthal by Joann Spiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Comunity College District

Angela Williams — Employee Name
Financial Aid Technician — Exact Position Title

Office of Financial Aid — College/Department/Location
~~(661)395-4427~~ — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							1	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	30	25	15	10	4	0	
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angela Williams Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Angela Wise	Financial Aid Assistant
Employee Name	Exact Position Title

CCCC/FA/South Kern campus	(661) 256-8644	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	(04-05)	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process: 4

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

TOTALS: 4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angela Wise by Joann Spiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Admissions & Records
Department/Location

Linda Allday
Employee Name

Admissions & Records Tech I.
Exact Position Title

395-4332
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best collection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda Allday Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

ADMISSIONS & RECORDS - CC
Department/Location

LOIS J. GONZALEZ-BAZARTH
Employee Name

ADMISSIONS & RECORDS SUPERVISOR
Exact Position Title

760 384-6360
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lois J. Gonzalez-Bazarth Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BC - Kern — District

AIK — Department/Location

Rosehee Candelaria — Employee Name

Admissions Assistant — Exact Position Title

3954301 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sue Vaughn for Rosehee Candelaria Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Business Services
Department/Location

Dorothy J Cox
Employee Name

Billing/Cashier Technician II
Exact Position Title

461-395-4493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1to 2 Mins	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 Mins	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Mins		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 to 3 Mins			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dorothy J. Cox Date May 18, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Bakersfield College - Business Services
Department/Location

BECKY DAKGATZ
Employee Name

Business Services Specialist
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Becky Dakgatz Date 5-18-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions & Records - BC
Department/Location

Ivan Estrada
Employee Name

A&R Asst - FLB
Exact Position Title

4049
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ivan Estrada Date 9-29-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Dawn Fidel
Employee Name

Air R Tech I
Exact Position Title

7603846358 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	17	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dawn Fidel Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Christy Jackson
Employee Name

Admissions Tech
Exact Position Title

395-4303
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5.01		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5.01		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Jackson Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Bus. Services
Department/Location

Mary James
Employee Name

Billing/Cashier Tech I
Exact Position Title

395-4491
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, ~~and printing out a list of enrolled courses.~~	3		/			
Code 12 Calculating the enrollment fee, collect the payment or receivable, ~~update student account~~/record, and print out receipt/~~course list~~/other report.	2		/			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	/				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				/	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5			/		/

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary E James Date 5/18/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Deborah Martell
Employee Name

Department Assistant II
Exact Position Title

760-872-1565
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time In Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah C Martell Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist — District
Business Services B.C. Campus — Department/Location
SHARON ODERMANN — Employee Name
Accounting Technician II — Exact Position Title
661-395-4853 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-4				✓	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-3			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Odermann Date 5-18-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

CC Online
Department/Location

Lori Olivera
Employee Name

Program Manager
Exact Position Title

760-872-5310
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time In Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivera Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions & Records-BC
Department/Location

Janet Pafford
Employee Name

A&R Assistant-LB
Exact Position Title

4049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sue Chung for Janet Pafford Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Lynne Puget
Employee Name

Admissions Tech
Exact Position Title

395-4301
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5.01		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5.01		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynne Puget Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

This is my best recollection estimate

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD BC — District

Bursar Services — Department/Location

Edwina Rawson — Employee Name

Acctg Spvsr. — Exact Position Title

395-4918 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8				✓	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	9				✓	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Edwina Rawson Date 5-18-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A/R
Department/Location

Diane Shaw
Employee Name

A/R Technician I
Exact Position Title

4308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2			✓		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best reconstruction estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Shaw Date 4/26

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: [illegible]
Department/Location: Bus Services
Employee Name: [illegible]
Exact Position Title: Payroll Tech
Telephone #: 328-7488
12mo/11mo/10mo/hrly Work year length(circle)
Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible] Date [illegible]

If you have any questions, please contact _____, at _____

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

VIENG S. CHA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature V. Cha Date 4/26/06 4/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Kim Clark — Employee Name

Financial Aid Assistant — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Clark — Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

Erin Cruz
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erin Cruz Date 4/27/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Anastasia Danielson
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anastasia Danielson by jspiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID, BAKERSFIELD COLLEGE
Department/Location

DIANNE L. DE LA FONTAINE
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

Telephone #

12mo/~~11mo/10mo/9mo~~
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dianne L. de la Fontaine Date 3/30/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

FINANCIAL AID
Department/Location

LUCY PEREZ-DYKES
Employee Name

ASSISTANT DIRECTOR OF FINANCIAL AID
Exact Position Title

(661) 395-4423
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3.0	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Perez-Dykes Date 4.3.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Dawn Fidel
Employee Name

Air Tech I
Exact Position Title

7603846358
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dawn Fidel Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
Financial Aid — Department/Location
Gina Hunter — Employee Name
Financial Aid Assistant — Exact Position Title
395-4480 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gina Hunter Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

BC FINANCIAL AID OFFICE
Department/Location

GILDA JENSEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

661 395-4418
Telephone #

12mo/~~XXXXXXXXXXXXXXX~~
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02
02-03 03-04 04-05 ~~XXXXXX~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gilda Jensen Date 3/30/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Kim Kost
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Kost by jspiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
BC Financial Aid — Department/Location
Evette Lara — Employee Name
Financial Aid Assistant — Exact Position Title
3954724 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evette Lara Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Daniel Lopez
Employee Name

Fiancial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Lopez by JSpitler Date 4-27-06

If you have any questions, please contact Joann Spitler, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist — District

Cerro Coso / South Kern — Department/Location

Kristi Lowe — Employee Name

Program Manager — Exact Position Title

661-258-8644 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Kristi Lowe — Date 4/28/06

If you have any questions, please contact JoAnn Spillers, at 760-384-6344

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

MARIA PERLA OLMEDO
Employee Name

FINANCIAL AID ASSISTANT DIRECTOR
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Inge Olsen
Employee Name

Department Assistant II
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	25	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-28-06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

JONN ORTEGA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	13	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Ortega Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District

Financial Aid / So. Kern — Department/Location

Kathleen Palen — Employee Name

Dept. Assistant III — Exact Position Title

Cell. 258.8644 — Telephone #

12mo/11mo/10mo/hrly (12mo) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Palen Date 4/28/06

If you have any questions, please contact JoAnn Spiller, at 760.384.6344

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVER ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Karen Patino
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Patino Date 4-29-06

If you have any questions, please contact JOANN V. Spiller at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Elaine Peacock
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Peacock by ppw Date 4-27-06

If you have any questions, please contact Joann Spitler, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to *implement* each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Mellissa Pearson
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mellissa Pearson Date 4/27/10

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Financial Aid — BC
Department/Location

Heather Skibinski
Employee Name

Payroll Technician
Exact Position Title

395-4020
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Heather Skibinski Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Joann Spiller
Employee Name

Asst. Director of
Financial Aid ~~Technician~~ JS
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature JoAnn V Spiller Date 4-26-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
3068/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Rochelle Sutton
Employee Name

Financial Aid Technician/Scholarships
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rochelle Sutton Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
Financial Aid Bakersfield College — Department/Location
Sarah Villasenor — Employee Name
Educational Advisor — Exact Position Title
Tel 3954582 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

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Employee Signature _____ Date 3/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID OFFICE BAKERSFIELD COLLEGE
Department/Location

MARY E. WARD
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

395-4448
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

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Employee Signature Mary E. Ward Date 3-30-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Bob Weisenthal
Employee Name

Associate Dean of Student Life
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: **98-99** 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 *Workload Multiplier* (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

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Employee Signature Bob Weisenthal by Joann Spiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Office of Financial Aid
Department/Location

Angela Williams
Employee Name

Financial Aid Technician
Exact Position Title

(661) 395-4424
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

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Employee Signature Angela Williams Date 4/3/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Angela Wise
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angela Wise-Ly Spoiler Date 4-27-06

If you have any questions, please contact Joann Spoiler, at (760) 384-6344

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	9,328	9,704	9,539	10,137	9,531	9,700	9,413	
Fall	21889	24420	24015	25957	26659	24992	24536	
Winter/ Intersession								
Spring	23562	26185	25689	27469	27328	26870	25051	
Total	54779	60309	59243	63563	63518	61562	59000	
2. Number of students who paid enrollment fees:								
Summer	--	3272	3083	2934	2908	2117	1539	
Fall	8098	8968	8266	7879	7555	6685	5724	
Winter/ Intersession								
Spring	8251	7467	8219	7730	7430	7530	6203	
Total	16349	19707	19568	18543	17893	16332	13466	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	5858	8428	8920	10195	11260	11544	12434	
Fall	7959	8187	9143	10555	11260	11544	12434	
Winter/ Intersession								
Spring	3612	3612	4288	4641	4788	5353	5799	
Total	19429	20227	22351	25391	22254	28441	30667	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: John R. Griffith Date 5/18/06

John R. Griffith — Dir Business Services

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	--	--	--	177	198	74	197	--
Fall	--	--	--	--	--	--	--	--
Winter/Intersession	--	--	--	--	--	--	--	--
Spring	900	3650	3000	7200	2672	3500	5570	--
Total	900	3650	3000	7377	2870	3574	5767	--
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	23	57	69	95	107	175	160	
Fall	211	204	204	217	270	247	316	
Winter/Intersession	--	--	--	--	--	--	--	--
Spring	14	112	162	159	193	223	227	--
Total	248	373	434	471	570	655	703	--

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/18/06

John R. Corcoran — Dir. Business Services

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer	7860	8428	11075	11005	11883	12511	13351	
Fall	7961	8219	10574	11976	12555	13655	14199	
Winter/Intersession								
Spring	3612	3642	4332	4917	5150	5402	5897	
Total	19433	20289	25981	27898	29588	31568	33447	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer	7860	8428	11075	11005	11883	12511	13351	
Fall	7961	8219	10574	11976	12555	13655	14199	
Winter/Intersession								
Spring	3612	3642	4332	4917	5150	5402	5897	
Total	19433	20289	25981	27898	29588	31568	33447	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/18/06

John R. Griffith
Employee Name: (print)

Dir. Business Services
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Enrollment Fee Collection and Waivers
#1 Number of Enrollment fee waivers requested (BOGG, etc) approved (BOGG, etc.)
#2 Number of Enrollment fee waivers approved (BOGG, etc) approved (BOGG, etc.)
Included Programs: Apprenticeship, Bakersfield Fire Dept, Kern Cnty Fire Dept, BPD, KCS
Data to be entered on Form EFCW 1.8-3, Page 28, #1 and #2

Kern Community College District

Campus	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
BC, CC, PC	70 -Summer	7,858	8,428	8,920	10,195	11,260	11,544	12,434
(data from Brian's report)	30- Fall	7,959	8,187	9,143	10,555	11,206	11,544	12,434
	Winter/Intersession							
	50- Spring	3,612	3,612	4,288	4,641	4,788	5,353	5,799
	Total	**19,429**	**20,227**	**22,351**	**25,391**	**27,254**	**28,441**	**30,667**

BC, CC, PC - Apprenticeship	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
(data from Becky D.)	70- Summer	-	-	1,337	347	414	385	317
	30- Fall	-	1	141	376	396	351	293
	Winter/Intersession							
	50- Spring	-	-	-	2	-	-	-
	Total	**-**	**1**	**1,478**	**725**	**810**	**736**	**610**

BC - Bakersfield Fire Dept	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
(data from Becky D.)	70- Summer	2		212	15		40	
	30- Fall	2	1	228	187	170	149	130
	Winter/Intersession							
	50- Spring	-		10	170			
	Total	**4**	**1**	**450**	**372**	**170**	**189**	**130**

BC - Kern Cnty Fire Dept	Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
(data from Becky D.)	70- Summer			497	127	150	187	330
	30- Fall			927	782	735	884	618
	Winter/Intersession							
	50- Spring			3	23	130	49	98
	Total	**-**	**-**	**1,427**	**932**	**1,015**	**1,120**	**1,046**

BC - Public Safety - BPD
Banner ID PUBSAF1
(data from Becky D.)

Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
70- Summer			109	320	22	25	28
30- Fall			104	55	25	20	204
Winter/Intersession							12
50- Spring				41	232		
Total	-	-	213	416	279	45	244

BC - Public Safety - KCS
Banner ID PUBSAF
(data from Becky D.)

Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
70- Summer				1	37	330	242
30- Fall		30	31	21	23	707	520
Winter/Intersession							
50- Spring		30	31	40			
Total	-	60	62	62	60	1,037	762

Combined Totals

Grand Total

Term	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
70- Summer	7,860	8,428	11,075	11,005	11,883	12,511	13,351
30- Fall	7,961	8,219	10,574	11,976	12,555	13,655	14,199
Winter/Intersession							
50- Spring	3,612	3,642	4,332	4,917	5,150	5,402	5,897
Total	19,433	20,289	25,981	27,898	29,588	31,568	33,447

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

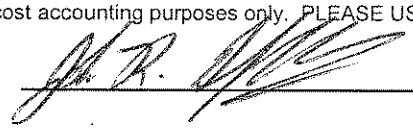
District: Kern Communitiy College District

REVISED 7-12-06

The following cost accounting statistics will be used to calculate your reimbursement.
Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$ 2,517,751.00	$ 2,988,939.00	$ 3,127,390.00	$ 3,272,399.00	$ 3,231,809.00	$ 5,307,205.00	$ 7,639,762.00	
2. Enrollment Fees Refunded	$ 123,875.10	$ 147,908.89	$ 142,314.99	$ 146,232.21	$ 154,929.82	$ 256,158.71	$ 212,575.59	
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 2,393,875.90	$ 2,841,030.11	$ 2,985,075.01	$ 3,124,166.79	$ 3,076,879.18	$ 5,051,046.29	$ 7,427,186.41	
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 2,319,925.00	$ 2,226,228.20	$ 2,567,153.00	$ 2,892,010.50	$ 2,961,641.00	$ 4,790,750.50	$ 7,101,425.00	
4B. 2% Enrollment Fees Waived (Line 4A x 2%	$ 46,398.50	$ 44,524.56	$ 51,343.06	$ 57,840.21	$ 59,232.82	$ 95,815.01	$ 142,028.50	
4 % Enrollment Fees Waived (Line 4A x 7%)	$162,394.75	$155,835.97						
5. Number of credit units for which enrollment fees were waived.								
Summer			104587	115780	122877	119354	176696	
Fall			110821	126817	126416	126105	129269	
Winter/Intersession								
Spring			17970	20469	19947	20694	23167	
TOTAL x $0.91 per credit			212,373.98	239,390.06	245,008.40	242,199.23	299,510.12	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowedge or information." This information isued for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature:  Date 5/18/2006

John R. Griffith
Employee Name: (print)

Director, Budget & Business Operations
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Subj: **308/95 Enrollment Fee Collection/Waivers FY98-99 to 04-05 Financial Aid Assistants**
Date: 6/21/2006 2:28:06 PM Pacific Standard Time
From: mvargas@bakersfieldcollege.edu
To: Smpsixten@aol.com
CC: jgriffit@bakersfieldcollege.edu

Sergio,

I received your fax dated 6/20/06 requesting clarification on Financial Aid Assistants salaries ranging from $5,661 to $13,175. Your questions were whether these are part time and how many hours a year are their salaries based on.

I checked the Financial Aid Assistant positions listed on the report for FY04-05. Some of the positions were full-time positions that get regular pay. However, some of the positions are part-time (FTE .48), salaries around $13,000. The $5,661 to $13,175 variances were due to some of the staff in these positions were only employed part of the year, therefore, salaries were less than others. See the following examples from FY2004-05 report:

FY2004-05 -- Position -- Financial Aid Assistant

Position #	Name	Wages Paid	FTE	Hrs per pay	Notes
BMC133	Lara, E.	$1,112.12	0.48	173.33	employed 1 month
BMC298	Garza, C.	$8,975.12	1	173.33	full-time employee but worked 5 months in this position
BMC511	Saenz, E.	$13,245.36	0.475	82.33	
CMC155	Clark, K.	$13,810.03	0.48	82.33	
CMC163	Lopez, D.	$14,667.40	0.48	82.33	
CMC165	Peacock, E.	$740.20	0.48	82.33	employed 1 month
CMC165	Wise, A.	$5,050.38	0.48	82.33	employed 6 months
CMC166	Pearson, M.	$13,496.37	0.48	82.33	
CMC167	Kost, K.	$12,933.32	0.48	82.33	
CMC168	Danielson, A.	$10,938.48	0.48	82.33	employed 5 months
CMC170	Patino, K.	$9,926.03	0.48	82.33	employed 5 months

Please call me if you have any questions.

Maria

Maria R. Vargas

Bakersfield College
Business Services
(661) 395-4490
(661) 395-4266 FAX
mvargas@bakersfieldcollege.edu

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LARA

EXPENDED LABOR BUDGET ORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Abair, Tracy	BMC130	Department Assistant II	14,337.38	3,606.14	17,791.56	1,587.06	-3,454.18	2,019.08	-1,435.10
Ackland, John R	BMF001	Instructor, Biology	99,379.46	24,531.89	99,379.00	25,430.24	.46	-898.35	-897.89
Acosta, Helen R	BMF002	Instructor, Speech	68,428.00	20,508.20	70,383.00	22,733.21	-1,955.00	-2,225.01	-4,180.01
Acosta, Jo A	BMC160	Department Assistant III	35,839.59	18,220.45	36,098.03	18,874.07	-258.44	-653.62	-912.06
Adams, Steve E	BMC002	Receiving Clerk	35,911.80	19,190.23	37,327.57	18,918.63	-1,415.77	271.60	-1,144.17
Agenjo, Anna M	BMF003	Dir Library, 205 Days	83,489.89	22,109.36	82,926.60	22,187.90	563.29	-78.54	484.75
Aguirre, Dickson S	BMC107	Groundsworker I	30,921.36	18,114.68	12,372.73	7,273.42	18,548.63	10,841.26	29,389.89
Ahl, Judy L	BMC449	Info Srvs Coord/Help Desk Tech	45,391.63	21,233.33	45,391.68	21,032.25	-.05	201.08	201.03
Albanes, Mary A	BMF004	Instructor, Fam & Cons. Ed	84,587.00	22,626.66	91,836.75	25,537.08	-7,249.75	-2,910.42	-10,160.17
Alfaro, Antonio G	BMC525	Job Development Specialist	8,764.07	770.37	8,711.77	791.91	52.30	-21.54	30.76
Allday, Linda O	BEC004	Admissions and Records Tech I	37,730.52	19,582.20	39,610.44	19,841.87	-1,879.92	-259.67	-2,139.59
Allen, Anna K	BMF005	Dir Human Srvs/Sociology	84,587.00	22,608.87	84,586.56	22,571.58	.44	37.29	37.73
Allsman, Ronald L	BMF007	Instructor, Biological Science	101,687.00	24,831.87	101,687.10	25,710.99	-.10	-879.12	-879.22
Alonso, Lupe M	BMC232	Child Day Care Center Asst	19,801.16	15,539.82	19,801.21	12,626.38	-.05	2,913.44	2,913.39
Alspaw, Nancy L	BMC329	Court Reporter Reader	9,062.89	796.62	9,768.00	873.72	-705.11	-77.10	-782.21
Amin, Karimeh S	BMF509	Sociology	31,902.50	10,007.16	29,985.85	7,[illegible].94	1,916.65	2,201.22	4,117.87

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EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Porterville College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
		Instruct							
Cha, Vieng S	PMC114	Financial Aid Technician	45,685.36	21,111.80	45,685.36	20,951.76	.00	160.04	160.04
Chan, Patrick K	PMF007	Instructor, Information System	90,508.00	22,906.95	90,508.40	25,517.70	-.40	-2,610.75	-2,611.15
Chavez, Donna L	PMD007	Child Dev Certificated Staff	37,200.00	16,212.80	37,200.00	16,201.26	.00	11.54	11.54
Childress, Pamela K	PMC023	Accounting Technician II	45,832.68	21,128.74	45,832.68	21,118.52	.00	10.22	10.22
Cline, Cynthia G	PMC011	Food Service Assistant III	8,973.00	815.65	4,819.40	326.69	4,153.60	488.96	4,642.56
Courter, Greg J	PMC042	Dept Asst III/Receiving Clk	26,274.86	16,792.71	11,164.24	6,785.50	15,110.62	10,007.21	25,117.83
Craig, Christopher G	PMC105	Network Technician	53,138.52	22,427.51	53,138.52	22,728.99	.00	-301.48	-301.48
Crewse, Terry D	PMF098	Faculty FT 10 175 Days	66,040.00	19,738.34	66,039.50	21,711.56	.50	-1,973.22	-1,972.72
Cruz, Erin S	PMC137	Ed Advisor/Fin Aid Technician	51,592.76	22,358.06	52,792.76	21,995.75	-1,200.00	362.31	-837.69
Cullum, Maggie I	PMC074	Department Assistant II	9,404.28	2,007.06	9,780.40	2,049.70	-376.12	-42.64	-418.76
Dale, Daniel R	PMF083	Instructor, Criminology	96,844.00	23,727.46	96,844.20	26,517.70	-.20	-2,790.24	-2,790.44
Davis, Bret	PMF086	Faculty FT 11-12 195	77,492.00	21,221.36	85,452.06	22,531.02	-7,960.06	-1,309.66	-9,269.72

EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Cerro Coso College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Caudill, Paula M	CMC084	Department Assistant II	32,604.48	18,349.28	32,604.48	18,324.62	.00	24.66	24.66
Chen, Yihfen	CMC145	Coord Inst Research/Planning	72,405.24	26,865.62	71,331.55	26,115.16	1,073.69	750.46	1,824.15
Chinh, Mai Y	CMD028	Associate Teacher, COF	22,772.80	14,387.58	24,843.00	14,493.18	-2,070.20	-105.60	-2,175.80
Cinense, Bartolome G	CMC006	Custodian II	34,234.68	18,707.79	34,234.69	18,682.93	-.01	24.86	24.85
Clark, Kimberly M	CMC155	Financial Aid Assistant	13,942.71	1,225.57	13,810.03	1,231.24	132.68	-5.67	127.01
Collins, Shellie L	CMD040	Associate Teacher	21,672.00	14,232.47	21,672.00	13,880.43	.00	352.04	352.04
Cornett, Candace L	CMC157	Department Assistant II	30,683.46	17,926.79	30,282.07	17,430.39	401.39	496.40	897.79
Couch, Lisa M	CMN007	Asst Dir, Bdgt Mngmnt & HR	59,840.73	24,184.10	59,840.76	24,155.70	-.03	28.40	28.37
Coward, Pamela A	CMC022	Human Resources Assistant	46,843.60	21,410.25	46,843.60	21,385.63	.00	24.62	24.62
Cox, Marjorie	CMC103	Department Assistant III	37,730.52	19,465.33	37,730.52	19,440.69	.00	24.64	24.64
Crabtree, Shelley J	CMC009	Scheduling Technician II	46,843.60	21,410.25	46,843.60	21,385.60	.00	24.65	24.65
Curley, Zelda T	CMC091	Laboratory Technician I	24,202.40	5,322.59	23,024.03	4,913.77	1,178.37	408.82	1,587.19

EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Cerro Coso College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Cushman, Jenine M	CEC001	Admissions and Records Tech I	35,911.80	19,076.60	35,911.80	18,865.20	.00	211.40	211.40
Daly, John M	CMN002	Dir., Maintenance & Operations	77,205.56	27,890.09	77,205.60	27,865.33	-.04	24.76	24.72
Danielson, Anastasia D	CMC168	Financial Aid Assistant	13,090.23	1,150.64	10,938.48	981.69	2,151.75	168.95	2,320.70
Darty, Lisa A	CMF120	Digital Animation	57,549.00	17,244.45	58,299.30	18,968.86	-750.30	-1,724.41	-2,474.71
Davis, Clifford M	CMF014	Instructor, English	70,662.00	20,748.86	72,386.90	23,146.65	-1,724.90	-2,397.79	-4,122.69
Dorrell, Natalie J	CMC030	Bookstore Manager	67,811.40	25,885.20	67,811.40	25,670.50	.00	214.70	214.70
Doyen, Christopher J	CEF004	Instructor, English	61,649.00	17,795.49	61,648.33	19,293.90	.67	-1,498.41	-1,497.74
Duran, Patricia M	CMC025	Educational Advisor	57,106.80	23,600.62	57,106.80	23,575.80	.00	24.82	24.82
Dyer, Sharon K	CMM002	President	130,823.40	28,995.55	130,823.40	28,736.82	.00	258.73	258.73
Eberhardt, Tammy S	CMC123	Administrative Assistant	41,235.71	18,748.97	48,311.41	21,480.37	-7,075.70	-2,731.40	-9,807.10
Eldridge, Anna Sue J	CMC159	Department Assistant II	27,170.40	17,154.21	28,230.14	17,059.67	-1,059.74	94.54	-965.20
Enns, Gary S	CMF114	English	66,040.00	20,127.66	66,239.50	22,113.74	-199.50	-1,986.08	-2,185.58

EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Covey, Robert L	BMF037	HEAD MENS CROSS CNTRY/TRACK	100,465.57	24,673.09	102,313.40	24,794.34	-1,847.83	-121.25	-1,969.08
Covington, Ruby	BMC055	Acctng Asst/Bookstore Asst II	38,948.28	31,295.16	43,643.83	20,048.73	-4,695.55	11,246.43	6,550.88
Cox, Dorothy J	BMC057	Cashier/Billing Technician II	40,798.20	20,243.35	40,959.81	20,127.84	-161.61	115.51	-46.10
Cox, Richard C	BMC010	Public Safety Officer II	43,698.00	20,868.31	52,771.06	21,645.91	-9,073.06	-777.60	-9,850.66
Coyle, Nancy A	BMC509	Bookstore Assistant I	24,937.56	16,546.81	35,100.36	18,458.63	-10,162.80	-1,911.82	-12,074.62
Coyle, William P	BMF039	Dir Food Services	80,199.00	22,038.44	86,441.52	21,278.19	-6,242.52	760.25	-5,482.27
Craft, Angela V	BMC161	Department Assistant III	34,586.31	17,950.34	34,882.54	18,596.38	-296.23	-646.04	-942.27
Cross Wade, Mellissa L	BMF508	Philosophy Temporary	63,805.00	19,447.89	27,045.85	7,577.18	36,759.15	11,870.71	48,629.86
Cruz, Edison	BMC059	Custodian I	32,763.12	18,511.63	34,401.31	18,400.20	-1,638.19	111.43	-1,526.76
Cummings, Tina M	BMF449	Aquatics Center Director	66,693.03	20,282.65	87,017.76	22,774.09	-20,324.73	-2,491.44	-22,816.17
Cunningham, Carol	BMF041	Instructor, English	104,810.03	25,237.87	106,810.04	25,490.60	-2,000.01	-252.73	-2,252.74
Daharsh, Robert O	BMC507	Public Safety Officer I	14,659.04	3,687.05	14,942.62	1,290.28	-283.58	2,396.77	2,113.19
Dahl, Paula J	BMF042	Instructor, Health/ PE	74,320.31	21,274.20	81,073.50	22,129.01	-6,753.19	-854.81	-7,608.00
Dameron, A S	BMF428	Health/PE- Women's	80,020.43	22,015.22	78,333.66	21,574.22	1,686.77	441.00	2,127.77

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EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
		SoccerCoach							
Damron, Brent W	BMF043	Instructor, Physical Ed	95,679.89	24,050.95	92,945.94	23,538.18	2,733.95	512.77	3,246.72
Daniel, Patricia L	BMC207	Food Service Assistant II	10,188.55	6,477.66	10,402.22	5,738.78	-213.67	738.88	525.21
	BMC281	Food Service Assistant II	.00	.00	458.31	97.80	-458.31	-97.80	-556.11
Daniels, Lenora	BMD004	Child Dev Certificated Staff	39,319.20	18,233.12	39,319.20	19,325.78	.00	-1,092.66	-1,092.66
Dargatz, Rebecca L	BMC062	Business Services Specialist	62,501.50	24,644.32	56,880.10	23,527.44	5,621.40	1,116.88	6,738.28
Darke, Richard M	BMF046	Instructor, Physical Science	84,587.00	22,608.87	84,586.50	24,562.63	.50	-1,953.76	-1,953.26
Davajian, Hoolyse A	BMF047	Counselor	100,465.57	24,673.09	102,471.04	23,519.09	-2,005.47	1,154.00	-851.47
Davidson, Marilyn T	BMC064	Administrative Assistant	58,557.30	22,978.20	58,557.30	23,507.50	.00	-529.30	-529.30
Davis, Alvin D	BMF050	Instructor, Art	88,818.00	23,158.90	88,818.20	25,126.24	-.20	-1,967.34	-1,967.54
Davis, Beatrice E	BMF051	Coord. Interior Design	95,035.00	23,967.12	95,035.20	24,005.58	-.20	-38.46	-38.66
Davis, Pamela K	BMF282	Faculty FT 10 175 Days	85,816.74	22,768.73	79,322.45	23,853.67	6,494.29	-1,084.94	5,409.35
Davis, Shelia M	BMC304	Department Assistant II	32,604.48	18,477.43	2,845.75	1,565.51	29,758.73	16,91[illegible]	46,670.65

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EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Davis, Shelia M	BMC368	Food Service Assistant I	6,655.97	555.77	4,253.06	572.42	2,402.91	-16.65	2,386.26
Day, Robert L	BMN004	Dir., M & O/Auxiliary Servs.	101,155.03	26,484.38	108,713.08	33,362.28	-7,558.05	-6,877.90	-14,435.95
De La Fontaine, Dianne L	BMC082	Financial Aid Technician	55,610.58	23,287.55	55,610.58	23,205.42	.00	82.13	82.13
DeArmond, Peter D	BMN003	Dir., Corporate & Comm Servs	63,897.39	17,278.32	63,897.39	21,922.47	.00	-4,644.15	-4,644.15
	BMN005	Dir., Small Business Develop	72,183.36	26,824.52	19,990.58	7,143.50	52,192.78	19,681.02	71,873.80
DeLosSantos, Manuel L	BMC450	Media Specialist	45,832.68	21,328.38	45,832.68	21,169.84	.00	158.54	158.54
DeStefano, Margaret J	BEF001	Dir Corrections/Adm. of Justc	101,687.00	24,831.87	101,687.04	23,425.02	-.04	1,406.85	1,406.81
Dean, Carl D	BMF499	Instructor/Asst Football Coach	63,805.00	19,907.21	62,068.90	19,286.57	1,736.10	620.64	2,356.74
Dellan, Jason N	BMC053	Cook/Baker	19,751.74	13,101.63	29,820.44	16,739.79	-10,068.70	-3,638.16	-13,706.86
Demkey, Paul W	BMF054	Coord. Apprenticeship	95,035.00	23,967.12	95,035.20	22,627.61	-.20	1,339.51	1,339.31
Desilagua, Alice R	BMF056	Counselor	100,465.57	24,673.09	96,120.96	24,151.50	4,344.61	521.59	4,866.20
Devlin Kelly, Inez	BMF058	Instructor, Life Science	90,508.00	23,378.60	90,508.40	25,577.70	-.40	-2,199.10	-2,199.50

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
		Instructor/KRV/ECON							
Farmer, Marie L	CML001	Admin. Asst., President	61,116.13	24,456.29	61,116.12	24,305.91	.01	150.38	150.39
Feliciano, Alejandro G	CMC065	Custodian I	26,967.99	17,109.69	26,967.90	16,677.96	.09	431.73	431.82
Fidel, Dawn M	CMC073	Admissions and Records Tech I	35,487.24	18,983.25	35,487.24	18,770.11	.00	213.14	213.14
Finney, Ellen F	CMC015	Custodian I	28,066.49	17,351.26	27,704.71	17,060.33	361.78	290.93	652.71
Fitzsimmons, Cheryl E	CMC156	Department Assistant III	35,770.28	19,045.48	36,370.44	19,025.47	-600.16	20.01	-580.15
Flagg, Carmen L	CMF140	Nursing	61,718.00	19,546.79	61,718.50	20,422.08	-.50	-875.29	-875.79
Flores, Felix A	CMC014	Custodian II	37,707.36	19,460.41	37,707.40	19,435.65	-.04	24.76	24.72
Foggia, Thomas D	CMF035	Instructor, Music	80,993.00	22,137.33	80,993.00	24,310.51	.00	-2,173.18	-2,173.18
Fogle-Oliver, Melinda L	CMF134	Drama (IWV)	68,194.00	20,417.15	67,693.90	22,345.89	500.10	-1,928.74	-1,428.64
Fuller, Elisabeth I	CMF115	Child Development Instructor	76,478.31	21,530.57	76,478.00	23,690.09	.31	-2,159.52	-2,159.21
Garcia, Dawn J	CMD027	Teacher, COF	20,458.24	14,061.45	19,373.87	13,571.45	1,084.37	490.00	1,574.37
Garcia, John A	CMF022	Reading	68,271.00	18,685.49	68,271.10	20,357.65	-.10	-1,672.16	-1,672.26
Girardot, Leo A	CMF010	Instructor, Psychology	108,611.43	24,274.38	108,611.00	26,537.10	.43	-2,262.72	-2,262.29
Godfrey, Jennifer M	CMC089	Receptionist	10,555.68	927.84	1,915.68	168.40	8,640.00	759.44	9,399.44

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EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Hill, John A	BMF439	Counselor	75,630.92	22,783.14	84,905.38	22,590.52	-9,274.46	192.62	-9,081.84
Hitchcock, Christine	BMC028	Admissions and Records Supv	68,235.00	26,156.54	68,235.00	25,764.37	.00	392.17	392.17
Hobbs, Barbara A	BMC128	Department Assistant III	45,009.60	21,151.00	45,009.60	20,675.28	.00	475.72	475.72
Holanday, Alma-Rita C	BMC422	Teaching Assistant	17,909.24	1,495.42	7,008.38	1,493.69	10,900.86	1.73	10,902.59
Holmes, Steven A	BMF108	Instructor, Political Sci	81,178.00	22,165.70	86,861.00	24,734.65	-5,683.00	-2,568.95	-8,251.95
Howald, Walter G	BMN021	Exec Dir, Institutnl Dev & Fnd	94,250.26	25,469.24	96,622.39	20,219.46	-2,372.13	5,249.78	2,877.65
Hubble, Cynthia M	BMF176	Instructor, English	81,178.00	22,165.70	86,861.00	24,866.94	-5,683.00	-2,701.24	-8,384.24
Hunter, Gina M	BMC087	Financial Aid Technician	49,365.72	22,089.82	19,889.55	9,882.05	29,476.17	12,207.77	41,683.94
	BMC298	Financial Aid Assistant	27,173.01	18,506.34	16,537.37	8,836.38	10,635.64	9,669.96	20,305.60
Hurd, Kimberly C	BMF504	Biology	63,805.00	28,860.29	55,666.80	18,617.19	8,138.20	10,243.10	18,381.30
Hurlbert, Emily C	BMF112	Instructor, Academis Dev	81,178.00	22,165.70	81,177.90	24,335.03	.10	-2,169.33	-2,169.23
Hussey, Brenda	BMC088	Child Day Care Center Asst	23,101.35	16,265.59	23,311.36	14,938.50	-210.01	1,327.09	1,117.08

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FISCAL YEAR BEGIN: 01-JUL-2004 FISCAL YEAR END: 30-JUN-2005
POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
A		Campus							
Jeffery, Sonia M	BMC154	Program Manager	60,998.00	24,437.34	60,998.02	24,181.80	-.02	255.54	255.52
Jenkins, Randy T	BMC366	Food Service Assistant III	7,890.96	710.18	7,793.91	705.34	97.05	4.84	101.89
Jensen, Gilda O	BMC227	Financial Aid Technician	53,138.52	22,902.95	55,229.66	23,091.37	-2,091.14	-188.42	-2,279.56
Jett, Jennifer B	BMF231	Instructor, English	59,631.00	19,364.59	60,381.40	21,565.85	-750.40	-2,201.26	-2,951.66
Jimenez, Qiu Y	BMF287	Faculty FT 10 175 Days	83,828.00	22,510.20	83,828.40	24,461.61	-.40	-1,951.41	-1,951.81
Johnson, Daniel G	BMF162	Instructor, Automotive	81,178.00	22,165.70	81,302.90	23,994.58	-124.90	-1,828.88	-1,953.78
Johnson, Daymon A	BMF036	Instructor, History	92,941.00	23,694.88	92,940.80	25,544.40	.20	-1,849.52	-1,849.32
Johnson, Jeffrey B	BMN005	Dir., Small Business Develop	72,183.36	26,824.52	66,472.26	19,003.34	5,711.10	7,821.18	13,532.28
Johnson, Jennifer L	BMF223	Instructor, Allied Health	84,587.00	22,626.66	85,111.50	24,614.46	-524.50	-1,987.80	-2,512.30
Johnson, Mary J	BMC142	Scheduling Technician II	53,120.49	22,899.04	55,620.49	22,634.68	-2,500.00	264.36	-2,235.64
Johnson, Odella M	BMF117	Instructor, Academic Dev	95,035.00	23,967.12	95,035.20	23,788.00	-.20	179.12	178.92
Johnson, Robin	BMC143	Department Assistant III	26,081.33	12,777.62	26,081.30	16,889.93	.03	-4,112.31	-4,112.28

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EXPENDED LABOR BUDGET REPORT as of 27 Apr 2006
Bakersfield College
KCCD Production
FISCAL YEAR: 2005 BUDGET ID: KCCD05 BUDGET PHASE: LABOR
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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Hutchins, Michelle M	BMC462	Child Day Care Center Asst	10,830.16	951.98	12,816.52	1,145.43	-1,986.36	-193.45	-2,179.81
Hutchison, Yvonne R	BMC134	Department Assistant III	43,206.03	20,762.28	43,206.03	20,609.18	.00	153.10	153.10
Ibarra, Angelina	BMD007	Child Dev Certificated Staff	27,993.00	17,341.35	27,993.00	17,123.69	.00	217.66	217.66
Ivey, Michael P	BEF010	Instructor, Business	74,061.67	21,240.58	74,061.96	21,186.77	-.29	53.81	53.52
Jackson, Angela R	BMC281	Food Service Assistant II	.00	.00	3,373.87	306.68	-3,373.87	-306.68	-3,680.55
Jackson, Christy L	BMC135	Admissions and Records Tech I	41,730.12	20,444.20	41,730.12	20,182.99	.00	261.21	261.21
Jacobson, Lavonda H	BMF114	Instructor, Allied Health	95,035.00	23,967.12	95,419.20	24,963.48	-384.20	-996.36	-1,380.56
Jacobus, Nancy	BMD008	Child Dev Certificated Staff	17,995.50	14,554.79	7,659.29	6,503.77	10,336.21	8,051.02	18,387.23
Jaime, Felicita R	BMC137	Child Day Care Center Asst	33,326.00	18,514.19	33,325.68	18,296.51	.32	217.68	218.00
James, May E	BMC138	Cashier/Billing Technician I	41,026.11	20,169.63	42,359.64	19,998.86	-1,333.53	170.77	-1,162.76
Jaramillo, John	BEM003	Director, Delano Center	93,390.00	23,753.27	93,390.00	23,939.93	.00	-186.66	-186.66

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Kenney, James F	CMC041	Special Services Assistant	14,486.33	1,273.35	14,517.63	1,299.85	-31.30	-26.50	-57.80
Kerlin, Sharen G	CMC043	Bookstore Assistant II	32,297.41	18,281.73	32,297.41	18,047.11	.00	234.62	234.62
Kiggens, James R	CMF112	3D Computer Animation Instruct	82,466.13	22,335.33	84,799.89	22,443.32	-2,333.76	-107.99	-2,441.75
Kilburn, Deborah L	CMF136	Computer Inform Systems (IWV)	73,135.00	19,339.22	73,884.70	20,983.39	-749.70	-1,644.17	-2,393.87
Kost, Greg A	CMC147	Program Manager	56,676.56	23,508.81	56,676.56	23,141.37	.00	367.44	367.44
Kost, Kimberly A	CMC167	Financial Aid Assistant	13,090.23	1,150.64	12,933.32	1,157.89	156.91	-7.25	149.66
Kowalski, Mary T	CMF044	Instructor, Nursing	99,766.06	24,660.44	103,415.96	25,131.94	-3,649.90	-471.50	-4,121.40
Lacher, Linda L	CMD037	Substitute Site Supervisor-COF	32,823.96	15,803.80	32,823.96	15,303.06	.00	500.74	500.74
Lane, Valerie J	CMC037	Learning Disabled Student Asst	12,340.45	1,084.73	12,331.82	1,118.01	8.63	-33.28	-24.65
Lathrop, Mark L	CMC078	Plant Engineer	47,036.64	21,451.45	47,036.64	21,426.81	.00	24.64	24.64
Lebsock, Mary G	CMC051	Asst Dir Business Services	15,528.18	5,059.50	23,525.25	7,547.01	-7,997.07	-2,487.51	-10,484.58
	CMN008	Dir., Business Services	84,295.86	27,657.82	75,905.09	23,796.80	8,390.77	3,861.02	12,251.79

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Liu, Li Kang	CMF125	Mathematics, South Kern	63,805.00	19,827.26	63,805.50	21,759.99	-.50	-1,932.73	-1,933.23
Lloyd, Cherie M	CMD003	Teacher, COF	25,610.80	14,787.45	25,567.66	14,570.03	43.14	217.42	260.56
Locke, William N	CMF019	Instructor, Physical Ed	95,035.00	22,646.58	95,035.20	22,627.61	-.20	18.97	18.77
Lopez, Daniel A	CMC163	Financial Aid Assistant	15,124.86	3,227.95	14,667.40	3,140.20	457.46	87.75	545.21
Lowe, Kristi D	CEC008	Program Manager	64,579.32	25,195.41	67,811.40	25,673.84	-3,232.08	-478.43	-3,710.51
Macari, Daniel	CMF118	Counselor/Social Science KRV	.00	.00	2,075.96	279.00	-2,075.96	-279.00	-2,354.96
Malamma, Monique D	CMC087	Special Services Assistant	13,349.14	2,848.99	13,298.92	2,838.23	50.22	10.76	60.98
Manion, James R	CMF020	Instructor, Mathematics	86,008.46	22,811.41	86,008.50	25,082.34	-.04	-2,270.93	-2,270.97
Martell, Deborah C	CEC009	Department Assistant II	34,213.56	18,703.13	34,213.56	18,475.76	.00	227.37	227.37
Marvin, Corey J	CMF104	Faculty FT 10 175 Days	83,828.00	22,518.37	83,865.90	22,504.37	-37.90	14.00	-23.90
Matsunaga, Ike G	CMC119	Network Technician	10,412.99	915.30	2,894.77	263.14	7,518.22	652.16	8,170.38
Mauldin, Margaret A	CMC100	Instruction Office Specialist	51,951.84	22,500.45	51,951.84	22,475.85	.00	24.60	24.60
Metcalf, Michael J	CMF047	Instructor, Industrial Safety	33,245.90	10,920.86	28,314.00	7,500.00	4,931.90	3,420.86	8,352.76
Meyers, Paul F	CMF023	Instructor, Art	116,732.23	25,248.07	116,732.04	25,228.98	.19	19.09	19.28
Miller, Charlene E	CMC089	Receptionist	10,555.68	927.84	3,739.91	337.77	6,815.77	590.07	7,405.84

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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Mitchell, Mary M	CMC125	Bookstore Assistant I	14,486.33	1,273.35	12,602.92	1,125.86	1,883.41	147.49	2,030.90
Moline, Jeannine M	CMF003	Counselor	66,445.97	20,182.22	66,446.04	19,957.05	-.07	225.17	225.10
Morrione, Deems D	CMC066	Graphics Designer	40,239.26	20,000.75	40,239.26	19,789.52	.00	211.23	211.23
Mott, Doris A	CMC047	Learning Disabled Student Asst	23,835.31	2,095.12	23,832.74	2,137.79	2.57	-42.67	-40.10
Nemeth, Marcey J	CMC115	Custodian I	12,449.40	1,417.99	12,453.00	1,418.52	-3.60	-.53	-4.13
O Neal, Mary C	CMF106	Child Dev	.00	.00	61,726.20	19,485.30	-61,726.20	-19,485.30	-81,211.50
O'Connor, Karen L	CMF006	Office Technologies	59,631.00	17,524.21	59,631.40	19,122.05	-.40	-1,597.84	-1,598.24
Olivera, Lori F	CMC095	Program Manager	60,998.00	24,431.09	60,998.00	24,295.62	.00	135.47	135.47
Olsen, Ingeborg H	CEC013	Department Assistant II	37,495.20	19,415.11	37,495.20	19,108.41	.00	306.70	306.70
Ostash, Heather B	CMF007	Counselor	76,160.31	21,487.82	79,098.28	21,000.26	-2,937.97	487.56	-2,450.41
Palen, Kathleen	CEC002	Department Assistant III	37,730.52	19,465.33	37,730.52	19,440.69	.00	24.64	24.64

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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Nelson, Darryl E	PMF088	Instructor, Art	81,178.00	21,698.71	87,382.70	25,152.98	-6,204.70	-3,454.27	-9,658.97
Nix, Annette M	PMC086	Administrative Secretary	47,036.64	21,155.13	47,036.64	21,426.81	.00	-271.68	-271.68
Noel, Tim R	PMC039	Skilled Craftsworker	29,619.43	12,984.47	30,369.29	12,725.93	-749.86	258.54	-491.32
	PMC088	Plumber	24,592.61	9,666.87	25,005.60	10,480.40	-412.99	-813.53	-1,226.52
Oldershaw, Kathryn	PMF152	Psychiatric Tech Nursing COF	70,661.88	20,521.08	70,661.90	22,513.00	-.02	-1,991.92	-1,991.94
Olmedo, Maria P	PMC040	Assistant Dir-Financial Aid	68,235.05	25,981.85	68,235.00	25,950.97	.05	30.88	30.93
Orong, Linda S	PMN001	Dir., Business Services	98,964.00	31,297.06	36,878.85	12,665.93	62,085.15	18,631.13	80,716.28
Ortega, John M	PMC041	Financial Aid Technician	54,386.40	22,687.70	54,386.40	22,808.69	.00	-120.99	-120.99
Osborne, Richard H	PMF042	Instructor, Soci/Anthrop	86,861.00	22,434.65	86,861.00	25,091.90	.00	-2,657.25	-2,657.25
Pendleton, Donna	PMD004	Child Dev Certificated Staff	33,591.60	16,489.93	33,591.60	18,541.81	.00	-2,051.88	-2,051.88
Phillips, Tammy L	PMC083	Child Day Care Center Asst	17,927.19	12,331.40	17,927.15	12,348.36	.04	-16.96	-16.92
Pierce, Susan L	PMF110	Health Career, Psych Tech	68,271.08	20,199.75	36.00	1,049.26	68,235.08	19,150.49	87,385.57
Piersol, Christopher J	PMF080	Faculty FT 10 175 Days	70,662.00	20,336.89	70,661.90	22,934.32	.10	-2,597.43	-2,597.33
Prahovic,	PMC044	Cook/Baker	24,001.40	14,481.66	30,641.98	17,822.64	-6,640.58	-3,340.98	-9,981.56

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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Oxford, Patricia E	BMC219	Child Day Care Center Asst	26,729.98	17,063.59	26,724.56	16,712.68	5.42	350.91	356.33
Paca, Sabrina	BMC522	Department Assistant I	5,700.00	295.83	3,801.13	197.26	1,898.87	98.57	1,997.44
Pafford, Janet L	BMC220	Admissions and Records Asst	17,669.40	10,487.58	17,693.62	14,600.54	-24.22	-4,112.96	-4,137.18
Painton, Timothy M	BMF163	Instructor, Physical Ed	85,358.55	22,709.18	83,384.10	22,252.88	1,974.45	456.30	2,430.75
Palitz, Merriem L	BMF164	Instructor, English	101,687.00	24,831.87	50,843.55	13,502.34	50,843.45	11,329.53	62,172.98
Paradise, Cynthia A	BMF165	Instructor, English	73,303.00	21,141.95	73,302.50	23,285.91	.50	-2,143.96	-2,143.46
Parent, Jeannie B	BMF425	English	70,743.00	20,809.15	70,742.70	27,879.75	.30	-7,070.60	-7,070.30
Park, Sung Soo	BMF166	Instructor, Physical Science	90,508.00	23,378.60	90,508.40	25,351.38	-.40	-1,972.78	-1,973.18
Parker, Billy	BMC225	Lead Printer	39,884.76	20,046.48	45,518.85	21,102.72	-5,634.09	-1,056.24	-6,690.33
Parks, Loretta	BMC373	Department Assistant I	8,556.42	770.08	3,810.57	334.95	4,745.85	435.13	5,180.98
	BMC523	Department Assistant I	6,466.00	568.37	7,639.78	691.55	-1,173.78	-123.18	-1,296.96
Parks, Paula L	BMF472	Basic Skills	63,733.00	19,897.85	63,733.20	21,668.23	-.20	-1,770.38	-1,770.58
Parsons, Clark G	BMF447	Instructional Technology Splst	80,993.00	22,143.61	80,993.04	21,931.74	-.04	211.87	211.83
Parsons, Robert	BMF168	Instructor, Mathematics	95,035.00	23,967.12	97,035.20	24,852.07	-2,000.20	-884.95	-2,885.15

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Cerro Coso College
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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Paradise-Clark, Kathleen R	CMC085	Executive Secretary	47,036.65	21,451.44	47,036.64	21,407.61	.01	43.83	43.84
Parker, Susan E	CMC098	Library Technician II	39,610.44	19,866.55	39,610.44	19,744.32	.00	122.23	122.23
Patino, Karen R	CMC170	Financial Aid Assistant	9,030.00	793.75	9,926.03	899.53	-896.03	-105.78	-1,001.81
Paymanian, Parvin	CMD015	Teacher, COF	30,444.00	15,468.46	30,444.00	15,443.70	.00	24.76	24.76
Peacock, Elaine M	CMC165	Financial Aid Assistant	13,627.30	1,197.84	740.20	65.06	12,887.10	1,132.78	14,019.88
Pearson, Mellissa Dawn M	CMC166	Financial Aid Assistant	13,496.49	1,186.34	13,496.37	1,203.79	.12	-17.45	-17.33
Peoples, Mary A	CMF117	Counselor/Special Services Crd	78,959.01	21,863.97	86,511.60	22,820.96	-7,552.59	-956.99	-8,509.58
Prieto, Juan C	CMC162	Custodian I/Maintenance Wkr	13,296.69	1,168.78	13,377.04	1,196.38	-80.35	-27.60	-107.95
Quinata, Kate L	CMD017	Teacher, COF	25,610.80	14,787.45	25,310.57	14,369.35	300.23	418.10	718.33
Ratliff, Cori A	CMC090	Instructionl Design Specialist	57,722.46	23,732.02	57,722.46	23,703.36	.00	28.66	28.66
Redondo, Jose	CMC056	Groundsworker II	35,911.80	19,076.61	35,911.80	19,033.22	.00	43.39	43.39
Rice, Laurie A	CMC023	Accounting Technician II	42,878.05	20,563.92	42,878.05	20,447.03	.00	116.89	116.89
Robison, Bonita L	CMF139	Personal Development	83,923.00	22,531.13	83,922.72	22,512.06	.28	19.07	19.35
Rodgers, Martha	CMF025	Instructor, Mathematics	102,465.57	23,462.70	102,566.00	25,741.49	-100.43	-2,278.79	-2,379.22

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Paschal, Carol	BMC226	Library Technician II	41,730.12	20,444.20	41,730.12	19,975.29	.00	468.91	468.91
Pecarovich, James D	BMC316	Assessment Assistant	14,877.51	1,338.97	8,362.52	760.17	6,514.99	578.80	7,093.79
Peninger, Susan	BEC019	Court Reporter Reader	8,393.76	2,106.87	2,833.69	249.07	5,560.07	1,857.80	7,417.87
Perez, Jaime	BMC494	Network Technician	47,849.88	21,763.12	47,849.88	21,179.75	.00	583.37	583.37
Perez-Dykes, Lucy S	BMC300	Assistant Dir-Financial Aid	62,833.70	24,992.44	34,516.96	18,312.61	28,316.74	6,679.83	34,996.57
Perkins, Nancy J	BMF171	Instructor, Allied Health	95,035.00	23,967.12	95,035.20	22,627.62	-.20	1,339.50	1,339.30
Perry, Tarina K	BMC098	Department Assistant III	37,730.52	19,582.20	37,603.54	19,226.97	126.98	355.23	482.21
Pesina, Delilah	BMC228	Child Day Care Center Asst	12,420.09	1,091.72	13,412.99	1,199.44	-992.90	-107.72	-1,100.62
Peters, Jennifer L	BMC229	Educational Advisor	66,438.54	24,784.28	66,438.54	25,324.56	.00	-540.28	-540.28
Phinney, Sarah R	BMC491	Web Site Coordinator	53,416.37	22,805.95	52,862.40	22,670.02	553.97	135.93	689.90
Pinza, Susan K	BMF296	Faculty FT 10 175 Days	85,718.43	22,755.96	86,468.04	22,907.17	-749.61	-151.21	-900.82
Pluta, Katherine R	BMF073	Instructor, English	95,035.00	23,967.12	95,035.20	22,627.62	-.20	1,339.50	1,339.30

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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Puget, Lynne J	BMC236	Admissions and Records Tech I	38,983.80	19,852.31	40,396.92	20,009.68	-1,413.12	-157.37	-1,570.49
Quatraro, Dolores D	BMF280	Faculty FT 10 175 Days	77,491.74	21,686.49	75,396.95	21,366.10	2,094.79	320.39	2,415.18
Rabe, Kristin M	BMC455	Media Services Coordinator	67,811.40	26,065.23	67,811.40	25,860.49	.00	204.74	204.74
Ramirez, David	BMC118	Facility Custodial Coordinator	37,730.52	19,582.20	39,807.56	19,340.01	-2,077.04	242.19	-1,834.85
Ramirez, John	BMC239	Facility Custodial Coordinator	42,981.48	20,713.88	55,865.45	21,708.26	-12,883.97	-994.38	-13,878.35
Ramos, Hilda J	BMC501	Child Day Care Center Asst	12,092.15	9,105.38	9,750.90	6,030.55	2,341.25	3,074.83	5,416.08
Rapp, Patricia A	BMC319	Executive Secretary	40,390.81	20,155.54	40,390.81	19,821.83	.00	333.71	333.71
Rauser, Edwina M	BMC241	Accounting Supervisor	65,984.37	25,671.46	67,184.37	25,607.29	-1,200.00	64.17	-1,135.83
Ray, Lakesha R	BMC514	Educational Advisor	22,342.44	1,963.91	21,882.68	1,826.81	459.76	137.10	596.86
Razo, Frank	BMC502	Groundsworker I	30,921.36	18,114.68	30,921.36	17,931.95	.00	182.73	182.73
Reader, Robert J	BMF158	Counselor	100,465.57	24,673.09	95,035.20	22,627.62	5,430.37	2,045.47	7,475.84
Reyes, Carla A	BMC273	Department Assistant III	39,610.44	19,987.36	39,610.44	19,655.29	.00	332.07	332.07

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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Schroeder, William J	BMC261	Custodian I	33,859.92	30,198.54	35,646.69	18,804.41	-1,786.77	11,394.13	9,607.36
Scrivner, Donald J	BMC307	Laboratory Technician I	31,208.25	16,268.11	31,332.19	17,551.65	-123.94	-1,283.54	-1,407.48
Serabian, Dean G	BMC452	Network Administrator	60,007.80	24,383.39	19,052.20	7,855.87	40,955.60	16,527.52	57,483.12
	BMC456	Network Technician	53,138.52	22,902.95	37,196.95	15,218.07	15,941.57	7,684.88	23,626.45
Serpa, Patrick E	BMF485	Serpa - Mathematics	78,344.00	21,797.28	78,343.80	23,957.41	.20	-2,160.13	-2,159.93
Shafer, Steve L	BMC295	Facilities Electrician	58,580.40	24,075.76	59,171.85	23,771.03	-591.45	304.73	-286.72
Shafik, Adel	BMF497	Art/Computer Graphics	73,135.00	21,120.12	70,661.90	21,468.57	2,473.10	-348.45	2,124.65
Shanklin, Kristopher W	BMC503	Public Safety Officer I	29,030.90	18,251.28	7,019.24	3,001.51	22,011.66	15,249.77	37,261.43
Shaw, Diane	BMC264	Admissions and Records Tech I	41,730.12	20,444.20	41,730.12	20,294.19	.00	150.01	150.01
Shimmin, Robert D	BMC493	Network Technician	50,403.16	22,313.41	50,403.16	21,939.14	.00	374.27	374.27
Sierra, Sandra E	BMF430	Counselor	76,019.60	21,475.20	74,081.59	21,189.32	1,938.01	285.88	2,223.89
Sifuentes, Diana D	BMC066	Department Assistant I	18,148.07	14,320.65	9,546.07	9,306.43	8,602.00	5,014.22	13,616.22

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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Sifuentes, Marco A	BMC265	Public Safety Officer II	48,253.32	21,850.08	62,638.52	23,376.17	-14,385.20	-1,526.09	-15,911.29
Silvert, Angela M	BMC026	Admissions and Records Asst	3,270.15	273.06	277.42	25.20	2,992.73	247.86	3,240.59
Simmons, Walton L	BMF191	Instructor, Appld Sci/Tech	90,508.00	23,378.60	90,508.44	23,397.18	-.44	-18.58	-19.02
Simpson, Lynn A	BMC080	Office Supervisor	39,297.12	19,919.83	25,699.50	13,906.61	13,597.62	6,013.22	19,610.84
Skibinski, Heather K	BMC259	Financial Aid Technician	30,406.77	14,942.12	33,466.97	15,712.30	-3,060.20	-770.18	-3,830.38
Smith, Carol E	BMF460	Mathematics	75,695.00	21,452.92	75,694.50	23,585.10	.50	-2,132.18	-2,131.68
Smith, Fred H	BMC271	Athletic Trainer/Program Dir	65,246.28	24,558.18	84,695.03	28,283.44	-19,448.75	-3,725.26	-23,174.01
Smith, Janice E	BMC342	Tutor	2,500.00	219.75	88.80	7.89	2,411.20	211.86	2,623.06
Smith, Jimmy D	BMC245	Skilled Craftsworker	34,987.92	16,128.48	43,612.92	16,646.03	-8,625.00	-517.55	-9,142.55
	BMC500	Maintenance & Operations Tech	12,880.20	13,081.41	12,880.20	5,752.83	.00	7,328.58	7,328.58
Smith, Scott	BMC282	Custodian I	27,448.44	17,366.20	30,573.70	17,373.29	-3,125.26	-7.09	-3,132.35
Smith, Shannon M	BMC490	Office Supervisor	40,846.92	20,136.69	42,046.92	20,242.39	-1,200.00	-105.70	-1,305.70
Smith, Stephen D	BMF192	Instructor, Social Science	102,094.74	24,884.87	102,095.04	23,473.87	-.30	1,411.00	1,410.70
Snyder, Charles	BMC457	Network Manager	72,981.36	27,179.45	72,981.36	26,825.34	.00	354.11	354.11

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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Sellers, Angela R	CMC082	Admissions and Records Tech II	47,036.64	21,451.45	47,036.64	21,426.80	.00	24.65	24.65
Sellers, Claudia L	CMF033	Instructor, Biology	81,823.00	22,248.89	81,822.60	24,428.30	.40	-2,179.41	-2,179.01
Seymour, Donald E	CMC042	Teaching Assistant	26,791.34	13,553.45	26,791.34	13,360.52	.00	192.93	192.93
Slovacek, Joseph	CMF037	Instructor, Mathematics	86,861.00	22,925.99	86,861.00	25,072.83	.00	-2,146.84	-2,146.84
Solidarios, Rudilin	CMC040	Custodian II	30,921.36	17,979.11	31,055.16	17,783.05	-133.80	196.06	62.26
Spiller, Joann V	CMC062	Assistant Dir-Financial Aid	63,090.60	24,877.69	63,090.60	24,699.62	.00	178.07	178.07
Stanley, Rebecca A	CMC063	Administrative Secretary	49,365.72	21,948.50	49,365.72	21,923.85	.00	24.65	24.65
Stenger Smith, John D	CMF119	Chemistry Instructor	84,695.54	22,634.97	84,696.00	24,803.58	-.46	-2,168.61	-2,169.07
Stephens, Norman R	CMF009	Faculty FT 10 175 Days	78,344.00	21,781.32	78,505.64	23,979.18	-161.64	-2,197.86	-2,359.50
Stickney, Caroline D	CMD025	Associate Teacher, COF	22,772.80	14,387.58	22,772.76	14,176.40	.04	211.18	211.22

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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
M									
Sousa, Diane M	BMD014	Child Dev Certificated Staff	37,427.20	16,449.33	37,427.16	15,433.39	.04	1,015.94	1,015.98
Spohn, Debborah K	BML001	Admin. Asst., President	62,142.39	24,304.08	62,142.36	24,230.07	.03	74.01	74.04
Starr, Donna L	BMF261	Instructor, Mathematics	73,303.00	33,224.28	73,302.50	23,285.91	.50	9,938.37	9,938.87
Stevenson, Lila F	BMC197	Tutorial Coordinator	36,415.01	17,390.27	11,518.66	9,658.55	24,896.35	7,731.72	32,628.07
Stidham, Margaret H	BMC275	Laboratory/Safety Technician	59,524.30	24,279.20	59,524.30	23,654.23	.00	624.97	624.97
Stierle, Isabel E	BMF215	Instructor, Biology	75,695.00	21,452.92	75,694.50	23,358.78	.50	-1,905.86	-1,905.36
Stine, Gertrud C	BMC218	Department Assistant II	14,214.85	3,063.59	15,353.94	1,366.03	-1,139.09	1,697.56	558.47
Stracener, Martha	BMC132	Payroll Technician II	38,670.48	19,671.73	38,670.48	19,357.20	.00	314.53	314.53
Stricklind, Jacquie M	BMC526	Tutor, ESL	6,673.68	1,424.30	4,571.90	974.11	2,101.78	450.19	2,551.97
Strobel, Nicolas V	BMF196	Instructor, Physical Science	92,941.00	22,928.12	92,940.80	25,901.64	.20	-2,973.52	-2,973.32

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Cerro Coso College
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POOLED POSITIONS ARE NOT INCLUDED

Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Stitt, Alton C	CMC007	Custodian I	30,241.80	17,829.66	30,241.77	17,804.88	.03	24.78	24.81
Suorez, Paula G	CMF108	Faculty FT 10 175 Days	81,586.89	22,217.15	87,183.99	22,950.28	-5,597.10	-733.13	-6,330.23
Sutton, Rochelle M	CMC059	Financial Aid Technician	47,036.64	21,451.45	47,036.64	21,052.42	.00	399.03	399.03
Swafford, Bobbie L	CMC016	Child Care Food Coordinator	33,296.64	18,501.49	32,537.43	18,122.60	759.21	378.89	1,138.10
Swiridoff, Christine	CMF024	Instructor, English	80,993.00	22,137.33	81,068.00	24,327.95	-75.00	-2,190.62	-2,265.62
Talley, Penny A	CMF110	Faculty FT 10 175 Days	78,918.17	21,858.48	83,249.04	22,234.83	-4,330.87	-376.35	-4,707.22
Tittle, Jonathan R	CMF137	History	103,723.91	25,192.38	104,764.04	25,313.01	-1,040.13	-120.63	-1,160.76
Vanderwerff, Dennis I	CMF011	Dir Learning Resources	93,408.34	23,805.96	97,679.90	24,297.20	-4,271.56	-491.24	-4,762.80
Vasquez, Yolanda	CMF123	Counselor, South Kern	71,178.34	20,818.25	71,178.00	20,593.02	.34	225.23	225.57
Wagener, Maris C	CMD010	Site Supervisor, COF	38,864.36	16,636.26	39,032.50	16,635.39	-168.14	.87	-167.27
Wasserman, June L	CMF030	Counselor	122,187.86	25,902.20	126,961.76	26,455.48	-4,773.90	-553.28	-5,327.18
Webster, Nancy D	CMF031	Instructor, Physical Ed	105,180.86	25,284.39	105,181.00	27,455.57	-.14	-2,171.18	-2,171.32

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District Office
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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Reynolds, Jerry A	DMC090	Custodian I	27,448.44	17,100.82	29,929.36	17,319.67	-2,480.92	-218.85	-2,699.77
Robinson, Kenneth I	DMN013	Assoc. Dir., Human Resources	88,603.14	20,158.57	88,603.08	29,968.64	.06	-9,810.07	-9,810.01
Romero, Stephanie S	DMN005	Controller	87,038.58	20,728.12	37,246.39	12,569.80	49,792.19	8,158.32	57,950.51
Serrano, Sandra V	DMM004	Chancellor	188,600.00	35,329.71	180,400.04	35,619.18	8,199.96	-289.47	7,910.49
Shearer, Sheila J	DMC085	Safety Coordinator	48,253.32	21,433.05	48,253.32	21,651.63	.00	-218.58	-218.58
Sloan, Sharon D	DMC087	Human Resources Assistant	50,678.58	21,940.44	50,678.58	22,017.42	.00	-76.98	-76.98
Tully, Brian A	DMC051	Systems Analyst/Programmer II	65,656.68	25,070.69	65,656.68	25,400.56	.00	-329.87	-329.87
Tutop, Zenaida F	DMC008	Payroll Supervisor	55,293.20	22,904.53	65,509.67	23,992.41	-10,216.47	-1,087.88	-11,304.35
Van Westen, Kellie J	DML005	Admin. Asst., Chancellor	81,906.02	28,424.88	81,906.00	28,695.39	.02	-270.51	-270.49
Vargas, Maria R	DMC025	Accounting Technician II	48,253.32	21,433.05	60,541.59	23,645.29	-12,288.27	-2,212.24	-14,500.51
VeVea, Elena A	DMC098	Database Administrator I	18,574.88	7,813.37	12,604.38	4,572.33	5,970.50	3,241.04	9,211.54

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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Vaughn, Suzanne A	BMN011	Director, Enrollment Services	88,603.14	31,948.75	88,603.20	30,116.67	-.06	1,832.08	1,832.02
Vickrey, Rachel A	BMF213	Instructor, Mathematics	99,300.21	24,521.59	90,508.44	23,397.18	8,791.77	1,124.41	9,916.18
Villasenor, Sarah E	BMC513	Educational Advisor	49,366.00	21,954.83	49,037.87	21,433.30	328.13	521.53	849.66
Walck, Vesta L	BMC294	Athletic Equipment Attendant	27,170.40	15,397.87	26,935.27	17,074.58	235.13	-1,676.71	-1,441.58
Wall, Charles C	BMF214	BUSINESS	81,350.00	22,188.07	83,353.16	23,121.80	-2,003.16	-933.73	-2,936.89
Ward, Mary E	BMC042	Financial Aid Technician	51,736.33	22,600.74	52,448.18	22,510.17	-711.85	90.57	-621.28
Waters, Barbara L	BMC299	Department Assistant III	43,641.53	20,073.16	40,149.07	19,779.51	3,492.46	293.65	3,786.11
Watson, Marilyn K	BMC464	Child Day Care Center Asst	12,666.83	1,113.42	15,190.23	1,358.00	-2,523.40	-244.58	-2,767.98
Wayland, Scott M	BMF284	Faculty FT 10 175 Days	73,303.00	21,141.95	73,302.50	23,285.91	.50	-2,143.96	-2,143.46
Webber, Elizabet C	BMF218	Instructor, Anthropology	80,199.00	22,038.44	82,199.30	24,151.16	-2,000.30	-2,112.72	-4,113.02
Wegner, Joan H	BMN010	Dir, Financial Aid & Schlrshps	95,093.69	33,438.46	95,093.64	31,230.80	.05	2,207.66	2,207.71

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Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
West, Charles E	BMF219	Dir Coop Educ/Placement	84,587.00	22,608.87	92,812.39	22,360.97	-8,225.39	247.90	-7,977.49
Westerfield, Cecelia L	BMC458	Network Technician	53,138.52	22,902.95	53,138.52	22,478.53	.00	424.42	424.42
Wheeler-Hayes, Melanie E	BMC182	Department Assistant III	45,009.60	21,024.56	45,009.60	20,994.16	.00	30.40	30.40
White, Catherine M	BMC305	Teacher Aide	10,719.96	964.80	18,166.13	1,403.93	-7,446.17	-439.13	-7,885.30
White, Rita A	BMC276	Teacher Aide	7,500.09	675.00	8,515.87	761.81	-1,015.78	-86.81	-1,102.59
Whitney, Phillip R	BMF103	Instructor, Computer Studies	86,861.00	22,904.48	86,861.00	24,865.58	.00	-1,961.10	-1,961.10
Whitson, Becki A	BMF300	Faculty FT Psychology	81,178.00	22,165.70	81,177.90	24,328.43	.10	-2,162.73	-2,162.63
Wiederrecht, Ann E	BMF088	Instructor, History/Poli Sci	73,135.00	21,120.12	73,134.70	23,068.71	.30	-1,948.59	-1,948.29
Wilkerson, Alejandra N	BMC308	Custodian I	30,290.40	17,978.70	36,889.27	18,368.77	-6,598.87	-390.07	-6,988.94
Williams, Angela Y	BMC293	Financial Aid Technician	49,365.72	22,089.82	53,167.36	22,381.87	-3,801.64	-292.05	-4,093.69
Williams, Reginald M	BMF011	Philosophy	55,603.00	18,840.95	57,549.30	18,868.07	-1,946.30	-27.12	-1,973.42
Wilson, Harry S	BMF222	Instructor, Photography	88,818.00	23,158.90	90,818.20	24,332.99	-2,000.20	-1,174.09	-3,174.29

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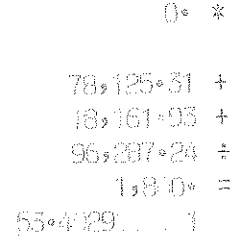
Former Incumbent	Posn Code	Position	Budgeted Salary	Budgeted Fringe	Wages Paid	Fringe Benefits Paid	Budgeted Salary Remaining	Budgeted Fringe Remaining	Budgeted Total Remaining
Weisenthal, Jo Ann	CMC067	Department Assistant II	29,036.25	15,644.90	29,036.25	15,420.23	.00	224.67	224.67
Weisenthal, Robert H	CMM009	Associate Dean of Student Life	78,125.31	18,161.93	78,125.31	18,137.23	.00	24.70	24.70
	CMN006	Dir Stud FA/Vet Servs/Stud Sup	23,081.01	5,385.63	23,081.01	5,385.61	.00	.02	.02
White, Teresa L	CMC141	Admissions and Records Asst	3,635.66	319.57	3,059.76	278.15	575.90	41.42	617.32
Whitehouse, Andrew H	CMC161	Custodian I/Maintenance Wkr	8,132.78	714.87	1,884.21	169.21	6,248.57	545.66	6,794.23
Whitlock, Gayle M	CEC014	Educational Advisor	6,362.24	1,357.82	6,362.24	719.16	.00	638.66	638.66
	CMF038	Counselor/Site Dir KRV 1Yr Tem	73,260.94	21,098.15	75,301.02	21,278.10	-2,040.08	-179.95	-2,220.03
Wilson, Darrin M	CMC113	Network Administrator	63,090.60	24,877.69	63,090.60	24,778.18	.00	99.51	99.51
Wilson, Janet M	CMC071	Library Technician II	43,698.00	20,738.92	43,698.00	20,569.09	.00	169.83	169.83
Windish, Sherri L	CMC058	Office Supervisor	41,730.12	20,318.93	41,730.12	20,107.60	.00	211.33	211.33
Winston, Rachel	CMF021	Instructor, Mathematics	75,695.00	21,425.30	75,694.50	23,638.26	.50	-2,212.96	-2,212.46



Schedule 5
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,841,030	$ 2,985,075	$ 3,124,167	$ 3,076,879	$ 5,051,046	$ 7,427,186
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 56,821	$ 59,702	$ 62,483	$ 61,538	$ 101,021	$ 148,544
1.8-4 line 4A	Enrollment Fees Waived	$ 2,226,228	$ 2,567,153	$ 2,892,011	$ 2,961,641	$ 4,790,751	$ 7,101,425
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 44,525	$ 51,343	$ 57,840	$ 59,233	$ 95,815	$ 142,029
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 155,836	For 00-01 through 04-05 - unit fee				
1.8-4 line 5	Summer		104,587	115,780	122,877	119,354	176,696
	Fall		110,821	126,817	126,416	126,105	129,269
	Winter/Interssion						
	Spring		17,970	20,469	19,947	20,694	23,167
	Total # of credits		233,378	263,066	269,240	266,153	329,132
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 212,374	$ 239,390	$ 245,008	$ 242,199	$ 299,510
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 44,525	$ 51,343	$ 57,840	$ 59,233	$ 95,815	$ 142,029
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 155,836					
1.8-4 5	Credit Units Waived		$ 212,374	$ 239,390	$ 245,008	$ 242,199	$ 299,510
Total Enrollment Fee Waiver Offset	**Forward to 5A**	**$ 200,361**	**$ 263,717**	**$ 297,230**	**$ 304,241**	**$ 338,014**	**$ 441,539**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Kern
COUNTY: Kern

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$33,230,153	$29,747,077	$365,670	$30,112,747
ENROLL FEE ADMIN (2%)	139,386	119,872	19,514	139,386
APPRENTICE ALLOWANCE	257,580	229,653	27,927	257,580
BASIC SKILLS	0	189,643	-189,643	0
PARTNERSHIP FOR EXCEL.	2,979,889	2,562,705	417,184	2,979,889
S.F.A.A.	911,591	782,678	128,913	911,591
E.O.P.S.	2,063,004	1,772,805	290,199	2,063,004
C.A.R.E.	327,289	279,653	47,636	327,289
D.S.P.S.	1,934,146	1,655,234	278,912	1,934,146
STATE HOSPITALS	494,290	425,089	69,201	494,290
CALWORKS	707,738	608,655	99,083	707,738
MATRICULATION (CREDIT)	845,673	727,278	118,395	845,673
MATRIC. (NONCREDIT)	24,337	20,930	3,407	24,337
FAC. & STAFF DIVERSITY	20,260	14,402	5,858	20,260
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	796,395	684,900	111,495	796,395
BLOCK GRANT (ONE-TIME)	396,713	341,173	55,540	396,713
ECON. DEVELOPMENT	801,426	581,714	91,484	673,198
TELECOMMUNICATIONS	175,715	94,678	81,037	175,715
TANF	163,733	140,811	22,922	163,733
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	206,400	214,656	-41,280	173,376
VTEA TITLE I C	414,371	161,605	186,467	348,072
PLANT & INSTRUCTIONAL	444,976	382,680	62,296	444,976
PRIOR YEAR CORRECTION	2,057,568	2,041,184	16,384	2,057,568
TOTAL	$49,392,633	$43,779,075	$2,268,601	$46,047,676

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

California Home

Fri

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Bakersfield College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 09, 2006 10:42:59

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	68	14,480
BOGW - Part A-3 based on general assistance recipient status	9	352
BOGW - Part A-4 based on Veteran's or National Guard dependent status	31	14,475
BOGW - Part A basis unreported	75	14,833
BOGW - Part B based on income standards	4,917	1,209,124
BOGW - Part C based on financial need	7,338	3,011,309

Total Unduplicated Count = 10,748
Total Amount = $ 4,264,573

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10,748
2,090
3,047
15,885

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerro Coso College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 09, 2006 10:44:45

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	50	13,155
BOGW - Part A-3 based on general assistance recipient status	6	1,339
BOGW - Part A-4 based on Veteran's or National Guard dependent status	20	7,249
BOGW - Part A basis unreported	59	17,430
BOGW - Part B based on income standards	985	250,519
BOGW - Part C based on financial need	1,475	558,646

Total Unduplicated Count = 2,090
Total Amount = $ 848,338

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Porterville College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 09, 2006 10:47:06

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	6	1,097
BOGW - Part A-3 based on general assistance recipient status	1	328
BOGW - Part A-4 based on Veteran's or National Guard dependent status	11	5,490
BOGW - Part A basis unreported	9	2,345
BOGW - Part B based on income standards	1,623	485,520
BOGW - Part C based on financial need	1,941	896,576

Total Unduplicated Count = 3,047
Total Amount = $ 1,391,356

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 9, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4891

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Kern Community College District CC15095

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Kern Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number:	CC15095
(02) Claimant Name	Kern Community College District
County of Location	Kern
Street Address or P.O. Box	2100 Chester Avenue
City / State / Zip Code	Bakersfield / CA / 93301

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 831,300	(13) $ 755,817
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 755,817
Due from State	(08) $ 831,300	(17) $ 755,817
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	537,864
(25) EFCW-1, (04)(B)(1)(a)(f)	255
(26) EFCW-1, (04)(B)(1)(b)(f)	1,179
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	338,327
(29) EFCW-1, (04)(B)(2)(c)(f)	459
(30) EFCW-1, (06)	40
(31) EFCW-1, (07)	350,443
(32) EFCW-1, (09)	132,491
(33) EFCW-1, (10)	340,220
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1-3-07

John Griffith — Type or Print Name

Director, Budget and Payroll Services — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Kern Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 537,864.14	$ -	$ -	$ -	$ -	$ 537,864.14
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 254.95	$ -	$ -	$ -	$ -	$ 254.95
b. Staff training (One time per employee)	$ 1,179.32	$ -	$ -	$ -	$ -	$ 1,179.32
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 338,326.82	$ -	$ -	$ -	$ -	$ 338,326.82
c. Reporting BOG fee waiver data to CCC	$ 458.91	$ -	$ -	$ -	$ -	$ 458.91
05) Total Direct Costs	$ 878,084.14	$ -	$ -	$ -	$ -	$ 878,084.14

Indirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	39.91%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 350,443.38
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,228,527.52
Cost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 132,491.00
10) Less: Enrollment Fee Waiver offsets		$ 340,220.00
11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 755,816.52

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Dargatz, Becky Business Services Specialist	$47.13	158.0	$ 7,446.54				
Enrollment Office Staff Various	$39.47	85.3	$ 3,366.79				
Referencing student accounts and records							
Enrollment Office Staff Various	$39.47	5,161.7	$ 203,732.30				
Calculating total enrollment fee to be collected							
Enrollment Office Staff Various	$39.47	2,265.5	$ 89,419.29				
ering student's questions regarding enrollment fee collection							
Enrollment Office Staff Various	$39.47	4,410.9	$ 174,098.22				
Updating written and computer records for enrollment fee information							
Enrollment Office Staff Various	$39.47	1,397.1	$ 55,143.54				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Enrollment Office Staff Various	$39.47	118.0	$ 4,657.46				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 537,864.14	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
n Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Spiller, Joann Assistant Director, Financial Aid	$50.99	5.0	$ 254.95				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 254.95	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Clark, Kim	Financial Aid Assistant	$18.42	4.0	$ 73.68				
Cornett, Candace	Financial Aid Technician	$32.28	1.0	$ 32.28				
Kost, Kim	Financial Aid Assistant	$19.17	4.0	$ 76.68				
Lowe, Kristi	Program Manager	$55.57	4.0	$ 222.28				
Olsen, Inge	Department Assistant II	$32.14	4.0	$ 128.56				
Palen, Kathleen	Department Assistant III	$32.99	4.0	$ 131.96				
Patino, Karen	Financial Aid Assistant	$16.34	4.0	$ 65.36				
Pearson, Mellissa	Department Assistant I	$21.15	4.0	$ 84.60				
Spiller, Joann	Assistant Director, Financial Aid	$50.99	4.0	$ 203.96				
Sutton, Rochelle	Financial Aid Technician	$39.99	4.0	$ 159.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,179.32	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Office Staff Various	$38.86	2,409.3	$ 93,625.40				
Receiving waiver applications							
Financial Office Staff Various	$38.86	1,807.0	$ 70,220.02				
Evaluating waiver applications and verifying application documents							
Financial Office Staff Various	$38.86	1,642.7	$ 63,835.32				
[illegible]ng approved application information into district records; providing student award letter							
Financial Office Staff Various	$38.86	2,847.3	$ 110,646.08				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 336,326.82	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Spillier, Joann Assistant Director, Financial Aid	$50.99	9.0	$ 458.91				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 458.91	$ -	$ -	$ -	$ -

New 04/06

Kern Community College District

308/95 ENROLLMENT COLLECTIONS/WAIVERS

2005-2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	4.00	Clark, Kim	Financial Aid Assistant	$18.42	$73.68	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Clark, Kim Total**			$73.68		
05-06	1.00	Cornett, Candace	Financial Aid Technician	$32.28	$32.28	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	1.00	**Cornett, Candace Total**			$32.28		
05-06	158.00	Dargatz, Becky	Business Services Specia	$47.13	$7,446.54	Collecting delinquent enrollment fees, or turning over accounts to collection age	Calculating and collecting enrollment fees
	158.00	**Dargatz, Becky Total**			$7,446.54		
05-06	5,161.70	Enrollment Office Staff	Various	$39.47	$203,732.30	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	2,265.50	Enrollment Office Staff	Various	$39.47	$89,419.29	Calculating total enrollment fee to be collected	Calculating and collecting enrollment
05-06	4,410.90	Enrollment Office Staff	Various	$39.47	$174,098.22	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	1,397.10	Enrollment Office Staff	Various	$39.47	$55,143.54	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	85.30	Enrollment Office Staff	Various	$39.47	$3,366.79	Collecting delinquent enrollment fees, or turning over accounts to collection age	Calculating and collecting enrollment fees
05-06	118.00	Enrollment Office Staff	Various	$39.47	$4,657.46	Providing refund of enrollment fees paid to students establishing fee waiver afte	Calculating and collecting enrollment fees
	13,438.50	**Enrollment Office Staff Total**			$530,417.60		
05-06	2,409.30	Financial Office Staff	Various	$38.86	$93,625.40	Answering student's questions regarding enrollment fee waivers/referring to app	Waiving student fees
05-06	1,807.00	Financial Office Staff	Various	$38.86	$70,220.02	Receiving waiver applications	Waiving student fees
05-06	1,642.70	Financial Office Staff	Various	$38.86	$63,835.32	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	2,847.30	Financial Office Staff	Various	$38.86	$110,646.08	Entering approved application information into district records; providing student	Waiving student fees
	8,706.30	**Financial Office Staff Total**			$338,326.82		
05-06	4.00	Kost, Kim	Financial Aid Assistant	$19.17	$76.68	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Kost, Kim Total**			$76.68		
05-06	4.00	Lowe, Kristi	Program Manager	$55.57	$222.28	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Lowe, Kristi Total**			$222.28		
05-06	4.00	Olsen, Inge	Department Assistant II	$32.14	$128.56	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Olsen, Inge Total**			$128.56		
05-06	4.00	Palen, Kathleen	Department Assistant III	$32.99	$131.96	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Palen, Kathleen Total**			$131.96		
05-06	4.00	Patino, Karen	Financial Aid Assistant	$16.34	$65.36	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Patino, Karen Total**			$65.36		
05-06	4.00	Pearson, Mellissa	Department Assistant I	$21.15	$84.60	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Pearson, Mellissa Total**			$84.60		
05-06	5.00	Spiller, Joann	Assistant Director, Financ	$50.99	$254.95	Prepare/revise district policies and procedures for waiver eligibility determinatio	Preparing district policies & procedures f
05-06	4.00	Spiller, Joann	Assistant Director, Financ	$50.99	$203.96	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
05-06	9.00	Spiller, Joann	Assistant Director, Financ	$50.99	$458.91	Reporting to College Chancellor number of and amounts provided for BOG fee v	Reporting BOG fee waiver data to CCC
	18.00	**Spiller, Joann Total**			$917.82		
05-06	4.00	Sutton, Rochelle	Financial Aid Technician	$39.99	$159.96	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Sutton, Rochelle Total**			$159.96		
	22,353.80	**Grand Total**			$878,084.14		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,828,422		$49,828,422	$521,119	$49,307,303
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,501,024		4,501,024	658,102	3,842,922
Course and Curriculum Development	6020	1,326,572		1,326,572	1,521	1,325,051
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	1,712,310		1,712,310	136,083	1,576,227
Instructional Support Services	6100					
Learning Center	6110	341,142		341,142		341,142
Library	6120	1,550,833		1,550,833	164,260	1,386,573
Media	6130	412,613		412,613	1,697	410,916
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	29,496		29,496	26,428	3,068
Admissions and Records	6200	1,321,655		1,321,655	9,781	1,311,874
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,963,850		2,963,850	11,803	2,952,047
Matriculation and Student Assessment	6320					
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,055,549	701	2,054,848	116,877	1,937,971
Subtotal		$66,043,466	$701	$66,042,765	$1,647,671	$64,395,094

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$2,325,592	$960,537	$1,365,055	$4,703	$1,360,352
Health Services	6440	467,202		467,202	22,096	445,106
Student Personnel Admin.	6450	554,716		554,716		554,716
Financial Aid Administration	6460	2,868,929		2,868,929	167,373	2,701,556
Job Placement Services	6470	77,241		77,241		77,241
Veterans Services	6480	58,077		58,077		58,077
Miscellaneous Student Services	6490	577,089		577,089	23,222	553,867
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,877,330		1,877,330	1,877,330	0
Custodial Services	6530	1,774,750		1,774,750	1,774,750	0
Grounds Maintenance and Repairs	6550	1,085,387		1,085,387	1,085,387	0
Utilities	6570	2,832,222		2,832,222	2,832,222	0
Other	6590	149,312		149,312	149,312	0
Planning, Policy Making, and Coordination	6600	2,670,881		2,670,881	2,670,881	0
General Inst. Support Services	6700					
Community Relations	6710	619,638		619,638	619,638	0
Fiscal Operations	6720	4,174,568		4,174,568	4,174,568	0
Human Resources Management	6730	1,685,197		1,685,197	1,685,197	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	4,696		4,696	4,696	0
Staff Diversity	6760	23,944		23,944	23,944	0
Logistical Services	6770	1,315,943		1,315,943	1,315,943	0
Management Information Systems	6780	5,324,206		5,324,206	5,324,206	0
Subtotal		$96,510,386	$961,238	$95,549,148	$25,403,139	$70,146,009

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	2,687,315		2,687,315	2,687,315	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	87,019		87,019		87,019
Community Use of Facilities	6830	15,355		15,355		15,355
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	10,667		10,667		10,667
Farm Operations	6930	-64		-64		-64
Food Services	6940	15,589		15,589		15,589
Parking	6950	392,045		392,045		392,045
Student and Co-curricular Activities	6960	309,347		309,347	26,224	283,123
Student Housing	6970	1,666		1,666		1,666
Other	6990	1,070,199		1,070,199	19,460	1,050,739
Auxiliary Operations	7000					
Contract Education	7010	-600		-600		-600
Other Auxiliary Operations	7090	143,646		143,646		143,646
Physical Property Acquisitions	7100	659,127		659,127	659,127	0
(05) Total		$101,901,697	$961,238	$100,940,459	$28,795,265	$72,145,194
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				39.91%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
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SUPPLEMENTAL DATA
For Actual Year: **2004-05**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	771,511	88,791	71,205	8,858		940,365
Architecture and Environmental Design	0200	154,992		1,030			156,022
Biological Sciences	0400	2,076,599	18,443	43,546	5,533		2,144,121
Business and Management	0500	1,381,872	130,176	6,652	19,280		1,537,980
Communications	0600	962,059	72,170	22,802			1,057,031
Computer and Information Science	0700	1,612,389	188,678	22,046	25,128		1,848,241
Education	0800	3,865,071	1,119,011	375,357	36,066		5,395,505
Engineering and Related Industrial Tech.	0900	1,911,526	327,217	320,006	241,185		2,799,934
Fine and Applied Arts	1000	2,955,695	223,377	111,594	28,743		3,319,409
Foreign Language	1100	1,114,059	66,471	667			1,181,197
Health	1200	4,079,090	616,398	143,187	78,330		4,917,005
Consumer Education and Home Economics	1300	1,368,457	215,575	116,349	24,430		1,724,811
Law	1400						
Humanities (Letters)	1500	5,287,645	201,579	11,319	8,138		5,508,681
Library Science	1600						
Mathematics	1700	3,978,764	117,990	2,991			4,099,745
Military Studies	1800						
Physical Sciences	1900	1,503,899	47,892	15,083			1,566,874
Psychology	2000	919,849	68,749	2,109			990,707
Public Affairs and Services	2100	1,476,307	387,984	199,744	34,519		2,098,554
Social Sciences	2200	3,397,003	106,271	4,049	10,909		3,518,232
Commercial Services	3000						
Interdisciplinary Studies	4900	2,402,878	158,301	4,709			2,565,888
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,458,120					2,458,120
Subtotal - Instructional Activities	**599**	43,677,785	4,155,073	1,474,445	521,119		49,828,422

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,504,721	338,201	658,102		4,501,024
Course and Curriculum Development	6020		955,021	370,030	1,521		1,326,572
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		1,440,284	135,943	136,083		1,712,310
Subtotal - Instructional Administration	**6000**		5,900,026	844,174	795,706		7,539,906
Instructional Support Services (6100)							
Learning Center	6110	195,756	142,134	3,252			341,142
Library	6120		1,244,667	141,906	164,260		1,550,833
Media	6130		407,048	3,868	1,697		412,613
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190			3,068	26,428		29,496
Subtotal - Instructional Support Services	**6100**	195,756	1,793,849	152,094	192,385		2,334,084
Admissions and Records	**6200**		1,279,081	32,793	9,781		1,321,655
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,890,196	61,851	11,803		2,963,850
Matriculation and Student Assessment	6320						
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,890,196	61,851	11,803		2,963,850

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,860,186	77,785	116,877	701	2,055,549
Extended Opportunity Prgms. & Services (EOPS)	6430		1,296,969	63,383	4,703	960,537	2,325,592
Health Services	6440		217,009	228,097	22,096		467,202
Student Personnel Administration	6450		531,469	23,247			554,716
Financial Aid Administration	6460		2,440,948	260,608	167,373		2,868,929
Job Placement Services	6470		74,195	3,046			77,241
Veterans Services	6480		58,077				58,077
Miscellaneous Student Services	6490		487,807	66,060	23,222		577,089
Subtotal - Other Student Services	**6400**		6,966,660	722,226	334,271	961,238	8,984,395
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,209,931	523,240	144,159		1,877,330
Custodial Services	6530		1,603,962	170,788			1,774,750
Grounds Maintenance and Repairs	6550		881,774	156,317	47,296		1,085,387
Utilities	6570			2,832,222			2,832,222
Other Operation and Maintenance of Plant	6590		34,326	55,275	59,711		149,312
Subtotal - Operation and Maintenance of Plant	**6500**		3,729,993	3,737,842	251,166		7,719,001
Planning, Policymaking, and Coordination	**6600**		2,050,111	557,811	62,959		2,670,881

* Salaries and Benefits of instructors and instructional aides in instructional assignments
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CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		205,661	402,327	11,650		619,638
Fiscal Operations	6720		2,917,942	1,246,897	9,729		4,174,568
Human Resources Management	6730		1,368,289	312,587	4,321		1,685,197
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750			4,696			4,696
Staff Diversity	6760		10,962	12,982			23,944
Logistical Services	6770		919,309	376,218	20,416		1,315,943
Management Information Systems	6780		3,572,298	1,500,531	251,377		5,324,206
Other General Institutional Support Services	6790		2,426,837	191,124	69,354		2,687,315
Subtotal - General Institutional Support Services	**6700**		11,421,298	4,047,362	366,847		15,835,507
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	28,121	49,294	9,604			87,019
Community Use Facilities	6830		15,355				15,355
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	28,121	64,649	9,604			102,374

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		1,127	9,540			10,667
Farm Operations	6930			(64)			(64)
Food Services	6940		15,459	130			15,589
Parking	6950		320,824	71,221			392,045
Student and Co-curricular Activities	6960		205,590	77,533	26,224		309,347
Student Housing	6970			1,666			1,666
Other Ancillary Services	6990		843,546	207,193	19,460		1,070,199
Subtotal - Ancillary Services	**6900**		1,386,546	367,219	45,684		1,799,449
Auxiliary Operations (7000)							
Contract Education	7010			(600)			(600)
Other Auxiliary Operations	7090		143,646				143,646
Subtotal - Auxiliary Operations	**7000**		143,646	(600)			143,046
Physical Property and Related Acquisitions (7100)	**7100**		255,060	34,746	369,321		659,127
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					574,653	574,653
Student Aid	7320					761,373	761,373
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,336,026	1,336,026
TOTAL EXPENDITURES and OTHER OUTGO	**391**	43,901,662	42,036,188	12,041,567	2,961,042	2,297,264	103,237,723

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	56,309
Avg. time p/account	5.5
Total Time (in minutes)	309700
Per Hour	60
Hours Worked **(** Activity 11)**	**5,161.7**
***EFC 2**	22,655
Avg. time p/student	6.0
Total Time (in minutes)	135930
Per Hour	60
Hours Worked **(** Activity 12)**	**2,265.5**
***EFC 1**	56,309
Avg. time p/question	4.7
Total Time (in minutes)	264652
Per Hour	60
Hours Worked **(** Activity 13)**	**4,410.9**
***EFC 2**	22,655
Avg. time p/file	3.7
Total Time (in minutes)	83824
Per Hour	60
Hours Worked **(** Activity 14)**	**1,397.1**
***EFC 4**	800
Avg. time p/account	6.4
Total Time (in minutes)	5120
Per Hour	60
Hours Worked **(** Activity 15)**	**85.3**
***EFC 5**	1,142
Avg. time p/student	6.2
Total Time (in minutes)	7080
Per Hour	60
Hours Worked **(** Activity 16)**	**118.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	32,854
Avg. time p/question	4.4
Total Time (in minutes)	144558
Per Hour	60
Hours Worked **(** Activity 21)**	**2,409.3**
***EFW 6**	32,854
Avg. time p/application	3.3
Total Time (in minutes)	108418
Per Hour	60
Hours Worked **(** Activity 22)**	**1,807.0**
***EFW 6**	32,854
Avg. time p/evaluation	3.0
Total Time (in minutes)	98562
Per Hour	60
Hours Worked **(** Activity 23)**	**1,642.7**
***EFW 8 (default)**	0
Avg. time p/application	4.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	32,854
Avg. time p/application	5.2
Total Time (in minutes)	170841
Per Hour	60
Hours Worked **(** Activity 25)**	**2,847.3**
***EFW 8**	0
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Allday, Linda	Admin. And Records Tech.1	2.0	2.0	1.0	4.0	4.0	
Candalaria, Roselee	Admin. Asst.	2.0	2.0	1.0	1.0		
Cox, Dorothy	Billing/Cashier Tech. 2		1.0	2.0		3.0	2.5
Dargatz, Becky	Business Services Specialist	4.0	3.0	4.0	2.0	5.0	6.0
Estrada, Juan	A&R Asst. FLB	1.0	1.0	2.0	1.0		
Fidel, Dawn	A&R Tech 1	10.0	14.0	5.0	5.0	12.0	8.0
Gonzalez-Bozarth, Lois	Admin. And Records Supervisor	9.0	8.0	5.0	7.0	5.0	5.0
Jackson, Christy	Admissions Tech	5.0		5.0			
James, May	Billing/Cashier Tech 1	3.0	2.0	2.0		2.0	5.0
Lowe, Kristi	Program Manager	5.0	5.0	5.0	3.0	5.0	5.0
Martell, Deborah	Dept. Asst. 2	5.0	12.0	5.0	5.0	2.0	3.0
Odermann, Sharon	Accounting Tech 2	2.5	3.5	3.0	2.0	2.0	2.5
Olivera, Lori	Program Manager	8.0	7.0	8.0	5.0	3.0	6.0
Olsen, Inge	Department Assistant III	10.0	15.0	10.0	5.0	14.0	9.0
Pafford, Janet	A&R Asst. LB	2.0	2.0	2.0	1.0		
Palen, Kathleen	Department Assistant III	5.0	5.0	5.0	3.0	3.0	5.0
Puget, Lynne	Admissions Tech.	5.0		5.0			
Rauser, Edwina	Accounting Supervisor	10.0		10.0		15.0	15.0
Shaw, Diane	A&R tch. 1	2.0	2.0	3.0	2.0	3.0	
Stracener, Martha	Payroll Tech.	4.5	4.5	4.5			4.5
White, Teresa	Admissions & Records Assistant	14.0	19.0	12.0	9.0	18.0	10.0
Average		**5.5**	**6.0**	**4.7**	**3.7**	**6.4**	**6.2**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year:04-05 and 05-06
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and PHR lists provided by client.
Findings:

Staff	Title	04-05	05-06
Allday, Linda	Admin. And Records Tech.1	$31.84	$45.72
Bozarth-Gonzalez, Lois	Admin. And Records Supervisor		
Candalaria, Roselee	Admin. Asst.		
Cox, Dorothy	Billing/Cashier Tech. 2	$33.91	$36.69
Dargatz, Becky	Business Services Specialist	$48.41	$47.13
Estrada, Juan	A&R Asst. FLB		
Fidel, Dawn	A&R Tech 1	$30.26	
Jackson, Christy	Admissions Tech	$34.54	$35.17
James, May	Billing/Cashier Tech 1	$33.40	$34.46
Martell, Deborah	Dept. Asst. 2	$29.40	
Odermann, Sharon	Accounting Tech 1		$36.44
Olivera, Lori	Program Manager	$47.46	
Pafford, Janet	A&R Asst. LB	$15.64	
Puget, Lynne	Admissions Tech.	$32.69	$35.04
Rauser, Edwina	Accounting Supervisor	$50.92	$54.64
Shaw, Diane	A&R tch. 1	$34.54	$35.09
Stracener, Martha	Payroll Tech.	$32.41	$34.27
Average PHR		**$35.03**	**$39.47**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used same timestudy as initial year claims.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Cha, Vieng	Financial Aid Tech	10.0	8.0	6.0	10.0	15.0	5.0
Clark, Kim	Financial Aid Asst.	2.5	2.5	2.5	10.0	4.0	4.0
Cruz, Erin	Financial Aid Tech.	10.0	6.0	5.0	9.0	8.0	5.0
Danielson, Anastasia	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
De La Fontaine, Diane	Financial Aid Tech.	1.5	0.5	2.0	1.5	2.0	2.0
Dykes, Perez-Lucy	Asst. Director of Financial Aid	3.0	0.5	1.0	1.5	3.0	1.0
Fidel, Dawn	A&R Tech 1	10.0	14.0	5.0	5.0	12.0	8.0
Hunter, Gina	Financial Aid Asst.	5.0	1.0	1.0	1.0	1.0	1.0
Jensen, Gilda	Financial Aid Tech.	2.5	0.5	2.0	0.5	2.5	1.5
Kost, Kim	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Evette, Lara	Financial Aid Asst.	5.0	2.0	2.0	1.0	2.0	2.0
Lopez, Daniel	Financial Aid Asst.	2.5	2.5	2.5	5.0	4.0	4.0
Lowe, Kristi	Program Manager	2.0	2.5	2.5	2.5	2.0	2.0
Olmedo, Maria	Financial Aid Asst. Director	8.0	7.0	5.0	9.0	10.0	4.0
Olsen, Inge	Department Asst. 2	2.5	2.5	2.5	6.0	4.0	4.0
Ortega, John	Financial Aid Tech.	13.0	8.0	8.0	12.0	12.0	6.0
Palen, Kathleen	Dept. Asst. 3	2.0	2.5	2.5	5.0	2.0	2.0
Patino, Karen	Financial Aid Asst.	2.5	2.5	2.5	4.5	4.0	4.0
Peacock, Elaine	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Pearson, Mellissa	Financial Aid Asst.	2.5	2.5	2.5	10.0	4.0	4.0
Skibinski, Heather	Payroll Tech.	5.0	2.0	2.0	1.0	2.0	2.0
Spiller, Joann	Asst. Director of Financial Aid	2.5	2.5	2.5		4.0	4.0
Sutton, Rochelle	Financial Aid Tech/Scholarships	2.5	2.5	2.5	10.0	4.0	4.0
Villasenor, Sarah	Educational Advisor	10.0	5.0	5.0	10.0	20.0	10.0
Ward, Mary	Financial Aid Tech.	2.0	1.0	3.0	0.5	2.0	1.5
Weisenthal, Bob	Associate Dean of Student Lifw	2.5	2.5	2.5		4.0	4.0
Williams, Angela	Financial Aid Tech.	3.0	2.0	3.0	3.0	3.0	3.0
Wise, Angela	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Average		**4.4**	**3.3**	**3.0**	**4.9**	**5.2**	**3.7**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 04-05 and 05-06
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and PHR lists provided by client.
Findings:

Staff	Title	04-05	05-06
Cha, Vieng	Financial Aid Tech	$37.11	$38.50
Clark, Kim	Financial Aid Asst.	$17.56	$18.42
Cruz, Erin	Financial Aid Tech.	$41.08	$40.83
Danielson, Anastasia	Financial Aid Asst.	$16.48	
De La Fontaine, Diane	Financial Aid Tech.	$43.83	$44.67
Fidel, Dawn	A&R Tech 1	$30.26	
Hunter, Gina	Financial Aid Asst.	$39.70	$35.23
Jensen, Gilda	Financial Aid Tech.	$42.25	$44.95
Kost, Kim	Financial Aid Asst.	$16.48	$19.17
Evette, Lara	Financial Aid Asst.		
Lopez, Daniel	Financial Aid Asst.	$10.20	
Lowe, Kristi	Program Manager	$49.87	$55.57
Olmedo, Maria	Financial Aid Asst. Director	$52.34	$55.98
Olsen, Ingeborg	Department Asst. 2	$31.62	$32.14
Ortega, John	Financial Aid Tech.	$42.82	$44.73
Palen, Kathleen	Dept. Asst. 3	$31.78	$32.99
Patino, Karen	Financial Aid Asst.	$11.37	$16.34
Peacock, Elaine	Financial Aid Asst.	$17.16	
Pearson, Mellissa	Financial Aid Asst.	$16.99	$21.15
Perez-Dykes, Lucy	Asst. Director of Financial Aid	$48.79	$51.11
Skibinski, Heather	Payroll Tech.	$25.19	$43.04
Spiller, Joann	Asst. Director of Financial Aid	$48.87	$50.99
Sutton, Rochelle	Financial Aid Tech/Scholarships	$38.05	$39.99
Villasenor, Sarah	Educational Advisor	$39.62	$44.32
Ward, Mary	Financial Aid Tech.	$41.29	$42.40
Weisenthal, Bob	Associate Dean of Student Lifw	$53.49	
Williams, Angela	Financial Aid Tech.	$39.70	$43.58
Wise, Angela	Financial Aid Asst.		
Average PHR		**$34.00**	**$38.86**

Conclusion: Findings go forward to EFCW -2.

Schedule 4
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1. Enrolled Students	54,779	60,309	59,243	63,563	63,518	61,562	59,000	56,309
EFC 2	1.8-1 2. Paid Enrollment fees	16,349	19,707	19,568	18,543	17,893	16,332	13,466	22,655
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	17,429	20,227	22,351	25,391	27,308	28,441	30,667	32,854
EFC 4	1.8-2 1. Delinquencies collections	900	3,650	3,000	7,377	2,870	3,574	5,767	800
EFC 5	1.8-2 2. Refunds	248	373	435	471	570	645	703	1142
EFW 6	1.8-3 1. Waivers Requested	19,433	20,289	25,981	27,898	29,588	31,568	33,447	32,854
EFW 7	1.8-3 2. Waivers Approved	19,433	20,289	25,981	27,898	29,588	31,568	33,447	32,854
EFW 8	1.8-3 (1-2) Waivers Denied	0	0	0	0	0	0	0	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in clas
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Bakersfield For 2005-2006

Data Current As Of May 22, 2012 10:25:56

Download The Result In Comma Delimited Format

Headcount
21,847

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Cerro Coso For 2005-2006

Data Current As Of May 22, 2012 10:26:18

Download The Result In Comma Delimited Format

Headcount
7,793

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Porterville For 2005-2006

Data Current As Of May 22, 2012 10:26:36

Download The Result In Comma Delimited Format

Headcount
5,470

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Kim Clark	Financial Aid Assistant
Employee Name	Exact Position Title

CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ 4 4 4 4

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Clark Date 5/1/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Candace Cornett	Financial Aid Technician	
Employee Name	Exact Position Title	
CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:			4	4				1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								6

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Candace Cornett Date 4/28/06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: Kern Fiscal Year: ~~2004-05~~ 05-06

Becky Dargatz
Employee Name

Business Services Specialist
Exact Position Title

Business Services - BC campus 661.395.4851 12mo/11mo/10mo/hrly
Dept. & Location # Telephone # Work year length

Date	Description of Activities		Time in Hours	Leave Blank
07 /05	Print due deligent letters - 1st notice		16 hrs	
07 /05	Follow/stuff envelopes with letters		8	
07 /05	Place postage on envelopes		4	
06 /05	Extract delinquent acct data and audit		16	
08 /05	Post previous years recovered dollars		8	
08 /05	Set up student installment plans and monitor		32	
08- /05	Follow up on returned statements		30	
08 /05	Print second due delingent letter		16	
08 /05	Fold/stuff envelopes with letters		8	
08 /05	Place postage on envelopes		4	
07 /05	Extract delinquent acct data and audit		16	
/ /				
/ /				
/ /				

0* +
16* +
8* +
4* +
16* +
8* +
32* +
30* +
16* +
8* +
4* +
16* +
0* +
[illegible]* +

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Becky Dargatz Date 5-18-06

BECKY DARGATZ Business Services Specialist
Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Kim Kost	Financial Aid Assistant
Employee Name	Exact Position Title

CCCC/FA/ESCC/Bishop	(760) 872-1565	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Kost by JoAnn Spiller Date 4-28-06

If you have any questions, please contact JoAnn Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College Dist

Kristi Lowe — Employee Name

Program Manager — Exact Position Title

Kern Cccd/ South Kern — College/Department/Location

661-259-8644 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	4	4	4	4	2	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristie Jane Lowe — Date 4/28/06

If you have any questions, please contact JoAnn Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Inge Olsen	Department Assistant II
Employee Name	Exact Position Title

CCCC/FA/KRV campus	(760) 379-5501	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	4	4	4	4	4	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-20-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College

Kathleen Palen — Employee Name

Dept. Assistant III — Exact Position Title

Cerro Coso Financial Aid / So. Kern — College/Department/Location

661.258.8644 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	4	4	4	4	4	4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Palen. Date 4/28/06

If you have any questions, please contact JoAnn Spiller, at 760.384.6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Karen Patino — Employee Name
Financial Aid Assistant — Exact Position Title

CCCC/FA/KRV campus — College/Department/Location
(760) 379-5501 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 A. Enrollment Collection Process:								
Code 1 B. Enrollment Waiver Process:								
Code 2 A. Enrollment Collection Process:								
Code 2 B. Enrollment Waiver Process:							4	4
Code 3 Record Retention:								
Code 4 State Reporting:								
TOTALS:							4	4

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Patino Date 4/28/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Mellissa Pearson	Department Assistant I	
Employee Name	Exact Position Title	
CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:						4	4	4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mellissa Pearson Date 4/27/10

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Joann Spiller	Assistant Director/Financial Aid
Employee Name	Exact Position Title

CCCC/FA/IWV campus	(760) 384-6221	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
(B) Enrollment Waiver Process:	5	5	5	5	5	5	5	5 - 8
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B) Enrollment Waiver Process:	4	4	4	4	4	4	4	4 - 4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	3	3	3	3	3	3	3	9 - 8
TOTALS:	12	12	12	12	12	12	12	18

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joann S. Spiller Date 4-28-06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Kern Community College District/ Cerro Coso Community College

Rochelle Sutton — Employee Name

Financial Aid Technician/Scholarships — Exact Position Title

CCCC/FA/IWV campus — College/Department/Location

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:		4	4	4	4	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.		9	9	9	9	9	9	0
TOTALS:		91	91	91	91	91	91	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rochelle Sutton Date 4/28/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Admissions & Records
Department/Location

Linda Allday
Employee Name

Admissions & Records Tech I.
Exact Position Title

395-4332
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda Allday Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BC - Kern — District

AIK — Department/Location

Rosehee Candelaria — Employee Name

Admissions Assistant — Exact Position Title

3954301 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosehee Candelaria Date 4/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Business Services
Department/Location

Dorothy J. Cox
Employee Name

Billing/Cashier Technician II
Exact Position Title

461-395-4493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4½ Mins	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 Mins	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Mins		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2½ 3 Mins			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dorothy J. Cox Date May 18, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Bakersfield College - Business Services
Department/Location

BECKY DAKGATZ
Employee Name

Business Services Specialist
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature Becky Dakgatz PLEASE USE BLUE INK

Date 5-18-06

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions Records - BC
Department/Location

Juan Estrada
Employee Name

A&R Asst. FLB
Exact Position Title

4049
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juan Estrada Juan Estrada Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD — District

Admissions & Records - CC — Department/Location

Dawn Fidel — Employee Name

Air Tech I — Exact Position Title

760 324 6358 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dawn Fidel — Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

ADMISSIONS & RECORDS - CC
Department/Location

LOIS J. GONZALEZ-BAZARTH
Employee Name

ADMISSIONS & RECORDS SUPERVISOR
Exact Position Title

760 384-6360
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lois J. Gonzalez-Bazarth Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Christy Jackson
Employee Name

Admissions Tech
Exact Position Title

395-4303
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Jackson Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Bus. Services
Department/Location

Mary James
Employee Name

Billing/Cashier Tech I
Exact Position Title

395-4491
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, ~~and printing out a list of enrolled courses.~~	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, ~~update student account~~/record, and print out receipt/~~course list~~/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5			✓		✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary E James Date 5/18/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist
District

Cerro Coso / South Kern
Department/Location

Kristi Lowe
Employee Name

Program Manager
Exact Position Title

661-258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristi Lowe Date 4/27/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - cc
Department/Location

Deborah Mantell
Employee Name

Department Assistant II
Exact Position Title

760-872-1565
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist — District
Business Services B.C. Campus — Department/Location
Sharon Oderman — Employee Name
Accounting Technician II — Exact Position Title
661-395-4853 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 **04-05** 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-4				✓	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-3			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Oderman Date 5-18-06

If you have any questions, please contact _____, at _____

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EFCW [illegible]-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD — District

CC Online — Department/Location

Lori Olivera — Employee Name

Program Manager — Exact Position Title

760-872-5310 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are reporting.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L Olivera — Date 4/27/06 at _____

If you have any questions, please contact _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

Revised January 2006 23

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD — District

Admission + Record / KRV — Department/Location

Inge Olsen — Employee Name

Department Assistant III — Exact Position Title

760-379-5501 — Telephone #

(2mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	14	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-27-06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions & Records-BC
Department/Location

Janet Pafford
Employee Name

A&R Assistant-LB
Exact Position Title

4049
Telephone #

12mo/11mo/10mo/hrly (35 hr/wk 3 mo.)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Janet Pafford Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist. — District
Cerro Coso / South Kern — Department/Location
Kathleen Palen — Employee Name
Dept. Assistant III — Exact Position Title
661.258.8644 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Palen Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Lynne Puget
Employee Name

Admissions Tech
Exact Position Title

395-4301
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Lynne Puget Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

This is my best recollection estimate

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BC
District

Busn. Servs.
Department/Location

Edwina Rauser
Employee Name

Acctg Spvsr.
Exact Position Title

396-4486
Telephone #

(2mo) 1mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Edwina L Rauser Date 5-2-06

If you have any questions, please contact Becky Naegle, at 4661

PLEASE SUBMIT THIS INFORMATION BY 5-5-06 : TO Becky Naegle

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A/R
Department/Location

Diane Shaw
Employee Name

A/R Technician I
Exact Position Title

4308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2			✓		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Shaw Date 4/26

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: [illegible]
Department/Location: Bus Services
Employee Name: [illegible]
Exact Position Title: Payroll Tech
Telephone #: 328-9488
12mo/11mo/10mo/hrly Work year length(circle)
Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02 (02-03) 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible] Date [illegible]

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD — District

Admission & Records / KRV — Department/Location

Teresa White — Employee Name

Admission & Records Assistant — Exact Position Title

760 379-5501 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	14	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	19	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	9	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa White Date 4-27-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

VIENG S CHA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature V. Cha Date 4/26/06 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Kim Clark — Employee Name

Financial Aid Assistant — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Clark — Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

Erin Cruz
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erin Cruz Date 4/27/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Anastasia Danielson
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anastasia Danielson by jspiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID, BAKERSFIELD COLLEGE
Department/Location

DIANNE L. DE LA FONTAINE
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

Telephone #

12mo/~~TIME/ACADEMIC~~
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.5	√			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	√			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	√			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	√			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.0		√		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2.0			√	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dianne L. de la Fontaine Date 3/30/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

FINANCIAL AID
Department/Location

LUCY PEREZ-DYKES
Employee Name

ASSISTANT DIRECTOR OF FINANCIAL AID
Exact Position Title

(661) 395-4423
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3.0	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Perez-Dykes Date 4.3.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Dawn Fidel
Employee Name

Air R Tech I
Exact Position Title

7603846358 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Dawn Fidel Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District

Financial Aid — Department/Location

Gina Hunter — Employee Name

Financial Aid Assistant — Exact Position Title

395-4480 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gina Hunter — Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

BC FINANCIAL AID OFFICE
Department/Location

GILDA JENSEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

661 395-4418
Telephone #

12mo/~~XXXXXXXXXXXXXX~~
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02
02-03 03-04 04-05 ~~XXXXX~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gilda Jensen Date 3/30/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Kim Kost
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Kost Joann Spiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
BC Financial Aid — Department/Location
Evette Rara — Employee Name
Financial Aid Assistant — Exact Position Title
395-4721 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evette Rara Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Daniel Lopez
Employee Name

Fiancial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Lopez by Joann Spitler Date 4-27-06

If you have any questions, please contact Joann Spitler, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist
District

Cerro Coso / South Kern
Department/Location

Kristi Lowe
Employee Name

Program Manager
Exact Position Title

661-258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristi Lowe Date 4/28/06

If you have any questions, please contact Yolanda Solis, at 760-384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

MARIA PERLA OLMEDO
Employee Name

FINANCIAL AID ASSISTANT DIRECTOR
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Report for Mandated Costs
2006/07 ENROLLMENT FEE COLLECTION AND WAIVER ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Inge Olsen
Employee Name

Department Assistant II
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year: single(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	17-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	25	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for audit accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-28-06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

JOHN ORTEGA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	13	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Financial Aid / So. Kern
Department/Location

Kathleen Balen
Employee Name

Dept. Assistant III
Exact Position Title

Tel. 258.2644
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Balen Date 4/28/06

If you have any questions, please contact Jo Lynn Spiller, at 760.384.6344

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Employee AVERAGE Time Record for Mandated Costs
98/99 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Karen Patino
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes.
Step 2: Select the appropriate workload multiplier from Form 17-1.

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	17-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Patino Date 4-29-06

If you have any questions, please contact JOANN V. Spiller at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Elaine Peacock
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Peacock by mm Date 4-27-06

If you have any questions, please contact Joann Spitler, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
3098/96 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Mellissa Pearson — Employee Name

Financial Aid Assistant — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mellissa Pearson Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Financial Aid — BC
Department/Location

Heather Skibinski
Employee Name

Payroll Technician
Exact/Position Title

395-4020
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Heather Skibinski Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ~~average~~ amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Joann Spiller
Employee Name

Asst. Director of Financial Aid ~~Technician~~ JS
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

~~Reimbursable Activities:~~ ENROLLMENT WAIVER FUNCTIONS	Average Time in ~~Minutes~~	1.7-1 ~~Workload Multiplier~~ (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature JoAnn C Spiller Date 4-26-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Rochelle Sutton — Employee Name

Financial Aid Technician/Scholarships — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rochelle Sutton — Date 4/29/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District

Financial Aid Bakersfield College Department/Location

Sarah VillaSenor Employee Name

Educational Advisor Exact Position Title

661 3954582 Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

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Employee Signature _____ Date 3/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID OFFICE BAKERSFIELD COLLEGE
Department/Location

MARY E. WARD
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

395-4448
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

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Employee Signature Mary E. Ward Date 3-30-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Bob Weisenthal
Employee Name

Associate Dean of Student Life
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

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Employee Signature Bob Weisenthal by JSpiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Office of Financial Aid
Department/Location

Angela Williams
Employee Name

Financial Aid Technician
Exact Position Title

(661) 395-4424
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

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Employee Signature Angela L Williams Date 4/3/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Angela Wise
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ (~~04-05~~)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes.
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

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Employee Signature Angela Wise-Ley Date 4-27-06

If you have any questions, please contact Joann Spitzer, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	9,328	9,704	9,539	10,137	9,531	9,700	9,413	9618
Fall	21889	24420	24015	25957	26659	24992	24536	23290
Winter/ Intersession								
Spring	23562	26185	25689	27469	27328	26870	25051	23401
Total	54779	60309	59243	63563	63518	61562	59000	56309
2. Number of students who paid enrollment fees:								
Summer	--	3272	3083	2934	2908	2117	1539	3716
Fall	8098	8968	8266	7879	7555	6685	5724	9301
Winter/ Intersession								
Spring	8251	7467	8219	7730	7430	7530	6203	9638
Total	16349	19707	19568	18543	17893	16332	13466	22655
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	5858	8428	8920	10195	11260	11544	12434	5902
Fall	7959	8187	9143	10555	11260	11544	12434	13189
Winter/ Intersession								
Spring	3612	3612	4288	4641	4788	5353	5799	13763
Total	19429	20227	22351	25391	22254	28441	30667	32854

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: John R. Griffith Date 11-02-06

John R. Griffith
Employee Name: (print)

Director, Budget & Business Operations
Position or Title

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

EFCW 1.8-2

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	--	--	--	177	198	74	197	--
Fall	--	--	--	--	--	--	--	800
Winter/Intersession	--	--	--	--	--	--	--	--
Spring	900	3650	3000	7200	2672	3500	5570	--
Total	900	3650	3000	7377	2870	3574	5767	--
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	23	57	69	95	107	175	160	138
Fall	211	204	204	217	270	247	316	533
Winter/Intersession	--	--	--	--	--	--	--	--
Spring	14	112	162	159	193	223	227	471
Total	248	373	434	471	570	655	703	1142

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11-02-06

John R. Griffith
Employee Name: (print)

Director, Budget & Business Operations
Position or Title

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer	7860	8428	11075	11005	11883	12511	13351	5902
Fall	7961	8219	10574	11976	12555	13655	14199	13189
Winter/Intersession								
Spring	3612	3642	4332	4917	5150	5402	5897	13763
Total	19433	20289	25981	27898	29588	31568	33447	32854
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer	7860	8428	11075	11005	11883	12511	13351	5902
Fall	7961	8219	10574	11976	12555	13655	14199	13189
Winter/Intersession								
Spring	3612	3642	4332	4917	5150	5402	5897	13763
Total	19433	20289	25981	27898	29588	31568	33447	32854

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11-02-06

John R. Griffith
Employee Name: (print)

Director, Budget & Business Operations
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Kern Communitiy College District

The following cost accounting statistics will be used to calculate your reimbursement.
Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Enrollment Fees Collected	$ 2,517,751.00	$ 2,988,939.00	$ 3,127,390.00	$ 3,272,399.00	$ 3,231,809.00	$ 5,307,205.00	$ 7,639,762.00	$ 4,408,250.00
Enrollment Fees Refunded	$ 123,875.10	$ 147,908.89	$ 142,314.99	$ 148,232.21	$ 154,929.82	$ 256,158.71	$ 212,575.59	$ 260,371.00
Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 2,393,875.90	$ 2,841,030.11	$ 2,985,075.01	$ 3,124,166.79	$ 3,076,879.18	$ 5,051,046.29	$ 7,427,186.41	$ 4,147,879.00
A. Total Enrollment Fees Waived (BOGG, etc.)	$ 2,319,925.00	$ 2,226,228.20	$ 2,567,153.00	$ 2,892,010.50	$ 2,961,641.00	$ 4,790,750.50	$ 7,101,425.00	$ 6,953,846.50
B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 46,398.50	$ 44,524.56	$ 51,343.06	$ 57,840.21	$ 59,232.82	$ 95,815.01	$ 142,028.50	$ 139,076.93
C. 7% Enrollment Fees Waived (Line 4A x 7%)	$162,394.75	$155,835.97						
Number of credit units for which enrollment fees were waived.								
Summer			104587	115780	122877	119354	176696	22765.88
Fall			110821	126817	126416	126105	129269	124737.81
Winter/Intersession								
Spring			17970	20469	19947	20694	23167	117475.98
TOTAL x $0.91 per credit			212,373.98	239,390.06	245,008.40	242,199.23	299,510.12	241,131.50

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowedge or information." This information isued for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date November 2, 2006

J. R. Griffith
Employee Name: (print)

Director, Budget & Business Operations
Position or Title

If you have any questions, please contact _____, at _____

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MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates and missing titles for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE SECRETARY		$ 44.22
	AVERAGE DEAN		$ 89.87
	AVERAGE DIRECTOR		$ 71.85
	AVERAGE EXECUTIVE SECRETARY		$ 45.24
	AVERAGE FACULTY		$ 86.13
	AVERAGE PRESIDENT		$ 97.27
	AVERAGE VICE PRESIDENT		$ 89.22
AHL, JUDY	INFORMATION SERVICES COORDINATOR	31.94	$ 38.58
ALBANES, MARY ANN	DIRECTOR, CHILD CARE PROJECT	$ 67.61	$ 67.30
ALLDAY, LINDA	ADMISSIONS & RECORDS TECH		$ 45.72
ALLEN, MICHELE (SEE BREESO)	DIRECTOR, PUBLIC INFORMATION (SEE BRESSO, MICHELLE)		
ALVARADO, ANGELA	DIRECTOR, EOPS		$ 46.63
ALVARADO, EDDIE	SYSTEMS ADMINISTRATION MANAGER	$ 73.94	$ 75.48
ANDREWS, WILLIAM	PRESIDENT OF BAKERSFIELD COLLEGE	$ 68.99	$ 93.80

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
APLAND, MARSHA	ADMINISTRATIVE ASSISTANT		
BAILEY, MARY LINDA	PROFESSOR/LIBRARIAN	$ 63.97	$ 78.67
BECK, SANDRA	MAILROOM COORDINATOR	$ 28.63	$ 29.19
BENNET, KATHY	EDUCATIONAL ADMINISTRATOR	$ 62.25	$ 75.29
BERRY, DONNA	DIRECTOR, BUSINESS SERVICES		$ 63.51
BETHURUM, THOMAS	PUBLICATIONS COORDINATOR	31.73	$ 45.42
BEZAYIFF, DAVID	PROFESSOR	$ 46.93	$ 77.72
BOARD, JILL	VICE PRESIDENT, STUDENT SERVICES	$ 76.34	$ 88.96
BOYCE, ANN	DIRECTOR	42.43	$ 81.91
BRESSO, MICHELLE	ASSISTANT PROFESSOR	$ 44.91	$ 47.08
BROWN, CAROL	ADMIN. ASSISTANT, PRESIDENT	$ 44.78	$ 50.14
BURKE, TOM	CHIEF FINANCIAL OFFICER	$ 91.37	$ 89.10
BURKHART, OLENE	INSTRUCTION OFFICE SPECIALIST	$ 47.98	$ 48.59
CAPEHART, TIM	PUBLIC SAFETY FIRE	21.95	$ 46.88
CAPET, MITIL	VICE PRESIDENT, STUDENT LEARNING	$ 75.69	$ 83.64
CARMONA, CANDICE	EXECUTIVE SECRETARY	$ 29.13	$ 34.20
CARRASCO (PATSY), DANNY	DEPT. ASSISTANT III	$ 33.11	$ 33.70
CHA, VIENG	FINANCIAL AID TECHNICIAN		$ 38.50

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
CHAMBERLAIN, GREG	DEAN/LEARNING RSRCS/INFO TECH	$ 83.64	$ 83.64
CHRYSANTHOU, JUANITA	VICE PRESIDENT, STUDENT SERVICES	$ 15.19	
CLARK, KIMBERLY	FINANCIAL AID ASSISTANT		$ 18.42
COLLIER, CINDY	DIRECTOR, NURSING	$ 61.20	$ 71.58
COLLINS, VIC	INTERIM ASSOC. DIRECTOR, HR		$ 90.62
CORNETT, CANDACE	FINANCIAL AID TECHNICIAN		$ 32.28
COUCH, LISA	ASST. DIR. BUDGET MANAGEMENT &HR	$ 48.39	$ 50.00
COX, DOROTHY	CASHIER/BILLING TECHNICIAN II		$ 36.69
COYLE, WILLIAM (PATRICK)	PROFESSOR, DIRECTOR FOOD SERVICES	$ 59.84	$ 79.97
CRABB, BONNIE	DEPARTMENT ASSISTANT II	$ 21.08	$ 48.74
CRUZ, ERIN	ED ADVISOR/FINANCIAL AID TECHNICIAN		$ 40.83
DALE, DAN	DEAN OF INSTRUCTION	$ 71.06	$ 73.73
DARGATZ, REBECCA	BUSINESS SERVICES SPECIALIST		$ 47.13
DAVIS, BRET	FACULTY	$ 59.99	$ 69.15
DAY, ROBERT	DIRECTOR OF BOOKSTORE & AUXILARY SCVS.	$ 81.84	$ 82.59
De La FONTAINE, DIANNE	FINANCIAL AID TECHNICIAN		$ 44.67
DORRELL, NATALIE	BOOKSTORE MANAGER	$ 51.93	$ 53.16
DUGAN, VIKKI	CLASS STAFF	$ 60.16	$ 75.85

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
DUNWOODY, MARY	DEPARTMENT ASSISTANT III	$ 25.85	$ 36.03
DYER, SHARON K.	PRESIDENT	$ 91.91	$ 100.74
EBERHARDT, TAMMY	ADMINISTRATIVE ASSISTANT	$ 81.43	$ 41.41
ERREA, SALLY	EDUCATIONAL SERVICES ASSISTANT	$ 36.16	$ 51.79
ETCHEVERRY, JOHN	DIRECTOR, BUSINESS SERVICES-END 9/30/04	$ 26.65	
FARMER, M. LOUISE	ADMIN ASISTANT FOR PRESIDENT-RETIRED	$ 47.46	$ 47.57
FITCH, DELIGHT	ACCOUNTING/PURCHASING SUPERVISOR	$ 55.30	$ 53.45
GALVAN, VERITY	ADMINISTRATIVE ASSISTANT		
GARCIA, BALDOMERO	PROGRAM COORDINATOR	$ 41.20	$ 42.48
GEISSEL, TRUDY	HUMAN RESOURCES ASSISTANT	$ 54.58	$ 49.99
GOMEZ-HEITZBERG, NAN	DEAN OF INSTRUCTION	$ 85.56	$ 96.16
GONZALES, MANUEL	DIRECTOR, EOPS	$ 66.65	$ 71.33
GRAHIOLA, ARMANDO	GROUNDSWORKER	$ 35.27	$ 53.00
GRIFFITH, JOHN R.	DIRECTOR OF BUDGET & BUSINESS OPERATIONS	$ 77.73	$ 74.94
GRONTKOWSKI, NAOMI	HUMAN RESOURCES ASSISTANT	$ 54.55	$ 45.88
GUTIERREZ, MICHAEL R	COUNSELOR, PROFESSOR	$ 71.44	$ 83.19
HALBERG, MARY	PROGRAM MANAGER	60.39	$ 60.39
HALL, LINCOLN	INTERIM PRESIDENT, PORTERVILLE-END 1/31/06	$ 71.87	$ 79.22

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
HARP, HELEN	ADMINISTRATIVE SECRETARY	38.38	$ 41.00
HAWKINS, JANET	HUMAN RESOURCES TECHNICIAN, DISTRICT	$ 32.80	$ 40.99
HAWTHORNE, REBECCA	TICKET OFFICE COORDINATOR		$ 43.03
HERNANDEZ, CHRISTINE	DIRECTOR, LEARNING SUPPORT SCVS.-END 10/7/05	$ 53.58	$ 75.29
HOWALD, WALT	EXEC. DIRECTOR, INST. DEV. & FND	$ 58.89	$ 76.59
HUNTER, GINA	FINANCIAL AID TECHNICIAN		$ 35.23
JACKSON, CHRISTY	ADMISSIONS & RECORDS TECH I		$ 35.17
JACOB, CATHI	ACCOUNTING SUPERVISOR	$ 39.39	$ 51.44
JAMES, MAY	CASHIER/BILLING TECHNICIAN II		$ 34.46
JAMES, SEAN	INTERNAL AUDITOR	$ 60.43	$ 69.03
JENSEN, GILDA	FINANCIAL AID TECHNICIAN		$ 44.95
JOHNSON, JEFF	DIRECTOR, SM BUSINESS DEV.-END 1/31/05	$ 43.08	$ 43.08
JONES, MARY	HR SECRETARY	$ 47.42	$ 49.04
KARR, ANITA	DEPARTMENT ASSISTANT	31.06	32.19
KENNEDY, DEBRA	FACULTY	$ 62.16	$ 73.15
KIM, YOUNG	FACULTY	$ 64.49	$ 75.88
KNAPIK, PATRICIA	VP, STUDENT LEARNING (SEE VANDERVOORT, PATRICIA)	$ 65.99	
KNUDSON, EDWARD	DEAN OF ECON & WORKFORCE DEV.	$ 73.07	$ 85.79

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
KOST, KIMBERLY	FINANCIAL AID ASSISTANT		$ 19.17
LEBSOCK, GAIL	DIRECTOR, BUSINESS SERVICES	$ 69.05	$ 76.76
LOWE, KRISTI	PROGRAM MANAGER		$ 55.57
MARTY, JUDY	FRINGE BENEFITS SPECIALISTS	$ 41.08	$ 43.70
McABEE, KIMBERLY	PAYROLL TECH	$ 39.17	$ 42.56
McGEE, JIM	DIRECTOR, INFO TECHNOLOGY SCVS	$ 70.03	$ 71.86
MEIER, KEN	VICE PRESIDENT, STUDENT SERVICES	$ 84.67	$ 93.48
MINTER-PROCTER, TERESA	FACULTY	$ 60.14	$ 61.12
MINUS, DARYL	DEAN, LEARNING SUPPORT SCVS.	$ 53.00	$ 83.10
MORGAN, RANDY	GRAPHIC DESIGNER/WEB SITE COORDINATOR	$ 51.81	$ 52.19
MUNOZ, CYNTHIA	ADMINISTRATIVE ASSISTANT	$ 43.12	$ 44.09
NEELEY, PHYLLIS	TEACHER ASSISTANT (CLASSIFIED STAFF)	$ 34.73	$ 52.96
NEWTON, JOE	PROFESSOR	$ 66.64	$ 69.06
O'CONNOR, JONATHON DANIEL	DEAN OF STUDENT LEARNING	$ 57.44	$ 78.10
ODERMANN, SHARON	ACCOUNTING TECHNICIAN II		$ 36.44
OLMEDO, MARIA	ASSISTANT DIRECTOR-FINANCIAL AID		$ 55.98
OLSEN, INGEBORG	DEPARTMENT ASSISTANT		$ 32.14
ORONG, LINDA	WOC DIRECTOR, BUSINESS SERVICES	$ 84.17	$ 78.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
ORTEGA, JOHN	FINANCIAL AID TECHNICIAN		$ 44.73
PALEN, KATHLEEN	DEPARTMENT ASSISTANT		$ 32.99
PALINSKY, DAVID	DIRECTOR, DATA BASE ADMINISTRATION	$ 86.17	$ 88.66
PALINSKY, GLORIA	BUSINESS SERVICES ASSISTANT	46.74	$ 49.05
PATINO, KAREN	FINANCIAL AID ASSISTANT		$ 16.34
PEARSON, MELLISSA	FINANCIAL AID ASSISTANT		$ 21.15
PEREZ-DYKES, LUCY	ASSISTANT DIRECTOR-FINANCIAL AID		$ 51.11
PUGET, LYNNE	ADMISSIONS & RECORDS TECHNICIAN		$ 35.04
PUMMILL, CYNTHIA	FACULTY	$ 57.40	$ 69.65
QUAN, RAY	DIRECTOR, HR-TERM 6/30/05	$ 96.65	
RAUSER, EDWINA	ACCOUNTING SUPERVISOR		$ 54.64
ROAN, JOHN	ASSISTANT DIRECTOR OF MAINTENANCE AND OPERATIONS	$ 56.28	$ 55.10
ROBINSON, KENNETH	DIRECTOR OF HUMAN RESOURCES	$ 68.30	$ 69.46
ROMERO, STEPHANIE	CONTROLLER	25.11	$ 60.44
ROSALES, DAVID	PROFESSOR OF HISTORY	$ 69.51	$ 83.29
ROSS, PATRICIA	DEAN, STUDENT LEARNING	$ 64.43	$ 128.18
SCAFFIDI, SUSAN	ASSISTANT DIRECTOR/CORP/COMM SCVS	$ 57.41	$ 57.20
SCHEERER, GEROLD	DIRECTOR, INST. RESEARCH & PLANNING	$ 68.16	$ 98.84

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
SCHULTZ, STEVE	VICE PRESIDENT, LEARNING	$ 87.29	$ 90.81
SERRANO, SANDRA	CHANCELLOR	$ 124.44	$ 123.27
SHAW, DIANE	ADMISSIONS & RECORDS TECHNICIAN		$ 35.09
SHEARER, SHEILA	SAFETY COORDINATOR (formerly Bridges, Sheila)	$ 38.84	$ 39.40
SKIBINSKI, HEATHER	FINANCIAL AID TECHNICIAN		$ 43.04
SNYDER, CHARLES MONTY	NETWORK MANAGER	$ 55.45	$ 57.58
SPILLER, JOANN	ASSISTANT DIRECTOR-FINANCIAL AID		$ 50.99
STRACENER, MARTHA	PAYROLL TECHNICIAN		$ 34.27
STUEBBE, JAN	DIRECTOR, ATHLETICS	$ 66.94	$ 73.78
SUTTON, ROCHELLE	FINANCIAL AID TECHNICIAN		$ 39.99
TEAGUE, JOYCE	DEPARTMENT ASSISTANT	$ 35.65	$ 36.62
THOMPSON, JILL	ADMIN ASSISTANT	$ 40.88	$ 42.44
TULLY, BRIAN	SYSTEMS ANALYST/PROGRAMMER		$ 52.67
TURNEY, DON	INTERIM DEAN, STUDENT SERVICES	$ 51.99	$ 91.07
TUTOP, ZENAIDA	PAYROLL SUPERVISOR	$ 49.72	$ 53.68
VAN WESTEN, KELLIE	ADMINISTRATIVE ASSISTANT	$ 61.45	$ 41.70
VANDERVOORT, PATRICIA	VP STUDENT LEARNING (formerly Knapik, Patricia)	$ 65.99	END 6/4/04
VARGAS, MARIA	ACCOUNTING TECHNICIAN II	$ 46.77	$ 46.77

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
VAUGHN, SUZANNE	DIRECTOR OF ENROLLMENT SERVICES	$ 68.39	$ 65.49
VICKREY, RACHAEL	PROFESSOR	$ 63.28	$ 75.89
VILLASENOR, SARAH	EDUCATIONAL ADVISOR		$ 44.32
WARD, MARY	FINANCIAL AID TECHNICIAN		$ 42.40
WEGNER, JOAN	DIRECTOR, FINANCIAL AID & SCHOLARSHIPS		$ 75.76
WEST, CHARLES	DIRECTOR COOPERARIVE EDUCATION-END 12/31/05	$ 66.34	$ 66.32
WHITLEY, PAM	EDUCATIONAL SERVICES TECHNICIAN	$ 59.45	$ 51.14
WILKERSON, NIKKI	CUSTODIAN	$ 30.70	$ 33.23
WILLIAMS, ANGELA	FINANCIAL AID TECHNICIAN		$ 43.58
WILLIAMS, DARRYL	FACULTY	$ 65.37	$ 78.37
WRIGHT, DR. RICHARD	FACULTY	$ 73.48	$ 103.11
YOUNG, JERRY	CHANCELLOR		

Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 2,841,030	$ 2,985,075	$ 3,124,167	$ 3,076,879	$ 5,051,046	$ 7,427,186	$ 4,147,879
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 56,821	$ 59,702	$ 62,483	$ 61,538	$ 101,021	$ 148,544	$ 82,958
1.8-4 line 4A	Enrollment Fees Waived	$ 2,226,228	$ 2,567,153	$ 2,892,011	$ 2,961,641	$ 4,790,751	$ 7,101,425	$ 6,953,847
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 44,525	$ 51,343	$ 57,840	$ 59,233	$ 95,815	$ 142,029	$ 139,077
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 155,836	For 00-01 through 05-06 - unit fee					
1.8-4 line 5	Summer		104,587	115,780	122,877	119,354	176,696	22,766
	Fall		110,821	126,817	126,416	126,105	129,269	124,738
	Winter/Interssion							
	Spring		17,970	20,469	19,947	20,694	23,167	117,476
	Total # of credits		233,378	263,066	269,240	266,153	329,132	264,980
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 212,374	$ 239,390	$ 245,008	$ 242,199	$ 299,510	$ 241,132
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 44,525	$ 51,343	$ 57,840	$ 59,233	$ 95,815	$ 142,029	$ 139,077
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 155,836						
1.8-4 5	Credit Units Waived		$ 212,374	$ 239,390	$ 245,008	$ 242,199	$ 299,510	$ 241,132
Total Enrollment Fee Waiver Offset	**Forward to 5A**	**$ 200,361**	**$ 263,717**	**$ 297,230**	**$ 304,241**	**$ 338,014**	**$ 441,539**	**$ 380,209**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Kern
COUNTY: Kern

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$42,921,196	$39,248,832	$247,107	$39,495,939
EQUALIZATION	81,338	74,831	6,507	81,338
ENROLL FEE ADMIN (2%)	132,491	121,891	10,600	132,491
APPRENTICE ALLOWANCE	240,570	231,773	8,797	240,570
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	500,035	460,033	40,002	500,035
S.F.A.A.	906,754	833,139	73,615	906,754
E.O.P.S.	2,223,915	2,046,001	177,914	2,223,915
C.A.R.E.	347,189	317,540	29,649	347,189
D.S.P.S.	1,912,582	1,759,577	153,005	1,912,582
STATE HOSPITALS	515,198	473,983	41,215	515,198
CALWORKS	636,639	651,119	-14,480	636,639
MATRICULATION (CREDIT)	896,795	816,775	80,020	896,795
MATRIC. (NONCREDIT)	27,772	25,551	2,221	27,772
FAC.& STAFF DIVERSITY	22,273	18,834	3,439	22,273
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	796,395	732,685	63,710	796,395
TELECOMMUNICATIONS	172,631	101,283	71,348	172,631
PLANT & INSTRUCTIONAL	449,582	413,617	35,965	449,582
ECON. DEVELOPMENT	676,903	568,598	1	568,599
TANF	163,733	150,635	13,098	163,733
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	225,750	189,630	0	189,630
VTEA TITLE I C	639,279	468,450	68,544	536,994
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	318,557	318,557	0	318,557
TOTAL	$54,807,577	$50,023,334	$1,112,277	$51,135,611

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Kern Co[illegible]nity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 1,094.48	$ 1,085.59	$ 1,039.57	$ 959.14	$ 980.87	$ 839.25	$ 254.95
2	Staff Training	(04)(B)(1)(b)	$ 1,722.46	$ 1,474.53	$ 1,168.07	$ 1,197.86	$ 1,669.23	$ 1,884.70	$ 1,179.32
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 3,145.30	$ 2,722.23	$ 2,689.03	$ 2,652.15	$ 1,549.45	$ 1,678.33	$ -
4	Waiving student fees	(04)(B)(2)(b)	$ 144,154.86	$ 168,677.38	$ 229,342.70	$ 269,130.69	$ 291,044.27	$ 301,359.00	$ 338,326.82
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 7,536.62	$ 6,403.89	$ 7,775.65	$ 7,991.95	$ 6,297.36	$ 5,321.68	$ 458.91
6	EFCW - Fee Waiver Costs	Total	$ 157,653.72	$ 180,363.62	$ 242,015.02	$ 281,931.79	$ 301,541.18	$ 311,082.96	$ 340,220.00
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 200,361.00	$ 263,717.00	$ 297,230.00	$ 304,241.00	$ 338,014.00	$ 441,539.00	$ 380,209.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (42,707.28)	$ (83,353.38)	$ (55,214.98)	$ (22,309.21)	$ (36,472.82)	$ (130,456.04)	$ (39,989.00)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 157,653.72**	**$ 180,363.62**	**$ 242,015.02**	**$ 281,931.79**	**$ 301,541.18**	**$ 311,082.96**	**$ 340,220.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Bakersfield College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 22, 2012 10:27:16

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	85	16,633
BOGW - Part A-3 based on general assistance recipient status	6	789
BOGW - Part A basis unreported	80	18,678
BOGW - Part B based on income standards	5,172	1,421,428
BOGW - Part C based on financial need	7,296	3,054,703

Total Amount = $ 4,512,231

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerro Coso College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 22, 2012 10:27:26

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	44	12,363
BOGW - Part A-3 based on general assistance recipient status	2	416
BOGW - Part A basis unreported	49	9,386
BOGW - Part B based on income standards	960	252,889
BOGW - Part C based on financial need	1,285	452,354

Total Amount = $ 727,408

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California Home

Tuesday, May 22, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Porterville College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 22, 2012 10:27:37

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	4	861
BOGW - Part A basis unreported	3	722
BOGW - Part B based on income standards	1,416	425,808
BOGW - Part C based on financial need	1,961	911,973

Total Amount = $ 1,339,364

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
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5252 Balboa Avenue, Suite 900
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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 6, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8901

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Kern Community College District CC15095

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Kern Community College District's reimbursement claims listed below:

608/95	Enrollment Fee Collection and Waivers	2006-2007
608/95	Enrollment Fee Collection and Waivers	2007-2008

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

(01) Claimant Identification Number: CC15095

LABEL HERE

(02) Claimant Name: Kern Community College District
County of Location: Kern
Street Address or P.O. Box: 2100 Chester Avenue
City: Bakersfield | State: CA | Zip Code: 93301

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement X
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 958,210
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 948,210
Due from State	(08)	(17) $ 948,210
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	713,809
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	185,551
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	42
(31) EFCW-1, (07)	380,699
(32) EFCW-1, (09)	136,298
(33) EFCW-1, (10)	185,551
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 2/2/09

Thomas Burke — **Type or Print Name**

Chief Financial Officer — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 287	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **Kern Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2006-2007**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 713,808.96	$ -	$ -	$ -	$ -	$ 713,808.96
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 185,551.02	$ -	$ -	$ -	$ -	$ 185,551.02
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 899,359.98	$ -	$ -	$ -	$ -	$ 899,359.98

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	42.33%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 380,699.08
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,280,059.06
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 136,298.00
(10) Enrollment Fee Waiver offsets		$ 185,551.02
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 958,210.04

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$44.39	4,930.8	$ 218,878.21				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$44.39	3,327.5	$ 147,707.73				
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$44.39	5,770.1	$ 256,134.74				
ıg written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$44.39	2,052.0	$ 91,088.28				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 713,808.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Kern Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Staff — Waiving Fees	$39.73	1,292.4	$ 51,347.05				
Entering approved application information into district records; providing student award letter Financial Aid Staff — Waiving Fees	$39.73	1,527.4	$ 60,683.60				
Evaluating waiver applications and verifying application documents Financial Aid Staff — Waiving Fees	$39.73	881.2	$ 35,010.08				
[illegible]ing waiver applications Financial Aid Staff — Waiving Fees	$39.73	969.3	$ 38,510.29				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 185,551.02	$ -	$ -	$ -	$ -

Kern Commu College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2006-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	5,770.10	Enrollment Office Staf	Collecting Fees	$44.39	$256,134.74	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	3,327.50	Enrollment Office Staf	Collecting Fees	$44.39	$147,707.73	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	4,930.80	Enrollment Office Staf	Collecting Fees	$44.39	$218,878.21	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	2,052.00	Enrollment Office Staf	Collecting Fees	$44.39	$91,088.28	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	16,080.40	**Enrollment Office Staff Total**			$713,808.96		
06-07	1,292.40	Financial Aid Staff	Waiving Fees	$39.73	$51,347.05	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	969.30	Financial Aid Staff	Waiving Fees	$39.73	$38,510.29	Receiving waiver applications	Waiving student fees
06-07	881.20	Financial Aid Staff	Waiving Fees	$39.73	$35,010.08	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,527.40	Financial Aid Staff	Waiving Fees	$39.73	$60,683.60	Entering approved application information into district records; providing student award letter	Waiving student fees
	4,670.30	**Financial Aid Staff Total**			$185,551.02		
	20,750.70	**Grand Total**			$899,359.98		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$52,818,047		$52,818,047	$1,027,796	$51,790,251
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	9,536,814		9,536,814	598,858	8,937,956
Course and Curriculum Development	6020	509,365		509,365	33,299	476,066
Academic/Faculty Senate	6030	176,156		176,156		176,156
Other Instructional Administration & Instructional Governance	6090	53,715		53,715		53,715
Instructional Support Services	6100					
Learning Center	6110	300,085		300,085		300,085
Library	6120	1,718,128		1,718,128	177,130	1,540,998
Media	6130	419,359		419,359		419,359
Museums and Galleries	6140	3,948		3,948		3,948
Academic Information Systems and Technology	6150	42,105		42,105	36,657	5,448
Other Instructional Support Services	6190					
Admissions and Records	6200	1,473,922		1,473,922	17,863	1,456,059
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,512,684		2,512,684	1,409	2,511,275
Matriculation and Student Assessment	6320	1,270,291		1,270,291	15,465	1,254,826
Transfer Programs	6330	3,054		3,054		3,054
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,312,275	2,250	2,310,025	177,824	2,132,201
Subtotal		$73,149,948	$2,250	$73,147,698	$2,086,301	$71,061,397

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$2,707,717	$1,055,861	$1,651,856	$1,616	$1,650,240
Health Services	6440	416,135		416,135	92,202	323,933
Student Personnel Admin.	6450	176,369		176,369		176,369
Financial Aid Administration	6460	2,381,337		2,381,337	2,380	2,378,957
Job Placement Services	6470	31,576		31,576	8,185	23,391
Veterans Services	6480	64,766		64,766		64,766
Miscellaneous Student Services	6490	1,283,979		1,283,979	35,395	1,248,584
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,741,694		1,741,694	1,741,694	0
Custodial Services	6530	1,887,157		1,887,157	1,887,157	0
Grounds Maintenance and Repairs	6550	892,623		892,623	892,623	0
Utilities	6570	3,353,262		3,353,262	3,353,262	0
Other	6590	55,512		55,512	55,512	0
Planning, Policy Making, and Coordination	6600	2,558,157		2,558,157	2,558,157	0
General Inst. Support Services	6700					
Community Relations	6710	814,359		814,359	814,359	0
Fiscal Operations	6720	4,086,477		4,086,477	4,086,477	0
Human Resources Management	6730	1,773,398		1,773,398	1,773,398	0
Noninstructional Staff Benefits & Incentives	6740	2,325,402		2,325,402	2,325,402	0
Staff Development	6750	5,598		5,598	5,598	0
Staff Diversity	6760	10,470		10,470	10,470	0
Logistical Services	6770	1,773,847		1,773,847	1,773,847	0
Management Information Systems	6780	6,457,082		6,457,082	6,457,082	0
Subtotal		$107,946,865	$1,058,111	$106,888,754	$29,961,117	$76,927,637

6190?

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,947,967		1,947,967		1,947,967
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	282,456		282,456		282,456
Community Use of Facilities	6830					
Economic Development	6840	502,127		502,127	1,079	501,048
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910	102,941		102,941		102,941
Child Development Center	6920	716		716		716
Farm Operations	6930					
Food Services	6940	-21,066		-21,066		-21,066
Parking	6950	423,852		423,852	96,279	327,573
Student and Co-curricular Activities	6960	466,502		466,502	149,251	317,251
Student Housing	6970					
Other	6990	93,821		93,821	7,800	86,021
Auxiliary Operations	7000					
Contract Education	7010	-914		-914		-914
Other Auxiliary Operations	7090	100,873		100,873		100,873
Depreciation or Use Allowance - Building					2,759,714	
Depreciation or Use Allowance - Equipment					1,133,114	
(05) Total		$111,846,140	$1,058,111	$110,788,029	$34,108,354	$80,572,503
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				42.33%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	779,494	37,841	46,703	33,740		897,778
Architecture and Environmental Design	0200	31,303					31,303
Environmental Sciences and Technologies	0300			49,508			49,508
Biological Sciences	0400	1,959,218		40,600	68,353		2,068,171
Business and Management	0500	1,307,128	63,125	1,315			1,371,568
Communications	0600	1,422,864	30,367	18,282			1,471,513
Information Technology	0700	1,548,768	43,731	17,707	24,293		1,634,499
Education	0800	3,982,799	904,784	466,577	115,560		5,469,720
Engineering and Industrial Tech.	0900	1,965,899	65,718	321,785	245,592		2,598,994
Fine and Applied Arts	1000	2,589,126	111,118	145,163	152,933		2,998,340
Foreign Language	1100	1,294,685	27,182	6,611			1,328,478
Health	1200	4,671,991	366,767	283,356	184,997		5,507,111
Family and Consumer Sciences	1300	1,545,328	130,260	127,785	23,522		1,826,895
Law	1400	23,600					23,600
Humanities (Letters)	1500	5,736,046	71,027	14,330			5,821,403
Library Science	1600	13,970	3,575				17,545
Mathematics	1700	4,210,061	6,643	5,051	1,870		4,223,625
Military Studies	1800						
Physical Sciences	1900	1,789,439	24,290	91,456	4,785		1,909,970
Psychology	2000	947,377	71,364	240	1,077		1,020,058
Public and Protective Services	2100	1,952,825	100,799	611,607	159,375		2,824,606
Social Sciences	2200	3,679,088		6,051	3,232		3,688,371
Commercial Services	3000						
Interdisciplinary Studies	4900	2,997,152	181,178	53,927	8,467		3,240,724
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,794,267					2,794,267
Subtotal - Instructional Activities	**599**	47,242,428	2,239,769	2,308,054	1027796		52,818,047

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Kern Community College District **520** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		7,988,267	949,689	[illegible]		9,536,814
Course and Curriculum Development	6020		308,064	168,002	[illegible]		509,365
Academic/Faculty Senate	6030		165,990	10,166			176,156
Other Instruct. Admin. & Instruct. Governance	6090		53,715				53,715
Subtotal - Instructional Administration	**6000**		8,516,036	1,127,857	632,157		10,276,050
Instructional Support Services (6100)							
Learning Center	6110	119,008	174,189	6,888			300,085
Library	6120		1,390,669	150,329	[illegible]		1,718,128
Media	6130		419,359				419,359
Museums and Galleries	6140		3,948				3,948
Academic Information Systems and Tech.	6150			5,448	[illegible]		42,105
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	119,008	1,988,165	162,665	213,787		2,483,625
Admissions and Records	**6200**		1,413,510	42,549	[illegible]		1,473,922
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,484,095	27,180	[illegible]		2,512,684
Matriculation and Student Assessment	6320		938,243	316,583	[illegible]		1,270,291
Transfer Programs	6330			3,054			3,054
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		3,422,338	346,817	16,874		3,786,029

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Kern Community College District **520** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,958,304	173,897	[illegible]824	[illegible]250	2,312,275
Extended Opportunity Prgms. & Services (EOPS)	6430		1,530,868	119,372	[illegible]616	[illegible]861	2,707,717
Health Services	6440		206,733	117,200	[illegible]202		416,135
Student Personnel Administration	6450		169,631	6,738			176,369
Financial Aid Administration	6460		2,231,650	147,307	[illegible]380		2,381,337
Job Placement Services	6470		18,256	5,135	[illegible]185		31,576
Veterans Services	6480		63,612	1,154			64,766
Miscellaneous Student Services	6490		1,062,955	185,629	[illegible]395		1,283,979
Subtotal - Other Student Services	**6400**		7,242,009	756,432	317,602	1,058,111	9,374,154
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,120,382	489,792	131,520		1,741,694
Custodial Services	6530		1,661,747	219,693	5,717		1,887,157
Grounds Maintenance and Repairs	6550		710,262	140,413	41,948		892,623
Utilities	6570			3,353,262			3,353,262
Other Operation and Maintenance of Plant	6590		8,776	46,744	(8)		55,512
Subtotal - Operation and Maintenance of Plant	**6500**		3,501,167	4,249,904	179,177		7,930,248
[illegible]anning, Policymaking, and Coordination	**6600**		1,587,619	802,628	167,910		2,558,157

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Kern Community College District **520** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		416,574	385,686	12,099		814,359
Fiscal Operations	6720		2,644,848	1,419,583	22,046		4,086,477
Human Resources Management	6730		1,356,757	412,343	4,298		1,773,398
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		2,325,402				2,325,402
Staff Development	6750		2,382	3,216			5,598
Staff Diversity	6760		3,560	6,910			10,470
Logistical Services	6770		850,604	905,756	17,487		1,773,847
Management Information Systems	6780		3,980,706	1,954,672	521,704		6,457,082
Other General Institutional Support Services	6790		1,588,076	216,710	143,181		1,947,967
Subtotal - General Institutional Support Services	**6700**		13,168,909	5,304,876	720,815		19,194,600
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		258,871	23,585			282,456
Community Use Facilities	6830						
Economic Development	6840		387,029	114,019	1,079		502,127
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		645,900	137,604	1,079		784,583

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Kern Community College District **520** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		102,941				102,941
Child Development Centers	6920		705	11			716
Farm Operations	6930						
Food Services	6940		(21,066)				(21,066)
Parking	6950		274,325	53,248	96,279		423,852
Student and Co-curricular Activities	6960		213,416	103,835	149,251		466,502
Student Housing	6970						
Other Ancillary Services	6990		76,383	9,638	7,800		93,821
Subtotal - Ancillary Services	**6900**		646,704	166,732	253,330		1,066,766
Auxiliary Operations (7000)							
Contract Education	7010		(914)				(914)
Other Auxiliary Operations	7090		100,873				100,873
Subtotal - Auxiliary Operations	**7000**		99,959				99,959
Physical Property and Related Acquisitions (7100)	**7100**		140,427	7,739	73,074		221,240
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					486,963	486,963
Student Aid	7320					635,638	635,638
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,122,601	1,122,601
TOTAL EXPENDITURES and OTHER OUTGO	**391**	47,361,436	44,612,512	15,413,857	3,621,464	2,180,712	113,189,981

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Kern Community College District **520** District Code No.

Schedule 1A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	62,947
Avg. time p/account	5.5
Total Time (in minutes)	346209
Per Hour	60
Hours Worked **(** Activity 11)**	**5,770.1**
***EFC 2**	33,275
Avg. time p/student	6.0
Total Time (in minutes)	199650
Per Hour	60
Hours Worked **(** Activity 12)**	**3,327.5**
***EFC 1**	62,947
Avg. time p/question	4.7
Total Time (in minutes)	295851
Per Hour	60
Hours Worked **(** Activity 13)**	**4,930.8**
***EFC 2**	33,275
Avg. time p/file	3.7
Total Time (in minutes)	123118
Per Hour	60
Hours Worked **(** Activity 14)**	**2,052.0**
***EFC 4**	
Avg. time p/account	6.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5**	
Avg. time p/student	6.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Kern Community College District
308/95 Enrollment Fee Collection and Waivers *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	17,624
Avg. time p/question	4.4
Total Time (in minutes)	77546
Per Hour	60
Hours Worked **(** Activity 21)**	**1,292.4**
***EFW 6**	17,624
Avg. time p/application	3.3
Total Time (in minutes)	58159
Per Hour	60
Hours Worked **(** Activity 22)**	**969.3**
***EFW 6**	17,624
Avg. time p/evaluation	3.0
Total Time (in minutes)	52872
Per Hour	60
Hours Worked **(** Activity 23)**	**881.2**
***EFW 8 (default)**	
Avg. time p/application	4.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	17,624
Avg. time p/application	5.2
Total Time (in minutes)	91645
Per Hour	60
Hours Worked **(** Activity 25)**	**1,527.4**
***EFW 8**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 submitted for the 05-06 EFCW claim.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Allday, Linda	Admin. And Records Tech.1	2.0	2.0	1.0	4.0	4.0	
Candalaria, Roselee	Admin. Asst.	2.0	2.0	1.0	1.0		
Cox, Dorothy	Billing/Cashier Tech. 2		1.0	2.0		3.0	2.5
Dargatz, Becky	Business Services Specialist	4.0	3.0	4.0	2.0	5.0	6.0
Estrada, Juan	A&R Asst. FLB	1.0	1.0	2.0	1.0		
Fidel, Dawn	A&R Tech 1	10.0	14.0	5.0	5.0	12.0	8.0
Gonzalez-Bozarth, Lois	Admin. and Records Supervisor	9.0	8.0	5.0	7.0	5.0	5.0
Jackson, Christy	Admissions Tech	5.0		5.0			
James, May	Billing/Cashier Tech 1	3.0	2.0	2.0		2.0	5.0
Lowe, Kristi	Program Manager	5.0	5.0	5.0	3.0	5.0	5.0
Martell, Deborah	Dept. Asst. 2	5.0	12.0	5.0	5.0	2.0	3.0
Odermann, Sharon	Accounting Tech 2	2.5	3.5	3.0	2.0	2.0	2.5
Olivera, Lori	Program Manager	8.0	7.0	8.0	5.0	3.0	6.0
Olsen, Inge	Department Assistant III	10.0	15.0	10.0	5.0	14.0	9.0
Pafford, Janet	A&R Asst. LB	2.0	2.0	2.0	1.0		
Palen, Kathleen	Department Assistant III	5.0	5.0	5.0	3.0	3.0	5.0
Puget, Lynne	Admissions Tech.	5.0		5.0			
Rauser, Edwina	Accounting Supervisor	10.0		10.0		15.0	15.0
Shaw, Diane	A&R tch. 1	2.0	2.0	3.0	2.0	3.0	
Stracener, Martha	Payroll Tech.	4.5	4.5	4.5			4.5
White, Teresa	Admissions & Records Assistant	14.0	19.0	12.0	9.0	18.0	10.0
Average		**5.5**	**6.0**	**4.7**	**3.7**	**6.4**	**6.2**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except for activity code 14 and 16 used defaults EFC-2.and EFC 5.**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year:2006-2007
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and PHR lists provided by client.
Findings:

Staff	Title	06-07	
Allday, Linda	Admin. And Records Tech.1	$57.67	
Candalaria, Roselee	Admin. Asst.	$45.86	A
Cox, Dorothy	Billing/Cashier Tech. 2	$37.15	
Dargatz, Becky	Business Services Specialist	$57.57	
Estrada, Juan	A&R Asst. FLB	$45.86	A
Fidel, Dawn	A&R Tech 1	$41.15	A
Gonzalez-Bozarth, Lois	Admin. and Records Supervisor	$62.45	A
Jackson, Christy	Admissions Tech	$36.45	
James, May	Billing/Cashier Tech 1	$35.37	
Lowe, Kristi	Program Manager	$56.25	
Martell, Deborah	Dept. Asst. 2	$32.59	A
Odermann, Sharon	Accounting Tech 2	$36.84	
Olivera, Lori	Program Manager	$66.45	A
Olsen, Inge	Department Assistant III	$33.84	
Pafford, Janet	A&R Asst. LB	$45.86	A
Palen, Kathleen	Department Assistant III	$32.59	A
Puget, Lynne	Admissions Tech.	$35.04	
Rauser, Edwina	Accounting Supervisor	$55.91	
Shaw, Diane	A&R tch. 1	$35.44	
Stracener, Martha	Payroll Tech.	$36.03	
White, Teresa	Admissions & Records Assistant	$45.86	A
Average PHR		**$44.39**	

A: Average PHR used.

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Cha, Vieng	Financial Aid Tech	10.0	8.0	6.0	10.0	15.0	5.0
Clark, Kim	Financial Aid Asst.	2.5	2.5	2.5	10.0	4.0	4.0
Cruz, Erin	Financial Aid Tech.	10.0	6.0	5.0	9.0	8.0	5.0
Danielson, Anastasia	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
De La Fontaine, Diane	Financial Aid Tech.	1.5	0.5	2.0	1.5	2.0	2.0
Dykes, Perez-Lucy	Asst. Director of Financial Aid	3.0	0.5	1.0	1.5	3.0	1.0
Fidel, Dawn	A&R Tech 1	10.0	14.0	5.0	5.0	12.0	8.0
Hunter, Gina	Financial Aid Asst.	5.0	1.0	1.0	1.0	1.0	1.0
Jensen, Gilda	Financial Aid Tech.	2.5	0.5	2.0	0.5	2.5	1.5
Kost, Kim	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Evette, Lara	Financial Aid Asst.	5.0	2.0	2.0	1.0	2.0	2.0
Lopez, Daniel	Financial Aid Asst.	2.5	2.5	2.5	5.0	4.0	4.0
Lowe, Kristi	Program Manager	2.0	2.5	2.5	2.5	2.0	2.0
Olmedo, Maria	Financial Aid Asst. Director	8.0	7.0	5.0	9.0	10.0	4.0
Olsen, Inge	Department Asst. 2	2.5	2.5	2.5	6.0	4.0	4.0
Ortega, John	Financial Aid Tech.	13.0	8.0	8.0	12.0	12.0	6.0
Palen, Kathleen	Dept. Asst. 3	2.0	2.5	2.5	5.0	2.0	2.0
Patino, Karen	Financial Aid Asst.	2.5	2.5	2.5	4.5	4.0	4.0
Peacock, Elaine	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Pearson, Mellissa	Financial Aid Asst.	2.5	2.5	2.5	10.0	4.0	4.0
Skibinski, Heather	Payroll Tech.	5.0	2.0	2.0	1.0	2.0	2.0
Spiller, Joann	Asst. Director of Financial Aid	2.5	2.5	2.5		4.0	4.0
Sutton, Rochelle	Financial Aid Tech/Scholarships	2.5	2.5	2.5	10.0	4.0	4.0
Villasenor, Sarah	Educational Advisor	10.0	5.0	5.0	10.0	20.0	10.0
Ward, Mary	Financial Aid Tech.	2.0	1.0	3.0	0.5	2.0	1.5
Weisenthal, Bob	Associate Dean of Student Life	2.5	2.5	2.5		4.0	4.0
Williams, Angela	Financial Aid Tech.	3.0	2.0	3.0	3.0	3.0	3.0
Wise, Angela	Financial Aid Asst.	2.5	2.5	2.5	2.5	4.0	4.0
Average		**4.4**	**3.3**	**3.0**	**4.9**	**5.2**	**3.7**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided) except for activity code 24 use default EFW-8.**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and PHR lists provided by client.
Findings:

Staff	Title	06-07	
Cha, Vieng	Financial Aid Tech	$38.98	
Clark, Kim	Financial Aid Asst.	$19.38	
Cruz, Erin	Financial Aid Tech.	$45.50	
Danielson, Anastasia	Financial Aid Asst.	$18.17	A
De La Fontaine, Diane	Financial Aid Tech.	$44.67	
Fidel, Dawn	A&R Tech 1	$41.15	A
Hunter, Gina	Financial Aid Asst.	$38.11	
Jensen, Gilda	Financial Aid Tech.	$44.52	
Kost, Kim	Financial Aid Asst.	$18.17	A
Evette, Lara	Financial Aid Asst.	$18.17	A
Lopez, Daniel	Financial Aid Asst.	$18.17	A
Lowe, Kristi	Program Manager	$56.25	
Olmedo, Maria	Financial Aid Asst. Director	$59.66	
Olsen, Ingeborg	Department Asst. 2	$33.84	
Ortega, John	Financial Aid Tech.	$45.90	
Palen, Kathleen	Dept. Asst. 3	$32.59	A
Patino, Karen	Financial Aid Asst.	$16.96	
Peacock, Elaine	Financial Aid Asst.	$18.17	A
Pearson, Mellissa	Financial Aid Asst.	$51.50	
Perez-Dykes, Lucy	Asst. Director of Financial Aid	$53.53	
Skibinski, Heather	Payroll Tech.	$52.48	
Spiller, Joann	Asst. Director of Financial Aid	$57.20	
Sutton, Rochelle	Financial Aid Tech/Scholarships	$42.15	
Villasenor, Sarah	Educational Advisor	$57.13	
Ward, Mary	Financial Aid Tech.	$40.56	
Weisenthal, Bob	Associate Dean of Student Life	$87.22	A
Williams, Angela	Financial Aid Tech.	$44.05	
Wise, Angela	Financial Aid Asst.	$18.17	A
Average PHR		**$39.73**	

A: Average PHR used.

Conclusion: Findings go forward to EFCW -2.

Schedule 4
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		TOTALS 05-06	TOTALS 06-07
EFC 1	1.8-1 1.	Enrolled Students	56,309	62,947
EFC 2	1.8-1 2.	Paid Enrollment fees	22,655	33,275
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	32,854	17,624
EFC 4	1.8-2 1.	Delinquencies collections	800	
EFC 5	1.8-2 2.	Refunds	1142	
EFW 6	1.8-3 1.	Waivers Requested	32,854	17,624
EFW 7	1.8-3 2.	Waivers Approved	32,854	17,624
EFW 8	1.8-3 (1-2)	Waivers Denied	0	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 6
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Headcount

Purpose: To summarize the total student count for Kern CCD.
Source: California Chancellor's website.
Findings:

School	Semester	Headcount
Bakersfield	Summer	6,183
	Fall	16,096
	Spring	16,457
Cerro Coso	Summer	2,445
	Fall	5,001
	Spring	5,033
Porterville	Summer	1,357
	Fall	3,717
	Spring	3,655
Total		**59,944**

Conclusion: Used as a comparison to District supplied numbers. Utilized District Statistics.

California Home

Monday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Bakersfield For 2006 Summer Term

Data Current As Of January 26, 2009 09:12:43

Total Headcount	6,183

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Bakersfield For 2006 Fall Term

Data Current As Of January 26, 2009 09:13:03

Total Headcount	16,096

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Bakersfield For 2007 Spring Semester

Data Current As Of January 26, 2009 09:13:15

Total Headcount	16,457

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerro Coso For 2006 Summer Term

Data Current As Of January 26, 2009 09:15:11

Total Headcount	2,445

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerro Coso For 2006 Fall Term

Data Current As Of January 26, 2009 09:15:17

Total Headcount	5,001

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cerro Coso For 2007 Spring Semester

Data Current As Of January 26, 2009 09:15:31

Total Headcount	5,033

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Porterville
For 2006 Summer Term

Data Current As Of January 26, 2009 09:16:52

Total Headcount	1,357

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Porterville
For 2006 Fall Term

Data Current As Of January 26, 2009 09:16:58

Total Headcount	3,717

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Porterville
For 2007 Spring Semester

Data Current As Of January 26, 2009 09:17:09

Total Headcount	3,655

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Admissions & Records
Department/Location

Linda Allday
Employee Name

Admissions & Records Tech I.
Exact Position Title

395-4332
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best collection estimate.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda Allday Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BC - Kern — District

A I K — Department/Location

Rosehee Candelaria — Employee Name

Admissions Assistant — Exact Position Title

3945301 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)					4	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosehee Candelaria Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Business Services
Department/Location

Dorothy J Cox
Employee Name

Billing/Cashier Technician II
Exact Position Title

661-395-4493
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	N/A					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4½ Mins	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 Mins	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Mins		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2½ 3 Mins			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dorothy J Cox Date May 18, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Bakersfield College - Business Services
Department/Location

BECKY DAKOTZ
Employee Name

Business Services Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Becky Dakotz Date 5-18-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions & Records - BC
Department/Location

Juan Estrada
Employee Name

A&R Asst - FLB
Exact Position Title

4049
Telephone #

12mo/11mo/10mo/hriy
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juan Estrada Date 4-26-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD — District

Admissions & Records - CC — Department/Location

Dawn Fidel — Employee Name

Air Tech I — Exact Position Title

760 384 6358 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dawn Fidel — Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

ADMISSIONS & RECORDS - CC
Department/Location

LOUIS J. GONZALEZ-KOZIARTH
Employee Name

ADMISSIONS & RECORDS SUPERVISOR
Exact Position Title

760 384-6360
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Louis J. Gonzalez-Koziarth Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Christy Jackson
Employee Name

Admissions Tech
Exact Position Title

395-4303
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christy Jackson Date 4/25/06

ou have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Bus. Services
Department/Location

Mary James
Employee Name

Billing/Cashier Tech I
Exact Position Title

395-4491
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, ~~and printing out a list of enrolled courses.~~	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, ~~update student account~~/record, and print out receipt/~~course list~~/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5			✓		✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary James Date 5/18/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist
District

Cerro Coso / South Kern
Department/Location

Kristi Lowe
Employee Name

Program Manager
Exact Position Title

661-258-8647
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Deborah Martell
Employee Name

Department Assistant II
Exact Position Title

760-872-1565
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist — District
Business Services B.C. Campus — Department/Location
SHARON ODERMANN — Employee Name
Accounting Technician II — Exact Position Title
661-395-4853 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-4				✓	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-3			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Odermann Date 5-18-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

CC Online
Department/Location

Lori Olivera
Employee Name

Program Manager
Exact Position Title

760-872-5310
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are reporting.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual time or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivera Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admission + Record / KRV
Department/Location

Inge Olsen
Employee Name

Department Assistant III
Exact Position Title

760-379-5501
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	14	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

Admissions & Records-BC
Department/Location

Janet Pafford
Employee Name

A&R Assistant-LB
Exact Position Title

4049
Telephone #

85 hrs/wk 3 mo.
12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janet Pafford Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist. — District
Cerro Coso / South Kern — Department/Location
Kathleen Palen — Employee Name
Dept. Assistant III — Exact Position Title
661.258.8644 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Palen — Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A&R Bakersfield College
Department/Location

Lynne Puget
Employee Name

Admissions Tech
Exact Position Title

395-4301
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynne Puget Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

This is my best recollection estimate.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BC
District

Busn. Servs.
Department/Location

Edwina Rauser
Employee Name

Cashier Supv.
Exact Position Title

396-4486 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Edwina Rauser Date 5-2-06

If you have any questions, please contact Bobbie Knight, at 4861

PLEASE SUBMIT THIS INFORMATION BY 5-5-06; TO Bobbie Knight

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern
District

A/R
Department/Location

Diane Shaw
Employee Name

A/R Technician I
Exact Position Title

4208
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2			✓		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

This is my best recollection estimate

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Shaw Date 4/26

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: [illegible]

Department/Location: Pupil Svcs

Employee Name: [illegible]

Exact Position Title: Payroll Tech

Telephone #: 328-7488

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible] Date [illegible]

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admission & Records / KRV
Department/Location

Teresa White
Employee Name

Admission & Records Assistant
Exact Position Title

760 279-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	14	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	19	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	9	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	18	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa White Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

VIENG S. CHA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature V. Cha Date 4/26/06 4/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Kim Clark — Employee Name

Financial Aid Assistant — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Clark — Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

Erin Cruz
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erin Cruz Date 4/27/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Anastasia Danielson
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anastasia Danielson by spiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID, BAKERSFIELD COLLEGE
Department/Location

DIANNE L. DE LA FONTAINE
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

Telephone #

12mo/~~XXXXXXXXXXXX~~
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.5	√			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	√			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	√			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	√			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.0		√		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2.0			√	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dianne L. de la Fontaine Date 3/30/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

FINANCIAL AID
Department/Location

LUCY PEREZ-DYKES
Employee Name

ASSISTANT DIRECTOR OF FINANCIAL AID
Exact Position Title

(661) 395-4423
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3.0	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.0		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.0			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Perez-Dykes Date 4.3.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KCCD
District

Admissions & Records - CC
Department/Location

Dawon Fidel
Employee Name

Air R Tech I
Exact Position Title

7603846358 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	14	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Dawon Fidel Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District

Financial Aid — Department/Location

Gina Hunter — Employee Name

Financial Aid Assistant — Exact Position Title

395-4480 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gina Hunter Date 3-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

BC FINANCIAL AID OFFICE
Department/Location

GILDA JENSEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

661 395-4418
Telephone #

12mo/~~XXXXXXXXXXXX~~
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 ~~XXXXXX~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.0	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.5		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gilda Jensen Date 3/30/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-ESCC Mammoth campus
Department/Location

Kim Kost
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 934-2875
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Kost Joann Spiller Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
BC Financial Aid — Department/Location
Evette Lara — Employee Name
Financial Aid Assistant — Exact Position Title
395-4721 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evette Lara Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Daniel Lopez
Employee Name

Fiancial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Lopez Date 4-27-06

If you have any questions, please contact Joann Spitler, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College Dist — District

Cerro Coso / South Kern — Department/Location

Kristi Lowe — Employee Name

Program Manager — Exact Position Title

661-258-8644 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristi Lowe Date 4/28/06

If you have any questions, please contact Jo Ann Sollen, at 760-384-6344

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"COUNTER"

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

MARIA PERLA OLMEDO
Employee Name

FINANCIAL AID ASSISTANT DIRECTOR
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Perla Olmedo Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
2005/06: ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Inge Olsen
Employee Name

Department Assistant II
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	17-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	25	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Inge Olsen Date 4-24-06

If you have any questions, please contact Joann Spiller at (760) 384-6344

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE DISTRICT
District

PORTERVILLE COLLEGE FINANCIAL AID DEPARTMENT
Department/Location

JOHN ORTEGA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(559) 791-2223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	13	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Ortega Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Financial Aid / So. Kern
Department/Location

Kathleen Baker
Employee Name

Dept. Assistant III
Exact Position Title

Dist. 25X.X644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	25	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen Baker Date 4/28/06

If you have any questions, please contact Jo Lynn Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
388/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-Kern River Valley campus
Department/Location

Karen Patino
Employee Name

Financial Aid Assistant
Exact Position Title

(760) 379-5501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	17-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Patino Date 4-29-06

If you have any questions, please contact JoAnn V. Spiller at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Elaine Peacock
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Peacock by proxy Date 4-27-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Mellissa Pearson — Employees Name

Financial Aid Assistant — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in *minutes*
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mellissa Pearson — Date 4/27/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Financial Aid – BC
Department/Location

Heather Skibinski
Employee Name

Payroll Technician
Exact Position Title

395-4020
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Heather Skibinski Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
3085/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/
Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Joann Spiller
Employee Name

Asst. Director of
Financial Aid ~~Technician~~ JS
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02
02-03 03-04 (04-05)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes.
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature JoAnn V Spiller Date 4-26-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College — District

Financial Aid-IWV campus — Department/Location

Rochelle Sutton — Employee Name

Financial Aid Technician/Scholarships — Exact Position Title

(760) 384-6221 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rochelle Sutton — Date 4/29/06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College — District
Financial Aid Bakersfield College — Department/Location
Sarah Villa Senor — Employee Name
Educational Advisor — Exact Position Title
Tel 3954582 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes.
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

KERN COMMUNITY COLLEGE
District

FINANCIAL AID OFFICE BAKERSFIELD COLLEGE
Department/Location

MARY E. WARD
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

395-4448
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.5			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary E. Ward Date 3-30-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-IWV campus
Department/Location

Bob Weisenthal
Employee Name

Associate Dean of Student Life
Exact Position Title

(760) 384-6221
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bob Weisenthal by JSpiller Date 4-28-06

If you have any questions, please contact Joann Spiller, at (760) 384-6344

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College
District

Office of Financial Aid
Department/Location

Angela Williams
Employee Name

Financial Aid Technician
Exact Position Title

(661) 395-4424 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angela L Williams Date 4/2/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Kern Community College District/ Cerro Coso Community College
District

Financial Aid-South Kern Campus
Department/Location

Angela Wise
Employee Name

Financial Aid Assistant
Exact Position Title

(661) 258-8644
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ (~~04-05~~)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2.5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2½	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Angela Wise by Joann Spalder Date 4-27-06

If you have any questions, please contact Joann Spalder, at (760) 384-6344

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer	11,223	12,570	
Fall	25,648	27,481	
Winter/ Intersession	N/A	N/A	
Spring	26,076	27,445	
Total	62,947	67,496	
2. Number of students who paid enrollment fees:			
Summer	5,897	7,054	
Fall	13,192	14,678	
Winter/ Intersession	N/A	N/A	
Spring	14,186	14,896	
Total	33,275	36,628	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 1/15/2009

Stephen Kegley
Employee Name: (print)

Accounting Manager
Position or Title

If you have any questions, please contact Stephen Kegley, at 661-395-4492.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

RECEIVED
JAN 2 [illegible] 2009
BY: _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 1/15/2009

Stephen Kegley
Employee Name: (print)

Accounting Manager
Position or Title

If you have any questions, please contact Stephen Kegley, at 661-395-4492.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total	17,624	18,376	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total	17,624	18,376	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 1/15/2009

Stephen Kegley
Employee Name: (print)

Accounting Manager
Position or Title

If you have any questions, please contact Stephen Kegley, at 661-395-4492.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$5,431,306	$5,150,438	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$5,780,098	$5,103,488	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$115,602	$102,070	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer	20,330	20,402	
B. Fall	117,343	119,041	
C. Winter/Intersession	N/A	N/A	
D. Spring	110,030	115,731	
TOTAL x $0.91 per credit	$225,409.76	$232,208.70	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 1/15/2009

Stephen Kegley
Employee Name: (print)

Accounting Manager
Position or Title

If you have any questions, please contact Stephen Kegley, at 661-395-4492.

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MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates and missing titles for the FY: 07-08 and the missing rates for FY: 06-07.

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
	AVERAGE A&R ASSISTANT	$ 45.86	
	AVERAGE A&R SUPERVISOR	$ 62.45	
	AVERAGE A&R TECHNICIAN	$ 41.15	
	AVERAGE ACCOUNTING TECHNICIAN	$ 42.37	
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 45.86	
	AVERAGE ADMINISTRATIVE SECRETARY	$ 51.91	
	AVERAGE DEAN	$ 87.22	
	AVERAGE DEPARTMENT ASSISTANT	$ 32.59	
	AVERAGE DIRECTOR	$ 76.84	
	AVERAGE EXECUTIVE SECRETARY	$ 59.66	
	AVERAGE FINANCIAL AID ASSISTANT	$ 18.17	
	AVERAGE FINANCIAL AID TECHNICIAN	$ 43.18	
	AVERAGE MANAGER	$ 66.45	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
	AVERAGE PRESIDENT	$ 100.13	
	AVERAGE VICE PRESIDENT	$ 86.21	
AHL, JUDY	INFORMATION SERVICES COORDINATOR	$ 39.15	
ALBANES, MARY ANN	DIRECTOR, CHILD CARE PROJECT	LEFT DISTRICT	
ALLDAY, LINDA	ADMISSIONS & RECORDS TECH	$ 57.67	
ALVARADO, ANGELA	DIRECTOR, EOPS	$ 50.24	
ALVARADO, EDDIE	SYSTEMS ADMINISTRATION MANAGER	$ 78.03	
ANDREWS, WILLIAM	PRESIDENT OF BAKERSFIELD COLLEGE	$ 99.74	
BAILEY, MARY LINDA	PROFESSOR/LIBRARIAN	$ 79.98	
BECK, SANDRA	MAILROOM COORDINATOR	$ 29.70	
BENNET, KATHY	EDUCATIONAL ADMINISTRATOR -Left District 12/06	$ 75.29	
BERRY, DONNA	DIRECTOR, BUSINESS SERVICES	$ 66.86	
BETHURUM, THOMAS	PUBLICATIONS COORDINATOR	$ 47.33	
BEZAYIFF, DAVID	PROFESSOR (Teacher)	$ 80.42	
BOARD, JILL	VICE PRESIDENT, STUDENT SERVICES	$ 89.21	
BOYCE, ANN	DIRECTOR	$ 82.48	
BRESSO, MICHELLE	ASSISTANT PROFESSOR	$ 52.78	
BROWN, CAROL	ADMIN. ASSISTANT, PRESIDENT	$ 51.91	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
BURKE, TOM	CHIEF FINANCIAL OFFICER	$ 95.96	
BURKHART, OLENE	INSTRUCTION OFFICE SPECIALIST	$ 50.72	
CAPEHART, TIM	PUBLIC SAFETY FIRE- Left District 6/07	$ 68.35	
CAPET, MITIL	VICE PRESIDENT, STUDENT LEARNING-Left District 7/06	$ 83.64	
CARMONA, CANDICE	EXECUTIVE SECRETARY	$ 29.04	
CARRASCO (PATSY), DANNY	DEPT. ASSISTANT III	$ 35.12	
CHA, VIENG	FINANCIAL AID TECHNICIAN	$ 38.98	
CHAMBERLAIN, GREG	ACCOCIATE CHANCELLOR EDUCATIONAL SERVICES	$ 164.45	
CLARK, KIMBERLY	FINANCIAL AID ASSISTANT	$ 19.38	
COLLIER, CINDY	EXECUTIVE DIRECTOR HEALTH SERVICES, DIR. NURSIN	$ 71.58	
COLLINS, VIC	INTERIM ASSOC. DIRECTOR, HR	$ 76.36	
CORNETT, CANDACE	FINANCIAL AID TECHNICIAN	$ 40.41	
COUCH, LISA	ACCOUNTING MANAGER	$ 50.00	
COX, DOROTHY	CASHIER/BILLING TECHNICIAN II	$ 37.15	
COYLE, WILLIAM (PATRICK)	PROFESSOR, DIRECTOR FOOD SERVICES	$ 78.61	
CRABB, BONNIE	DEPARTMENT ASSISTANT II	LEFT DISTRICT	
CRUZ, ERIN	ED ADVISOR/FINANCIAL AID TECHNICIAN	$ 45.50	
DALE, DAN	DEAN OF INSTRUCTION	$ 74.19	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
DARGATZ, REBECCA	BUSINESS SERVICES SPECIALIST	$ 57.57	
DAVIS, BRET	FACULTY	$ 55.20	
DAY, ROBERT	DIRECTOR OF BOOKSTORE & AUXILARY SCVS.	$ 91.29	
De La FONTAINE, DIANNE	FINANCIAL AID TECHNICIAN Retired 05/07	$ 44.67	
DORRELL, NATALIE	BOOKSTORE MANAGER	$ 53.82	
DUGAN, VIKKI	CLASS STAFF	$ 76.84	
DUNWOODY, MARY	DEPARTMENT ASSISTANT III	$ 35.30	
DYER, SHARON K.	PRESIDENT	$ 100.52	
EBERHARDT, TAMMY	ADMINISTRATIVE ASSISTANT	$ 42.14	
ERREA, SALLY	EDUCATIONAL SERVICES ASSISTANT	$ 53.01	
FARMER, M. LOUISE	ADMIN ASISTANT FOR PRESIDENT-RETIRED	$ 48.39	
FITCH, DELIGHT	ACCOUNTING/PURCHASING SUPERVISOR	$ 53.09	
GARCIA, BALDOMERO	PROGRAM COORDINATOR	$ 43.02	
GEISSEL, TRUDY	HUMAN RESOURCES ASSISTANT	$ 52.41	
GOMEZ-HEITZBERG, NAN	EXECUTIVE DIRECTOR CHILD DEVELOPMENT DEAN SL	$ 96.16	
GONZALES, MANUEL	DIRECTOR, EOPS	$ 82.84	
GRAHIOLA, ARMANDO	GROUNDSWORKER	Retired 3/03/05	
GRIFFITH, JOHN R.	DIRECTOR OF BUDGET & BUSINESS OPERATIONS	$ 81.01	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
GRONTKOWSKI, NAOMI	HUMAN RESOURCES ASSISTANT	Retired 09/30/05	
GURROLA, VIRGINIA	DIRECTOR OF FINANCIAL AID AND ADMISSIONS	$ 74.40	
GUTIERREZ, MICHAEL R	COUNSELOR, PROFESSOR	$ 82.95	
HALBERG, MARY	PROGRAM MANAGER	$ 61.15	
HALL, LINCOLN	INTERIM PRESIDENT, PORTERVILLE-END 1/31/06	Left District 10/7/05	
HARP, HELEN	ADMINISTRATIVE SECRETARY	$ 41.52	
HAWKINS, JANET	HUMAN RESOURCES TECHNICIAN, DISTRICT	$ 43.75	
HAWTHORNE, REBECCA	TICKET OFFICE COORDINATOR	$ 46.09	
HERNANDEZ, CHRISTINE	DIRECTOR, LEARNING SUPPORT SCVS.-END 10/7/05	Left District 10/7/05	
HOWALD, WALT	EXEC. DIRECTOR, INST. DEV. & FND	$ 91.29	
HUNTER, GINA	FINANCIAL AID TECHNICIAN	$ 38.11	
JACKSON, CHRISTY	ADMISSIONS & RECORDS TECH I	$ 36.45	
JACOB, CATHI	ACCOUNTING SUPERVISOR	$ 46.32	
JAMES, MAY	CASHIER/BILLING TECHNICIAN II	$ 35.37	
JAMES, SEAN	INTERNAL AUDITOR	$ 75.61	
JENSEN, GILDA	FINANCIAL AID TECHNICIAN	$ 44.52	
JONES, MARY	HR SECRETARY	$ 51.75	
KARR, ANITA	DEPARTMENT ASSISTANT	$ 32.59	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
KENNEDY, DEBRA	FACULTY	$ 73.59	
KIM, YOUNG	FACULTY	$ 77.10	
KNUDSON, EDWARD	VICE PRESIDENT, STUDENT LEARNING	$ 85.79	
KOST, KIMBERLY	FINANCIAL AID ASSISTANT	LEFT DISTRICT	
LEBSOCK, GAIL	DIRECTOR, BUSINESS SERVICES	$ 82.66	
LOWE, KRISTI	PROGRAM MANAGER	$ 56.25	
MARTY, JUDY	FRINGE BENEFITS SPECIALISTS	$ 44.45	
McABEE, KIMBERLY	PAYROLL TECH	$ 44.34	
McGEE, JIM	DIRECTOR, INFO TECHNOLOGY SCVS	$ 71.53	
MEIER, KEN	VICE PRESIDENT, STUDENT SERVICES	Terminated 6/14/06	
MINTER-PROCTER, TERESA	FACULTY	$ 61.51	
MINUS, DARYL	DEAN, LEARNING SUPPORT SCVS.	LEFT DISTRICT	
MORGAN, RANDY	GRAPHIC DESIGNER/WEB SITE COORDINATOR	$ 54.34	
MUNOZ, CYNTHIA	ADMINISTRATIVE ASSISTANT	$ 44.50	
NEELEY, PHYLLIS	TEACHER ASSISTANT (CLASSIFIED STAFF)	LEFT DISTRICT	
NEWTON, JOE	PROFESSOR	LEFT DISTRICT	
O'CONNOR, JONATHON DANIEL	DEAN OF STUDENT LEARNING	$ 90.77	
ODERMANN, SHARON	ACCOUNTING TECHNICIAN II	$ 36.84	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
OLMEDO, MARIA	ASSISTANT DIRECTOR-FINANCIAL AID	$ 59.66	
OLSEN, INGEBORG	DEPARTMENT ASSISTANT	$ 33.84	
ORONG, LINDA	WOC DIRECTOR, BUSINESS SERVICES	LEFT DISTRICT	
ORTEGA, JOHN	FINANCIAL AID TECHNICIAN	$ 45.90	
PALEN, KATHLEEN	DEPARTMENT ASSISTANT	LEFT DISTRICT	
PALINSKY, DAVID	DIRECTOR, DATA BASE ADMINISTRATION	$ 89.49	
PALINSKY, GLORIA	BUSINESS SERVICES ASSISTANT	$ 51.04	
PATINO, KAREN	FINANCIAL AID ASSISTANT	$ 16.96	
PEARSON, MELLISSA	DEPARTMENT ASSISTANT I	$ 51.50	
PEREZ-DYKES, LUCY	ASSISTANT DIRECTOR-FINANCIAL AID	$ 53.53	
PUGET, LYNNE	ADMISSIONS & RECORDS TECHNICIAN Retired 6/06	$ 35.04	
PUMMILL, CYNTHIA	FACULTY	$ 73.14	
RAUSER, EDWINA	ACCOUNTING SUPERVISOR	$ 55.91	
ROAN, JOHN	ASSISTANT DIRECTOR OF MAINTENANCE AND OPERATIONS	$ 55.07	
ROBINSON, KENNETH	DIRECTOR OF HUMAN RESOURCES	$ 70.61	
ROMERO, STEPHANIE	CONTROLLER left district 6/07	$ 60.44	
ROSALES, DAVID	PROFESSOR OF HISTORY	$ 83.86	
ROSS, PATRICIA	DEAN, STUDENT LEARNING	$ 119.93	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
SCAFFIDI, SUSAN	ASSISTANT DIRECTOR/CORP/COMM SCVS	$ 62.14	
SCHEERER, GEROLD	DIRECTOR, INST. RESEARCH & PLANNING	LEFT DISTRICT	
SCHULTZ, STEVE	DEAN OF STUDENTS	$ 90.81	
SERRANO, SANDRA	CHANCELLOR	$ 142.08	
SHAW, DIANE	ADMISSIONS & RECORDS TECHNICIAN	$ 35.44	
SHEARER, SHEILA	SAFETY COORDINATOR (formerly Bridges, Sheila)	$ 40.99	
SKIBINSKI, HEATHER	FINANCIAL AID TECHNICIAN	$ 52.48	
SNYDER, CHARLES MONTY	NETWORK MANAGER	$ 70.38	
SPILLER, JOANN	ASSISTANT DIRECTOR-FINANCIAL AID	$ 57.20	
STRACENER, MARTHA	PAYROLL TECHNICIAN	$ 36.03	
STUEBBE, JAN	DEAN OF STUDENT LEARNING	$ 73.78	
SUTTON, ROCHELLE	FINANCIAL AID TECHNICIAN	$ 42.15	
TEAGUE, JOYCE	DEPARTMENT ASSISTANT	$ 37.77	
THOMPSON, JILL	ADMIN ASSISTANT	$ 46.50	
TULLY, BRIAN	SYSTEMS ANALYST/PROGRAMMER	$ 53.47	
TURNEY, DON	INTERIM DEAN, STUDENT SERVICES	$ 73.81	
TUTOP, ZENAIDA	PAYROLL SUPERVISOR	$ 54.86	
VAN WESTEN, KELLIE	ADMINISTRATIVE ASSISTANT	$ 41.70	

MANDATE REIMBURSEMENT SERVICES

COMMUNITY COLLEGE DISTRICT NAME: Kern Community College District

Name	Title	06-07	07-08
VARGAS, MARIA	ACCOUNTING TECHNICIAN II	$ 47.89	
VAUGHN, SUZANNE	DIRECTOR OF ENROLLMENT SERVICES	$ 70.35	
VICKREY, RACHAEL	PROFESSOR	$ 77.02	
VILLASENOR, SARAH	EDUCATIONAL ADVISOR	$ 57.13	
WARD, MARY	FINANCIAL AID TECHNICIAN	$ 40.56	
WEGNER, JOAN	DIRECTOR, FINANCIAL AID & SCHOLARSHIPS	$ 76.21	
WHITLEY, PAM	EDUCATIONAL SERVICES TECHNICIAN	$ 52.74	
WILKERSON, NIKKI	CUSTODIAN	$ 34.99	
WILLIAMS, ANGELA	FINANCIAL AID TECHNICIAN	$ 44.05	
WILLIAMS, DARRYL	FACULTY	$ 78.88	
WRIGHT, DR. RICHARD	FACULTY	$ 105.11	

Schedule 5

Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 4,147,879	$ 5,431,306
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 82,958	$ 108,626
1.8-4 line 4A	Enrollment Fees Waived	$ 6,953,847	$ 5,780,098
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 139,077	$ 115,602
1.8-4 line 5	Summer	22,766	20,330
	Fall	124,738	117,343
	Winter/Interssion		
	Spring	117,476	110,030
	Total # of credits	264,980	247,703
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)	$ 241,132	$ 225,410
Summary			
1.8-4 line 4B.	2% of Fees Waived	$ 139,077	$ 115,602
1.8-4 5	Credit Units Waived	$ 241,132	$ 225,410
Total Enrollment Fee Waiver Offset	**Forward to 5A**	**$ 380,209**	**$ 341,012**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Kern
COUNTY: Kern

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$47,934,772	$45,550,956	$-639,698	$44,911,258
ENROLL FEE ADMIN (2%)	136,298	125,394	10,904	136,298
APPRENTICE ALLOWANCE	243,000	221,325	21,675	243,000
BASIC SKILLS	447,228	0	447,228	447,228
S.F.A.A.	913,992	840,872	73,120	913,992
E.O.P.S.	2,456,054	2,259,569	196,485	2,456,054
C.A.R.E.	373,695	343,800	29,895	373,695
D.S.P.S.	2,188,363	2,013,294	175,069	2,188,363
STATE HOSPITALS	513,403	472,330	41,073	513,403
CALWORKS	857,047	894,121	-37,074	857,047
MATRICULATION (CREDIT)	1,269,216	1,161,238	107,978	1,269,216
MATRIC. (NONCREDIT)	35,412	32,579	2,833	35,412
FAC.& STAFF DIVERSITY	19,837	18,250	1,587	19,837
PART-TIME FAC. ALLO.	796,395	732,684	63,711	796,395
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	151,469	101,283	50,186	151,469
PLANT & INSTRUCTIONAL	200,719	184,663	16,056	200,719
SCHDL. MAINT. & REPAIR	200,738	184,679	16,059	200,738
TANF	180,257	165,837	14,420	180,257
ECON. DEVELOPMENT	891,994	749,276	-1	749,275
NURSING EDUCATION	937,064	94,661	842,403	937,064
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	13,297	13,297	0	13,297
PRIOR YEAR CORRECTION	-212,093	-212,093	0	-212,093
ONE TIME FUNDS				
TRANSITION PAYMENT	229,080	199,866	29,214	229,080
TRANS.& ARTIC. -REAPPR	15,000	15,000	0	15,000
GEN. PURPOSE -REAPPROP	356,334	356,334	0	356,334
BASIC SKILLS -REAPPROP	412,189	412,189	0	412,189
CAR. TECH. TRAILER BIL	634,589	634,589	0	634,589
GEN. PUR. TRAILER BILL	1,241,483	1,241,483	0	1,241,483
INST. MATERIAL TRAILER	749,139	749,139	0	749,139
SCHLD.MAINT. TRAILER B	749,139	749,139	0	749,139
FACULTY STAFF DEV	79,746	79,746	0	79,746
TOTAL	$65,014,856	$60,385,500	$1,463,123	$61,848,623

FISCAL SERVICES:06/22/07 44055.636 12:14 PM:EM
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Schedule 5A
Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 through 2006-2007
Enrollment Fee Waivers Offsets

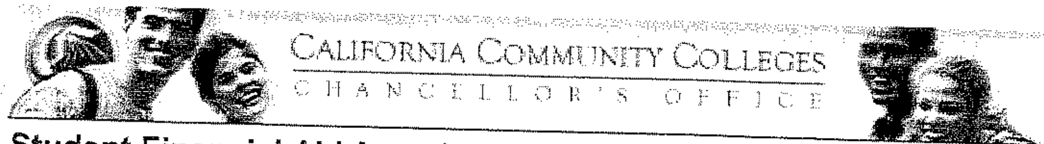
Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 254.95	
2	Staff Training	(04)(B)(1)(b)	$ 1,179.32	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ -	
4	Waiving student fees	(04)(B)(2)(b)	$ 338,326.82	$ 185,551.02
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 458.91	
6	EFCW - Fee Waiver Costs	Total	$ 340,220.00	$ 185,551.02
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 380,209.00	$ 341,012.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (39,989.00)	$ (155,460.98)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 340,220.00**	**$ 185,551.02**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Monday,



Student Financial Aid Awards

Bakersfield College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 26, 2009 12:47:43

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	91	19,100
BOGW - Part A-3 based on general assistance recipient status	5	1,365
BOGW - Part A basis unreported	26	5,748
BOGW - Part B based on income standards	4,701	1,162,279
BOGW - Part C based on financial need	7,337	2,781,695
Fee Waiver – Dependent of (children) deceased or disabled Veteran	60	23,893

Total 12,220

Total Amount = $ 3,994,080

Back to Top of Page

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	HeadCount	$
Bakersfield	12,220	3,994,080
Cerro Coso	2,176	643,614
Porterville	3,228	1,142,404
total	17,624	5,780,098

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cerro Coso College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 26, 2009 12:48:51

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	28	6,321
BOGW - Part A basis unreported	22	5,403
BOGW - Part B based on income standards	922	242,722
BOGW - Part C based on financial need	1,169	376,411
Fee Waiver – Dependent of (children) deceased or disabled Veteran	35	12,757

total 2,176

Total Amount = $ 643,614

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Monday, January 26, 2009

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Porterville College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 26, 2009 12:49:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-2 based on SSI recipient status	3	229
BOGW - Part A basis unreported	2	715
BOGW - Part B based on income standards	1,420	365,112
BOGW - Part C based on financial need	1,798	774,119
Fee Waiver – Dependent of (children) deceased or disabled Veteran	5	2,229

total 3,228

Total Amount = $ 1,142,404

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Long Beach Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Brownell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	☐	(09) Reimbursement	X
	(04) Combined	☐	(10) Combined	☐
	(05) Amended	☐	(11) Amended	☐
Fiscal Year of cost	(06)		(12) 2004-2005	
Total Claimed Amount	(07)		(13) $ 344,399	
Less: 10% Late Penalty			(14) $ 34,440	
Less: Prior Claim Payment Received			(15) $ -	
Net Claimed Amount			(16) $ 309,959	
Due from State	(08)		(17) $ 309,959	
Due to State			(18)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	75
(24) EFCW-1, (04)(A)(2)(a)(f)	407,222
(25) EFCW-1, (04)(B)(1)(a)(f)	45
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	18,241
(29) EFCW-1, (04)(B)(2)(c)(f)	2,102
(30) EFCW-1, (06)	32
(31) EFCW-1, (07)	89,505
(32) EFCW-1, (09)	152,403
(33) EFCW-1, (10)	20,388
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) I. Ramos **Date** 6-25-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 227	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Long Beach Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 75.20	$ -	$ -	$ -	$ -	$ 75.20
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 256,384.31	$ -	$ 150,837.50	$ -	$ -	$ 407,221.81
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 44.73	$ -	$ -	$ -	$ -	$ 44.73
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 18,241.16	$ -	$ -	$ -	$ -	$ 18,241.16
c. Reporting BOG fee waiver data to CCC	$ 2,102.31	$ -	$ -	$ -	$ -	$ 2,102.31
(05) Total Direct Costs	$ 276,847.71	$ -	$ 150,837.50	$ -	$ -	$ 427,685.21

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.33%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 89,504.86
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 517,190.07
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 152,403.00
(10) Less: Enrollment Fee Waiver offsets		$ 20,388.20
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 344,398.87

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Hicks, Patricia Lead Cashier	$37.60	2.0	$ 75.20				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 75.20	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant:) Beach Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$15.47	5,488.5	$ 84,907.10				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$15.47	5,811.3	$ 89,900.81				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$15.47	5,273.2	$ 81,576.40				
Software/Consultant costs for on-line enrollment and fees collection Ciber Consultant	$100.00	1,508.4			$ 150,837.50		
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 256,384.31	$ -	$ 150,837.50	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
g Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$89.46	0.5	$ 44.73				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 44.73	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	78.9	$ 2,099.53				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	141.9	$ 3,775.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 18,241.16	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
g Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$89.46	23.5	$ 2,102.31				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,102.31	$ -	$ -	$ -	$ -

New 04/06

Long Beach Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

005

Sorted by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1,508.38	Ciber	Consultant	$100.00	$150,837.50	Software/Consultant costs for on-line enrollment and fees collection	Calculating and collecting enrollment fees
	1,508.38	**Ciber Total**			$150,837.50		
04-05	23.50	Du Bois, Toni	Dean, Financial Aid	$89.46	$2,102.31	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
04-05	0.50	Du Bois, Toni	Dean, Financial Aid	$89.46	$44.73	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,147.04		
04-05	5,488.50	Enrollment Office Staff	Collecting Fees	$15.47	$84,907.10	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	5,811.30	Enrollment Office Staff	Collecting Fees	$15.47	$89,900.81	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	5,273.20	Enrollment Office Staff	Collecting Fees	$15.47	$81,576.40	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	16,573.00	**Enrollment Office Staff Total**			$256,384.31		
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Receiving waiver applications	Waiving student fees
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	78.90	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$2,099.53	Entering approved application information into district records; providing student award letter	Waiving student fees
	437.10	**Financial Aid Office Staff (BOG A/B) Total**			$11,631.22		
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Receiving waiver applications	Waiving student fees
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	141.90	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$3,775.96	Entering approved application information into district records; providing student award letter	Waiving student fees
	248.40	**Financial Aid Office Staff (BOG C) Total**			$6,609.94		
04-05	2.00	Hicks, Patricia	Lead Cashier	$37.60	$75.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.20		
	18,792.88	**Grand Total**			$427,685.21		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$50,775,403		$50,775,403	$1,036,216	$49,739,187
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,644,983		2,644,983	30,286	2,614,697
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	180,188		180,188		180,188
Other Instructional Administration & Instructional Governance	6090	220,556		220,556		220,556
Instructional Support Services	6100					
Learning Center	6110	800,862		800,862	10,740	790,122
Library	6120	1,792,044		1,792,044	24,992	1,767,052
Media	6130	902,063		902,063	7,782	894,281
Museums and Galleries	6140	1,575		1,575		1,575
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	84,023		84,023		84,023
Admissions and Records	6200	2,206,462		2,206,462	39,928	2,166,534
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,189,427		3,189,427	156,140	3,033,287
Matriculation and Student Assessment	6320	796,630		796,630	41,295	755,335
Transfer Programs	6330	661,629		661,629	15,509	646,120
Career Guidance	6340	255,534		255,534	12,395	243,139
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	732,781		732,781	2,043	730,738
Subtotal		$65,244,160	$0	$65,244,160	$1,377,326	$63,866,834

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,028,838		$1,028,838	$5,463	$1,023,375
Health Services	6440	481,890		481,890	905	480,985
Student Personnel Admin.	6450	1,584,409		1,584,409	4,216	1,580,193
Financial Aid Administration	6460	2,258,974		2,258,974	173,328	2,085,646
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	748,096		748,096	45,874	702,222
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,949,467		1,949,467	1,949,467	0
Custodial Services	6530	3,000,901		3,000,901	3,000,901	0
Grounds Maintenance and Repairs	6550	765,635		765,635	765,635	0
Utilities	6570	1,814,246		1,814,246	1,814,246	0
Other	6590	43,165		43,165	43,165	0
Planning, Policy Making, and Coordination	6600	5,189,978		5,189,978	5,189,978	0
General Inst. Support Services	6700					
Community Relations	6710	870,714		870,714	870,714	0
Fiscal Operations	6720	2,488,662		2,488,662	2,488,662	0
Human Resources Management	6730	1,666,961		1,666,961	1,666,961	0
Noninstructional Staff Benefits & Incentives	6740	110,370		110,370	110,370	0
Staff Development	6750	151,451		151,451	151,451	0
Staff Diversity	6760	16,214		16,214	16,214	0
Logistical Services	6770	2,096,868		2,096,868	2,096,868	0
Management Information Systems	6780	2,174,133		2,174,133	2,174,133	0
Subtotal		$93,685,132	$0	$93,685,132	$23,945,877	$69,739,255

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	172,589		172,589	172,589	0
Community Services and Economic Development	6800					
Community Recreation	6810	72,475		72,475		72,475
Community Service Classes	6820					
Community Use of Facilities	6830	46,885		46,885		46,885
Economic Development	6840	3,100,797		3,100,797	35,364	3,065,433
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	25,660		25,660		25,660
Farm Operations	6930					
Food Services	6940					
Parking	6950	133,610		133,610	4,077	129,533
Student and Co-curricular Activities	6960	660,956		660,956		660,956
Student Housing	6970					
Other	6990	139,610		139,610	130	139,480
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	833,134		833,134		833,134
Physical Property Acquisitions	7100					
(05) Total		$98,870,848	$0	$98,870,848	$24,158,037	$74,712,811
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.33%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	333,429	43,902	17,108	4,961		399,400
Architecture and Environmental Design	0200						
Biological Sciences	0400	2,209,815	50,561	50,773	12,812		2,323,961
Business and Management	0500	2,579,722	102,719	43,965	176,593		2,902,999
Communications	0600						
Computer and Information Science	0700	1,129,914	61,599	45,065	86,349		1,322,927
Education	0800	3,289,667	424,394	62,727	73,978		3,850,766
Engineering and Related Industrial Tech.	0900	4,125,346	247,466	252,274	241,620		4,866,706
Fine and Applied Arts	1000	5,380,561	163,217	148,465	138,413		5,830,656
Foreign Language	1100	1,137,504	68,325	5,091	3,293		1,214,213
Health	1200	3,195,578	235,112	70,378	14,695		3,515,763
Consumer Education and Home Economics	1300	2,834,618	209,892	56,507	8,987		3,110,004
Law	1400						
Humanities (Letters)	1500	8,250,942	443,463	39,504	54,646		8,788,555
Library Science	1600	832,765	114,421	32,730	159,549		1,139,465
Mathematics	1700	2,826,725	79,193	17,253			2,923,171
Military Studies	1800						
Physical Sciences	1900	1,412,246	30,346	13,757	11,976		1,468,325
Psychology	2000						
Public Affairs and Services	2100	601,253	28,499	610,279			1,240,031
Social Sciences	2200	3,465,266	145,877	25,881	12,143		3,649,167
Commercial Services	3000	604,674	32,544	14,388	11,983		663,589
Interdisciplinary Studies	4900	357,306	39,526	21,497	24,218		442,547
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,123,158					1,123,158
Subtotal - Instructional Activities	**599**	45,690,489	2,521,056	1,527,642	1,036,216		50,775,403

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,342,320	272,377	30,286		2,644,983
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		175,639	4,549			180,188
Other Instruct. Admin. & Instruct. Governance	6090		219,726	830			220,556
Subtotal - Instructional Administration	**6000**		2,737,685	277,756	30,286		3,045,727
Instructional Support Services (6100)							
Learning Center	6110		760,638	29,484	10,740		800,862
Library	6120		1,707,835	59,217	24,992		1,792,044
Media	6130		873,181	21,100	7,782		902,063
Museums and Galleries	6140		1,575				1,575
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		50,376	33,647			84,023
Subtotal - Instructional Support Services	**6100**		3,393,605	143,448	43,514		3,580,567
Admissions and Records	**6200**		2,063,957	102,577	39,928		2,206,462
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,908,364	124,923	156,140		3,189,427
Matriculation and Student Assessment	6320		704,922	50,413	41,295		796,630
Transfer Programs	6330		543,939	102,181	15,509		661,629
Career Guidance	6340		221,635	21,504	12,395		255,534
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,378,860	299,021	225,339		4,903,220

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		711,023	19,715	2,043	*	732,781
Extended Opportunity Prgms. & Services (EOPS)	6430		970,572	52,803	5,463	*	1,028,838
Health Services	6440		387,581	93,404	905		481,890
Student Personnel Administration	6450		1,555,946	24,247	4,216		1,584,409
Financial Aid Administration	6460		1,915,830	169,816	173,328		2,258,974
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		616,644	85,578	45,874		748,096
Subtotal - Other Student Services	**6400**		6,157,596	445,563	231,829		6,834,988
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,632,392	293,763	23,312		1,949,467
Custodial Services	6530		2,759,544	190,151	51,206		3,000,901
Grounds Maintenance and Repairs	6550		684,720	80,915			765,635
Utilities	6570			1,814,246			1,814,246
Other Operation and Maintenance of Plant	6590			43,165			43,165
Subtotal - Operation and Maintenance of Plant	**6500**		5,076,656	2,422,240	74,518		7,573,414
Planning, Policymaking, and Coordination	**6600**		3,328,023	1,829,533	32,422		5,189,978

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		749,242	104,800	16,672		870,714
Fiscal Operations	6720		1,844,641	633,513	10,508		2,488,662
Human Resources Management	6730		1,479,678	175,803	11,480		1,666,961
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		110,370				110,370
Staff Development	6750		123,498	27,953			151,451
Staff Diversity	6760			16,214			16,214
Logistical Services	6770		1,595,054	421,246	80,568		2,096,868
Management Information Systems	6780		1,927,394	123,556	123,183		2,174,133
Other General Institutional Support Services	6790		169,047	3,542			172,589
Subtotal - General Institutional Support Services	**6700**		7,998,924	1,506,627	242,411		9,747,962
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		69,968	2,507			72,475
Community Service Classes	6820						
Community Use Facilities	6830		46,885				46,885
Economic Development	6840		2,821,848	243,585	35,364		3,100,797
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		2,938,701	246,092	35,364		3,220,157

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		25,649	11			25,660
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,730	127,803	4,077		133,610
Student and Co-curricular Activities	6960		649,409	11,547			660,956
Student Housing	6970						
Other Ancillary Services	6990		101,013	38,467	130		139,610
Subtotal - Ancillary Services	**6900**		777,801	177,828	4,207		959,836
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090		582,566	250,568			833,134
Subtotal - Auxiliary Operations	**7000**		582,566	250,568			833,134
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					11,500,356	11,500,356
Other Outgo	7330					428,502	428,502
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	45,690,489	41,955,430	9,228,895	1,996,034	11,928,858	110,799,706

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Long Beach Community College District **840** District Code No

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	64,570
Avg. time p/account	5.1
Total Time (in minutes)	329307
Per Hour	60
Hours Worked (** **Activity 11**)	**5488.5**

***EFC 2** (Not provided by client - no substitute multiplier can be used for activity code 12)	
Avg. time p/student	8.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 12**)	**0.0**

***EFC 1**	64,570
Avg. time p/question	5.4
Total Time (in minutes)	348678
Per Hour	60
Hours Worked (** **Activity 13**)	**5811.3**

***EFC 2** (Not provided by client - substituted multiplier *EFC 1)	64,570
Avg. time p/file	4.9
Total Time (in minutes)	316393
Per Hour	60
Hours Worked (** **Activity 14**)	**5273.2**

***EFC 4** (Not provided by client)	
Avg. time p/account (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 15**)	**0.0**

***EFC 5 (Not provided by client)**	
Avg. time p/student (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary for BOG A/B

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	
Avg. time p/question	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 21**)	60
	119.4
***EFW 6**	
Avg. time p/application	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 22**)	60
	119.4
***EFW 6**	
Avg. time p/evaluation	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 23**)	60
	119.4
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 24**)	**0.0**
***EFW 7**	
Avg. time p/application	9,473
Total Time (in minutes)	0.5
Per Hour	4737
Hours Worked (** **Activity 25**)	60
	78.9
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 26**)	**0.0**

Conclusion: *Findings will go forward to the EFCW-2.*

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 1C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary for BOG C

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

	***EFW 6**	
	Avg. time p/question	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 21)**	60
		35.5
	***EFW 6**	
	Avg. time p/application	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 22)**	60
		35.5
	***EFW 6**	
	Avg. time p/evaluation	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 23)**	60
		35.5
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 24)**	**0.0**
***	***EFW 7 (used *EFW 6)**	
	Avg. time p/application	2,128
	Total Time (in minutes)	4.0
	Per Hour	8512
	Hours Worked **(** Activity 25)**	60
		141.9
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

*** Normally we would not substitute *EFW 6 (# of applications received) for *EFW 7 (# of applications approved) because *EFW 6 would be a larger number than *EFW 7. Clients #'s for *EFW 6 (# of applications received) for BOG C was much, much lower than the CCCCO's website #'s for *EFW 7 (# of applications approved), so therefore we used multiplier *EFW 6 for code 25.

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See in workpapers of 04-05 claim only.)
Initial year claim 98-99 through 05-06. Ane timestudy used for all initial years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Acosta, Adelino	Admissions & Records Tech II	5	8	5	5		
Alvial, Bertha	Registration Worker	5	8	5	5		
Alvial, Lefia	Registration Worker	5	8	5	5		
Anderson, Amy	Registration Aide	5	8	5	5		
Brackman, Pamela	Admissions & Records Tech II	5	8	5	4		
Bronilla, Cheryl	Registration Aide	5	8	5	5		
Brown, Eileen	Admissions & Records Tech II	5	8	5	5		
Castillo, Josefina	Registration Worker	5	8	5	5		
Chamlem, Sombat	Registration Aide	5	8	5	5		
Clark, Kamryn	Registration Worker	5	8	5	5		
Collado, Carmen	Registration Aide	5	8	5	5		
Combs, April	Temporary Office Worker I	5	8	5	5		
De La Rama, Allen	Registration Aide	5	8	5	5		
De La Rama, Micah	Temporary Office Worker I	5	8	5	5		
Deweese, James	Registration Aide	5	8	5	5		
Dorsey, Krystal	Registration Aide	5	8	5	5		
Fairmen, Audrey	Registration Aide	5	8	5	5		
Franco, Dolores	International Admissions/Records Tech. II	5	9	7	5		
Galvan, Karen	Registration Worker	5	8	5	5		
Garces, Tim	Registration Worker	5	8	5	5		
Gardner, Darice	Registration Worker	5	8	5	5		
Gonzales, Mary	Registration Aide	5	8	5	5		
Heth, Linda	Temporary Office Worker I	5	8	5	5		
Hicks, Patricia	Lead Cashier	5	5	5	5	5	5
Hiemstra, Torri	Registration Aide	5	8	5	5		
Jelin, Ivan	Registration Worker	5	8	5	5		
Kemp, Erma	Registration Worker	5	5	8	5		
Kinsella, Denise	International Program Manager			10			
Lemle, Barbara	Casual - Registrar Worker	5	8	5	5		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II	5	7	6	6		
Liebrecht, Cathy (01-02)	Registration Aide	5	8	5	5		
MacCullen, Jana	Registration Worker	5	8	5	5		
MacCullen, Jennifer	Registration Worker	5	8	5	5		
MacCullen, Matthew	Registration Worker	5	8	5	5		
MacCullen, Ruth	Associate Registrar	10	12	15	8		
Maiava, Tulia	Registration Aide	5	8	5	5		
McKibben, Emily	Registration Worker	5	8	5	5		
Mello, Sandra (01-02)	Registration Aide	5	8	5	5		
Mello, Sandra (98-99 to 00-01)	Registration Worker	5	8	5	5		

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Mendoza, Camelia	Registration Worker	5	8	5	5		
Milkes, Sharon	Senior Clerk/A&R Tech. II	6	9	6	5		
Miller, Margaret	Admissions & Records Tech II	5	8	5	5		
Moll, Corrin	Registration Worker	5	8	5	5		
Nguyen, Kevin	Registration Worker	5	8	5	5		
Nichols, Anthony	Registration Worker	5	8	5	5		
Odell, Renee	Registration Aide	5	8	5	5		
Olsen, Sharon	Registration Aide	5	8	5	5		
Parker, Jared	Registration Worker	5	8	5	5		
Pettit, Marcia	Associate Registrar	6	9	8	4		
Pouono, Pasadena	Registration Aide	5	8	5	5		
Quintus, Samantha	Registration Aide	5	8	5	5		
Robinson, Stacey	Lead Cashier	3	4	2	1	6	3
Rowan, Loretta	Registration Aide	5	8	5	5		
Rubalcava, Jorge	Registration Worker	5	8	5	5		
Rubalcava, Maria	Records Specialist	6	9	6	4		
Ruelas, Guadalupe	Admissions & Records Tech II	6	9	5	5		
Sanders, Sherrie	Registration Worker	5	8	5	5		
Satele, Leilva	Registration Aide	5	8	5	5		
Satele, Tauasosi Mary	Senior Clerk	4	7	8	4		
Stewart, Lisa	Records Specialist	4	8	5	4		
Tait, Sandra	Registration Worker	5	8	5	5		
Tarrab, Wafa	Registration Worker	5	8	5	5		
Togafau, Hubert	Registration Aide	5	8	5	5		
Tran, Christine	Admissions & Records Tech II	6	8	5	4		
Valle, Heather	Registration Worker	5	8	5	5		
Wade, Cherri	Admissions & Records Tech II	4	8	5	4		
Watson, Katherine	Registration Aide	5	8	5	5		
Wilson, Danny	Registration Aide	5	8	5	5		
Yarbrough, Charlotte	Admissions & Records Tech II	6	9	5	8		
Yost, Mary Margaret	Registration Aide	5	8	5	5		
Average		**5.1**	**8.0**	**5.4**	**4.9**	5.5	4.0

Conclusion: Findings go forward to Schedule 1A.

Only two responses to codes 15 and 16 - so these averages were not used.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Enrollment Fee Collection Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
Bolded PHR's -- see email from client dated 5/18/07 and fax cover sheet dated 5/21/07.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					$26.59	$30.47	$30.47	$30.77
Alvial, Bertha	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Alvial, Lefia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Anderson, Amy	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brackman, Pamela	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Bronilla, Cheryl	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brown, Eileen	Admissions & Records Tech II				$26.11	$31.08	$35.64	$35.64	$37.98
Castillo, Josefina	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Chamlern, Sombat	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Clark, Kamryn	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Collado, Carmen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Combs, April	Temporary Office Worker I					$14.30	$14.30	$14.30	$14.30
De La Rama, Allen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
De La Rama, Micah	Temporary Office Worker I				$12.10		$12.10		
Deweese, James	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Dorsey, Krystal	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Fairmen, Audrey	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Franco, Dolores	International Admissions/Records Tech. II				$29.56	$29.56	$33.85	$35.64	$36.00
Galvan, Karen	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Garces, Tim	Registration Worker	$8.79	$8.79	$8.79	$9.08	$9.08	$9.08	$9.08	$9.08
Gardner, Darice	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gonzales, Mary	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Heth, Linda	Temporary Office Worker I				$12.10	$12.10	$12.10		
Hicks, Patricia	Lead Cashier				$26.11	$31.08	$35.64	$37.60	$37.98
Hiemstra, Torri	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Jelin, Ivan	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kemp, Erma	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kinsella, Denise	International Program Manager				$26.11	$31.08	$31.27	$37.04	$41.30
Lemle, Barbara	Casual - Registrar Worker				$9.08	$9.08	$9.08		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II							$25.10	$26.35
Liebrecht, Cathy (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**		
MacCullen, Jana	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Jennifer	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Matthew	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Ruth	Associate Registrar				$32.71	$34.34	$38.59		$40.99
Maiava, Tulia	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
McKibben, Emily	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (98-99 to 00-01)	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Mendoza, Camelia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Milkes, Sharon	Senior Clerk/A&R Tech. II				$22.74	$25.28	$28.93	$28.93	$30.77
Miller, Margaret	Admissions & Records Tech II				$26.56	$28.02	$32.09	$33.85	$34.19
Moll, Corrin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nguyen, Kevin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nichols, Anthony	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Odell, Renee	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Olsen, Sharon	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Parker, Jared	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Pettit, Marcia	Associate Registrar				$37.61	$42.27	$42.27	$42.27	$42.27
Pouono, Pasadena	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Quintus, Samantha	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Robinson, Stacey	Lead Cashier							$25.43	$25.43
Rowan, Loretta	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Jorge	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Maria	Records Specialist				$21.78	$27.30	$30.47	$32.09	$32.41
Ruelas, Guadalupe	Admissions & Records Tech II				$25.21	$26.59	$30.47	$30.77	$30.77
Sanders, Sherrie	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Leilva	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Tauasosi Mary	Senior Clerk				$25.21	$26.59	$32.09	$32.09	$32.41
Stewart, Lisa	Records Specialist				$23.96	$26.59	$30.47	$30.47	$30.77
Tait, Sandra	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tarrab, Wafa	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Togafau, Hubert	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tran, Christine	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Valle, Heather	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wade, Cherri	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Watson, Katherine	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wilson, Danny	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Yarbrough, Charlotte	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Yost, Mary Margaret	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Average PHR		**$11.22** *	**$11.79** *	**$12.38** *	**$12.99**	**$13.97**	**$15.00**	**$15.47**	**$16.10**

* Note that for FY's 98-99, 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Fee Waiver Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
The fiscal years that staff were involved in was taken from lists by fiscal year made by T. DuBois from LBCCCD.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Alvarado, Olga				$24.79	$29.52	$31.33		
Avila, Jason							$22.93	$22.93
Deering, JoAnn	FA Spec. 7/1/02 -- FA Tech. 1/1/02			$24.79	$29.52			
Duran, Susana	FA Spec. 1/1/04						$25.30	$27.02
Gilliland, Shannon	Account Tech. II FA 7/1/05						$22.93	
Huerta, Maggie				$22.34	$26.59	$28.19	$28.19	$28.47
Kwon, Jennifer								$24.38
Lane, Alan								
Lim, Janice								$24.38
McKibbin, Lori				$27.98				
Menlivar, Juan Franc	FA Spec.					$22.93	$24.13	$25.68
Nguyen, Hue				$26.16	$31.14	$31.33	$31.33	$33.28
Polly, Irene				$24.79	$29.52	$31.14	$31.33	$31.64
Pope, Michelle	FA Spec.				$28.02			
Ruiz, Noelia				$26.56	$23.82	$23.76		
Skille, Steve	Account Tech. II FA					$25.43		
Thim, Monica								
Vaughn, Dara							$26.75	$28.47
Average PHR		**$22.99** *	**$24.14** *	**$25.34**	**$28.30**	**$27.73**	**$26.61**	**$27.36**

* Note that for FY's 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate productive hourly rates for prior fiscal years not provided by client.
Source: SixTen calculated PHR's from annual salary provided by client.
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	**Admissions & Records Tech II**					$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	22.96	24.11	25.32	26.59				
	Divided by 5%	1.05	1.05	1.05	1.05				
	Current fiscal year phr	$21.87	$22.96	$24.11	$25.32				
Brown, Eileen	**Admissions & Records Tech II**				$26.11	$31.08	$35.64	$35.64	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Combs, April	**Temporary Office Worker I**					$14.30	$14.30	$14.30	$14.30
	Hourly employee - so used same hrly rate for missing year				$14.30				
De la Rama, Micah	**Temporary Office Worker I**				$12.10		$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Franco, Dolores	**Int'l Admissions/Records Tech. II**				$29.56	$29.56	$33.85	$35.64	$36.00
	Previous fiscal year phr	26.81	28.15	29.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$25.53	$26.81	$28.15					
Heth, Linda	**Temporary Office Worker I**				$12.10	$12.10	$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Hicks, Patricia	**Lead Cashier**				$26.11	$31.08	$35.64	$37.60	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Milkes, Sharon	**Senior Clerk/A&R Tech. II**				$22.74	$25.28	$28.93	$28.93	$30.77
	Previous fiscal year phr	20.63	21.66	22.74					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$19.65	$20.63	$21.66					
Miller, Margaret	**Admissions & Records Tech II**				$26.56	$28.02	$32.09	$33.85	$34.19
	Previous fiscal year phr	24.10	25.30	26.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.95	$24.10	$25.30					

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-0
Pettit, Marcia	**Associate Registrar**				$37.61	$42.27	$42.27	$42.27	$42.2
	Previous fiscal year phr	$34.11	$35.82	37.61					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$32.49**	**$34.11**	**$35.82**					
Rubalcava, Maria	**Records Specialist**				$21.78	$27.30	$30.47	$32.09	$32.4
	Previous fiscal year phr	19.75	20.74	21.78					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$18.81**	**$19.75**	**$20.74**					
Ruelas, Guadalupe	**Admissions & Records Tech II**				$25.21	$26.59	$30.47	$30.77	$30.77
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$21.78**	**$22.87**	**$24.01**					
Satele, Tauasosi Mary	**Senior Clerk**				$25.21	$26.59	$32.09	$32.09	$32.41
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$21.78**	**$22.87**	**$24.01**					
Stewart, Lisa	**Records Specialist**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					
Wade, Cherri	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					
Yarbrough, Charlotte	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					

Conclusion: Findings go forward to the EFCW-2.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s. workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	59,221	62,569	63,787	66,733	75,701	72,546	64,570
EFC 2	1.8-1 2.	Paid Enrollment fees							
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)							
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.						
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.						
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.					
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128
EFW 7	1.8-3 2.	Waivers Approved	X -						
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.					

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Thurs

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2004 Summer Term

Data Current As Of May 17, 2007 02:50:12

Total Headcount	13,237

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2004 Fall Term

Data Current As Of May 17, 2007 02:50:22

Total Headcount	25,888

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Spring Semester

Data Current As Of May 17, 2007 02:50:36

Total Headcount	24,594

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Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2003-04

Toni DuBois — Employee Name

Dean, Student Financial Aid — Exact Position Title

Financial Aid — Dept. & Location #

x4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
2/12/02	meeting to discuss moving BOGFW to PS		1.0	
3/25/02	assist in development of Bolt on in PS		2.0	
11/14/02	write policy & procedure for BOGFW		2.5	
11/27/02	prepare training material for staff		1.5	
1/6/03	revise student consumer info re: BOG		1.0	
2/5/03	train FA staff on PS - BOGFW		1.0	
4/12/03	input BOGFW apps. to PS		4.0	
9/7/04	complete BOGFW report to state		3.5	
9/23/04	work on MIS reporting for BOG		2.0	
9/28/04	work on MIS reporting for BOG		3.0	
10/01/04	make corrections to rejects MIS		5.0	
10/04/04	make corrections to rejects MIS		6.0	
10/05/04	make final corrections to MIS		4.0	
/ /			Total 23.5	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois — Employee Name: (print)

Dean, Stud. Fin Aid — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: ~~2005-06~~ 2004-2005

Toni DuBois — Dean, Stu. Fin Aid

Employee Name — Exact Position Title

Financial Aid — x4573 — 12mo/11mo/10mo/hrly

Dept. & Location # — Telephone # — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
6/15/05 →	write policy + procedure for 05-06 BOGFW		.5	
8/3/05 → add to 05-06	train staff on changes to BOGFW (RDP)		.5	
/ /				
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1.6B - code 1B - policies & procedures

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois — Dean, Stu. Fin Aid

Employee Name: (print) — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

Copy - original in 04-05 resources

1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Community College District

Patricia Hicks — Lead Cashier

Employee Name — Exact Position Title

Fiscal Services/PCC Campus — 562-938-3906 — (12mo/11mo/10mo/hrly)

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	N/A							
B. Enrollment Waiver Process:	N/A							
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	2	2	2	2	2	2	2	2 hrs.
B. Enrollment Waiver Process:	N/A							
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	N/A							
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	N/A							
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks — Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

ADELINO ACOSTA
Employee Name

A/R II
Exact Position Title

938-3993
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

BERTHA ALVIAL
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 ~~99-00~~ (00-01) 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
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Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

LEFIA ALVIAL
Employee Name

registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Amy Anderson
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
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Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS / LAC ~~RECORDS TECH I~~
Department/Location

PAMELA BRACKMAN
Employee Name

ADMISSIONS & RECORDS TECH I
Exact Position Title

562-938-3948
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~ OOPS

Circle the years for which you are responding. OOPS

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Pamela Brackman Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Cheryl Bronilla
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

EILEEN BROWN
Employee Name

A/R II
Exact Position Title

938-3948
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
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Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

JOSEFINA CASTILLO
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
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Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sombat Chamlern
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
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Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION - PCC
Department/Location

KAMRYN CLARK
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/14/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Carmen Collado
Employee Name

Registration Aide
Exact Position Title

Telephone # ____ 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

April Combs
Employee Name

Temporary Office Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LRC
Department/Location

Allen J DelaRama
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Micah DeLaRama
Employee Name

Temporary Office Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

James Deweese
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

Krystal Dorsey
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

~~Registration Aide~~ Admissions
Department/Location

Audrey Fairmen
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Department/Location

Dolores Franco
Employee Name

Int'l Admissions/Records Tech II
Exact Position Title

Ext. 4528
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D Dolores Franco Date 5 3 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission/PCC
Department/Location

Karen Galvan
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

TIM CARCES
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Darice Gardner
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Mary Gonzales
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Linda Heth
Employee Name

Temporary Office Worker I
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - PCC Campus
Department/Location

Patricia Hicks
Employee Name

Lead Cashier
Exact Position Title

562-938-3906
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2-5 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-5 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2-5 min	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-5 min	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Terri Hiemstra
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION / ACC
Department/Location

IVAN JEUN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS - PCC
Department/Location

ERMA KEMP
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College Dist. — District
International Student Program — Department/Location
Denise Kinsella — Employee Name
International Program Manager — Exact Position Title
562-938-4743 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Kinsella Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIAN & RECORDS - PCC
Department/Location

Barbara Lemile
Employee Name

CASUAL - REGISTRAR WORKER
Exact Position Title

938-3943
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02
02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Admissions / LAC
Department/Location

Catherine Liebrecht
Employee Name

A&R Tech II
Exact Position Title

4288
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ only through 2003
~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses. ✓	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report. ✓	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. ✓	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. ✓	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine Liebrecht Date 5/3/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Cathy Liebrecht
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Registration - admission - PCC
Department/Location

Jana mac cullen
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

REGISTRATION-ADMISSION/PCC
Department/Location

JENNIFER MAC CULLEN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / Rec
Department/Location

Matthew MacMillen
Employee Name

Registration
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

RUTH MAC CULLEN
Employee Name

ASSOCIATE REGISTRAR
Exact Position Title

938-3405
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Tylia N. Maiava
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - Registration - PCC
Department/Location

Emily McKibben
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature _____ PLEASE USE BLUE INK

Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sandra Mello
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly (circle)
Telephone # Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Sandra Mello
Employee Name

Registration Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Camelia Mendoza
Employee Name

Registration Worker / LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

PCE A&R
Department/Location

Sharon Mikes
Employee Name

SR Clerk/AR Tech II
Exact Position Title

562 938-3947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
✓ **Code 13** Answering Questions and/or referring student to the appropriate person for an answer.	6					
✓ **Code 14** Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Sharon Mikes

Date 5-3-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Margaret Miller
Employee Name

Admissions & Records Tech II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Coreen Moll
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - PCC
Department/Location

Kevin nguyen
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Anthony Nichols
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Renee Odell
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sharon Olsen
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/~~hrly~~
Telephone # Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Jared Parker
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Marcia Pettit
Employee Name

Associate Registrar
Exact Position Title

938-4719
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Pettit Date 4/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Pasadena Pouono
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Samantha Quintus
Employee Name

Registration Aid
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - LAC Campus.
Department/Location

Stacey ROBINSON
Employee Name

Lead Cashier
Exact Position Title

(562) 938-4455
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Loretta Rowan
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admission / Rec
Department/Location

JORGE RUBALCAVA
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Admissions / PCC
Department/Location

Maria L Rubalcava
Employee Name

Records Specialist
Exact Position Title

562) 938-3994
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria L Rubalcava Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

A&R PCCH II
Department/Location

Guadalupe Rivelas
Employee Name

A&R TECH II
Exact Position Title

5629383946
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Guadalupe Rivelas Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Sherrie Sanders
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Leilua Satele
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

Admissions / LAC
Department/Location

Tauasosi Mary Satele
Employee Name

Senior Clerk
Exact Position Title

562 938 4138
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T Mary Satele Date 5/2/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
AR/ PCC — Department/Location
Lisa Stewart — Employee Name
Records Specialist — Exact Position Title
562 938 3943 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Stewart Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions/PCC
Department/Location

Sandra Tait
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Registration - Admission / PCC
Department/Location

WAFA TARRAB
Employee Name

Registration Worker & LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Hubert Togafau
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH
District

ADMISSIONS
Department/Location

CHRISTINE TRAN
Employee Name

ADMISSIONS TECH II
Exact Position Title

938-4748
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCE
Department/Location

Heather Valles
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

A & R (CLAC)
Department/Location

CHERRI WADE
Employee Name

Admissions / Records Tech II
Exact Position Title

(562) 938-4137 — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cherri Wade Date 05/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Katherine Watson
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Danny Wilson
Employee Name

Registration Aid
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.B.C.C.D.
District

AgR / PCC
Department/Location

CHARLOTTE YARBROUGH
Employee Name

AgR TECH. II
Exact Position Title

562) 938-3949
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Mary Margaret Yost
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/17

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1/2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1/2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3~~08~~/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
— BOG C —

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

See attached
Employee Name

Financial Aid Specialist
Exact Position Title

x 4573
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori M Bruce Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BOGFW A+B
18-3 BOG-C

TIME + STATISTICS

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2004-05

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 14,327 applications			
/ /	into PS. Bolton for			
/ /	BOGFW A+B			
/ /	2 mins per application			
/ /	for eligibility determination			
/ /	and input		477.6	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to Ed Express			
/ /	for 2,128 students			
/ /	at 7 minutes per			
/ /	student		248.3	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Stu. Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

17-3 Attachment

2004-05

Financial Aid Specialists

Hue Nguyen - LAC
Irene Kelly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Susana Duran - PCC
Dara Vaughn - PCC
Juan Franc Menjivar - PCC
Monica Thim - LAC
Shannon Gilliland - LAC
Jason Avila - PCC

EFCW 1.8-1

95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

Beach Community College

accounting statistics will be used to calculate your reimbursement. Please report the in the spaces provided.

ata	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
nts enrolled each fiscal								
	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,217 26,296
	22,594	24,619	25,700	28,722	29,779	28,722	25,686	24,999 26,444
	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740
nts who paid enrollment								
nts exempted from es (BOGG, etc):								

12,431.00 +
24,196.00 +
22,594.00 +
99-99 59,221.00 *

0. C

13,446.00 +
24,504.00 +
24,619.00 +
99-00 62,569.00 *

0. C

13,661.00 +
24,426.00 +
25,700.00 +
00-01 63,787.00 *

0. C

15,287.00 +
22,724.00 +
28,722.00 +
01-02 66,733.00 *

0. C

17,605.00 +
28,317.00 +
29,779.00 +
02-03 75,701.00 *

0. C

12,854.00 +
30,970.00 +
28,722.00 +
03-04 72,546.00 *

0. C

13,837.00 +
25,047.00 +
25,686.00 +
04-05 64,570.00 *

0. C

14,000.00 +
26,296.00 +
26,444.00 +
05-06 66,740.00 *

0. C

FICATION: The State of California requires that school district personnel maintain a record of data order for the district to receive reimbursement. Your signature on this form certifies that you data or have provided a good faith estimate which you "certify (or declare) under penalty of ws of the State of California to be true and correct based on your personal knowledge or formation is used for cost accounting purposes only. PLEASE USE BLUE INK

: Linda Roseth Date 5/23/07

ROSETH MANDATED COST SPECIALIST
int) Position or Title

itions, please contact _____, at _____.

HIS INFORMATION BY _____; TO _____.

Ten and Associates

Revised January 2006

LONG BEACH

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Summer	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
Fall	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,296
Spring	22,594	24,619	25,700	28,722	29,779	28,722	25,686	26,444
Total	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740

Rec'd from Hannah Alford - Research Analyst
5/23/07

AND 1.7-3 BOGFW A-3
1.8-3 BOG-C

TIME & STATISTICS

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2004-05

See attached Financial Aid Specialist

Employee Name Exact Position Title

Financial Aid

Dept. & Location # Telephone # (12mo/11mo/10mo/hrly) Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 14,327 applications			
/ /	into PS. Bolton for			
/ /	BOGFW A+B			
/ /	2 mins per application			
/ /	for eligibility determination			
/ /	and input		477.6	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to Ed Express			
/ /	for 2,128 students			
/ /	at 7 minutes per			
/ /	student		248.3	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M. DuBois Date 4-17-06

Toni M. DuBois Dean, Stu. Fin. Aid

Employee Name: (print) Position or Title

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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January 2006

1.7-3 Attachment

2004-05

Financial Aid Specialists

Hue Nguyen - LAC
Irene Kelly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Susana Duran - PCC
Dara Vaughn - PCC
Juan Franc Menjivar - PCC
Monica Thim - LAC
Shannon Gilliland - LAC
Jason Avila - PCC

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Long Beach Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ N/A	$ 2,718,590	$ 2,520,654	$ 2,748,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 5-24-07

Toni M. DuBois
Employee Name: (print)

Dean, Stud. Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Name	Title	03-04	04-05
BERRY, JANICE	EXECUTIVE SECRETARY	$ 56.33	$ 59.63
BERRY, MARSHALL	CUSTODIAL SUPERVISOR	$ 48.33	$ 48.68
BLOMBERG, CYNTHIA	NURSE-LAC	$ 50.71	$ 49.65
BLORE, JOANNE	PROJECT MANAGER, WORKPLACE SKILLS	$ 69.20	
BOUWENS, DEBI	CHILD DEV SITE SUPERVISOR	$ 56.50	
BOWERS, ALLISON	INSTRUCTIONAL ASSISTENCE COORDINATOR	$ 56.01	$ 54.84
BRADSHAW, JOAN	BOARD SECRETARY (Retired 6/04)	$ 54.94	
BYNUM, LOU ANN	ADMIN DEAN, ECONOMIC DEVELOPMENT	$ 110.72	$ 119.80
BYRD, ART	VICE PRESIDENT, STUDENT SUPP SERV	$ 110.72	$ 119.80
CALLAHAN, MARY	VICE PRESIDENT, ACADEMIC AFFAIRS (Retired 6/04)	$ 110.72	
CARR, JOAN	PAYROLL & BENEFITS MANAGER	$ 64.68	$ 65.14
CARTER, JERI	MANAGER, STUDENT LIFE	$ 71.14	$ 71.65
CHOW-OSAKA, ANGELINA	HUMAN RESOURCES ASSISTANT	$ 35.32	
COLLINS, VICTOR	EXECUTIVE VP, HUMAN RESOURCES (Retired 6/04)	$ 124.56	
CREASON, PAUL	DIRECTOR OF GRANTS	$ 84.17	$ 91.35
CREASY, RICHARD	CUSTODIAL SUPERVISOR	$ 46.32	
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)	$ 40.61	
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 65.45	$ 71.03
DORSEY, CHRISTOPHER	ACCOUNTING TECHNICIAN I		$ 43.40
DUBOIS, TONI	DIRECTOR, FINANCIAL AIDE	$ 78.73	$ 89.46

SixTen calculated Productive Hourly Rates w/ 21% benefits for month + 10% benefits for hourly

St	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					26.59	30.47	30.77	30.77
Alvarado, Olga					24.79	29.52	31.33	31.33	
Avila, Jason								22.93	*23.96
Brackman, Pamela	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Brown, Eileen	Admissions & Records Tech II				26.11	31.08	35.64	35.64	37.98
Combs, April	Temporary Office Worker I					14.30	14.30	14.30	14.30
De La Rama, Micah	Temporary Office Worker I				12.10		12.10		
Deering, JoAnn					24.79	29.52	29.52	22.93	
Duran, Susana	FA Spec						22.93	*25.30	27.02
Franco, Dolores	Int'l Admissions/Records Tech. II				29.56	29.56	33.85	35.64	36.00
Gilliland, Shannon	Account Tech. II FA							25.43	28.47
Heth, Linda	Temporary Office Worker I				12.10	12.10	12.10		
Hicks, Patricia	Lead Cashier				26.11	31.08	35.64	37.60	37.98
Huerta, Maggie	FA Spec				22.34	26.59	28.19	28.47	28.47
Kinsella, Denise	International Program Manager				26.11	31.08	31.27	37.04	41.30
KwoN Jennifer							28.19		24.38
Lane, Alan									
Lemle, Barbara	Casual - Registrar Worker				9.08	9.08	9.08	25.10	
Liebrecht, Catherine	Admissions & Records Tech II							*20.88	26.35
Lim, nice									*24.38
MacCullen, Ruth	Associate Registrar				32.71	34.34	38.59		40.99
McKibbin, Lori					27.98		29.52		
Menjivar, Juan Franc	FA Spec						22.93	24.13	25.68
Milkes, Sharon	Senior Clerk/A&R Tech. II				22.74	25.28	28.93	*29.46	30.77
Miller, Margaret	Admissions & Records Tech II				26.56	28.02	32.09	33.85	34.19
Nguyen, Hue	FA Spec				26.16	31.14	31.33	31.33	33.28
Pettit, Marcia	Associate Registrar				37.61	42.27	42.27	42.27	*43.49
Polly, Irene	FA Spec				24.79	29.52	31.14	31.33	31.64
Pope, Irene								25.43	*28.14
Robinson, Stacey	Lead Cashier								
Rubalcava, Maria	Records Specialist				21.78	27.30	30.47	32.09	32.41
Delas, Guadalupe	Admissions & Records Tech II	***			25.21	26.59	30.47	30.77	30.77
Ruiz, Noelia					26.56	23.82	23.76		
Stele, Tauasosi Mary	Senior Clerk				25.21	26.59	32.09	32.09	32.41
Tille, Steve	Account Tech. II FA				12.10	22.80	25.43	26.75	28.47
Stewart, Lisa	Records Specialist				23.96	26.59	30.47	30.47	30.77
Sum, Monica	FA Spec								29.14
Tan, Christine	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Ugh Dara	FA Spec				20.53	22.80	24.13	26.75	28.47
Wade, Cherri	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77
Yarbrough, Charlotte	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77

* = ~~Changed PHR w/ no back-up~~ where back up was not provided - used same PHR as previous FY. If no previous PHR available used following FY PHR and divided by 5%

** = No Back-up - gave the same as Jennifer Kwon

*** = ~~difference or average difference of all other yrs provided~~

Staff	Title	PHRs 02-03	PHRs 05-06
Allen, Marianne	FA Counselor	48.76	55.80
Af od, Kathie	Secretary LAC	29.52	32.46
Blassetti, Sara	FA - PT Counselor	N/W	12.10
Catipon, Mary	FA - PT Counselor	N/N	52.23
Davis, Judy	Secretary		N/W
Douglass, Genevieve	Account Tech. II		N/N
Eksigian, Arda	Assoc. Director FA	40.83	47.82
Garvey, Peggy	Account Tech. II	28.02	29.70
Gutierrez, Dorothy	FA Advisor	44.93	45.65
MacCallum, Michael	FA Counselor	64.82	72.70
Miller, Laura	Account Tech. II	29.48	
Nachreiner, Ron	Office Assistant		19.50
Overton, Kimberly	FA - PT Counselor	N/W	
Pope, Michele	FA Specialist	28.02	29.47
Stepan, Betty	FA Counselor	58.32	61.24
Sweet-Kelly, Deborah	Office Assistant	23.38	24.55
Tait, Sandra	Office Assistant	19.56	21.79
Tim, Sophorn	FA Data Software Spec.	7.43	7.80
Turner, Lydia	FA Counselor		53.53
Yentch, Richard	Assoc. Director FA		47.82

NW - not working

There are two other employees w/ this title Blassetti & Catipon - used lower of the two = 12.10

Sixten Calculated Productive Hourly Rates w/ 21% benefits for monthly + 8% benefits for hourly

FA Specialists

0•	C	
Duran 27•02	+	
Huerta 28•47	+	
menjivar 25•68	+	
Nguyen 33•28	+	
Polly 31•64	+	
Vaughn 28•47	+	
Pope, Michele 29•42	+	
203•98	*	
203•98	÷	
7•	=	
29•14	*	
Avg FA Spec used for Thim, Monica		
0•	C	

0•	C	
0•	C	
Pope 28•02	×	
1•05	=	
29•42	*	
0•	C	
Stepan 58•32	×	
1•05	=	
61•24	*	
0•	C	
Sweet-Kelly 23•38	×	
1•05	=	
24•55	*	
0•	C	
0•	C	
7•43	×	
Tait 1•05	=	
7•80	*	
0•	C	

Schedule 5
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Consultant Summary

Purpose: To summarize consultant costs for EFCW.
Source: Invoices from Ciber
Findings:

Invoice Date	Billing Period		Total Amount	
	Beginning	Ending		
7/30/2004	7/10/2004	7/23/2004	$	56,922.50
9/24/2004	9/4/2004	9/17/2004	$	22,440.00
10/7/2004	9/18/2004	10/1/2004	$	37,125.00
10/21/2004	10/2/2004	10/15/2004	$	34,350.00
Total			**$**	**150,837.50**

Conclusion: Findings go forward to EFCW-2.

Entered under component calculating collection of enrollment fees

00141

ciber
An Equal Opportunity Employer

5251 DTC Parkway, Suite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INFORMATION SYSTEMS
AUG 09 2004
RECEIVED

INVOICE NO.	08-013258
DATE OF INVOICE	07/30/2004
CUSTOMER ACCOUNT NO.	08002LBC001
PAYMENT TERMS	Net 20
BILLING PERIOD	
BEGINNING	07/10/2004
ENDING	07/23/2004
PURCHASE ORDER NO./REFERENCE	

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

HRS/QTY	DESCRIPTION	RATE	AMOUNT
82.50	Bitter,Jerry	145.00	11,962.50
80.00	Collings,Richard	145.00	11,600.00
80.00	Cubba,Carl	145.00	11,600.00
88.00	Dani,Sameer	145.00	12,760.00
60.00	Mueller,Barbara	150.00	9,000.00
		TOTAL	56,922.50

9/21/04

CW99611.445
UH12694
line#1

CIBER Invoice Hours/Qty Detail w[illegible]k

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-013258
Invoice Date: 07/30/2004
Billing Period: 7/10/2004 To 7/23/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Bitter,Jerry	Task 1	07/12/2004	9.00		
Bitter,Jerry	Task 1	07/13/2004	12.00		
Bitter,Jerry	Task 1	07/14/2004	13.00		
Bitter,Jerry	Task 1	07/15/2004	8.00		
Bitter,Jerry	Task 1	07/16/2004	0.50		
Bitter,Jerry	Task 1	07/19/2004	9.00		
Bitter,Jerry	Task 1	07/20/2004	11.50		
Bitter,Jerry	Task 1	07/21/2004	11.50		
Bitter,Jerry	Task 1	07/22/2004	8.00		
Bitter,Jerry Total:			**82.50**	145.00	11,962.
Collings,Richard	08002LBC00105	07/12/2004	10.00		
Collings,Richard	08002LBC00105	07/13/2004	10.00		
Collings,Richard	08002LBC00105	07/14/2004	10.00		
Collings,Richard	08002LBC00105	07/15/2004	10.00		
Collings,Richard	08002LBC00105	07/19/2004	12.00		
Collings,Richard	08002LBC00105	07/20/2004	11.00		
Collings,Richard	08002LBC00105	07/21/2004	10.00		
Collings,Richard	08002LBC00105	07/22/2004	7.00		
Collings,Richard Total:			**80.00**	145.00	11,600.(
Cubba,Carl	Task 1	07/12/2004	11.00		
Cubba,Carl	Task 1	07/13/2004	12.00		
Cubba,Carl	Task 1	07/14/2004	11.00		
Cubba,Carl	Task 1	07/15/2004	6.00		
Cubba,Carl	Task 1	07/19/2004	10.00		
Cubba,Carl	Task 1	07/20/2004	11.00		
Cubba,Carl	Task 1	07/21/2004	11.00		
Cubba,Carl	Task 1	07/22/2004	8.00		
Cubba,Carl Total:			**80.00**	145.00	11,600.0(
Dani,Sameer	08002LBC00105	07/12/2004	11.00		
Dani,Sameer	08002LBC00105	07/13/2004	11.00		
Dani,Sameer	08002LBC00105	07/14/2004	11.00		
Dani,Sameer	08002LBC00105	07/15/2004	10.00		
Dani,Sameer	08002LBC00105	07/19/2004	11.00		
Dani,Sameer	08002LBC00105	07/20/2004	11.00		
Dani,Sameer	08002LBC00105	07/21/2004	11.00		
Dani,Sameer	08002LBC00105	07/22/2004	12.00		
Dani,Sameer Total:			**88.00**	145.00	12,760.0(
Mueller,Barbara	Task 1	07/13/2004	11.00		
Mueller,Barbara	Task 1	07/14/2004	11.00		
Mueller,Barbara	Task 1	07/15/2004	10.00		
Mueller,Barbara	Task 1	07/19/2004	8.00		

ciber
An Equal Opportunity Employer
5251 DTC ..., Suite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT T

Dept. 1305
Denver CO 80291-1305

INVOICE

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INFORMATION SYSTEMS

OCT 01 2004

RECEIVED

INVOICE NO.	
08-014961	
DATE OF INVOICE	
09/24/2004	
CUSTOMER ACCOUNT NO.	
08002LBC001	
PAYMENT TERMS	
Net 20	
BILLING PERIOD	
BEGINNING	ENDING
09/04/2004	09/17/2004
PURCHASE ORDER NO./REFERENCE	

HRS/QTY	DESCRIPTION	RATE	AMOUNT
72.00	Collings,Richard	145.00	10,440
80.00	Dani,Sameer	150.00	12,000

10/4/04

CN99611.445
UH12694

TOTAL	22,440.0

9/24/2004 9:00:26 AM 451001
riginal

For billing questions, please call 925-609-3117

CIBER Invoice Hours/Qty Detail wi ...sk

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-014961
Invoice Date: 09/24/2004
Billing Period: 9/4/2004 To 9/17/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOUN
Collings,Richard	08002LBC00105	09/13/2004	12.00		
Collings,Richard	08002LBC00105	09/14/2004	11.00		
Collings,Richard	08002LBC00105	09/15/2004	10.00		
Collings,Richard	08002LBC00105	09/16/2004	7.00		
Collings,Richard	08002LBC00105	09/07/2004	12.50		
Collings,Richard	08002LBC00105	09/08/2004	12.00		
Collings,Richard	08002LBC00105	09/09/2004	7.50		
Collings,Richard Total:			**72.00**	**145.00**	10,440.0
Dani,Sameer	08002LBC00105	09/10/2004	8.00		
Dani,Sameer	08002LBC00105	09/13/2004	10.00		
Dani,Sameer	08002LBC00105	09/14/2004	11.00		
Dani,Sameer	08002LBC00105	09/15/2004	11.00		
Dani,Sameer	08002LBC00105	09/16/2004	8.00		
Dani,Sameer	08002LBC00105	09/07/2004	10.00		
Dani,Sameer	08002LBC00105	09/08/2004	11.00		
Dani,Sameer	08002LBC00105	09/09/2004	11.00		
Dani,Sameer Total:			**80.00**	**150.00**	12,000.0

Total: **22,440.00**

ciber
An Equal Opportunity Employer
5251 DTC [illegible]ite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INVOICE NO.
08-015428
DATE OF INVOICE
10/07/2004
CUSTOMER ACCOUNT NO.
08002LBC001
PAYMENT TERMS
Net 20
BILLING PERIOD
BEGINNING / ENDING
09/18/2004 / 10/01/2004
PURCHASE ORDER NO./REFERENCE

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INFORMATION SYSTEMS
OCT 12 2004
RECEIVED

HRS/QTY	DESCRIPTION	RATE	AMOUNT
80.00	Collings,Richard	150.00	12,000.
80.00	Dani,Sameer	150.00	12,000.
87.50	Gaston,Sandra	150.00	13,125.
		TOTAL	37,125.00

10/13/04

CN 99611.445
N # 12694

For billing questions, please call 925-609-3117

CIBER Invoice Hours/Qty Detail

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-015428
Invoice Date: 10/07/2004
Billing Period: 9/18/2004 To 10/1/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Collings,Richard	08002LBC00105	09/20/2004	11.00		
Collings,Richard	08002LBC00105	09/21/2004	11.00		
Collings,Richard	08002LBC00105	09/22/2004	11.00		
Collings,Richard	08002LBC00105	09/23/2004	7.00		
Collings,Richard	08002LBC00105	09/27/2004	11.00		
Collings,Richard	08002LBC00105	09/28/2004	12.00		
Collings,Richard	08002LBC00105	09/29/2004	11.00		
Collings,Richard	08002LBC00105	09/30/2004	6.00		
Collings,Richard Total:			**80.00**	150.00	12,000.(
Dani,Sameer	08002LBC00105	09/20/2004	10.00		
Dani,Sameer	08002LBC00105	09/21/2004	11.00		
Dani,Sameer	08002LBC00105	09/22/2004	11.00		
Dani,Sameer	08002LBC00105	09/23/2004	8.00		
Dani,Sameer	08002LBC00105	09/27/2004	12.00		
Dani,Sameer	08002LBC00105	09/28/2004	10.00		
Dani,Sameer	08002LBC00105	09/29/2004	10.00		
Dani,Sameer	08002LBC00105	09/30/2004	8.00		
Dani,Sameer Total:			**80.00**	150.00	12,000.(
Gaston,Sandra	Task 1	10/01/2004	4.50		
Gaston,Sandra	Task 1	09/20/2004	11.00		
Gaston,Sandra	Task 1	09/21/2004	11.00		
Gaston,Sandra	Task 1	09/22/2004	11.00		
Gaston,Sandra	Task 1	09/23/2004	7.00		
Gaston,Sandra	Task 1	09/27/2004	11.00		
Gaston,Sandra	Task 1	09/28/2004	11.00		
Gaston,Sandra	Task 1	09/29/2004	11.00		
Gaston,Sandra	Task 1	09/30/2004	10.00		
Gaston,Sandra Total:			**87.50**	150.00	13,125.0

Total: 37,125.0

ciber
An Equal Opportunity Employer
5251 DTC [illegible]ite 1400
Greenwood [illegible], CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INFORMATION SYSTEMS
OCT 26 2004
RECEIVED

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INVOICE NO.	
08-015910	
DATE OF INVOICE	
10/21/2004	
CUSTOMER ACCOUNT NO.	
08002LBC001	
PAYMENT TERMS	
Net 20	
BILLING PERIOD	
BEGINNING	ENDING
10/02/2004	10/15/2004
PURCHASE ORDER NO./REFERENCE	

HRS/QTY	DESCRIPTION	RATE	AMOUNT
80.00	Collings,Richard	150.00	12,000.
80.00	Dani,Sameer	150.00	12,000.
69.00	Gaston,Sandra	150.00	10,350.
		TOTAL	34,350.0

CN 99611.4X5
U# 12694

Mario Valente 10/27/04

CIBER Invoice Hours/Qty Detail v

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-015910
Invoice Date: 10/21/2004
Billing Period: 10/2/2004 To 10/15/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Collings,Richard	08002LBC00105	10/11/2004	11.00		
Collings,Richard	08002LBC00105	10/12/2004	11.00		
Collings,Richard	08002LBC00105	10/13/2004	11.00		
Collings,Richard	08002LBC00105	10/14/2004	7.00		
Collings,Richard	08002LBC00105	10/04/2004	8.50		
Collings,Richard	08002LBC00105	10/05/2004	12.00		
Collings,Richard	08002LBC00105	10/06/2004	12.00		
Collings,Richard	08002LBC00105	10/07/2004	7.50		
Collings,Richard Total:			**80.00**	**150.00**	**12,000.(**
Dani,Sameer	08002LBC00105	10/11/2004	10.00		
Dani,Sameer	08002LBC00105	10/12/2004	11.00		
Dani,Sameer	08002LBC00105	10/13/2004	11.00		
Dani,Sameer	08002LBC00105	10/14/2004	8.00		
Dani,Sameer	08002LBC00105	10/04/2004	11.00		
Dani,Sameer	08002LBC00105	10/05/2004	10.00		
Dani,Sameer	08002LBC00105	10/06/2004	11.00		
Dani,Sameer	08002LBC00105	10/07/2004	8.00		
Dani,Sameer Total:			**80.00**	**150.00**	**12,000.0**
Gaston,Sandra	Task 1	10/11/2004	11.00		
Gaston,Sandra	Task 1	10/12/2004	11.00		
Gaston,Sandra	Task 1	10/13/2004	10.00		
Gaston,Sandra	Task 1	10/14/2004	8.00		
Gaston,Sandra	Task 1	10/04/2004	11.00		
Gaston,Sandra	Task 1	10/05/2004	11.00		
Gaston,Sandra	Task 1	10/07/2004	7.00		
Gaston,Sandra Total:			**69.00**	**150.00**	**10,350.0(**

Total: 34,350.00

Board of Trustees
Dr. Thomas J. Clark
Jeffrey A. Kellogg
Dianne Theil McNinch
Douglas W. Otto
Roberto Uranga

Superintendent-President
E. Jan Kehoe, Ph.D.

Long Beach City College • Long Beach Community College District
4901 East Carson Street • Long Beach, California 90808

September 21, 2004

Ciber, Inc.
Michael Dillon
25161 Sea Vista Dr.
Dana Point, CA 92629

Subject: Contract No. CN99611.4 Software Implementation Services – Amendment #10

Dear Mr. Dillon:

Attached is a fully executed copy of Amendment #10 for CN99611.4 – Software Implementation Services.

Please invoice referencing CN #99611.4 to Long Beach Community College District, Fiscal Operations-Y14, 4901 East Carson Street, Long Beach, CA 90808.

For payment inquiries, call Fiscal Operations, (562) 938-4532 and for contract information, call Contracting & Procurement, (562) 938-4213.

Sincerely,

Sandy Mathis

Sandy Mathis
Contracting & Procurement
(562) 938-4215

Attachments (1)

cc: Los Angeles County, School Services Division
Fiscal Operations
Contracting & Procurement
ACIT

CN 99611.4

AMENDED AGREEMENT
Software Implementation Services - Amendment #10

This amended agreement, made and entered into this fourteenth day of July, 2004 in the County of Los Angeles, State of California, by and between LONG BEACH COMMUNITY COLLEGE DISTRICT, hereinafter called the DISTRICT, and CIBER, INC. hereinafter called the CONSULTANT.

WITNESSETH: The District and the Consultant do mutually agree to amend Agreement CN99611.4.1 entered into on the first day of March, 1999, as follows:

1. Increase the contract an additional Eight Hundred Thousand Dollars ($428,920.00) for consulting services to continue implementation of the additional Version 8 PeopleSoft modules for Student Administration for student access to online registration, counseling, instructor contracts and implementation and upgrade to PeopleSoft Financials Version 8.

Except as amended herein, all terms and conditions of original agreement CN99611.4 and any amendment thereto shall remain in full force and effect.

Long Beach Community College District

Denise Spencer Watkins 21 Sep 2004
Denise Spencer Watkins Date
Director of Contracting & Procurement

Consultant
Ciber, Inc.

7-14-04
Signature Date

Michael Dillon
Vice President

Approved by the Board of Trustees on July 13, 2004.

Schedule 4

Long Beach Community College District
308/95 Enrollment Fe llection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 04-05 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received			Not provided by client -- used CCCCO's website numbers			
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301		For 00-01 through 04-05 - unit fee			
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301					
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$58,214,336	$52,352,598	$595,885	$52,948,483
ENROLL FEE ADMIN (2%)	152,403	131,066	21,337	152,403
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,538,453	3,043,069	495,384	3,538,453
S.F.A.A.	992,751	827,638	165,113	992,751
E.O.P.S.	1,791,382	1,540,589	250,793	1,791,382
C.A.R.E.	252,407	217,070	35,337	252,407
D.S.P.S.	994,409	851,011	143,398	994,409
STATE HOSPITALS	0	0	0	0
CALWORKS	1,068,270	918,712	149,558	1,068,270
MATRICULATION (CREDIT)	807,863	686,846	121,017	807,863
MATRIC. (NONCREDIT)	215,531	185,357	30,174	215,531
FAC. & STAFF DIVERSITY	21,941	15,597	6,344	21,941
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	937,446	806,204	131,242	937,446
BLOCK GRANT (ONE-TIME)	450,138	387,119	63,019	450,138
ECON. DEVELOPMENT	1,231,919	1,008,863	25,949	1,034,812
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	250,344	215,296	35,048	250,344
VTEA LEADERSHIP	100,000	78,000	6,000	84,000
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	673,740	700,690	-134,748	565,942
PLANT & INSTRUCTIONAL	504,901	434,215	70,686	504,901
PRIOR YEAR CORRECTION	715,595	697,851	17,744	715,595
TOTAL	$73,035,732	$65,183,015	$2,254,951	$67,437,966

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

July 18, 2007

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Long Beach Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. J. Branvell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 231,440
Less: 10% Late Penalty		(14) $ 23,144
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 208,296
Due from State	(08)	(17) $ 208,296
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	127
(24) EFCW-1, (04)(A)(2)(a)(f)	275,791
(25) EFCW-1, (04)(B)(1)(a)(f)	47
(26) EFCW-1, (04)(B)(1)(b)(f)	392
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	17,915
(29) EFCW-1, (04)(B)(2)(c)(f)	2,207
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	100,388
(32) EFCW-1, (09)	144,866
(33) EFCW-1, (10)	20,561
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) I Ramos — **Date** 6-25-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Long Beach Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ] — Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 126.82	$ -	$ -	$ -	$ -	$ 126.82
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 275,791.39	$ -	$ -	$ -	$ -	$ 275,791.39
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 46.96	$ -	$ -	$ -	$ -	$ 46.96
b. Staff training (One time per employee)	$ 391.60	$ -	$ -	$ -	$ -	$ 391.60
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 17,915.35	$ -	$ -	$ -	$ -	$ 17,915.35
c. Reporting BOG fee waiver data to CCC	$ 2,207.12	$ -	$ -	$ -	$ -	$ 2,207.12
(05) Total Direct Costs	$ 296,479.24	$ -	$ -	$ -	$ -	$ 296,479.24

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	33.86%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 100,387.87
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 396,867.11
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 144,866.00
(10) Less: Enrollment Fee Waiver offsets		$ 20,561.03
(11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 231,440.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Robinson, Stacey Lead Cashier	$25.43	2.0	$ 50.86				
Hicks, Patricia Lead Cashier	$37.98	2.0	$ 75.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 126.82	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$16.10	5,672.9	$ 91,333.69				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$16.10	6,006.6	$ 96,706.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$16.10	5,450.4	$ 87,751.44				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 275,791.39	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

1) Claimant: Long Beach Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$93.92	0.5	$ 46.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 46.96	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
MacCallum, Michael	FA Counselor	$72.70	0.5	$ 36.35				
Allen, Marianne	FA Counselor	$55.80	0.5	$ 27.90				
Stepan, Betty	FA Counselor	$61.24	0.5	$ 30.62				
Turner, Lydia	FA Counselor	$53.53	0.5	$ 26.77				
Gutierrez, Dorothy	FA Advisor	$45.65	0.5	$ 22.83				
Ekhsigian, Arda	Associate Director FA	$47.82	0.5	$ 23.91				
Yentch, Richard	Associate Director FA	$47.82	0.5	$ 23.91				
Huerta, Maggie	FA Specialist	$28.47	0.5	$ 14.24				
Pope, Michele	FA Specialist	$29.42	0.5	$ 14.71				
Nguyen, Hue	FA Specialist	$33.28	0.5	$ 16.64				
Polly, Irene	FA Specialist	$31.64	0.5	$ 15.82				
Nachreiner, Ron	Office Assistant	$19.50	0.5	$ 9.75				
Atwood, Kathie	Secretary	$32.46	0.5	$ 16.23				
Thim, Monica	FA Specialist	$29.14	0.5	$ 14.57				
Duran, Susana	FA Specialist	$27.02	0.5	$ 13.51				
Vaughn, Dara	FA Specialist	$28.47	0.5	$ 14.24				
Tim, Sophorn	FA Data Software Specialist	$7.80	0.5	$ 3.90				
Menjivar, Juan Franc	FA Specialist	$25.68	0.5	$ 12.84				
Blassetti, Sara	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Overton, Kimberly	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Skille, Steve	Account Tech. II FA	$28.47	0.5	$ 14.24				
Gilliland, Shannon	Account Tech. II FA	$28.47	0.5	$ 14.24				
Sweet-Kelly, Deborah	Office Assistant	$24.55	0.5	$ 12.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 391.60	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	83.8	$ 2,292.77				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	138.4	$ 3,786.62				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 17,915.35	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

1) Claimant
ong Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$93.92	23.5	$ 2,207.12				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,207.12	$ -	$ -	$ -	$ -

New 04/06

Long Beach Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

20 6

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Allen, Marianne	FA Counselor	$55.80	$27.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Allen, Marianne Total**			$27.90		
8/3/2005	0.50	Atwood, Kathie	Secretary	$32.46	$16.23	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Atwood, Kathie Total**			$16.23		
8/3/2005	0.50	Blassetti, Sara	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Blassetti, Sara Total**			$6.05		
05-06	23.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$2,207.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
05-06	0.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$46.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,254.08		
8/3/2005	0.50	Duran, Susana	FA Specialist	$27.02	$13.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Duran, Susana Total**			$13.51		
8/3/2005	0.50	Ekhsigian, Arda	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Ekhsigian, Arda Total**			$23.91		
05-06	5,672.90	Enrollment Office Staff	Collecting Fees	$16.10	$91,333.69	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,006.60	Enrollment Office Staff	Collecting Fees	$16.10	$96,706.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,450.40	Enrollment Office Staff	Collecting Fees	$16.10	$87,751.44	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	17,129.90	**Enrollment Office Staff Total**			$275,791.39		
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Receiving waiver applications	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	83.80	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,292.77	Entering approved application information into district records; providing student award letter	Waiving student fees
	412.60	**Financial Aid Office Staff (BOG A/B) Total**			$11,288.75		
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Receiving waiver applications	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	138.40	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$3,786.62	Entering approved application information into district records; providing student award letter	Waiving student fees
	242.20	**Financial Aid Office Staff (BOG C) Total**			$6,626.60		
8/3/2005	0.50	Gilliland, Shannon	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gilliland, Shannon Total**			$14.24		
8/3/2005	0.50	Gutierrez, Dorothy	FA Advisor	$45.65	$22.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gutierrez, Dorothy Total**			$22.83		
05-06	2.00	Hicks, Patricia	Lead Cashier	$37.98	$75.96	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.96		
8/3/2005	0.50	Huerta, Maggie	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Huerta, Maggie Total**			$14.24		
8/3/2005	0.50	MacCallum, Michael	FA Counselor	$72.70	$36.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**MacCallum, Michael Total**			$36.35		
8/3/2005	0.50	Menjivar, Juan Franc	FA Specialist	$25.68	$12.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Menjivar, Juan Franc Total**			$12.84		
8/3/2005	0.50	Nachreiner, Ron	Office Assistant	$19.50	$9.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nachreiner, Ron Total**			$9.75		

Long Beach Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2 06
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Nguyen, Hue	FA Specialist	$33.28	$16.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nguyen, Hue Total**			$16.64		
8/3/2005	0.50	Overton, Kimberly	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Overton, Kimberly Total**			$6.05		
8/3/2005	0.50	Polly, Irene	FA Specialist	$31.64	$15.82	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Polly, Irene Total**			$15.82		
8/3/2005	0.50	Pope, Michele	FA Specialist	$29.42	$14.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Pope, Michele Total**			$14.71		
05-06	2.00	Robinson, Stacey	Lead Cashier	$25.43	$50.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Robinson, Stacey Total**			$50.86		
8/3/2005	0.50	Skille, Steve	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Skille, Steve Total**			$14.24		
8/3/2005	0.50	Stepan, Betty	FA Counselor	$61.24	$30.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Stepan, Betty Total**			$30.62		
8/3/2005	0.50	Sweet-Kelly, Deborah	Office Assistant	$24.55	$12.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Sweet-Kelly, Deborah Total**			$12.28		
8/3/2005	0.50	Thim, Monica	FA Specialist	$29.14	$14.57	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Thim, Monica Total**			$14.57		
8/3/2005	0.50	Tim, Sophorn	FA Data Software Specialist	$7.80	$3.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Tim, Sophorn Total**			$3.90		
8/3/2005	0.50	Turner, Lydia	FA Counselor	$53.53	$26.77	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Turner, Lydia Total**			$26.77		
8/3/2005	0.50	Vaughn, Dara	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Vaughn, Dara Total**			$14.24		
8/3/2005	0.50	Yentch, Richard	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Yentch, Richard Total**			$23.91		
	17,824.20	**Grand Total**			$296,479.24		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,194,957		$49,194,957	$903,650	$48,291,307
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,663,844		2,663,844	28,676	2,635,168
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	196,791		196,791	1,058	195,733
Other Instructional Administration & Instructional Governance	6090	252,724		252,724	1,132	251,592
Instructional Support Services	6100					
Learning Center	6110	962,512		962,512	10,164	952,348
Library	6120	1,852,763		1,852,763	3,719	1,849,044
Media	6130	952,522		952,522	62,578	889,944
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	103,287		103,287		103,287
Admissions and Records	6200	2,052,489		2,052,489	1,008	2,051,481
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,183,080		3,183,080	24,985	3,158,095
Matriculation and Student Assessment	6320	968,830		968,830	18,067	950,763
Transfer Programs	6330	648,165		648,165	399	647,766
Career Guidance	6340	266,960		266,960	2,119	264,841
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	743,541		743,541	20,102	723,439
Subtotal		$64,042,465	$0	$64,042,465	$1,077,657	$62,964,808

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,010,638		$1,010,638	$754	$1,009,884
Health Services	6440	442,697		442,697	3,600	439,097
Student Personnel Admin.	6450	1,267,712		1,267,712	8	1,267,704
Financial Aid Administration	6460	2,605,567		2,605,567	76,718	2,528,849
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	590,216		590,216	53,774	536,442
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,171,008		2,171,008	2,171,008	0
Custodial Services	6530	2,809,091		2,809,091	2,809,091	0
Grounds Maintenance and Repairs	6550	669,585		669,585	669,585	0
Utilities	6570	1,914,073		1,914,073	1,914,073	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,033,837		6,033,837	6,033,837	0
General Inst. Support Services	6700					
Community Relations	6710	515,752		515,752	515,752	0
Fiscal Operations	6720	2,503,134		2,503,134	2,503,134	0
Human Resources Management	6730	1,482,567		1,482,567	1,482,567	0
Noninstructional Staff Benefits & Incentives	6740	272,673		272,673	272,673	0
Staff Development	6750	144,599		144,599	144,599	0
Staff Diversity	6760	25,685		25,685	25,685	0
Logistical Services	6770	1,562,060		1,562,060	1,562,060	0
Management Information Systems	6780	3,112,541		3,112,541	3,112,541	0
Subtotal		$93,175,900	$0	$93,175,900	$24,429,116	$68,746,784

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	165,228		165,228	165,228	0
Community Services and Economic Development	6800					
Community Recreation	6810	81,018		81,018		81,018
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	3,657,034		3,657,034	110,701	3,546,333
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	26,593		26,593		26,593
Farm Operations	6930					
Food Services	6940					
Parking	6950	372,718		372,718	134,749	237,969
Student and Co-curricular Activities	6960	720,319		720,319		720,319
Student Housing	6970					
Other	6990	-8,463		-8,463		-8,463
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$98,190,347	$0	$98,190,347	$24,839,794	$73,350,553
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				33.86%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	347,491	7,097	8,251	31,150		393,989
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,883,586	63,359	47,516	7,914		2,002,375
Business and Management	0500	2,851,997	91,223	36,335	61,421		3,040,976
Communications	0600						
Computer and Information Science	0700	1,146,557	42,266	37,729	62,584		1,289,136
Education	0800	2,963,053	257,204	46,820	66,557		3,333,634
Engineering and Related Industrial Tech.	0900	3,764,729	177,615	285,630	322,702		4,550,676
Fine and Applied Arts	1000	5,227,230	197,222	95,495	91,665		5,611,612
Foreign Language	1100	1,208,644	58,346	5,695	1,335		1,274,020
Health	1200	2,924,793	229,799	114,941	62,958		3,332,491
Consumer Education and Home Economics	1300	2,988,994	170,056	52,390	15,977		3,227,417
Law	1400						
Humanities (Letters)	1500	8,403,710	392,567	39,374	71,897		8,907,548
Library Science	1600	813,607	115,323	69,875	78,212		1,077,017
[illegible]ematics	1700	2,921,689	93,488	14,055			3,029,232
[illegible]ary Studies	1800						
Physical Sciences	1900	1,436,078	32,431	21,798	14,913		1,505,220
Psychology	2000						
Public Affairs and Services	2100	649,794	35,454	471,754	1,204		1,158,206
Social Sciences	2200	3,727,451	124,631	20,862	3,517		3,876,461
Commercial Services	3000	557,157	29,192	17,863	5,368		609,580
Interdisciplinary Studies	4900	386,731	39,779	1,043	4,276		431,829
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	543,538					543,538
Subtotal - Instructional Activities	**599**	44,746,829	2,157,052	1,387,426	903,650		49,194,957

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,462,563	172,605	28,676		2,663,844
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		193,355	2,378	1,058		196,791
Other Instruct. Admin. & Instruct. Governance	6090		249,932	1,660	1,132		252,724
Subtotal - Instructional Administration	**6000**		2,905,850	176,643	30,866		3,113,359
Instructional Support Services (6100)							
Learning Center	6110		929,938	22,410	10,164		962,512
Library	6120		1,769,278	79,766	3,719		1,852,763
Media	6130		875,341	14,603	62,578		952,522
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		57,100	46,187			103,287
Subtotal - Instructional Support Services	**6100**		3,631,657	162,966	76,461		3,871,084
Admissions and Records	**6200**		1,926,090	125,391	1,008		2,052,489
[illegible]ent Counseling and Guidance (6300)							
[illegible]ounseling and Guidance	6310		3,092,458	65,637	24,985		3,183,080
Matriculation and Student Assessment	6320		905,070	45,693	18,067		968,830
Transfer Programs	6330		539,405	108,361	399		648,165
Career Guidance	6340		246,385	18,456	2,119		266,960
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,783,318	238,147	45,570		5,067,035

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		704,967	18,472	20,102		743,541
Extended Opportunity Prgms. & Services (EOPS)	6430		980,606	29,278	754		1,010,638
Health Services	6440		344,951	94,146	3,600		442,697
Student Personnel Administration	6450		1,249,634	18,070	8		1,267,712
Financial Aid Administration	6460		2,152,508	376,341	76,718		2,605,567
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		429,918	106,524	53,774		590,216
Subtotal - Other Student Services	**6400**		5,862,584	642,831	154,956		6,660,371
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,805,534	342,333	23,141		2,171,008
Custodial Services	6530		2,660,805	145,492	2,794		2,809,091
Grounds Maintenance and Repairs	6550		631,499	36,500	1,586		669,585
Utilities	6570			1,914,073			1,914,073
Other Operation and Maintenance of Plant	6590						
Total - Operation and Maintenance of Plant	6500		5,097,838	2,438,398	27,521		7,563,757
Planning, Policymaking, and Coordination	**6600**		3,407,925	2,616,442	9,470		6,033,837

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		412,457	103,295			515,752
Fiscal Operations	6720		1,857,114	645,804	216		2,503,134
Human Resources Management	6730		1,404,493	70,024	8,050		1,482,567
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		272,673				272,673
Staff Development	6750		126,104	17,424	1,071		144,599
Staff Diversity	6760			25,685			25,685
Logistical Services	6770		1,290,305	148,728	123,027		1,562,060
Management Information Systems	6780		2,168,816	820,708	123,017		3,112,541
Other General Institutional Support Services	6790		150,980	14,248			165,228
Subtotal - General Institutional Support Services	**6700**		7,682,942	1,845,916	255,381		9,784,239
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		77,010	4,008			81,018
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		2,929,472	616,861	110,701		3,657,034
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		3,006,482	620,869	110,701		3,738,052

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		26,593				26,593
Farm Operations	6930						
Food Services	6940						
Parking	6950		163,899	74,070	134,749		372,718
Student and Co-curricular Activities	6960		702,958	17,361			720,319
Student Housing	6970						
Other Ancillary Services	6990			(8,463)			(8,463)
Subtotal - Ancillary Services	**6900**		893,450	82,968	134,749		1,111,167
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
ng-Term Debt	7210						
ax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					3,648,802	3,648,802
Other Outgo	7330					516,328	516,328
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,165,130	4,165,130
TOTAL EXPENDITURES and OTHER OUTGO	**391**	44,746,829	41,355,188	10,337,997	1,750,333	4,165,130	102,355,477

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	66,740
Avg. time p/account	5.1
Total Time (in minutes)	340374
Per Hour	60
Hours Worked **(** Activity 11)**	**5672.9**
***EFC 2** **(Not provided by client - no substitute multiplier can be used for activity code 12)**	
Avg. time p/student	8.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 12)**	**0.0**
***EFC 1**	66,740
Avg. time p/question	5.4
Total Time (in minutes)	360396
Per Hour	60
Hours Worked **(** Activity 13)**	**6006.6**
***EFC 2** **(Not provided by client - substituted multiplier *EFC 1)**	66,740
Avg. time p/file	4.9
Total Time (in minutes)	327026
Per Hour	60
Hours Worked **(** Activity 14)**	**5450.4**
***EFC 4** **(Not provided by client)**	
Avg. time p/account (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5 (Not provided by client)**	
Avg. time p/student (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary for BOG A/B

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	13,152
Avg. time p/question	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 21)**	**109.6**
***EFW 6**	13,152
Avg. time p/application	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 22)**	**109.6**
***EFW 6**	13,152
Avg. time p/evaluation	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 23)**	**109.6**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,056
Avg. time p/application	0.5
Total Time (in minutes)	5028
Per Hour	60
Hours Worked **(** Activity 25)**	**83.8**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 1C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary for BOG C

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

	***EFW 6**	2,076
	Avg. time p/question	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 21)**	**34.6**
	***EFW 6**	2,076
	Avg. time p/application	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 22)**	**34.6**
	***EFW 6**	2,076
	Avg. time p/evaluation	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 23)**	**34.6**
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 24)**	**0.0**
***	***EFW 7 (used *EFW 6)**	2,076
	Avg. time p/application	4.0
	Total Time (in minutes)	8304
	Per Hour	60
	Hours Worked **(** Activity 25)**	**138.4**
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

*** Normally we would not substitute *EFW 6 (# of applications received) for *EFW 7 (# of applications approved) because *EFW 6 would be a larger number than *EFW 7. Clients #'s for *EFW 6 (# of applications received) for BOG C was much, much lower than the CCCCO's website #'s for *EFW 7 (# of applications approved), so therefore we used multiplier *EFW 6 for code 25.

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See in workpapers of 04-05 claim only.)
Initial year claim 98-99 through 05-06. Ane timestudy used for all initial years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Acosta, Adelino	Admissions & Records Tech II	5	8	5	5		
Alvial, Bertha	Registration Worker	5	8	5	5		
Alvial, Lefia	Registration Worker	5	8	5	5		
Anderson, Amy	Registration Aide	5	8	5	5		
Brackman, Pamela	Admissions & Records Tech II	5	8	5	4		
Bronilla, Cheryl	Registration Aide	5	8	5	5		
Brown, Eileen	Admissions & Records Tech II	5	8	5	5		
Castillo, Josefina	Registration Worker	5	8	5	5		
Chamlern, Sombat	Registration Aide	5	8	5	5		
Clark, Kamryn	Registration Worker	5	8	5	5		
Collado, Carmen	Registration Aide	5	8	5	5		
Combs, April	Temporary Office Worker I	5	8	5	5		
De La Rama, Allen	Registration Aide	5	8	5	5		
De La Rama, Micah	Temporary Office Worker I	5	8	5	5		
Deweese, James	Registration Aide	5	8	5	5		
Dorsey, Krystal	Registration Aide	5	8	5	5		
Fairmen, Audrey	Registration Aide	5	8	5	5		
Franco, Dolores	International Admissions/Records Tech. II	5	9	7	5		
Galvan, Karen	Registration Worker	5	8	5	5		
Garces, Tim	Registration Worker	5	8	5	5		
Gardner, Darice	Registration Worker	5	8	5	5		
Gonzales, Mary	Registration Aide	5	8	5	5		
Heth, Linda	Temporary Office Worker I	5	8	5	5		
Hicks, Patricia	Lead Cashier	5	5	5	5	5	5
Hiemstra, Torri	Registration Aide	5	8	5	5		
Jelin, Ivan	Registration Worker	5	8	5	5		
Kemp, Erma	Registration Worker	5	5	8	5		
Kinsella, Denise	International Program Manager			10			
Lemle, Barbara	Casual - Registrar Worker	5	8	5	5		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II	5	7	6	6		
Liebrecht, Cathy (01-02)	Registration Aide	5	8	5	5		
MacCullen, Jana	Registration Worker	5	8	5	5		
MacCullen, Jennifer	Registration Worker	5	8	5	5		
MacCullen, Matthew	Registration Worker	5	8	5	5		
MacCullen, Ruth	Associate Registrar	10	12	15	8		
Maiava, Tulia	Registration Aide	5	8	5	5		
McKibben, Emily	Registration Worker	5	8	5	5		
Mello, Sandra (01-02)	Registration Aide	5	8	5	5		
Mello, Sandra (98-99 to 00-01)	Registration Worker	5	8	5	5		

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Mendoza, Camelia	Registration Worker	5	8	5	5		
Milkes, Sharon	Senior Clerk/A&R Tech. II	6	9	6	5		
Miller, Margaret	Admissions & Records Tech II	5	8	5	5		
Moll, Corrin	Registration Worker	5	8	5	5		
Nguyen, Kevin	Registration Worker	5	8	5	5		
Nichols, Anthony	Registration Worker	5	8	5	5		
Odell, Renee	Registration Aide	5	8	5	5		
Olsen, Sharon	Registration Aide	5	8	5	5		
Parker, Jared	Registration Worker	5	8	5	5		
Pettit, Marcia	Associate Registrar	6	9	8	4		
Pouono, Pasadena	Registration Aide	5	8	5	5		
Quintus, Samantha	Registration Aide	5	8	5	5		
Robinson, Stacey	Lead Cashier	3	4	2	1	6	3
Rowan, Loretta	Registration Aide	5	8	5	5		
Rubalcava, Jorge	Registration Worker	5	8	5	5		
Rubalcava, Maria	Records Specialist	6	9	6	4		
Ruelas, Guadalupe	Admissions & Records Tech II	6	9	5	5		
Sanders, Sherrie	Registration Worker	5	8	5	5		
Satele, Leilva	Registration Aide	5	8	5	5		
Satele, Tauasosi Mary	Senior Clerk	4	7	8	4		
Stewart, Lisa	Records Specialist	4	8	5	4		
Tait, Sandra	Registration Worker	5	8	5	5		
Tarrab, Wafa	Registration Worker	5	8	5	5		
Togafau, Hubert	Registration Aide	5	8	5	5		
Tran, Christine	Admissions & Records Tech II	6	8	5	4		
Valle, Heather	Registration Worker	5	8	5	5		
Wade, Cherri	Admissions & Records Tech II	4	8	5	4		
Watson, Katherine	Registration Aide	5	8	5	5		
Wilson, Danny	Registration Aide	5	8	5	5		
Yarbrough, Charlotte	Admissions & Records Tech II	6	9	5	8		
Yost, Mary Margaret	Registration Aide	5	8	5	5		
Average		**5.1**	**8.0**	**5.4**	**4.9**	5.5	4.0

Conclusion: Findings go forward to Schedule 1A.

Only two responses to codes 15 and 16 - so these averages were not used.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Enrollment Fee Collection Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
Bolded PHR's -- see email from client dated 5/18/07 and fax cover sheet dated 5/21/07.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					$26.59	$30.47	$30.47	$30.77
Alvial, Bertha	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Alvial, Lefia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Anderson, Amy	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brackman, Pamela	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Bronilla, Cheryl	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brown, Eileen	Admissions & Records Tech II				$26.11	$31.08	$35.64	$35.64	$37.98
Castillo, Josefina	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Chamlern, Sombat	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Clark, Kamryn	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Collado, Carmen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Combs, April	Temporary Office Worker I					$14.30	$14.30	$14.30	$14.30
De La Rama, Allen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
e La Rama, Micah	Temporary Office Worker I				$12.10		$12.10		
Deweese, James	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Dorsey, Krystal	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Fairmen, Audrey	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Franco, Dolores	International Admissions/Records Tech. II				$29.56	$29.56	$33.85	$35.64	$36.00
Galvan, Karen	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Garces, Tim	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gardner, Darice	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gonzales, Mary	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Heth, Linda	Temporary Office Worker I				$12.10	$12.10	$12.10		
Hicks, Patricia	Lead Cashier				$26.11	$31.08	$35.64	$37.60	$37.98
Hiemstra, Torri	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Jelin, Ivan	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kemp, Erma	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kinsella, Denise	International Program Manager				$26.11	$31.08	$31.27	$37.04	$41.30
Lemle, Barbara	Casual - Registrar Worker				$9.08	$9.08	$9.08		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II							$25.10	$26.35
Liebrecht, Cathy (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**		
MacCullen, Jana	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Jennifer	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Matthew	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Ruth	Associate Registrar				$32.71	$34.34	$38.59		$40.99
Maiava, Tulia	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
McKibben, Emily	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (98-99 to 00-01)	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Mendoza, Camelia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Milkes, Sharon	Senior Clerk/A&R Tech. II				$22.74	$25.28	$28.93	$28.93	$30.77
Miller, Margaret	Admissions & Records Tech II				$26.56	$28.02	$32.09	$33.85	$34.19
Moll, Corrin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nguyen, Kevin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nichols, Anthony	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Odell, Renee	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Olsen, Sharon	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Parker, Jared	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Pettit, Marcia	Associate Registrar				$37.61	$42.27	$42.27	$42.27	$42.27
Pouono, Pasadena	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Quintus, Samantha	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Robinson, Stacey	Lead Cashier							$25.43	$25.43
Rowan, Loretta	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Jorge	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Maria	Records Specialist				$21.78	$27.30	$30.47	$32.09	$32.41
Ruelas, Guadalupe	Admissions & Records Tech II				$25.21	$26.59	$30.47	$30.77	$30.77
Sanders, Sherrie	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Leilva	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Tauasosi Mary	Senior Clerk				$25.21	$26.59	$32.09	$32.09	$32.41
Stewart, Lisa	Records Specialist				$23.96	$26.59	$30.47	$30.47	$30.77
Tait, Sandra	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tarrab, Wafa	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Togafau, Hubert	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tran, Christine	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Valle, Heather	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wade, Cherri	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Watson, Katherine	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wilson, Danny	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Yarbrough, Charlotte	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Yost, Mary Margaret	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Average PHR		**$11.22** *	**$11.79** *	**$12.38** *	**$12.99**	**$13.97**	**$15.00**	**$15.47**	**$16.10**

* Note that for FY's 98-99, 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Fee Waiver Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
The fiscal years that staff were involved in was taken from lists by fiscal year made by T. DuBois from LBCCCD.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Alvarado, Olga				$24.79	$29.52	$31.33		
Avila, Jason							$22.93	$22.93
Deering, JoAnn	FA Spec. 7/1/02 -- FA Tech. 1/1/02			$24.79	$29.52			
Duran, Susana	FA Spec. 1/1/04						$25.30	$27.02
Gilliland, Shannon	Account Tech. II FA 7/1/05						$22.93	
Huerta, Maggie				$22.34	$26.59	$28.19	$28.19	$28.47
Kwon, Jennifer								$24.38
Lane, Alan								
Lim, Janice								$24.38
McKibbin, Lori				$27.98				
Menjivar, Juan Franc	FA Spec.					$22.93	$24.13	$25.68
Nguyen, Hue				$26.16	$31.14	$31.33	$31.33	$33.28
Polly, Irene				$24.79	$29.52	$31.14	$31.33	$31.64
Pope, Michelle	FA Spec.				$28.02			
Ruiz, Noelia				$26.56	$23.82	$23.76		
Skille, Steve	Account Tech. II FA					$25.43		
Thim, Monica								
Vaughn, Dara							$26.75	$28.47
Average PHR		**$22.99** *	**$24.14** *	**$25.34**	**$28.30**	**$27.73**	**$26.61**	**$27.36**

* Note that for FY's 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate productive houlry rates for prior fiscal years not provided by client.
Source: SixTen calculated PHR's from annual salary provided by client.
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	**Admissions & Records Tech II**					$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	22.96	24.11	25.32	26.59				
	Divided by 5%	1.05	1.05	1.05	1.05				
	Current fiscal year phr	$21.87	$22.96	$24.11	$25.32				
Brown, Eileen	**Admissions & Records Tech II**				$26.11	$31.08	$35.64	$35.64	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Combs, April	**Temporary Office Worker I**					$14.30	$14.30	$14.30	$14.30
	Hourly employee - so used same hrly rate for missing year				$14.30				
De La Rama, Micah	**Temporary Office Worker I**				$12.10		$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Franco, Dolores	**Int'l Admissions/Records Tech. II**				$29.56	$29.56	$33.85	$35.64	$36.00
	Previous fiscal year phr	26.81	28.15	29.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$25.53	$26.81	$28.15					
Heth, Linda	**Temporary Office Worker I**				$12.10	$12.10	$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Hicks, Patricia	**Lead Cashier**				$26.11	$31.08	$35.64	$37.60	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Hilkes, Sharon	**Senior Clerk/A&R Tech. II**				$22.74	$25.28	$28.93	$28.93	$30.77
	Previous fiscal year phr	20.63	21.66	22.74					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$19.65	$20.63	$21.66					
Hiller, Margaret	**Admissions & Records Tech II**				$26.56	$28.02	$32.09	$33.85	$34.19
	Previous fiscal year phr	24.10	25.30	26.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.95	$24.10	$25.30					

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Pettit, Marcia	**Associate Registrar**				$37.61	$42.27	$42.27	$42.27	$42.27
	Previous fiscal year phr	$34.11	$35.82	37.61					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$32.49	$34.11	$35.82					
Rubalcava, Maria	**Records Specialist**				$21.78	$27.30	$30.47	$32.09	$32.41
	Previous fiscal year phr	19.75	20.74	21.78					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$18.81	$19.75	$20.74					
Ruelas, Guadalupe	**Admissions & Records Tech II**				$25.21	$26.59	$30.47	$30.77	$30.77
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$21.78	$22.87	$24.01					
Satele, Tauasosi Mary	**Senior Clerk**				$25.21	$26.59	$32.09	$32.09	$32.41
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$21.78	$22.87	$24.01					
Ste t, Lisa	**Records Specialist**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					
Wade, Cherri	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					
Yarbrough, Charlotte	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					

Conclusion: Findings go forward to the EFCW-2.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s.
(See in workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source			Totals 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students		59,221	62,569	63,787	66,733	75,701	72,546	64,570	66740
EFC 2	1.8-1 2.	Paid Enrollment fees									
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)									
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.								
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.								
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327	13,152	
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473	10,056	
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128	2,076	
EFW 7	1.8-3 2.	Waivers Approved	X -								
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Summer Term

Data Current As Of May 17, 2007 02:50:46

Total Headcount	13,073

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Fall Term

Data Current As Of May 17, 2007 02:50:56

Total Headcount	25,214

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach For 2006 Spring Semester

Data Current As Of May 17, 2007 02:51:13

Total Headcount	25,378

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Community College District

Patricia Hicks — Employee Name

Lead Cashier — Exact Position Title

Fiscal Services/PCC Campus 562-938-3906 — College/Department/Location, Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: N/A

B. Enrollment Waiver Process: N/A

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 2 2 2 2 2 2 2 2 hrs.

B. Enrollment Waiver Process: N/A

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

N/A

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

N/A

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Comm. College District

Stacey Robinson — Employee Name

Lead Cashier — Exact Position Title

Fiscal Services - LAC — College/Department/Location

(562) 938-4455 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	(05-06)
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2005-06

Toni Du Bois — Employee Name

Dean, Stu. Fin Aid — Exact Position Title

Financial Aid — Dept. & Location #

x4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
6/15/05	write policy + procedure for 05-06 BOGFW		.5	
8/3/05	train staff on changes to BOGFW (RDP)		.5	
/ /				
/ /				
/ /				
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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. Du Bois — Employee Name: (print)

Dean, Stu. Fin Aid — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2004-05 2005-2006

Toni DuBois Dean, Student Fin Aid

Employee Name Exact Position Title

FinanaalAid x4573 (12mo/11mo/10mo/hrly)

Dept. & Location # Telephone # Work year length

Date	Description of Activities		Time in Hours	Leave Blank
4/29/04	write policy + procedure for 0405 BOG FW		1.00	
9/15/05	work on MIS data for BOG		1.5	
9/22/05	make corrections to BOG-MIS data		3.0	
9/28/05	make corrections to BOG-MIS data		5.0	
10/06/05	review final BOG-MIS data		.5	
/ /				
/ /				
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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois Dean, Student Fin. Aid

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

1.7-3 AND 1.8-3

AU6 Time and Stats for BOG FW A & B BOG C

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 13,152 applications			
/ /	into PS Bolt-on for			
/ /	BOG FW A+B			
/ /	2 mins. per application			
/ /	for eligibility determination			
/ /	and input		438.4	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to EdExpress			
/ /	for 2,076 students			
/ /	at 7 minutes per			
/ /	student		242.2	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Student Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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TONI DUBOIS' Time Sheet

15,228

Attachment for ETCW 2.2

2005-06

Financial Aid Specialists

Hue Nguyen – LAC
Irene Poly – PCC
Maggie Huerta – LAC
Michele Pope – LAC
Monica Thim – LAC
Jenifer Kwok – LAC
Jason Avila – LAC
Susana Duran – PCC
Juan Franc Menjivar – PCC
Dara Vaughn – PCC
Janice Lim – PCC

Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

training on RDP + BOGFW
Activity

Queen Mary
Location

8-3-05
Date

10 to 10:30 am
Time

NAME	POSITION/TITLE	LOCATION	PREP TIME
Michael MacCallum	FA Counselor	LAC	
Betty Stepan	FA Counselor	PCC	
Marianne Allen	FA Counselor	LAC	
Lydia Turner	FA Counselor	PCC	
Sara Blassetti	FA - PT Counselor	LAC/PCC	
Kimberly Overton	FA - PT Counselor	LAC/PCC	
Dorothy Gutierrez	FA Advisor	LAC	
Richard Yentch	Assoc. Dir. FA	LAC	
Arda Eksigian	Assoc. Dir FA	PCC	
Steve Skille	Acct Tech II FA	LAC	
Shannon Gilliland	Acct Tech II FA	LAC	
Deborah Sweet-Kelly	Office Asst.	LAC	

Brief description of the purpose of the meeting: training on changes to 2005-06 BOG FW to include Registered Domestic Partner (RDP) definitions

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean Stud. Fin Aid
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Continuation 2005-06
8-3-05 staff training

✓ Ron Nachreiner	Office Asst.	PCC
✓ Kathie Atwood	Secretary	LAC
✓ Maggie Huerta	FA Specialist	LAC
✓ Michele Pope	FA Specialist	LAC
✓ Hue Nguyen	FA Specialist	LAC
✓ Monica Thim	FA Specialist	LAC
✓ Susana Duran	FA Specialist	PCC
✓ Dara Vaughn	FA Specialist	PCC
✓ J. Franc Menjivar	FA Specialist	PCC
✓ Irene Polly	FA Specialist	PCC
Sophorn Tim	FA Data Software Spec	LAC

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

ADELINO ACOSTA
Employee Name

AIR II
Exact Position Title

938-3993
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

BERTHA ALVIAL
Employee Name

Registration worker
Exact Position Title

938-3943
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 ~~99-00~~ (00-01) 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

LEFIA ALVIAL
Employee Name

registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College — District
Admissions / LAC — Department/Location
Amy Anderson — Employee Name
Registration Aide — Exact Position Title
Telephone # — 12mo/11mo/10mo/hrly (circle) Work year length
Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH COMMUNITY COLLEGE DISTRICT — District
ADMISSIONS & RECORDS TECH I LAC — Department/Location

PAMELA BRACKMAN — Employee Name
ADMISSIONS & RECORDS TECH I — Exact Position Title

562-938-3948 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ OOPS OOPS

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela Brackman Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Cheryl Bronilla
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

EILEEN BROWN
Employee Name

A/R II
Exact Position Title

938-3948
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

JOSEFINA CASTILLO
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sombat Chamlern
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION - PCC
Department/Location

KAMRYN CLARK
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Carmen Collado
Employee Name

Registration Aide
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

April Combs
Employee Name

Temporary Office Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Allen J DeLa Rama
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/~~hrly~~
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Micah De La Rama
Employee Name

Temporary Office Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

James Deweese
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

Krystal Dorsey
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

~~Registration Aide~~ Admissions
Department/Location

Audrey Fairmen
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Department/Location

Dolores Franco
Employee Name

Int'l Admissions/Records Tech II
Exact Position Title

Ext. 4528
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Dolores Franco Date 5 3 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission/PCC
Department/Location

Karen Galvan
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/RCC
Department/Location

TIM CARLES
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Darice Gardner
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Mary Gonzales
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Linda Heth
Employee Name

Temporary Office Worker I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - PCC Campus
Department/Location

Patricia Hicks
Employee Name

Lead Cashier
Exact Position Title

562-938-3906
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2-5 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-5 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2-5 min	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-5 min	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Torri Hiemstra
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION / ACC
Department/Location

IVAN JELIN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS - PCC
Department/Location

ERMA KEMP
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College Dist. — District
International Student Program — Department/Location
Denise Kinsella — Employee Name
International Program Manager — Exact Position Title
562-938-4743 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)
Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Kinsella — Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIAN & RECORDS - PCC
Department/Location

Barbara Lemle
Employee Name

CASUAL - REGISTRAR WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Admissions/LAC
Department/Location

Catherine Liebrecht
Employee Name

A+R Tech II
Exact Position Title

4288
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ only through 2003
~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses. ✓	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report. ✓	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. ✓	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. ✓	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine Liebrecht Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Cathy Liebrecht
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Registration - admission - PCC
Department/Location

Jana mac cullen
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

REGISTRATION-ADMISSION/PCC
Department/Location

JENNIFER MAC CULLEN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / Rec
Department/Location

Matthew MacMillen
Employee Name

Registration
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

RUTH MAC CULLEN
Employee Name

ASSOCIATE REGISTRAR
Exact Position Title

938-3940
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Tulia N. Maiava
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - Registration - PCC
Department/Location

Emily McKibben
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sandra Mello
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Sandra Mello
Employee Name

Registration worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Camelia Mendoza
Employee Name

Registration Worker / LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

PCC A&R
Department/Location

Sharon Mikes
Employee Name

Sr Clerk / AIR Tech II
Exact Position Title

(562) 938-3947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
✓ **Code 13** Answering Questions and/or referring student to the appropriate person for an answer.	6					
✓ **Code 14** Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Mikes Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Margaret Miller
Employee Name

Admissions & Records Tech II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Coreen Moll
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - PCC
Department/Location

Kevin nguyen
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Anthony Nichols
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Renee Odell
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/~~hrly~~ Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sharon Olsen
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/~~hrly~~
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Jared Parker
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Marcia Pettit
Employee Name

Associate Registrar
Exact Position Title

938-4719
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Pettit Date 4/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Pasadena Pouono
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Samantha Quintus
Employee Name

Registration Aid
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
Fiscal Services - LAC Campus. — Department/Location
Stacey ROBINSON — Employee Name
Lead Cashier — Exact Position Title
(562) 938 4455 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson — Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Loretta Rowan
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admission / PCE
Department/Location

JORGE RUBALCAVA
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Admissions / PCC
Department/Location

Maria L Rubalcava
Employee Name

Records Specialist
Exact Position Title

562) 938-3994 Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica L Rubalcava Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

A&R PCCH II
Department/Location

Guadalupe Ruelas
Employee Name

A&R TECH II.
Exact Position Title

5629383946
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Guadalupe Ruelas Date 5/3/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Sherrie Sanders
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Leilya Satele
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

Admissions / LAC
Department/Location

Tauasosi Mary Satele
Employee Name

Senior Clerk
Exact Position Title

562 938 4138
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T Mary Satele Date 5/2/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
A+R/ PCC — Department/Location
Lisa Stewart — Employee Name
Records Specialist — Exact Position Title
562 938 3943 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-99) 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Stewart Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions/PCC
Department/Location

Sandra Tait
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Registration - Admission / PCC
Department/Location

WARA TARRAB
Employee Name

Registration Worker & LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Hubert Togafau
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH
District

ADMISSIONS
Department/Location

CHRISTINE TRAN
Employee Name

ADMISSIONS TECH II
Exact Position Title

938-4748
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Heather Valles
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

A & R CLAC)
Department/Location

CHERRI WADE
Employee Name

Admissions / Records Tech II
Exact Position Title

(562) 938 4137
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cher Wade Date 05/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Katherine Watson
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly (circle)
Telephone # Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Danny Wilson
Employee Name

Registration Aid
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature DL Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.B.C.C.D.
District

AgR / PCC
Department/Location

CHARLOTTE YARBROUGH
Employee Name

AgR Tech. II
Exact Position Title

(562) 938-3949
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Mary Margaret Yost
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	½				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	½				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	½				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	½				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori M Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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2005-06

Financial Aid Specialists

Hue Nguyen - LAC
Irene Poly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Monica Thim - LAC
Jenifer Kwok - LAC
Jason Avila - LAC
Susana Duran - PCC
Juan Franc Menjivar - PCC
Dara Vaughn - PCC
Janice Lim - PCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG - C

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

See attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-4-07

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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2005-06

Financial Aid Specialists

Hue Nguyen - LAC
Irene Polly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Monica Thim - LAC
Jenifer Kwok - LAC
Jason Avila - LAC
Susana Duran - PCC
Juan Franc Menjivar - PCC
Dara Vaughn - PCC
Janice Lim - PCC

LONG BEACH 1.8-1 #1

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Summer	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
Fall	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,296
Spring	22,594	24,619	25,700	28,722	29,779	28,722	25,686	26,444
Total	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740

Rec'd from Hannah Alford - Research Analyst
5/23/07

1.4-3 AND 1.8-3

BOG FW A & B
BOG C

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 13,152 applications			
/ /	into PS Bolt-on for			
/ /	BOG FW A+B			
/ /	2 mins. per application			
/ /	for eligibility determination			
/ /	and input		438.4	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to EdExpress			
/ /	for 2,076 students			
/ /	at 7 minutes per			
/ /	student		242.2	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Student Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

15,228

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Long Beach Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ N/A	$ 2,718,590	$ 2,520,656	$ 2,748,095	$ 2,837,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 5-24-07

Toni M. DuBois
Employee Name: (print)

Dean, Stud. Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
CREASY, RICHARD	CUSTODIAL SUPERVISOR(Retired 12/04)	$ 46.65	
CROCKARD, BRUCE	DIRECTOR, HR & STAFF DIVERSITY		$ 79.51
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)		
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 71.03	$ 74.57
de la RAMA, CURIE	ADMINISTRATIVE SECRETARY	46.84	$ 49.77
DORSEY, CHRISTOPHER	ACCOUNTING TECHNICIAN I	$ 43.40	$ 48.23
DUBOIS, TONI	DIRECTOR, FINANCIAL AID	$ 89.46	$ 93.92
DUNCAN, YVONNE	PROJECT MANAGER-GOOD BEGINNINGS	$ 69.70	$ 69.70
ECKMAN, JONATHON	CUSTODIAN	$ 36.09	$ 38.33
EKHSIGIAN, ARDA	ASSOCIATE DIRECTOR, FINANCIAL AID	$ 56.89	$ 56.89
FALTADO, EXVI	ADMINISTRATIVE SECRETARY	37.95	$ 38.33
FERNANDEZ, YOLANDA	CLERK	38.01	$ 38.38
FLOYD, GREG	DEPUTY DIRECTOR, FACILITIES	$ 79.79	$ 79.79
FOOTDALE, JOE	COLLEGE POLICE SHIFT SUPERVISOR(Layoff 8/03)		
FORD-PANEK, EMMA	ADMINISTRATIVE CONTRACT TECH	$ 42.59	$ 44.63
FYLPAA, JOHN	DEAN, STUDENT AFFAIRS	$ 98.62	$ 98.62
GARCIA, KELLY	ADMIN SECRETARY	$ 52.14	$ 52.14
GIBBINS, ANITA	MANAGER, WOMENS CENTER	$ 56.89	$ 56.89
GONZALES, GLORIA	SENIOR CLERK, SUP'T-PRESIDENTS OFFICE		
GUIDAS, MARK	NETWORK SERVICES MANAGER	$ 74.58	$ 78.30

SixTen calculated Productive Hourly Rates w/ 21% benefits for month / 10% benefits for hourly

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					26.59	30.47	30.77	30.77
Alvarado, Olga					24.79	29.52	31.33	31.33	
Avila, Jason								22.93	*23.96
Brackman, Pamela	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Brown, Eileen	Admissions & Records Tech II				26.11	31.08	35.64	35.64	37.98
Combs, April	Temporary Office Worker I					14.30	14.30	14.30	14.30
De La Rama, Micah	Temporary Office Worker I				12.10		12.10		
Deering, JoAnn					24.79	29.52	29.52	22.93	
Duran, Susana	FA Spec						22.93	*25.30	27.02
Franco, Dolores	Int'l Admissions/Records Tech. II				29.56	29.56	33.85	35.64	36.00
Gilliland, Shannon	Account Tech. II FA							25.43	28.47
Heth, Linda	Temporary Office Worker I				12.10	12.10	12.10		
Hicks, Patricia	Lead Cashier				26.11	31.08	35.64	37.60	37.98
Huerta, Maggie	FA Spec				22.34	26.59	28.19	28.47	28.47
Kinsella, Denise	International Program Manager				26.11	31.08	31.27	37.04	41.30
Kwon, Jennifer								28.19	24.38
Lane, Alan									
Lemle, Barbara	Casual - Registrar Worker				9.08	9.08	9.08	25.10	
Liebrecht, Catherine	Admissions & Records Tech II							*20.88	26.35
Lim, Janice									**24.38
MacCullen, Ruth	Associate Registrar				32.71	34.34	38.59		40.99
McKibbin, Lori					27.98		29.52		
Menjivar, Juan Franc	FA Spec						22.93	24.13	25.68
Milkes, Sharon	Senior Clerk/A&R Tech. II				22.74	25.28	28.93	*29.46	30.77
Miller, Margaret	Admissions & Records Tech II				26.56	28.02	32.09	33.85	34.19
Nguyen, Hue	FA Spec				26.16	31.14	31.33	31.33	33.28
Pettit, Marcia	Associate Registrar				37.61	42.27	42.27	42.27	*43.49
Polly, Irene	FA Spec				24.79	29.52	31.14	31.33	31.64
Pope, Irene									
Robinson, Stacey	Lead Cashier							25.43	28.14
Rubalcava, Maria	Records Specialist				21.78	27.30	30.47	32.09	32.41
Ruelas, Guadalupe	Admissions & Records Tech II			***	25.21	26.59	30.47	30.77	30.77
Ruiz, Noelia					26.56	23.82	23.76		
Satele, Tauasosi Mary	Senior Clerk				25.21	26.59	32.09	32.09	32.41
Skille, Steve	Account Tech. II FA				12.10	22.80	25.43	26.75	28.47
Stewart, Lisa	Records Specialist				23.96	26.59	30.47	30.47	30.77
Sim, Monica	FA Spec								29.14
Tan, Christine	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Vaughn, Dara	FA Spec				20.53	22.80	24.13	26.75	28.47
Wade, Sherri	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77
Yarbrough, Charlotte	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77

where back-up was not provided - used same DIFF as previous FY. If no previous PHR available used following FY PHR and divided by 5%

= Changed PHR w/ no back-up the difference or average difference of all other yrs provided

** = No Back-up - gave the same as Jennifer Kwon

* = No Back-up - Fa

Staff	Title	PHRs 02-03	PHRs 05-06
Allen, Marianne	FA Counselor	48.76	55.80
Atwood, Kathie	Secretary LAC	29.52	32.46
Bla tti, Sara	FA - PT Counselor	N/W	12.10
Catipon, Mary	FA - PT Counselor	N/N	52.23
Davis, Judy	Secretary		N/W
Douglass, Genevieve	Account Tech. II		N/N
Haksigian, Arda	Assoc. Director FA	40.83	47.82
Garvey, Peggy	Account Tech. II	28.02	29.70
Gutierrez, Dorothy	FA Advisor	44.93	45.65
MacCallum, Michael	FA Counselor	64.82	72.70
Miller, Laura	Account Tech. II	29.48	
Nachreiner, Ron	Office Assistant		19.50
Overton, Kimberly	FA - PT Counselor	N/W	
Pope, Michele	FA Specialist	28.02	29.42
Stepan, Betty	FA Counselor	58.32	61.24
Sweet-Kelly, Deborah	Office Assistant	23.38	24.55
Tait, Sandra	Office Assistant	19.56	21.79
Tim, Sophorn	FA Data Software Spec.	7.43	7.80
Turner, Lydia	FA Counselor		53.53
Yentch, Richard	Assoc. Director FA		47.82

NW - not working

There are two other employees w/ this title Blassetti & Catipon - used lower of the two = 12.10

Sixten Calculated Productive Hourly Rates w/ 21% benefits for monthly + 6% benefits for hourly

FA Specialists

0•	C	
Duran 27•02		+
Huerta 28•47		+
menjivar 25•68		+
Nguyen 33•28		+
Polly 31•64		+
Vaughn 28•47		+
Pope, Michele 29•42		+
203•98		*
203•98		÷
7•		=
29•14		*
Avg FA Specialist for Thim, Monica		
0•	C	

0•	C	
0•	C	
Pope 28•02		x
1•05		=
29•42		*
0•	C	
Stepan 58•32		x
1•05		=
61•24		*
0•	C	
Sweet-Kelly 23•38		x
1•05		=
24•55		*
0•	C	
0•	C	
7•43		x
1•05		=
7•80		*
0•	C	

FAX

For: **Sergio Perez**

Fax Number: **(858) 514-8645**

From: **Linda Roseth,**
Long Beach City College- Mandated Cost Specialist

Fax Number: **(562) 938-4364**

Date: 5/21/07

Regarding: Signed EFCW 1.7-2 forms

Number of pages:

Comments:

Hi Sergio,

Ross signed these forms on Friday.

The Registration Worker rate from 7/1/01 is $8.25

Before 7/1/01 the rate was $7.99.

I am working on the rates for A/R II and Temporary Office Worker.

Thank you.

Linda

0• C
7•99 x
1•1 =
8•79 *
0• C
8•25 x
1•1 =
9•08 *
0• C

Schedule 4
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 04-05 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers						
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843	272,320
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301						
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**	**$ 389,417**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 05-06 fees are $26.00.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$68,697,779	$59,554,598	$3,660,866	$63,215,464
EQUALIZATION	775,786	713,723	62,063	775,786
ENROLL FEE ADMIN (2%)	144,866	133,276	11,590	144,866
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	593,764	546,263	47,501	593,764
S.F.A.A.	919,278	844,662	74,616	919,278
E.O.P.S.	1,774,345	1,632,399	141,946	1,774,345
C.A.R.E.	251,965	229,934	22,031	251,965
D.S.P.S.	1,048,903	964,990	83,913	1,048,903
STATE HOSPITALS	0	0	0	0
CALWORKS	1,238,270	982,810	255,460	1,238,270
MATRICULATION (CREDIT)	816,099	742,531	73,568	816,099
MATRIC. (NONCREDIT)	181,267	166,765	14,502	181,267
FAC.& STAFF DIVERSITY	24,493	20,709	3,784	24,493
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	937,446	862,451	74,995	937,446
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	501,260	461,160	40,100	501,260
ECON. DEVELOPMENT	1,357,017	1,139,893	1	1,139,894
TANF	250,344	230,318	20,026	250,344
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	15,802	47,408	63,210
VTEA TITLE I C	964,030	681,335	128,450	809,785
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	1,594,930	1,579,911	15,019	1,594,930
TOTAL	$82,199,424	$71,537,292	$4,796,409	$76,333,701

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch[illegible] 4A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 61.51	$ 64.59	$ 3,135.64	$ 256.03	$ 78.73	$ 44.73	$ 46.96
	EFCW-1 B. 1. b.		$ 180.59	$ 28.15	$ 97.38	$ 1,038.20			$ 391.60
	EFCW-1 B. 2. a.								
	EFCW-1 B. 2. b.		$ 14,235.42	$ 15,490.64	$ 16,242.94	$ 22,470.20	$ 22,494.58	$ 18,241.16	$ 17,915.35
	EFCW-1 B. 2. c.			$ 1,227.21	$ 1,254.67	$ 1,645.88		$ 2,102.31	$ 2,207.12
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 14,477.52	$ 16,810.59	$ 20,730.63	$ 25,410.31	$ 22,573.31	$ 20,388.20	$ 20,561.03
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 244,673.00	$ 258,940.00	$ 282,099.00	$ 296,585.00	$ 363,527.00	$ 412,824.00	$ 389,417.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (230,195.48)	$ (242,129.41)	$ (261,368.37)	$ (271,174.69)	$ (340,953.69)	$ (392,435.80)	$ (368,855.97)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 14,477.52**	**$ 16,810.59**	**$ 20,730.63**	**$ 25,410.31**	**$ 22,573.31**	**$ 20,388.20**	**$ 20,561.03**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Long Beach College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 16, 2007 01:55:38

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	390	116,207
BOGW - Part A-2 based on SSI recipient status	316	68,289
BOGW - Part A-3 based on general assistance recipient status	133	32,929
BOGW - Part A basis unreported	295	109,785
BOGW - Part B based on income standards	8,922	2,728,260
BOGW - Part C based on financial need	9,724	4,024,854

Total Amount = $ 7,080,324

Back to Top of Page

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0• C

390•00 +
316•00 +
133•00 +
295•00 +
8,922•00 +
A+B Total 10,056•00 *

0• C

10,056•00 +
9,724•00 +
A,B+C Total 19,780•00 *

0• C

Client CCCCO

A+B 13,152 19056

C 2,076 9,724

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

October 18, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8611

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Long Beach Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers ***(AMENDED)*** 2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 231,440
Less: 10% Late Penalty		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
...et Claimed Amount		(16) $ 221,440
Due from State	(08)	(17) $ 221,440
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	127
(24) EFCW-1, (04)(A)(2)(a)(f)	275,791
(25) EFCW-1, (04)(B)(1)(a)(f)	47
(26) EFCW-1, (04)(B)(1)(b)(f)	392
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	17,915
(29) EFCW-1, (04)(B)(2)(c)(f)	2,207
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	100,388
(32) EFCW-1, (09)	144,866
(33) EFCW-1, (10)	20,561
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 10-11-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Long Beach Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 126.82	$ -	$ -	$ -	$ -	$ 126.82
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 275,791.39	$ -	$ -	$ -	$ -	$ 275,791.39
3. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 46.96	$ -	$ -	$ -	$ -	$ 46.96
b. Staff training (One time per employee)	$ 391.60	$ -	$ -	$ -	$ -	$ 391.60
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 17,915.35	$ -	$ -	$ -	$ -	$ 17,915.35
c. Reporting BOG fee waiver data to CCC	$ 2,207.12	$ -	$ -	$ -	$ -	$ 2,207.12
5) Total Direct Costs	$ 296,479.24	$ -	$ -	$ -	$ -	$ 296,479.24

direct Costs		
6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	33.86%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 100,387.87
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 396,867.11
st Reduction		
) Less: Enrollment Fee Revenue offset		$ 144,866.00
) Less: nrollment Fee Waiver offsets		$ 20,561.03
) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 231,440.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Robinson, Stacey Lead Cashier	$25.43	2.0	$ 50.86				
Hicks, Patricia Lead Cashier	$37.98	2.0	$ 75.96				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 126.82	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$16.10	5,672.9	$ 91,333.69				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$16.10	6,006.6	$ 96,706.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$16.10	5,450.4	$ 87,751.44				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 275,791.39	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$93.92	0.5	$ 46.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 46.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
MacCallum, Michael	FA Counselor	$72.70	0.5	$ 36.35				
Allen, Marianne	FA Counselor	$55.80	0.5	$ 27.90				
Stepan, Betty	FA Counselor	$61.24	0.5	$ 30.62				
Turner, Lydia	FA Counselor	$53.53	0.5	$ 26.77				
Gutierrez, Dorothy	FA Advisor	$45.65	0.5	$ 22.83				
Ekhsigian, Arda	Associate Director FA	$47.82	0.5	$ 23.91				
Yentch, Richard	Associate Director FA	$47.82	0.5	$ 23.91				
Huerta, Maggie	FA Specialist	$28.47	0.5	$ 14.24				
Pope, Michele	FA Specialist	$29.42	0.5	$ 14.71				
Nguyen, Hue	FA Specialist	$33.28	0.5	$ 16.64				
Polly, Irene	FA Specialist	$31.64	0.5	$ 15.82				
Nachreiner, Ron	Office Assistant	$19.50	0.5	$ 9.75				
Atwood, Kathie	Secretary	$32.46	0.5	$ 16.23				
Thim, Monica	FA Specialist	$29.14	0.5	$ 14.57				
Duran, Susana	FA Specialist	$27.02	0.5	$ 13.51				
Vaughn, Dara	FA Specialist	$28.47	0.5	$ 14.24				
Tim, Sophom	FA Data Software Specialist	$7.80	0.5	$ 3.90				
Menjivar, Juan Franc	FA Specialist	$25.68	0.5	$ 12.84				
Blassetti, Sara	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Overton, Kimberly	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Skille, Steve	Account Tech. II FA	$28.47	0.5	$ 14.24				
Gilliland, Shannon	Account Tech. II FA	$28.47	0.5	$ 14.24				
Sweet-Kelly, Deborah	Office Assistant	$24.55	0.5	$ 12.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 391.60	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	83.8	$ 2,292.77				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	138.4	$ 3,786.62				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 17,915.35	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$93.92	23.5	$ 2,207.12				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,207.12	$ -	$ -	$ -	$ -

Long Beach Community College District

308/95 ENROLLMENT F[illegible]OLLECTIONS/WAIVERS

2[illegible]06

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Allen, Marianne	FA Counselor	$55.80	$27.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Allen, Marianne Total**			$27.90		
8/3/2005	0.50	Atwood, Kathie	Secretary	$32.46	$16.23	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Atwood, Kathie Total**			$16.23		
8/3/2005	0.50	Blassetti, Sara	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Blassetti, Sara Total**			$6.05		
05-06	23.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$2,207.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
05-06	0.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$46.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,254.08		
8/3/2005	0.50	Duran, Susana	FA Specialist	$27.02	$13.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Duran, Susana Total**			$13.51		
8/3/2005	0.50	Ekhsigian, Arda	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Ekhsigian, Arda Total**			$23.91		
05-06	5,672.90	Enrollment Office Staff	Collecting Fees	$16.10	$91,333.69	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,006.60	Enrollment Office Staff	Collecting Fees	$16.10	$96,706.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,450.40	Enrollment Office Staff	Collecting Fees	$16.10	$87,751.44	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	17,129.90	**Enrollment Office Staff Total**			$275,791.39		
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Receiving waiver applications	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	83.80	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,292.77	Entering approved application information into district records; providing student award letter	Waiving student fees
	412.60	**Financial Aid Office Staff (BOG A/B) Total**			$11,288.75		
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Receiving waiver applications	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	138.40	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$3,786.62	Entering approved application information into district records; providing student award letter	Waiving student fees
	242.20	**Financial Aid Office Staff (BOG C) Total**			$6,626.60		
8/3/2005	0.50	Gilliland, Shannon	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gilliland, Shannon Total**			$14.24		
8/3/2005	0.50	Gutierrez, Dorothy	FA Advisor	$45.65	$22.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gutierrez, Dorothy Total**			$22.83		
05-06	2.00	Hicks, Patricia	Lead Cashier	$37.98	$75.96	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.96		
8/3/2005	0.50	Huerta, Maggie	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Huerta, Maggie Total**			$14.24		
8/3/2005	0.50	MacCallum, Michael	FA Counselor	$72.70	$36.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**MacCallum, Michael Total**			$36.35		
8/3/2005	0.50	Menjivar, Juan Franc	FA Specialist	$25.68	$12.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Menjivar, Juan Franc Total**			$12.84		
8/3/2005	0.50	Nachreiner, Ron	Office Assistant	$19.50	$9.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nachreiner, Ron Total**			$9.75		

Long Beach Community College District

308/95 ENROLLMENT [illegible]OLLECTIONS/WAIVERS

2[illegible]06

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Nguyen, Hue	FA Specialist	$33.28	$16.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nguyen, Hue Total**			$16.64		
8/3/2005	0.50	Overton, Kimberly	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Overton, Kimberly Total**			$6.05		
8/3/2005	0.50	Polly, Irene	FA Specialist	$31.64	$15.82	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Polly, Irene Total**			$15.82		
8/3/2005	0.50	Pope, Michele	FA Specialist	$29.42	$14.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Pope, Michele Total**			$14.71		
05-06	2.00	Robinson, Stacey	Lead Cashier	$25.43	$50.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Robinson, Stacey Total**			$50.86		
8/3/2005	0.50	Skille, Steve	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Skille, Steve Total**			$14.24		
8/3/2005	0.50	Stepan, Betty	FA Counselor	$61.24	$30.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Stepan, Betty Total**			$30.62		
8/3/2005	0.50	Sweet-Kelly, Deborah	Office Assistant	$24.55	$12.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Sweet-Kelly, Deborah Total**			$12.28		
8/3/2005	0.50	Thim, Monica	FA Specialist	$29.14	$14.57	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Thim, Monica Total**			$14.57		
8/3/2005	0.50	Tim, Sophorn	FA Data Software Specialist	$7.80	$3.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Tim, Sophorn Total**			$3.90		
8/3/2005	0.50	Turner, Lydia	FA Counselor	$53.53	$26.77	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Turner, Lydia Total**			$26.77		
8/3/2005	0.50	Vaughn, Dara	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Vaughn, Dara Total**			$14.24		
8/3/2005	0.50	Yentch, Richard	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Yentch, Richard Total**			$23.91		
	17,824.20	**Grand Total**			$296,479.24		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,194,957		$49,194,957	$903,650	$48,291,307
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,663,844		2,663,844	28,676	2,635,168
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	196,791		196,791	1,058	195,733
Other Instructional Administration & Instructional Governance	6090	252,724		252,724	1,132	251,592
Instructional Support Services	6100					
Learning Center	6110	962,512		962,512	10,164	952,348
Library	6120	1,852,763		1,852,763	3,719	1,849,044
Media	6130	952,522		952,522	62,578	889,944
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	103,287		103,287		103,287
Admissions and Records	6200	2,052,489		2,052,489	1,008	2,051,481
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,183,080		3,183,080	24,985	3,158,095
Matriculation and Student Assessment	6320	968,830		968,830	18,067	950,763
Transfer Programs	6330	648,165		648,165	399	647,766
Career Guidance	6340	266,960		266,960	2,119	264,841
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	743,541		743,541	20,102	723,439
Subtotal		$64,042,465	$0	$64,042,465	$1,077,657	$62,964,808

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,010,638		$1,010,638	$754	$1,009,884
Health Services	6440	442,697		442,697	3,600	439,097
Student Personnel Admin.	6450	1,267,712		1,267,712	8	1,267,704
Financial Aid Administration	6460	2,605,567		2,605,567	76,718	2,528,849
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	590,216		590,216	53,774	536,442
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,171,008		2,171,008	2,171,008	0
Custodial Services	6530	2,809,091		2,809,091	2,809,091	0
Grounds Maintenance and Repairs	6550	669,585		669,585	669,585	0
Utilities	6570	1,914,073		1,914,073	1,914,073	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,033,837		6,033,837	6,033,837	0
General Inst. Support Services	6700					
Community Relations	6710	515,752		515,752	515,752	0
Fiscal Operations	6720	2,503,134		2,503,134	2,503,134	0
Human Resources Management	6730	1,482,567		1,482,567	1,482,567	0
Noninstructional Staff Benefits & Incentives	6740	272,673		272,673	272,673	0
Staff Development	6750	144,599		144,599	144,599	0
Staff Diversity	6760	25,685		25,685	25,685	0
Logistical Services	6770	1,562,060		1,562,060	1,562,060	0
Management Information Systems	6780	3,112,541		3,112,541	3,112,541	0
Subtotal		$93,175,900	$0	$93,175,900	$24,429,116	$68,746,784

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES	FORM FAM-29C

(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	165,228		165,228	165,228	0
Community Services and Economic Development	6800					
Community Recreation	6810	81,018		81,018		81,018
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	3,657,034		3,657,034	110,701	3,546,333
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	26,593		26,593		26,593
Farm Operations	6930					
Food Services	6940					
Parking	6950	372,718		372,718	134,749	237,969
Student and Co-curricular Activities	6960	720,319		720,319		720,319
Student Housing	6970					
Other	6990	-8,463		-8,463		-8,463
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$98,190,347	$0	$98,190,347	$24,839,794	$73,350,553
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				33.86%		

(07) Notes

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	347,491	7,097	8,251	31,150		393,989
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,883,586	63,359	47,516	7,914		2,002,375
Business and Management	0500	2,851,997	91,223	36,335	61,421		3,040,976
Communications	0600						
Computer and Information Science	0700	1,146,557	42,266	37,729	62,584		1,289,136
Education	0800	2,963,053	257,204	46,820	66,557		3,333,634
Engineering and Related Industrial Tech.	0900	3,764,729	177,615	285,630	322,702		4,550,676
Fine and Applied Arts	1000	5,227,230	197,222	95,495	91,665		5,611,612
Foreign Language	1100	1,208,644	58,346	5,695	1,335		1,274,020
Health	1200	2,924,793	229,799	114,941	62,958		3,332,491
Consumer Education and Home Economics	1300	2,988,994	170,056	52,390	15,977		3,227,417
Law	1400						
Humanities (Letters)	1500	8,403,710	392,567	39,374	71,897		8,907,548
Library Science	1600	813,607	115,323	69,875	78,212		1,077,017
[illegible]ematics	1700	2,921,689	93,488	14,055			3,029,232
[illegible]y Studies	1800						
Physical Sciences	1900	1,436,078	32,431	21,798	14,913		1,505,220
Psychology	2000						
Public Affairs and Services	2100	649,794	35,454	471,754	1,204		1,158,206
Social Sciences	2200	3,727,451	124,631	20,862	3,517		3,876,461
Commercial Services	3000	557,157	29,192	17,863	5,368		609,580
Interdisciplinary Studies	4900	386,731	39,779	1,043	4,276		431,829
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	543,538					543,538
Subtotal - Instructional Activities	**599**	44,746,829	2,157,052	1,367,426	903,650		49,194,957

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,462,563	172,605	28,676		2,663,844
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		193,355	2,378	1,058		196,791
Other Instruct. Admin. & Instruct. Governance	6090		249,932	1,660	1,132		252,724
Subtotal - Instructional Administration	**6000**		2,905,850	176,643	30,866		3,113,359
Instructional Support Services (6100)							
Learning Center	6110		929,938	22,410	10,164		962,512
Library	6120		1,769,278	79,766	3,719		1,852,763
Media	6130		875,341	14,603	62,578		952,522
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		57,100	46,187			103,287
Subtotal - Instructional Support Services	**6100**		3,631,657	162,966	76,461		3,871,084
Admissions and Records	**6200**		1,926,090	125,391	1,008		2,052,489
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,092,458	65,637	24,985		3,183,080
Matriculation and Student Assessment	6320		905,070	45,693	18,067		968,830
Transfer Programs	6330		539,405	108,361	399		648,165
Career Guidance	6340		246,385	18,456	2,119		266,960
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,783,318	238,147	45,570		5,067,035

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		704,967	18,472	20,102		743,541
Extended Opportunity Prgms. & Services (EOPS)	6430		980,606	29,278	754		1,010,638
Health Services	6440		344,951	94,146	3,600		442,697
Student Personnel Administration	6450		1,249,634	18,070	8		1,267,712
Financial Aid Administration	6460		2,152,508	376,341	76,718		2,605,567
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		429,918	106,524	53,774		590,216
Subtotal - Other Student Services	**6400**		5,862,584	642,831	154,956		6,660,371
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,805,534	342,333	23,141		2,171,008
Custodial Services	6530		2,660,805	145,492	2,794		2,809,091
Grounds Maintenance and Repairs	6550		631,499	36,500	1,586		669,585
Utilities	6570			1,914,073			1,914,073
Other Operation and Maintenance of Plant	6590						
Total - Operation and Maintenance of Plant	**6500**		5,097,838	2,438,398	27,521		7,563,757
Planning, Policymaking, and Coordination	**6600**		3,407,925	2,616,442	9,470		6,033,837

* Salaries and Benefits of instructors and instructional aides in instructional assignments
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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		412,457	103,295			515,752
Fiscal Operations	6720		1,857,114	645,804	216		2,503,134
Human Resources Management	6730		1,404,493	70,024	8,050		1,482,567
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		272,673				272,673
Staff Development	6750		126,104	17,424	1,071		144,599
Staff Diversity	6760			25,685			25,685
Logistical Services	6770		1,290,305	148,728	123,027		1,562,060
Management Information Systems	6780		2,168,816	820,708	123,017		3,112,541
Other General Institutional Support Services	6790		150,980	14,248			165,228
Subtotal - General Institutional Support Services	**6700**		7,682,942	1,845,916	255,381		9,784,239
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		77,010	4,008			81,018
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		2,929,472	616,861	110,701		3,657,034
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		3,006,482	620,869	110,701		3,738,052

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		26,593				26,593
Farm Operations	6930						
Food Services	6940						
Parking	6950		163,899	74,070	134,749		372,718
Student and Co-curricular Activities	6960		702,958	17,361			720,319
Student Housing	6970						
Other Ancillary Services	6990			(8,463)			(8,463)
Subtotal - Ancillary Services	**6900**		893,450	82,968	134,749		1,111,167
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
ong-Term Debt	7210						
ax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					3,648,802	3,648,802
Student Aid	7320					516,328	516,328
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,165,130	4,165,130
TOTAL EXPENDITURES and OTHER OUTGO	**391**	44,746,829	41,355,188	10,337,997	1,750,333	4,165,130	102,355,477

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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2 Balboa Avenue, Suite 900
Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 11, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Long Beach Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

Claimant Identification Number: CC19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 166,400	(13) $ 151,285
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 151,285
Due from State	(08) $ 166,400	(17) $ 151,285
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	198,025
(25) EFCW-1, (04)(B)(1)(a)(f)	22
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	106,385
(29) EFCW-1, (04)(B)(2)(c)(f)	1,110
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	99,912
(32) EFCW-1, (09)	146,652
(33) EFCW-1, (10)	107,517
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**: 12/20/07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
ong Beach Community College District	Reimbursement	X	2006-2007
	Estimated		

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 198,024.87	$ -	$ -	$ -	$ -	$ 198,024.87
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P ing district policies & procedures fo V.B.	$ 22.19	$ -	$ -	$ -	$ -	$ 22.19
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 106,384.75	$ -	$ -	$ -	$ -	$ 106,384.75
c. Reporting BOG fee waiver data to CCC	$ 1,109.60	$ -	$ -	$ -	$ -	$ 1,109.60
Total Direct Costs	$ 305,541.41	$ -	$ -	$ -	$ -	$ 305,541.41

irect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.70%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 99,912.04
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 405,453.45
t Reduction		
Less: Enrollment Fee Revenue offset		$ 146,652.00
Less: Enrollment Fee Waiver offsets		$ 107,516.54
Tota aimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 151,284.91

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$41.16	1,062.2	$ 43,720.15				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$41.16	910.4	$ 37,472.06				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$41.16	1,745.0	$ 71,824.20				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$41.16	834.6	$ 34,352.14				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$41.16	83.2	$ 3,424.51				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$41.16	175.7	$ 7,231.81				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 198,024.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination DuBois, Toni Dean, Financial Aid	$110.96	0.2	$ 22.19				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 22.19	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Receiving waiver applications							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Evaluating waiver applications and verifying application documents							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Entering approved application information into district records; providing student award letter							
Financial Aid Staff Various	$48.50	1,188.8	$ 57,656.80				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 106,384.75	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
DuBois, Toni Dean, Financial Aid	$110.96	10.0	$ 1,109.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,109.60	$ -	$ -	$ -	$ -

Long Beach Community College District
308/95 ENROLLMF EE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	10.00	DuBois, Toni	Dean, Financial Aid	$110.96	$1,109.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	0.20	DuBois, Toni	Dean, Financial Aid	$110.96	$22.19	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for §
	10.20	**DuBois, Toni Total**			$1,131.79		
06-07	1,062.20	Enrollment Office Staf	Various	$41.16	$43,720.15	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	910.40	Enrollment Office Staf	Various	$41.16	$37,472.06	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	1,745.00	Enrollment Office Staf	Various	$41.16	$71,824.20	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	834.60	Enrollment Office Staf	Various	$41.16	$34,352.14	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	175.70	Enrollment Office Staf	Various	$41.16	$7,231.81	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
06-07	83.20	Enrollment Office Staf	Various	$41.16	$3,424.51	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	4,811.10	**Enrollment Office Staff Total**			$198,024.87		
06-07	1,188.80	Financial Aid Staff	Various	$48.50	$57,656.80	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Receiving waiver applications	Waiving student fees
	2,193.50	**Financial Aid Staff Total**			$106,384.75		
	7,014.80	**Grand Total**			$305,541.41		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$53,110,562		$53,110,562	$868,912	$52,241,650
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,902,807		2,902,807	28,005	2,874,802
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	180,923		180,923		180,923
Other Instructional Administration & Instructional Governance	6090	264,898		264,898	2,225	262,673
Instructional Support Services	6100					
Learning Center	6110	970,132		970,132	4,896	965,236
Library	6120	1,838,953		1,838,953	11,457	1,827,496
Media	6130	1,001,439		1,001,439	30,472	970,967
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	72,011		72,011	7,786	64,225
Admissions and Records	6200	2,205,355		2,205,355	17,412	2,187,943
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,456,275		3,456,275	42,690	3,413,585
Matriculation and Student Assessment	6320	816,099		816,099		816,099
Transfer Programs	6330	740,167		740,167	3,642	736,525
Career Guidance	6340	282,029		282,029	2,872	279,157
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	868,008		868,008	5,962	862,046
Subtotal		$68,709,658	$0	$68,709,658	$1,026,331	$67,683,327

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,350,823		$1,350,823	$10,417	$1,340,406
Health Services	6440	467,273		467,273	2,554	464,719
Student Personnel Admin.	6450	1,177,387		1,177,387	821	1,176,566
Financial Aid Administration	6460	2,504,427		2,504,427	39,850	2,464,577
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	581,687		581,687	47,401	534,286
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,281,157		2,281,157	2,281,157	0
Custodial Services	6530	2,886,471		2,886,471	2,886,471	0
Grounds Maintenance and Repairs	6550	602,263		602,263	602,263	0
Utilities	6570	2,286,858		2,286,858	2,286,858	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,233,767		6,233,767	6,233,767	0
General Inst. Support Services	6700					
Community Relations	6710	785,798		785,798	785,798	0
Fiscal Operations	6720	2,227,400		2,227,400	2,227,400	0
Human Resources Management	6730	1,516,246		1,516,246	1,516,246	0
Noninstructional Staff Benefits & Incentives	6740	221,240		221,240	221,240	0
Staff Development	6750	164,436		164,436	164,436	0
Staff Diversity	6760	22,110		22,110	22,110	0
Logistical Services	6770	1,527,703		1,527,703	1,527,703	0
Management Information Systems	6780	3,522,834		3,522,834	3,522,834	0
Subtotal		$99,069,538	$0	$99,069,538	$25,405,657	$73,663,881

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	483,895		483,895	483,895	0
Community Services and Economic Development	6800					
Community Recreation	6810	75,626		75,626		75,626
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	4,577,040		4,577,040	20,998	4,556,042
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	9,530		9,530		9,530
Farm Operations	6930					
Food Services	6940					
Parking	6950	147,595		147,595	18,017	129,578
Student and Co-curricular Activities	6960	845,332		845,332	2,641	842,691
Student Housing	6970					
Other	6990	27,749		27,749		27,749
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$105,236,305	$0	$105,236,305	$25,931,208	$79,305,097
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.70%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	468,963	36,631	10,938	20,042		536,574
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	2,065,899	82,139	72,822	42,570		2,263,430
Business and Management	0500	2,957,372	94,832	35,506	16,426		3,104,136
Communications	0600						
Information Technology	0700	1,239,279	49,133	23,789	79,408		1,391,609
Education	0800	3,207,531	312,215	53,335	49,682		3,622,763
Engineering and Industrial Tech.	0900	3,957,188	235,851	305,134	389,760		4,887,933
Fine and Applied Arts	1000	5,606,680	216,681	114,256	49,981		5,987,598
Foreign Language	1100	1,266,511	51,111	7,125	5,516		1,330,263
Health	1200	3,445,740	222,375	71,262	23,365		3,762,742
Family and Consumer Sciences	1300	2,574,865	175,274	63,468	4,733		2,818,340
Law	1400						
Humanities (Letters)	1500	9,247,177	441,354	46,392	55,617		9,790,540
Library Science	1600	960,690	125,138	29,005	100,353		1,215,186
Mathematics	1700	3,359,297	107,212	17,369	1,981		3,485,859
Military Studies	1800						
Physical Sciences	1900	1,541,019	34,188	76,491	2,392		1,654,090
Psychology	2000			✓			
Public and Protective Services	2100	656,080	54,818	539,168			1,250,066
Social Sciences	2200	4,113,671	125,133	26,440	5,597		4,270,841
Commercial Services	3000	604,059	36,296	11,910	21,489		673,754
Interdisciplinary Studies	4900	499,159	19,619	3,869			522,647
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	542,191					542,191
Subtotal - Instructional Activities	**599**	48,313,371	2,420,000	1,508,279	868,912		53,110,562

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CCFS-311 *(Rev. 6/2001, er)*
9/19/06 10:51AM

Long Beach Community College District | 840 | District Code No.

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010						
Course and Curriculum Development	6020		2,610,522	264,280	28,005		2,902,807
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		176,491	4,432			180,923
Subtotal - Instructional Administration	**6000**		260,027	2,646	2,225		264,898
Instructional Support Services (6100)			3,047,040	271,358	30,230		3,348,628
Learning Center	6110						
Library	6120		935,984	29,252	4,896		970,132
Media	6130		1,751,963	75,533	11,457		1,838,953
Museums and Galleries	6140		941,657	29,310	30,472		1,001,439
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		46,617	17,608	7,786		72,011
Admissions and Records	**6200**		3,676,221	151,703	54,611		3,882,535
Student Counseling and Guidance (6300)			2,065,838	122,105	17,412		2,205,355
Counseling and Guidance	6310						
Matriculation and Student Assessment	6320		3,369,855	43,730	42,690		3,456,275
Transfer Programs	6330		770,417	45,682			816,099
Career Guidance	6340		632,234	104,291	3,642		740,167
Other Student Counseling and Guidance	6390		264,313	14,844	2,872		282,029
Subtotal - Student Counseling and Guidance	**6300**		5,036,819	208,547	49,204		5,294,570

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		841,624	20,422	5,962		868,008
Extended Opportunity Prgms. & Services (EOPS)	6430		1,294,039	46,367	10,417		1,350,823
Health Services	6440		363,463	101,256	2,554		467,273
Student Personnel Administration	6450		1,147,814	28,752	821		1,177,387
Financial Aid Administration	6460		2,192,636	271,941	39,850		2,504,427
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		454,960	79,326	47,401		581,687
Operation and Maintenance of Plant (6500)			6,294,536	548,064	107,005		6,949,605
Building Maintenance and Repairs	6510						
Custodial Services	6530		1,864,328	392,836	23,993		2,281,157
Grounds Maintenance and Repairs	6550		2,643,370	198,260	44,841		2,886,471
Utilities	6570		602,219	44			602,263
Other Operation and Maintenance of Plant	6590			2,286,858			2,286,858
Subtotal - Operation and Maintenance of Plant	**6500**		5,109,917	2,877,998	68,834		8,056,749
Planning, Policymaking, and Coordination	**6600**		3,514,785	2,701,218	17,764		6,233,767

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		528,623	242,703	14,472		785,798
Fiscal Operations	6720		1,908,662	312,098	6,640		2,227,400
Human Resources Management	6730		1,331,297	180,451	4,498		1,516,246
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		221,240				221,240
Staff Development	6750		147,816	16,620			164,436
Staff Diversity	6760			21,132	978		22,110
Logistical Services	6770		1,321,674	82,668	123,361		1,527,703
Management Information Systems	6780		2,357,886	942,737	222,211		3,522,834
Other General Institutional Support Services	6790		279,682	143,842	60,371		483,895
Subtotal - General Institutional Support Services	**6700**		8,096,880	1,942,251	432,531		10,471,662
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		69,639	5,987			75,626
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		3,109,627	1,446,415	20,998		4,577,040
Subtotal - Community Services	**6800**		3,179,266	1,452,402	20,998		4,652,666

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		9,530				9,530
Farm Operations	6930						
Food Services	6940						
Parking	6950		85,373	44,205	18,017		147,595
Student and Co-curricular Activities	6960		820,975	21,716	2,641		845,332
Student Housing	6970						
Other Ancillary Services	6990		29,043	(1,294)			27,749
Subtotal - Ancillary Services	**6900**		944,921	64,627	20,658		1,030,206
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					5,499,802	5,499,802
Other Outgo	7330					552,266	552,266
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	48,313,371	43,366,223	11,848,552	1,688,159	6,052,068	6,052,068
						6,052,068	111,288,373

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CCFS-311 *(Rev. 6/2001, er)*
9/19/06 10:52AM

Long Beach Community College District | 940 | District Code No.

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 2**	22,761
Avg. time p/account	2.8
Total Time (in minutes)	63731
Per Hour	60
Hours Worked **(** Activity 11)**	**1062.2**
***EFC 2**	22,761
Avg. time p/student	2.4
Total Time (in minutes)	54626
Per Hour	60
Hours Worked **(** Activity 12)**	**910.4**
***EFC 2**	22,761
Avg. time p/question	4.6
Total Time (in minutes)	104701
Per Hour	60
Hours Worked **(** Activity 13)**	**1745.0**
***EFC 2**	22,761
Avg. time p/file	2.2
Total Time (in minutes)	50074
Per Hour	60
Hours Worked **(** Activity 14)**	**834.6**
***EFC 4**	1,663
Avg. time p/account (Not provided by client)	3.0
Total Time (in minutes)	4989
Per Hour	60
Hours Worked **(** Activity 15)**	**83.2**
***EFC 5**	2,636
Avg. time p/student (Not provided by client)	4.0
Total Time (in minutes)	10544
Per Hour	60
Hours Worked **(** Activity 16)**	**175.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	20,096
Avg. time p/question	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 21)**	**334.9**
***EFW 6**	20,096
Avg. time p/application	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 22)**	**334.9**
***EFW 6**	20,096
Avg. time p/evaluation	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 23)**	**334.9**
***EFW 8**	818
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	19,278
Avg. time p/application	3.7
Total Time (in minutes)	71329
Per Hour	60
Hours Worked **(** Activity 25)**	**1188.8**
***EFW 8**	818
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		2	2	2	2	4	5	
		**Activity Codes						
Staff	Title	11	12	13	14	15	16	PHR
Baldwin, Francine	Cashier	3	2	5	2			33.60
Galtan, Sharonnac	Cashier	3	2	5	2			33.60
Haitana-Olsen, Sharon	Cashier	3	2	5	2			33.60
Hicks, Pat	Lead Cashier	3	2	5	2	3	4	56.66
Robinson, Stacy	Lead Cashier	2	4	3	3	3	4	48.36
Average		**2.8**	**2.4**	**4.6**	**2.2**	3.0	4.0	41.16

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2B
Long Beach Community College
308/95 Enrollment Fee Collection Waivers
Fiscal Year 2006-2007
Bog A B Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waivers Functions, Bog A & B.
Source: EFCW 1.7-3.
Findings:

		*EFC Workload Multiplier						
		6	6	6	8	7	8	
		**Activity Codes						
Staff	Title	21	22	23	24	25	26	PHR
Avila, Jason	Financial Aid Specialist	1	1	1		4.0		28.57
DuBois, Toni	Financial Aid Specialist	1	1	1		1.0		110.96
Duran, Susana	Financial Aid Specialist	1	1	1		4.0		42.42
Huerta, Magdalena	Financial Aid Specialist	1	1	1		4.0		44.67
Lim, Janice	Financial Aid Specialist	1	1	1		4.0		38.24
Mason, Ryan	Financial Aid Specialist	1	1	1		4.0		36.33
Nguyen, Hue	Financial Aid Specialist	1	1	1		4.0		49.63
Polly, Irene	Financial Aid Specialist	1	1	1		4.0		47.13
Pope, Michele	Financial Aid Specialist	1	1	1		4.0		44.67
Vaughn, Dara	Financial Aid Specialist	1	1	1		4.0		42.42
Average		1	1	1		3.7		48.50

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

21 - Answer Questions *regarding fee waivers or referring them to the appropriate person for an answer.*
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s.
(See in workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1.	Enrolled Students	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740	67,336
EFC 2	1.8-1 2.	Paid Enrollment fees									22,761
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)									19,278
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.								1,663
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.								2,636
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327	13,152	20,096
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473	10,056	19,278
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							818
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128	2,076	
EFW 7	1.8-3 2.	Waivers Approved	X -								
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2007 Spring Semester

Data Current As Of October 30, 2007 07:42:14

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	25,739

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25,739 Spring
25,943 Fall
12,875 Summer
Total 64,557

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2006 Fall Term

Data Current As Of October 30, 2007 07:42:37

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Total Headcount	25,943

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2006 Summer Term

Data Current As Of October 30, 2007 07:42:47

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	12,875

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LBCCD

Toni M. DuBois — Employee Name

Dean — Exact Position Title

Financial Aid — College/Department/Location

4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		10mins.	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		0	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		10hrs	
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Toni M DuBois Date 10-13-07

If you have any questions, please contact Linda Roseth at Ext.4512

PLEASE SUBMIT THIS INFORMATION BY October 1, 2007 to Linda Roseth 2007

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Student Accounts N104
Department/Location

FRANCINE BALDWIN
Employee Name

Cashier
Exact Position Title

562-938-4010
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Francine Baldwin Date 9-28-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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RECEIVED
OCT 8 2007
BY:

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FISCAL/STUD. ACCTS-PCC
Department/Location

Sharonmae GAITAN
Employee Name

CASHIER Acct. Asst. I
Exact Position Title

(562) 938-3907
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Student Accounts N104.
Department/Location

Sharon Haitana-Olsen
Employee Name

Cashier
Exact Position Title

(562) 938-4009
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature S Haitana Olsen Date 9/27/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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OCT 8 2007
BY:

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Student Accts - Pcc
Department/Location

Pat Hicks
Employee Name

LEAD CASHIER ACCT. Tech III
Exact Position Title

(562) 938-3906 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pat Hicks Date 10/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Fiscal Services - Cashiering
Department/Location

Stacey Robinson
Employee Name

Lead Cashier
Exact Position Title

562 938-4455 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 9/26/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG A & B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

JASON AVILA
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4588
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

Toni DuBois
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1/2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1/2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1/2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	No			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1/2			
Code 26 Denied Applications: Reviewing additional documentation ...tification to student	NA			

...equires that school district personnel maintain a record of ...e reimbursement. Your signature on this form certifies that ...aith estimate which you "certify (or declare) under penalty of ...e and correct based on your personal knowledge or ...g purposes only. PLEASE USE BLUE INK

...26 Date 10-13-07

..., at ...

...; TO ...

January 2006

LongB
EFCW
1.7-3

Tony DuBois
Code 21, 22, 23

1/2 minute
30 seconds

Linda Roseth

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A & B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

OCT 16 2007

LBCCD — District

FINANCIAL AID — Department/Location

SUSANA DURAN — Employee Name

FINANCIAL AID SPECIALIST — Exact Position Title

3063 — Telephone #

12mo/11mo/10mo/hrly Work year length (circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

MAGDALENA HUERTA
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4571
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG Fee

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

JANICE LIM
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

3158
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

RYAN MASON
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4032
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications; notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

HUE NGUYEN
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4570
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

IRENE POLLY
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

3953
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step.1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

MICHELE POPE
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD — District

FINANCIAL AID — Department/Location

OCT 16 2007

DARA VAUGHN — Employee Name

FINANCIAL AID SPECIALIST — Exact Position Title

3954 — Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		13,621	
Fall		26,944	
~~Winter/ Intersession~~		–	
Spring		26,771	
Total		67,336	
2. Number of students who paid enrollment fees:			
Summer			
Fall			
~~Winter/ Intersession~~			
Spring			
Total			
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
~~Winter/ Intersession~~			
Spring			
Total		19,278	

From Hanna Afford

From Patti Davis

From Toni DuBois

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean, Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer			
Fall			
Winter/ Intersession		NA	
Spring			
Total			
2. Number of students who paid enrollment fees:			
Summer 2006		3546	
Fall 2006		9543	
Winter/ Intersession-NA			
Spring 2007		9672	
Total		22761	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer 2006		5959	
Fall 2006		12714	
Winter/ Intersession - NA			
Spring 2007		12328	
Total		31001	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Chris Dorsey/LR Date 12/3/07

CHRIS DORSEY Business Analyst III

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		325	
Fall		670	
Winter/Intersession		—	
Spring		668	
Total		1663	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		151	
Fall		1654	
Winter/Intersession		—	
Spring		831	
Total		2636	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Patricia Davis Date 10/19/07

Patricia Davis
Employee Name: (print)

Deputy Director Finance & Acctg
Position or Title

If you have any questions, please contact Linda Roseth, at Ext. 4512.

PLEASE SUBMIT THIS INFORMATION BY October 1, 2007 ; TO Linda Roseth .

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. only

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
~~Winter/Intersession~~			
Spring			
Total		20,096	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
~~Winter/Intersession~~			
Spring			
Total		19,278	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean Stu Fin Aid
Position or Title

If you have any questions, please contact _____ at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7 only	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ $6,039,921	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ $120,798	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
~~C. Winter/Intersession~~			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean, Stu Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
0 Page(s) attachment

FAX TRANSMITTAL

DATE: November 21, 2007

FAX TO: FR Linda Roseth
Long Beach CCD
562-938-4364

FROM: To Keith Petersen KBP

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee and Collection Waivers
Fiscal Year: 2006-2007

PLEASE RESPOND BY: December 6, 2007

In order to complete the above claim we need the following PHR's:

Name	Title	2006-2007 PHR	
Avila, Jason	Financial Aid Specialist	$ 28.57	2842.90
Baldwin, Francine	Cashier	$ 33.60	3344.19
Duran, Susana	Financial Aid Specialist	$ 42.42	4221.72
Gaitan, Sharonnac	Cashier	$ 33.60	3344.19
Haitana-Olsen, Sharon	Cashier	$ 33.60	3344.19
Hicks, Pat	Lead Cashier	$ 56.66	5638.74
Huerta, Magdalena	Financial Aid Specialist	$ 44.67	4445.93
Lim, Janice	Financial Aid Specialist	$ 38.24	3805.40
Mason, Ryan	Financial Aid Specialist	$ 36.33	3615.40
Nguyen, Hue	Financial Aid Specialist	$ 49.63	4939.11
Polly, Irene	Financial Aid Specialist	$ 47.13	4690.40
Pope, Michele	Financial Aid specialist	$ 44.67	4445.93
Robinson, Stacy	Lead Cashier	$ 48.36	4813.15
Vaughn, Dara	Financial aid Specialist	$ 42.42	4221.72

Thank You.

KBP:te

Name	Title	05-06	06-07
CHAO, SEM	BUDGET OFFICER	$ 55.39	$ 64.16
CHOW-OSAKA, ANGELINA	HUMAN RESOURCES ASSISTANT (Resigned 2004)		
CHRIST, GREG	EVENTS ASSISTANT	$ 8.33	$ 8.33
COLLINS, VICTOR	EXECUTIVE VP, HUMAN RESOURCES (Retired 6/04)		
COMPIAN, LAURA	ACADEMIC ADMIN SECRETARY	$ 38.33	$ 43.80
COSTA, ALTA	HONORS PROGRAM SECRETARY	$ 42.54	$ 46.15
CREASON, PAUL	DIRECTOR OF GRANTS	$ 91.35	$ 102.79
CREASY, RICHARD	CUSTODIAL SUPERVISOR(Retired 12/04)		
CROCKARD, BRUCE	DIRECTOR, HR & STAFF DIVERSITY (Resigned 07/06)	$ 79.51	
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)		
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 74.57	$ 89.77
de la RAMA, CURIE	ADMINISTRATIVE SECRETARY	$ 49.77	$ 54.00
DORSEY, CHRISTOPHER	BUSINESS SYSTEMS ANALYST II	$ 48.23	$ 62.13
DUBOIS, TONI	DEAN, FINANCIAL AID	$ 93.92	$ 110.96
DUNCAN, YVONNE	PROJECT MANAGER-GOOD BEGINNINGS	$ 69.70	$ 78.42
ECKMAN, JONATHON	CUSTODIAN	$ 38.33	$ 43.80
EKHSIGIAN, ARDA	BUSINESS PROCESS SUPPORT SUPERVISOR	$ 56.89	$ 68.50
ESTACIO, RON	RECEIVING CLERK	$ 36.39	$ 43.80
FALTADO, EXVI	ADMINISTRATIVE SECRETARY (Resigned 2006)	$ 38.33	
FEENSTRA, DARREN	VEHICLE & SMALL ENGINE MECHANIC	$ 46.70	$ 52.68

Name	Title	05-06	06-07
CHAO, SEM	BUDGET OFFICER	$ 55.39	$ 64.16
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FALTADO, EXVI	ADMINISTRATIVE SECRETARY (Resigned 2006)	$ 38.33	
FEENSTRA, DARREN	VEHICLE & SMALL ENGINE MECHANIC	$ 46.70	$ 52.68

APPENDIX 1

Resolution of the Board of Governors of the California Community Colleges No. 2006-02

Whereas, California Education Code section 76300 was recently amended by Assembly Bill 1802 (Stats. 2006, ch. 79) to reduce the enrollment fee from $26 per unit to "($20) per unit per semester, effective with the spring term of the 2006-07 academic year;" and

Whereas, There are indications that the Legislature actually intended to have the reduction in the enrollment fee begin with any term beginning on or after January 1, 2007, even if that term begins before the "Spring 2007" semester or quarter; and

Whereas, Many colleges with intersessions beginning before the Spring 2007 term will soon begin early registration during which students will be simultaneously enrolling in classes for both the intersession and for the regular Spring term; and

Whereas, Under these circumstances it will be administratively difficult and confusing to students to require colleges to charge $26 per unit for intersessions and $20 for the Spring term; and

Whereas, California Education Code section 76300 also gives the Board of Governors authority to proportionately adjust the per unit enrollment fee for intersessions; *now therefore, be it*

Resolved, That the Board of Governors of the California Community Colleges hereby takes the following actions:

For any term or intersession beginning on or after January 1, 2007, and prior to the Spring 2007 semester or quarter, a community college district may charge an enrollment fee of $20 per semester unit or $13 per quarter unit. In addition, for any subsequent term or intersession for which the Legislature has authorized a fee of $20 per semester unit, a community college district shall charge an enrollment fee of $13 per quarter unit if applicable.

Schedule 4
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers							
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324	$ 6,039,921.00
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606	$ 120,798
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301	For 00-01 through 06-07 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 20.00
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843	272,320	301,996
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811	$ 274,816
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606	$ 120,798
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301							
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811	$ 274,816
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**	**$ 389,417**	**$ 395,614**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2006-07 fees are $20.00.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$83,642,183	$73,633,954	$4,732,448	$78,366,402
ENROLL FEE ADMIN (2%)	146,652	134,920	11,732	146,652
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	937,055	0	937,055	937,055
S.F.A.A.	894,005	822,484	71,521	894,005
E.O.P.S.	1,793,109	1,649,661	143,448	1,793,109
C.A.R.E.	300,826	276,760	24,066	300,826
D.S.P.S.	1,544,367	1,420,817	123,550	1,544,367
STATE HOSPITALS	0	0	0	0
CALWORKS	1,428,377	1,130,107	298,270	1,428,377
MATRICULATION (CREDIT)	1,202,793	1,100,129	102,664	1,202,793
MATRIC. (NONCREDIT)	240,291	221,067	19,224	240,291
FAC.& STAFF DIVERSITY	20,615	18,965	1,650	20,615
PART-TIME FAC. ALLO.	937,446	862,451	74,995	937,446
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	214,102	196,974	17,128	214,102
SCHDL. MAINT. & REPAIR	214,122	196,993	17,129	214,122
TANF	237,827	218,801	19,026	237,827
ECON. DEVELOPMENT	1,440,742	1,210,223	0	1,210,223
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	100,577	100,577	0	100,577
PRIOR YEAR CORRECTION	2,074,787	2,074,787	0	2,074,787
ONE TIME FUNDS				
TRANSITION PAYMENT	235,129	205,143	29,986	235,129
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	380,093	380,093	0	380,093
BASIC SKILLS -REAPPROP	534,568	534,568	0	534,568
CAR. TECH. TRAILER BIL	676,900	676,900	0	676,900
GEN. PUR. TRAILER BILL	1,324,258	1,324,258	0	1,324,258
INST. MATERIAL TRAILER	799,087	799,087	0	799,087
SCHLD.MAINT. TRAILER B	799,087	799,087	0	799,087
FACULTY STAFF DEV	85,063	85,063	0	85,063
TOTAL	$102,256,019	$90,112,631	$6,637,088	$96,749,719

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch 4A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 61.51	$ 64.59	$ 3,135.64	$ 256.03	$ 78.73	$ 44.73	$ 46.96	$ 22.19
	EFCW-1 B. 1. b.		$ 180.59	$ 28.15	$ 97.38	$ 1,038.20			$ 391.60	
	EFCW-1 B. 2. a.									
	EFCW-1 B. 2. b.		$ 14,235.42	$ 15,490.64	$ 16,242.94	$ 22,470.20	$ 22,494.58	$ 18,241.16	$ 17,915.35	$ 106,384.75
	EFCW-1 B. 2. c.			$ 1,227.21	$ 1,254.67	$ 1,645.88		$ 2,102.31	$ 2,207.12	$ 1,109.60
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 14,477.52	$ 16,810.59	$ 20,730.63	$ 25,410.31	$ 22,573.31	$ 20,388.20	$ 20,561.03	$ 107,516.54
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 244,673.00	$ 258,940.00	$ 282,099.00	$ 296,585.00	$ 363,527.00	$ 412,824.00	$ 389,417.00	395614
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (230,195.48)	$ (242,129.41)	$ (261,368.37)	$ (271,174.69)	$ (340,953.69)	$ (392,435.80)	$ (368,855.97)	$ (288,097.46)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 14,477.52**	**$ 16,810.59**	**$ 20,730.63**	**$ 25,410.31**	**$ 22,573.31**	**$ 20,388.20**	**$ 20,561.03**	**$ 107,516.54**

California Home

Tuesday, May 22, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Long Beach College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 22, 2012 03:25:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	361	89,796
BOGW - Part A-2 based on SSI recipient status	247	50,427
BOGW - Part A-3 based on general assistance recipient status	103	24,443
BOGW - Part A basis unreported	142	47,171
BOGW - Part B based on income standards	8,672	2,344,546
BOGW - Part C based on financial need	9,616	3,565,231
Fee Waiver – Dependent child of deceased or disabled Veteran	70	25,562

Total Amount = $ 6,147,176

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Long Beach Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D J Brownell

for Keith B. Petersen, President

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	☐	(09) Reimbursement	X
	(04) Combined	☐	(10) Combined	☐
	(05) Amended	☐	(11) Amended	☐
Fiscal Year of cost	(06)		(12) 2004-2005	
Total Claimed Amount	(07)		(13) $ 344,399	
Less: 10% Late Penalty			(14) $ 34,440	
Less: Prior Claim Payment Received			(15) $ -	
Net Claimed Amount			(16) $ 309,959	
Due from State	(08)		(17) $ 309,959	
Due to State			(18)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	75
(24) EFCW-1, (04)(A)(2)(a)(f)	407,222
(25) EFCW-1, (04)(B)(1)(a)(f)	45
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	18,241
(29) EFCW-1, (04)(B)(2)(c)(f)	2,102
(30) EFCW-1, (06)	32
(31) EFCW-1, (07)	89,505
(32) EFCW-1, (09)	152,403
(33) EFCW-1, (10)	20,388
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) I. Ramos **Date** 6-25-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 227	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Long Beach Community College District	Reimbursement	X	2004-2005
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 75.20	$ -	$ -	$ -	$ -	$ 75.20
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 256,384.31	$ -	$ 150,837.50	$ -	$ -	$ 407,221.81
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 44.73	$ -	$ -	$ -	$ -	$ 44.73
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 18,241.16	$ -	$ -	$ -	$ -	$ 18,241.16
c. Reporting BOG fee waiver data to CCC	$ 2,102.31	$ -	$ -	$ -	$ -	$ 2,102.31
(05) Total Direct Costs	$ 276,847.71	$ -	$ 150,837.50	$ -	$ -	$ 427,685.21

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.33%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 89,504.86
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 517,190.07
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 152,403.00
(10) Less: Enrollment Fee Waiver offsets		$ 20,388.20
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 344,398.87

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Hicks, Patricia Lead Cashier	$37.60	2.0	$ 75.20				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 75.20	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant:) Beach Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$15.47	5,488.5	$ 84,907.10				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$15.47	5,811.3	$ 89,900.81				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$15.47	5,273.2	$ 81,576.40				
Software/Consultant costs for on-line enrollment and fees collection Ciber Consultant	$100.00	1,508.4			$ 150,837.50		
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 256,384.31	$ -	$ 150,837.50	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
g Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$89.46	0.5	$ 44.73				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 44.73	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	119.4	$ 3,177.23				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	35.5	$ 944.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$26.61	78.9	$ 2,099.53				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	141.9	$ 3,775.96				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 18,241.16	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
g Beach Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$89.46	23.5	$ 2,102.31				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,102.31	$ -	$ -	$ -	$ -

New 04/06

Long Beach Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

005

Sorted by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1,508.38	Ciber	Consultant	$100.00	$150,837.50	Software/Consultant costs for on-line enrollment and fees collection	Calculating and collecting enrollment fees
	1,508.38	**Ciber Total**			$150,837.50		
04-05	23.50	Du Bois, Toni	Dean, Financial Aid	$89.46	$2,102.31	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
04-05	0.50	Du Bois, Toni	Dean, Financial Aid	$89.46	$44.73	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,147.04		
04-05	5,488.50	Enrollment Office Staff	Collecting Fees	$15.47	$84,907.10	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	5,811.30	Enrollment Office Staff	Collecting Fees	$15.47	$89,900.81	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	5,273.20	Enrollment Office Staff	Collecting Fees	$15.47	$81,576.40	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	16,573.00	**Enrollment Office Staff Total**			$256,384.31		
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Receiving waiver applications	Waiving student fees
04-05	119.40	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$3,177.23	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	78.90	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$26.61	$2,099.53	Entering approved application information into district records; providing student award letter	Waiving student fees
	437.10	**Financial Aid Office Staff (BOG A/B) Total**			$11,631.22		
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Receiving waiver applications	Waiving student fees
04-05	35.50	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$944.66	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	141.90	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$26.61	$3,775.96	Entering approved application information into district records; providing student award letter	Waiving student fees
	248.40	**Financial Aid Office Staff (BOG C) Total**			$6,609.94		
04-05	2.00	Hicks, Patricia	Lead Cashier	$37.60	$75.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.20		
	18,792.88	**Grand Total**			$427,685.21		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$50,775,403		$50,775,403	$1,036,216	$49,739,187
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,644,983		2,644,983	30,286	2,614,697
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	180,188		180,188		180,188
Other Instructional Administration & Instructional Governance	6090	220,556		220,556		220,556
Instructional Support Services	6100					
Learning Center	6110	800,862		800,862	10,740	790,122
Library	6120	1,792,044		1,792,044	24,992	1,767,052
Media	6130	902,063		902,063	7,782	894,281
Museums and Galleries	6140	1,575		1,575		1,575
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	84,023		84,023		84,023
Admissions and Records	6200	2,206,462		2,206,462	39,928	2,166,534
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,189,427		3,189,427	156,140	3,033,287
Matriculation and Student Assessment	6320	796,630		796,630	41,295	755,335
Transfer Programs	6330	661,629		661,629	15,509	646,120
Career Guidance	6340	255,534		255,534	12,395	243,139
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	732,781		732,781	2,043	730,738
Subtotal		$65,244,160	$0	$65,244,160	$1,377,326	$63,866,834

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,028,838		$1,028,838	$5,463	$1,023,375
Health Services	6440	481,890		481,890	905	480,985
Student Personnel Admin.	6450	1,584,409		1,584,409	4,216	1,580,193
Financial Aid Administration	6460	2,258,974		2,258,974	173,328	2,085,646
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	748,096		748,096	45,874	702,222
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,949,467		1,949,467	1,949,467	0
Custodial Services	6530	3,000,901		3,000,901	3,000,901	0
Grounds Maintenance and Repairs	6550	765,635		765,635	765,635	0
Utilities	6570	1,814,246		1,814,246	1,814,246	0
Other	6590	43,165		43,165	43,165	0
Planning, Policy Making, and Coordination	6600	5,189,978		5,189,978	5,189,978	0
General Inst. Support Services	6700					
Community Relations	6710	870,714		870,714	870,714	0
Fiscal Operations	6720	2,488,662		2,488,662	2,488,662	0
Human Resources Management	6730	1,666,961		1,666,961	1,666,961	0
Noninstructional Staff Benefits & Incentives	6740	110,370		110,370	110,370	0
Staff Development	6750	151,451		151,451	151,451	0
Staff Diversity	6760	16,214		16,214	16,214	0
Logistical Services	6770	2,096,868		2,096,868	2,096,868	0
Management Information Systems	6780	2,174,133		2,174,133	2,174,133	0
Subtotal		$93,685,132	$0	$93,685,132	$23,945,877	$69,739,255

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	172,589		172,589	172,589	0
Community Services and Economic Development	6800					
Community Recreation	6810	72,475		72,475		72,475
Community Service Classes	6820					
Community Use of Facilities	6830	46,885		46,885		46,885
Economic Development	6840	3,100,797		3,100,797	35,364	3,065,433
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	25,660		25,660		25,660
Farm Operations	6930					
Food Services	6940					
Parking	6950	133,610		133,610	4,077	129,533
Student and Co-curricular Activities	6960	660,956		660,956		660,956
Student Housing	6970					
Other	6990	139,610		139,610	130	139,480
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	833,134		833,134		833,134
Physical Property Acquisitions	7100					
(05) Total		$98,870,848	$0	$98,870,848	$24,158,037	$74,712,811
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.33%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	333,429	43,902	17,108	4,961		399,400
Architecture and Environmental Design	0200						
Biological Sciences	0400	2,209,815	50,561	50,773	12,812		2,323,961
Business and Management	0500	2,579,722	102,719	43,965	176,593		2,902,999
Communications	0600						
Computer and Information Science	0700	1,129,914	61,599	45,065	86,349		1,322,927
Education	0800	3,289,667	424,394	62,727	73,978		3,850,766
Engineering and Related Industrial Tech.	0900	4,125,346	247,466	252,274	241,620		4,866,706
Fine and Applied Arts	1000	5,380,561	163,217	148,465	138,413		5,830,656
Foreign Language	1100	1,137,504	68,325	5,091	3,293		1,214,213
Health	1200	3,195,578	235,112	70,378	14,695		3,515,763
Consumer Education and Home Economics	1300	2,834,618	209,892	56,507	8,987		3,110,004
Law	1400						
Humanities (Letters)	1500	8,250,942	443,463	39,504	54,646		8,788,555
Library Science	1600	832,765	114,421	32,730	159,549		1,139,465
Mathematics	1700	2,826,725	79,193	17,253			2,923,171
Military Studies	1800						
Physical Sciences	1900	1,412,246	30,346	13,757	11,976		1,468,325
Psychology	2000						
Public Affairs and Services	2100	601,253	28,499	610,279			1,240,031
Social Sciences	2200	3,465,266	145,877	25,881	12,143		3,649,167
Commercial Services	3000	604,674	32,544	14,388	11,983		663,589
Interdisciplinary Studies	4900	357,306	39,526	21,497	24,218		442,547
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,123,158					1,123,158
Subtotal - Instructional Activities	**599**	45,690,489	2,521,056	1,527,642	1,036,216		50,775,403

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,342,320	272,377	30,286		2,644,983
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		175,639	4,549			180,188
Other Instruct. Admin. & Instruct. Governance	6090		219,726	830			220,556
Subtotal - Instructional Administration	**6000**		2,737,685	277,756	30,286		3,045,727
Instructional Support Services (6100)							
Learning Center	6110		760,638	29,484	10,740		800,862
Library	6120		1,707,835	59,217	24,992		1,792,044
Media	6130		873,181	21,100	7,782		902,063
Museums and Galleries	6140		1,575				1,575
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		50,376	33,647			84,023
Subtotal - Instructional Support Services	**6100**		3,393,605	143,448	43,514		3,580,567
Admissions and Records	**6200**		2,063,957	102,577	39,928		2,206,462
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,908,364	124,923	156,140		3,189,427
Matriculation and Student Assessment	6320		704,922	50,413	41,295		796,630
Transfer Programs	6330		543,939	102,181	15,509		661,629
Career Guidance	6340		221,635	21,504	12,395		255,534
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,378,860	299,021	225,339		4,903,220

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		711,023	19,715	2,043	*	732,781
Extended Opportunity Prgms. & Services (EOPS)	6430		970,572	52,803	5,463	*	1,028,838
Health Services	6440		387,581	93,404	905		481,890
Student Personnel Administration	6450		1,555,946	24,247	4,216		1,584,409
Financial Aid Administration	6460		1,915,830	169,816	173,328		2,258,974
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		616,644	85,578	45,874		748,096
Subtotal - Other Student Services	**6400**		6,157,596	445,563	231,829		6,834,988
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,632,392	293,763	23,312		1,949,467
Custodial Services	6530		2,759,544	190,151	51,206		3,000,901
Grounds Maintenance and Repairs	6550		684,720	80,915			765,635
Utilities	6570			1,814,246			1,814,246
Other Operation and Maintenance of Plant	6590			43,165			43,165
Subtotal - Operation and Maintenance of Plant	**6500**		5,076,656	2,422,240	74,518		7,573,414
Planning, Policymaking, and Coordination	**6600**		3,328,023	1,829,533	32,422		5,189,978

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		749,242	104,800	16,672		870,714
Fiscal Operations	6720		1,844,641	633,513	10,508		2,488,662
Human Resources Management	6730		1,479,678	175,803	11,480		1,666,961
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		110,370				110,370
Staff Development	6750		123,498	27,953			151,451
Staff Diversity	6760			16,214			16,214
Logistical Services	6770		1,595,054	421,246	80,568		2,096,868
Management Information Systems	6780		1,927,394	123,556	123,183		2,174,133
Other General Institutional Support Services	6790		169,047	3,542			172,589
Subtotal - General Institutional Support Services	**6700**		7,998,924	1,506,627	242,411		9,747,962
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		69,968	2,507			72,475
Community Service Classes	6820						
Community Use Facilities	6830		46,885				46,885
Economic Development	6840		2,821,848	243,585	35,364		3,100,797
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		2,938,701	246,092	35,364		3,220,157

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		25,649	11			25,660
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,730	127,803	4,077		133,610
Student and Co-curricular Activities	6960		649,409	11,547			660,956
Student Housing	6970						
Other Ancillary Services	6990		101,013	38,467	130		139,610
Subtotal - Ancillary Services	**6900**		777,801	177,828	4,207		959,836
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090		582,566	250,568			833,134
Subtotal - Auxiliary Operations	**7000**		582,566	250,568			833,134
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					11,500,356	11,500,356
Other Outgo	7330					428,502	428,502
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	45,690,489	41,955,430	9,228,895	1,996,034	11,928,858	110,799,706

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Long Beach Community College District **840** District Code No

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	64,570
Avg. time p/account	5.1
Total Time (in minutes)	329307
Per Hour	60
Hours Worked (** **Activity 11**)	**5488.5**

***EFC 2** (Not provided by client - no substitute multiplier can be used for activity code 12)	
Avg. time p/student	8.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 12**)	**0.0**

***EFC 1**	64,570
Avg. time p/question	5.4
Total Time (in minutes)	348678
Per Hour	60
Hours Worked (** **Activity 13**)	**5811.3**

***EFC 2** (Not provided by client - substituted multiplier *EFC 1)	64,570
Avg. time p/file	4.9
Total Time (in minutes)	316393
Per Hour	60
Hours Worked (** **Activity 14**)	**5273.2**

***EFC 4** (Not provided by client)	
Avg. time p/account (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 15**)	**0.0**

***EFC 5 (Not provided by client)**	
Avg. time p/student (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary for BOG A/B

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	
Avg. time p/question	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 21**)	60
	119.4
***EFW 6**	
Avg. time p/application	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 22**)	60
	119.4
***EFW 6**	
Avg. time p/evaluation	14,327
Total Time (in minutes)	0.5
Per Hour	7164
Hours Worked (** **Activity 23**)	60
	119.4
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 24**)	**0.0**
***EFW 7**	
Avg. time p/application	9,473
Total Time (in minutes)	0.5
Per Hour	4737
Hours Worked (** **Activity 25**)	60
	78.9
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 26**)	**0.0**

Conclusion: *Findings will go forward to the EFCW-2.*

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 1C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary for BOG C

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

	***EFW 6**	
	Avg. time p/question	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 21)**	60
		35.5
	***EFW 6**	
	Avg. time p/application	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 22)**	60
		35.5
	***EFW 6**	
	Avg. time p/evaluation	2,128
	Total Time (in minutes)	1.0
	Per Hour	2128
	Hours Worked **(** Activity 23)**	60
		35.5
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 24)**	**0.0**
***	***EFW 7 (used *EFW 6)**	
	Avg. time p/application	2,128
	Total Time (in minutes)	4.0
	Per Hour	8512
	Hours Worked **(** Activity 25)**	60
		141.9
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

*** Normally we would not substitute *EFW 6 (# of applications received) for *EFW 7 (# of applications approved) because *EFW 6 would be a larger number than *EFW 7. Clients #'s for *EFW 6 (# of applications received) for BOG C was much, much lower than the CCCCO's website #'s for *EFW 7 (# of applications approved), so therefore we used multiplier *EFW 6 for code 25.

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See in workpapers of 04-05 claim only.)
Initial year claim 98-99 through 05-06. Ane timestudy used for all initial years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Acosta, Adelino	Admissions & Records Tech II	5	8	5	5		
Alvial, Bertha	Registration Worker	5	8	5	5		
Alvial, Lefia	Registration Worker	5	8	5	5		
Anderson, Amy	Registration Aide	5	8	5	5		
Brackman, Pamela	Admissions & Records Tech II	5	8	5	4		
Bronilla, Cheryl	Registration Aide	5	8	5	5		
Brown, Eileen	Admissions & Records Tech II	5	8	5	5		
Castillo, Josefina	Registration Worker	5	8	5	5		
Chamlem, Sombat	Registration Aide	5	8	5	5		
Clark, Kamryn	Registration Worker	5	8	5	5		
Collado, Carmen	Registration Aide	5	8	5	5		
Combs, April	Temporary Office Worker I	5	8	5	5		
De La Rama, Allen	Registration Aide	5	8	5	5		
De La Rama, Micah	Temporary Office Worker I	5	8	5	5		
Deweese, James	Registration Aide	5	8	5	5		
Dorsey, Krystal	Registration Aide	5	8	5	5		
Fairmen, Audrey	Registration Aide	5	8	5	5		
Franco, Dolores	International Admissions/Records Tech. II	5	9	7	5		
Galvan, Karen	Registration Worker	5	8	5	5		
Garces, Tim	Registration Worker	5	8	5	5		
Gardner, Darice	Registration Worker	5	8	5	5		
Gonzales, Mary	Registration Aide	5	8	5	5		
Heth, Linda	Temporary Office Worker I	5	8	5	5		
Hicks, Patricia	Lead Cashier	5	5	5	5	5	5
Hiemstra, Torri	Registration Aide	5	8	5	5		
Jelin, Ivan	Registration Worker	5	8	5	5		
Kemp, Erma	Registration Worker	5	5	8	5		
Kinsella, Denise	International Program Manager			10			
Lemle, Barbara	Casual - Registrar Worker	5	8	5	5		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II	5	7	6	6		
Liebrecht, Cathy (01-02)	Registration Aide	5	8	5	5		
MacCullen, Jana	Registration Worker	5	8	5	5		
MacCullen, Jennifer	Registration Worker	5	8	5	5		
MacCullen, Matthew	Registration Worker	5	8	5	5		
MacCullen, Ruth	Associate Registrar	10	12	15	8		
Maiava, Tulia	Registration Aide	5	8	5	5		
McKibben, Emily	Registration Worker	5	8	5	5		
Mello, Sandra (01-02)	Registration Aide	5	8	5	5		
Mello, Sandra (98-99 to 00-01)	Registration Worker	5	8	5	5		

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Mendoza, Camelia	Registration Worker	5	8	5	5		
Milkes, Sharon	Senior Clerk/A&R Tech. II	6	9	6	5		
Miller, Margaret	Admissions & Records Tech II	5	8	5	5		
Moll, Corrin	Registration Worker	5	8	5	5		
Nguyen, Kevin	Registration Worker	5	8	5	5		
Nichols, Anthony	Registration Worker	5	8	5	5		
Odell, Renee	Registration Aide	5	8	5	5		
Olsen, Sharon	Registration Aide	5	8	5	5		
Parker, Jared	Registration Worker	5	8	5	5		
Pettit, Marcia	Associate Registrar	6	9	8	4		
Pouono, Pasadena	Registration Aide	5	8	5	5		
Quintus, Samantha	Registration Aide	5	8	5	5		
Robinson, Stacey	Lead Cashier	3	4	2	1	6	3
Rowan, Loretta	Registration Aide	5	8	5	5		
Rubalcava, Jorge	Registration Worker	5	8	5	5		
Rubalcava, Maria	Records Specialist	6	9	6	4		
Ruelas, Guadalupe	Admissions & Records Tech II	6	9	5	5		
Sanders, Sherrie	Registration Worker	5	8	5	5		
Satele, Leilva	Registration Aide	5	8	5	5		
Satele, Tauasosi Mary	Senior Clerk	4	7	8	4		
Stewart, Lisa	Records Specialist	4	8	5	4		
Tait, Sandra	Registration Worker	5	8	5	5		
Tarrab, Wafa	Registration Worker	5	8	5	5		
Togafau, Hubert	Registration Aide	5	8	5	5		
Tran, Christine	Admissions & Records Tech II	6	8	5	4		
Valle, Heather	Registration Worker	5	8	5	5		
Wade, Cherri	Admissions & Records Tech II	4	8	5	4		
Watson, Katherine	Registration Aide	5	8	5	5		
Wilson, Danny	Registration Aide	5	8	5	5		
Yarbrough, Charlotte	Admissions & Records Tech II	6	9	5	8		
Yost, Mary Margaret	Registration Aide	5	8	5	5		
Average		**5.1**	**8.0**	**5.4**	**4.9**	5.5	4.0

Conclusion: Findings go forward to Schedule 1A.

Only two responses to codes 15 and 16 - so these averages were not used.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Enrollment Fee Collection Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
Bolded PHR's -- see email from client dated 5/18/07 and fax cover sheet dated 5/21/07.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					$26.59	$30.47	$30.47	$30.77
Alvial, Bertha	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Alvial, Lefia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Anderson, Amy	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brackman, Pamela	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Bronilla, Cheryl	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brown, Eileen	Admissions & Records Tech II				$26.11	$31.08	$35.64	$35.64	$37.98
Castillo, Josefina	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Chamlern, Sombat	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Clark, Kamryn	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Collado, Carmen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Combs, April	Temporary Office Worker I					$14.30	$14.30	$14.30	$14.30
De La Rama, Allen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
De La Rama, Micah	Temporary Office Worker I				$12.10		$12.10		
Deweese, James	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Dorsey, Krystal	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Fairmen, Audrey	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Franco, Dolores	International Admissions/Records Tech. II				$29.56	$29.56	$33.85	$35.64	$36.00
Galvan, Karen	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Garces, Tim	Registration Worker	$8.79	$8.79	$8.79	$9.08	$9.08	$9.08	$9.08	$9.08
Gardner, Darice	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gonzales, Mary	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Heth, Linda	Temporary Office Worker I				$12.10	$12.10	$12.10		
Hicks, Patricia	Lead Cashier				$26.11	$31.08	$35.64	$37.60	$37.98
Hiemstra, Torri	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Jelin, Ivan	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kemp, Erma	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kinsella, Denise	International Program Manager				$26.11	$31.08	$31.27	$37.04	$41.30
Lemle, Barbara	Casual - Registrar Worker				$9.08	$9.08	$9.08		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II							$25.10	$26.35
Liebrecht, Cathy (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**		
MacCullen, Jana	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Jennifer	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Matthew	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Ruth	Associate Registrar				$32.71	$34.34	$38.59		$40.99
Maiava, Tulia	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
McKibben, Emily	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (98-99 to 00-01)	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Mendoza, Camelia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Milkes, Sharon	Senior Clerk/A&R Tech. II				$22.74	$25.28	$28.93	$28.93	$30.77
Miller, Margaret	Admissions & Records Tech II				$26.56	$28.02	$32.09	$33.85	$34.19
Moll, Corrin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nguyen, Kevin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nichols, Anthony	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Odell, Renee	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Olsen, Sharon	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Parker, Jared	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Pettit, Marcia	Associate Registrar				$37.61	$42.27	$42.27	$42.27	$42.27
Pouono, Pasadena	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Quintus, Samantha	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Robinson, Stacey	Lead Cashier							$25.43	$25.43
Rowan, Loretta	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Jorge	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Maria	Records Specialist				$21.78	$27.30	$30.47	$32.09	$32.41
Ruelas, Guadalupe	Admissions & Records Tech II				$25.21	$26.59	$30.47	$30.77	$30.77
Sanders, Sherrie	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Leilva	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Tauasosi Mary	Senior Clerk				$25.21	$26.59	$32.09	$32.09	$32.41
Stewart, Lisa	Records Specialist				$23.96	$26.59	$30.47	$30.47	$30.77
Tait, Sandra	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tarrab, Wafa	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Togafau, Hubert	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tran, Christine	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Valle, Heather	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wade, Cherri	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Watson, Katherine	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wilson, Danny	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Yarbrough, Charlotte	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Yost, Mary Margaret	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Average PHR		**$11.22** *	**$11.79** *	**$12.38** *	**$12.99**	**$13.97**	**$15.00**	**$15.47**	**$16.10**

* Note that for FY's 98-99, 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Fee Waiver Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
The fiscal years that staff were involved in was taken from lists by fiscal year made by T. DuBois from LBCCCD.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Alvarado, Olga				$24.79	$29.52	$31.33		
Avila, Jason							$22.93	$22.93
Deering, JoAnn	FA Spec. 7/1/02 -- FA Tech. 1/1/02			$24.79	$29.52			
Duran, Susana	FA Spec. 1/1/04						$25.30	$27.02
Gilliland, Shannon	Account Tech. II FA 7/1/05						$22.93	
Huerta, Maggie				$22.34	$26.59	$28.19	$28.19	$28.47
Kwon, Jennifer								$24.38
Lane, Alan								
Lim, Janice								$24.38
McKibbin, Lori				$27.98				
Menlivar, Juan Franc	FA Spec.					$22.93	$24.13	$25.68
Nguyen, Hue				$26.16	$31.14	$31.33	$31.33	$33.28
Polly, Irene				$24.79	$29.52	$31.14	$31.33	$31.64
Pope, Michelle	FA Spec.				$28.02			
Ruiz, Noelia				$26.56	$23.82	$23.76		
Skille, Steve	Account Tech. II FA					$25.43		
Thim, Monica								
Vaughn, Dara							$26.75	$28.47
Average PHR		**$22.99** *	**$24.14** *	**$25.34**	**$28.30**	**$27.73**	**$26.61**	**$27.36**

* Note that for FY's 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate productive hourly rates for prior fiscal years not provided by client.
Source: SixTen calculated PHR's from annual salary provided by client.
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	**Admissions & Records Tech II**					$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	22.96	24.11	25.32	26.59				
	Divided by 5%	1.05	1.05	1.05	1.05				
	Current fiscal year phr	$21.87	$22.96	$24.11	$25.32				
Brown, Eileen	**Admissions & Records Tech II**				$26.11	$31.08	$35.64	$35.64	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Combs, April	**Temporary Office Worker I**					$14.30	$14.30	$14.30	$14.30
	Hourly employee - so used same hrly rate for missing year				$14.30				
De la Rama, Micah	**Temporary Office Worker I**				$12.10		$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Franco, Dolores	**Int'l Admissions/Records Tech. II**				$29.56	$29.56	$33.85	$35.64	$36.00
	Previous fiscal year phr	26.81	28.15	29.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$25.53	$26.81	$28.15					
Heth, Linda	**Temporary Office Worker I**				$12.10	$12.10	$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Hicks, Patricia	**Lead Cashier**				$26.11	$31.08	$35.64	$37.60	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Milkes, Sharon	**Senior Clerk/A&R Tech. II**				$22.74	$25.28	$28.93	$28.93	$30.77
	Previous fiscal year phr	20.63	21.66	22.74					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$19.65	$20.63	$21.66					
Miller, Margaret	**Admissions & Records Tech II**				$26.56	$28.02	$32.09	$33.85	$34.19
	Previous fiscal year phr	24.10	25.30	26.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.95	$24.10	$25.30					

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-0
Pettit, Marcia	**Associate Registrar**				$37.61	$42.27	$42.27	$42.27	$42.2
	Previous fiscal year phr	$34.11	$35.82	37.61					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$32.49**	**$34.11**	**$35.82**					
Rubalcava, Maria	**Records Specialist**				$21.78	$27.30	$30.47	$32.09	$32.4
	Previous fiscal year phr	19.75	20.74	21.78					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$18.81**	**$19.75**	**$20.74**					
Ruelas, Guadalupe	**Admissions & Records Tech II**				$25.21	$26.59	$30.47	$30.77	$30.77
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$21.78**	**$22.87**	**$24.01**					
Satele, Tauasosi Mary	**Senior Clerk**				$25.21	$26.59	$32.09	$32.09	$32.41
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$21.78**	**$22.87**	**$24.01**					
Stewart, Lisa	**Records Specialist**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					
Wade, Cherri	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					
Yarbrough, Charlotte	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	**$20.70**	**$21.73**	**$22.82**					

Conclusion: Findings go forward to the EFCW-2.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s. workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	59,221	62,569	63,787	66,733	75,701	72,546	64,570
EFC 2	1.8-1 2.	Paid Enrollment fees							
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)							
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.						
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.						
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.					
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128
EFW 7	1.8-3 2.	Waivers Approved	X -						
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.					

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Thurs

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2004 Summer Term

Data Current As Of May 17, 2007 02:50:12

Total Headcount	13,237

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2004 Fall Term

Data Current As Of May 17, 2007 02:50:22

Total Headcount	25,888

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Spring Semester

Data Current As Of May 17, 2007 02:50:36

Total Headcount	24,594

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Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2003-04

Toni DuBois — Employee Name

Dean, Student Financial Aid — Exact Position Title

Financial Aid — Dept. & Location #

x4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
2/12/02	meeting to discuss moving BOGFW to PS		1.0	
3/25/02	assist in development of Bolt on in PS		2.0	
11/14/02	write policy & procedure for BOGFW		2.5	
11/27/02	prepare training material for staff		1.5	
1/6/03	revise student consumer info re: BOG		1.0	
2/5/03	train FA staff on PS - BOGFW		1.0	
4/12/03	input BOGFW apps. to PS		4.0	
9/7/04	complete BOGFW report to state		3.5	
9/23/04	work on MIS reporting for BOG		2.0	
9/28/04	work on MIS reporting for BOG		3.0	
10/01/04	make corrections to rejects MIS		5.0	
10/04/04	make corrections to rejects MIS		6.0	
10/05/04	make final corrections to MIS		4.0	
/ /			Total 23.5	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois — Employee Name: (print)

Dean, Stud. Fin Aid — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: ~~2005-06~~ 2004-2005

Toni DuBois — Dean, Stu. Fin Aid

Employee Name — Exact Position Title

Financial Aid — x4573 — 12mo/11mo/10mo/hrly

Dept. & Location # — Telephone # — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
6/15/05 →	write policy + procedure for 05-06 BOGFW		.5	
8/3/05 → add to 05-06	train staff on changes to BOGFW (RDP)		.5	
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1.6B - code 1B - policies & procedures

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois — Dean, Stu. Fin Aid

Employee Name: (print) — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

Copy - original in 04-05 resources

1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Community College District

Patricia Hicks — Lead Cashier

Employee Name — Exact Position Title

Fiscal Services/PCC Campus — 562-938-3906 — (12mo/11mo/10mo/hrly)

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	N/A							
B. Enrollment Waiver Process:	N/A							
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	2	2	2	2	2	2	2	2 hrs.
B. Enrollment Waiver Process:	N/A							
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	N/A							
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	N/A							
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks — Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

ADELINO ACOSTA
Employee Name

A/R II
Exact Position Title

938-3993
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

BERTHA ALVIAL
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 ~~99-00~~ (00-01) 01-02 ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

LEFIA ALVIAL
Employee Name

registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Amy Anderson
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS / LAC ~~RECORDS TECH I~~
Department/Location

PAMELA BRACKMAN
Employee Name

ADMISSIONS & RECORDS TECH I
Exact Position Title

562-938-3948
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~ OOPS

Circle the years for which you are responding. OOPS

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela Brackman Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Cheryl Bronilla
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

EILEEN BROWN
Employee Name

A/R II
Exact Position Title

938-3948
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

JOSEFINA CASTILLO
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sombat Chamlern
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION - PCC
Department/Location

KAMRYN CLARK
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/14/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Carmen Collado
Employee Name

Registration Aide
Exact Position Title

Telephone # ____ 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

April Combs
Employee Name

Temporary Office Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LRC
Department/Location

Allen J DelaRama
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Micah DeLaRama
Employee Name

Temporary Office Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

James Deweese
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

Krystal Dorsey
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

~~Registration Aide~~ Admissions
Department/Location

Audrey Fairmen
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Department/Location

Dolores Franco
Employee Name

Int'l Admissions/Records Tech II
Exact Position Title

Ext. 4528
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature D Dolores Franco Date 5 3 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission/PCC
Department/Location

Karen Galvan
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

TIM CARCES
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Darice Gardner
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Mary Gonzales
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Linda Heth
Employee Name

Temporary Office Worker I
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - PCC Campus
Department/Location

Patricia Hicks
Employee Name

Lead Cashier
Exact Position Title

562-938-3906
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2-5 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-5 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2-5 min	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-5 min	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Terri Hiemstra
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION / ACC
Department/Location

IVAN JEUN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS - PCC
Department/Location

ERMA KEMP
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College Dist. — District
International Student Program — Department/Location
Denise Kinsella — Employee Name
International Program Manager — Exact Position Title
562-938-4743 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Kinsella Date 5-3-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIAN & RECORDS - PCC
Department/Location

Barbara Lemile
Employee Name

CASUAL - REGISTRAR WORKER
Exact Position Title

938-3943
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02
02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Admissions / LAC
Department/Location

Catherine Liebrecht
Employee Name

A&R Tech II
Exact Position Title

4288
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ only through 2003
~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses. ✓	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report. ✓	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. ✓	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. ✓	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine Liebrecht Date 5/3/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Cathy Liebrecht
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Registration - admission - PCC
Department/Location

Jana mac cullen
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

REGISTRATION-ADMISSION/PCC
Department/Location

JENNIFER MAC CULLEN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / Rec
Department/Location

Matthew MacMillen
Employee Name

Registration
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

RUTH MAC CULLEN
Employee Name

ASSOCIATE REGISTRAR
Exact Position Title

938-3405
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Tylia N. Maiava
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - Registration - PCC
Department/Location

Emily McKibben
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature _____ PLEASE USE BLUE INK

Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sandra Mello
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly (circle)
Telephone # Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Sandra Mello
Employee Name

Registration Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Camelia Mendoza
Employee Name

Registration Worker / LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

PCE A&R
Department/Location

Sharon Mikes
Employee Name

SR Clerk/AR Tech II
Exact Position Title

562 938-3947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
✓ **Code 13** Answering Questions and/or referring student to the appropriate person for an answer.	6					
✓ **Code 14** Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Sharon Mikes

Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Margaret Miller
Employee Name

Admissions & Records Tech II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Coreen Moll
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - PCC
Department/Location

Kevin nguyen
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Anthony Nichols
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Renee Odell
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sharon Olsen
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/~~hrly~~
Telephone # Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Jared Parker
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Marcia Pettit
Employee Name

Associate Registrar
Exact Position Title

938-4719
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Pettit Date 4/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Pasadena Pouono
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Samantha Quintus
Employee Name

Registration Aid
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - LAC Campus.
Department/Location

Stacey ROBINSON
Employee Name

Lead Cashier
Exact Position Title

(562) 938-4455
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Loretta Rowan
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admission / Rec
Department/Location

JORGE RUBALCAVA
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Admissions / PCC
Department/Location

Maria L Rubalcava
Employee Name

Records Specialist
Exact Position Title

562) 938-3994
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria L Rubalcava Date 5-3-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

A&R PCCH II
Department/Location

Guadalupe Rivelas
Employee Name

A&R TECH II
Exact Position Title

5629383946
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Guadalupe Rivelas Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Sherrie Sanders
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Leilua Satele
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

Admissions / LAC
Department/Location

Tauasosi Mary Satele
Employee Name

Senior Clerk
Exact Position Title

562 938 4138
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T Mary Satele Date 5/2/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
AR/ PCC — Department/Location
Lisa Stewart — Employee Name
Records Specialist — Exact Position Title
562 938 3943 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Stewart Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions/PCC
Department/Location

Sandra Tait
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Registration - Admission / PCC
Department/Location

WAFA TARRAB
Employee Name

Registration Worker & LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Hubert Togafau
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH
District

ADMISSIONS
Department/Location

CHRISTINE TRAN
Employee Name

ADMISSIONS TECH II
Exact Position Title

938-4748
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCE
Department/Location

Heather Valles
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

A & R (CLAC)
Department/Location

CHERRI WADE
Employee Name

Admissions / Records Tech II
Exact Position Title

(562) 938-4137 — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cherri Wade Date 05/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Katherine Watson
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Danny Wilson
Employee Name

Registration Aid
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature DL Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.B.C.C.D.
District

AgR / PCC
Department/Location

CHARLOTTE YARBROUGH
Employee Name

AgR TECH. II
Exact Position Title

562) 938-3949
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Mary Margaret Yost
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/17

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1/2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1/2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3~~08~~/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
— BOG C —

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

See attached
Employee Name

Financial Aid Specialist
Exact Position Title

x 4573
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori M Bruce Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BOGFW A+B
18-3 BOG-C

TIME + STATISTICS

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2004-05

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 14,327 applications			
/ /	into PS. Bolton for			
/ /	BOGFW A+B			
/ /	2 mins per application			
/ /	for eligibility determination			
/ /	and input		477.6	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to Ed Express			
/ /	for 2,128 students			
/ /	at 7 minutes per			
/ /	student		248.3	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Stu. Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

17-3 Attachment

2004-05

Financial Aid Specialists

Hue Nguyen - LAC
Irene Kelly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Susana Duran - PCC
Dara Vaughn - PCC
Juan Franc Menjivar - PCC
Monica Thim - LAC
Shannon Gilliland - LAC
Jason Avila - PCC

EFCW 1.8-1

95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

Beach Community College

accounting statistics will be used to calculate your reimbursement. Please report the in the spaces provided.

ata	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
nts enrolled each fiscal								
	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,217 26,296
	22,594	24,619	25,700	28,722	29,779	28,722	25,686	24,999 26,444
	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740
nts who paid enrollment								
nts exempted from es (BOGG, etc):								

12,431.00 +
24,196.00 +
22,594.00 +
99-99 59,221.00 *

0. C

13,446.00 +
24,504.00 +
24,619.00 +
99-00 62,569.00 *

0. C

13,661.00 +
24,426.00 +
25,700.00 +
00-01 63,787.00 *

0. C

15,287.00 +
22,724.00 +
28,722.00 +
01-02 66,733.00 *

0. C

17,605.00 +
28,317.00 +
29,779.00 +
02-03 75,701.00 *

0. C

12,854.00 +
30,970.00 +
28,722.00 +
03-04 72,546.00 *

0. C

13,837.00 +
25,047.00 +
25,686.00 +
04-05 64,570.00 *

0. C

14,000.00 +
26,296.00 +
26,444.00 +
05-06 66,740.00 *

0. C

FICATION: The State of California requires that school district personnel maintain a record of data order for the district to receive reimbursement. Your signature on this form certifies that you data or have provided a good faith estimate which you "certify (or declare) under penalty of ws of the State of California to be true and correct based on your personal knowledge or formation is used for cost accounting purposes only. PLEASE USE BLUE INK

: Linda Roseth Date 5/23/07

ROSETH MANDATED COST SPECIALIST
int) Position or Title

itions, please contact _____, at _____.

HIS INFORMATION BY _____; TO _____.

Ten and Associates

Revised January 2006

LONG BEACH

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Summer	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
Fall	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,296
Spring	22,594	24,619	25,700	28,722	29,779	28,722	25,686	26,444
Total	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740

Rec'd from Hannah Alford - Research Analyst
5/23/07

AND 1.7-3 BOGFW A-3
1.8-3 BOG-C

TIME & STATISTICS

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2004-05

See attached Financial Aid Specialist

Employee Name Exact Position Title

Financial Aid

Dept. & Location # Telephone # (12mo/11mo/10mo/hrly) Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 14,327 applications			
/ /	into PS. Bolton for			
/ /	BOGFW A+B			
/ /	2 mins per application			
/ /	for eligibility determination			
/ /	and input		477.6	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to Ed Express			
/ /	for 2,128 students			
/ /	at 7 minutes per			
/ /	student		248.3	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M. DuBois Date 4-17-06

Toni M. DuBois Dean, Stu. Fin. Aid

Employee Name: (print) Position or Title

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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January 2006

1.7-3 Attachment

2004-05

Financial Aid Specialists

Hue Nguyen - LAC
Irene Kelly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Susana Duran - PCC
Dara Vaughn - PCC
Juan Franc Menjivar - PCC
Monica Thim - LAC
Shannon Gilliland - LAC
Jason Avila - PCC

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Long Beach Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ N/A	$ 2,718,590	$ 2,520,654	$ 2,748,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 5-24-07

Toni M. DuBois
Employee Name: (print)

Dean, Stud. Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Name	Title	03-04	04-05
BERRY, JANICE	EXECUTIVE SECRETARY	$ 56.33	$ 59.63
BERRY, MARSHALL	CUSTODIAL SUPERVISOR	$ 48.33	$ 48.68
BLOMBERG, CYNTHIA	NURSE-LAC	$ 50.71	$ 49.65
BLORE, JOANNE	PROJECT MANAGER, WORKPLACE SKILLS	$ 69.20	
BOUWENS, DEBI	CHILD DEV SITE SUPERVISOR	$ 56.50	
BOWERS, ALLISON	INSTRUCTIONAL ASSISTENCE COORDINATOR	$ 56.01	$ 54.84
BRADSHAW, JOAN	BOARD SECRETARY (Retired 6/04)	$ 54.94	
BYNUM, LOU ANN	ADMIN DEAN, ECONOMIC DEVELOPMENT	$ 110.72	$ 119.80
BYRD, ART	VICE PRESIDENT, STUDENT SUPP SERV	$ 110.72	$ 119.80
CALLAHAN, MARY	VICE PRESIDENT, ACADEMIC AFFAIRS (Retired 6/04)	$ 110.72	
CARR, JOAN	PAYROLL & BENEFITS MANAGER	$ 64.68	$ 65.14
CARTER, JERI	MANAGER, STUDENT LIFE	$ 71.14	$ 71.65
CHOW-OSAKA, ANGELINA	HUMAN RESOURCES ASSISTANT	$ 35.32	
COLLINS, VICTOR	EXECUTIVE VP, HUMAN RESOURCES (Retired 6/04)	$ 124.56	
CREASON, PAUL	DIRECTOR OF GRANTS	$ 84.17	$ 91.35
CREASY, RICHARD	CUSTODIAL SUPERVISOR	$ 46.32	
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)	$ 40.61	
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 65.45	$ 71.03
DORSEY, CHRISTOPHER	ACCOUNTING TECHNICIAN I		$ 43.40
DUBOIS, TONI	DIRECTOR, FINANCIAL AIDE	$ 78.73	$ 89.46

SixTen calculated Productive Hourly Rates w/ 21% benefits for month + 10% benefits for hourly

St	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					26.59	30.47	30.77	30.77
Alvarado, Olga					24.79	29.52	31.33	31.33	
Avila, Jason								22.93	*23.96
Brackman, Pamela	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Brown, Eileen	Admissions & Records Tech II				26.11	31.08	35.64	35.64	37.98
Combs, April	Temporary Office Worker I					14.30	14.30	14.30	14.30
De La Rama, Micah	Temporary Office Worker I				12.10		12.10		
Deering, JoAnn					24.79	29.52	29.52	22.93	
Duran, Susana	FA Spec						22.93	*25.30	27.02
Franco, Dolores	Int'l Admissions/Records Tech. II				29.56	29.56	33.85	35.64	36.00
Gilliland, Shannon	Account Tech. II FA							25.43	28.47
Heth, Linda	Temporary Office Worker I				12.10	12.10	12.10		
Hicks, Patricia	Lead Cashier				26.11	31.08	35.64	37.60	37.98
Huerta, Maggie	FA Spec				22.34	26.59	28.19	28.47	28.47
Kinsella, Denise	International Program Manager				26.11	31.08	31.27	37.04	41.30
KwoN Jennifer							28.19		24.38
Lane, Alan									
Lemle, Barbara	Casual - Registrar Worker				9.08	9.08	9.08	25.10	
Liebrecht, Catherine	Admissions & Records Tech II							*20.88	26.35
Lim, nice									*24.38
MacCullen, Ruth	Associate Registrar				32.71	34.34	38.59		40.99
McKibbin, Lori					27.98		29.52		
Menjivar, Juan Franc	FA Spec						22.93	24.13	25.68
Milkes, Sharon	Senior Clerk/A&R Tech. II				22.74	25.28	28.93	*29.46	30.77
Miller, Margaret	Admissions & Records Tech II				26.56	28.02	32.09	33.85	34.19
Nguyen, Hue	FA Spec				26.16	31.14	31.33	31.33	33.28
Pettit, Marcia	Associate Registrar				37.61	42.27	42.27	42.27	*43.49
Polly, Irene	FA Spec				24.79	29.52	31.14	31.33	31.64
Pope, Irene								25.43	*28.14
Robinson, Stacey	Lead Cashier								
Rubalcava, Maria	Records Specialist				21.78	27.30	30.47	32.09	32.41
Delas, Guadalupe	Admissions & Records Tech II	***			25.21	26.59	30.47	30.77	30.77
Ruiz, Noelia					26.56	23.82	23.76		
Stele, Tauasosi Mary	Senior Clerk				25.21	26.59	32.09	32.09	32.41
Tille, Steve	Account Tech. II FA				12.10	22.80	25.43	26.75	28.47
Stewart, Lisa	Records Specialist				23.96	26.59	30.47	30.47	30.77
Sum, Monica	FA Spec								29.14
Tan, Christine	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Ugh Dara	FA Spec				20.53	22.80	24.13	26.75	28.47
Wade, Cherri	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77
Yarbrough, Charlotte	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77

* = ~~Changed PHR w/ no back-up~~ where back up was not provided - used same PHR as previous FY. If no previous PHR available used following FY PHR and divided by 5%

** = No Back-up - gave the same as Jennifer Kwon

*** = ~~difference or average difference of all other yrs provided~~

Staff	Title	PHRs 02-03	PHRs 05-06
Allen, Marianne	FA Counselor	48.76	55.80
Af od, Kathie	Secretary LAC	29.52	32.46
Blassetti, Sara	FA - PT Counselor	N/W	12.10
Catipon, Mary	FA - PT Counselor	N/N	52.23
Davis, Judy	Secretary		N/W
Douglass, Genevieve	Account Tech. II		N/N
Eksigian, Arda	Assoc. Director FA	40.83	47.82
Garvey, Peggy	Account Tech. II	28.02	29.70
Gutierrez, Dorothy	FA Advisor	44.93	45.65
MacCallum, Michael	FA Counselor	64.82	72.70
Miller, Laura	Account Tech. II	29.48	
Nachreiner, Ron	Office Assistant		19.50
Overton, Kimberly	FA - PT Counselor	N/W	
Pope, Michele	FA Specialist	28.02	29.47
Stepan, Betty	FA Counselor	58.32	61.24
Sweet-Kelly, Deborah	Office Assistant	23.38	24.55
Tait, Sandra	Office Assistant	19.56	21.79
Tim, Sophorn	FA Data Software Spec.	7.43	7.80
Turner, Lydia	FA Counselor		53.53
Yentch, Richard	Assoc. Director FA		47.82

NW - not working

There are two other employees w/ this title Blassetti & Catipon - used lower of the two = 12.10

Sixten Calculated Productive Hourly Rates w/ 21% benefits for monthly + 8% benefits for hourly

FA Specialists

0•	C	
Duran 27•02	+	
Huerta 28•47	+	
menjivar 25•68	+	
Nguyen 33•28	+	
Polly 31•64	+	
Vaughn 28•47	+	
Pope, Michele 29•42	+	
203•98	*	
203•98	÷	
7•	=	
29•14	*	
Avg FA Spec used for Thim, Monica		
0•	C	

0•	C	
0•	C	
Pope 28•02	×	
1•05	=	
29•42	*	
0•	C	
Stepan 58•32	×	
1•05	=	
61•24	*	
0•	C	
Sweet-Kelly 23•38	×	
1•05	=	
24•55	*	
0•	C	
0•	C	
7•43	×	
Tait 1•05	=	
7•80	*	
0•	C	

Schedule 5
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Consultant Summary

Purpose: To summarize consultant costs for EFCW.
Source: Invoices from Ciber
Findings:

Invoice Date	Billing Period		Total Amount	
	Beginning	Ending		
7/30/2004	7/10/2004	7/23/2004	$	56,922.50
9/24/2004	9/4/2004	9/17/2004	$	22,440.00
10/7/2004	9/18/2004	10/1/2004	$	37,125.00
10/21/2004	10/2/2004	10/15/2004	$	34,350.00
Total			**$**	**150,837.50**

Conclusion: Findings go forward to EFCW-2.

Entered under component calculating collection of enrollment fees

00141

ciber
An Equal Opportunity Employer

5251 DTC Parkway, Suite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INFORMATION SYSTEMS
AUG 09 2004
RECEIVED

INVOICE NO.	08-013258
DATE OF INVOICE	07/30/2004
CUSTOMER ACCOUNT NO.	08002LBC001
PAYMENT TERMS	Net 20
BILLING PERIOD	
BEGINNING	07/10/2004
ENDING	07/23/2004
PURCHASE ORDER NO./REFERENCE	

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

HRS/QTY	DESCRIPTION	RATE	AMOUNT
82.50	Bitter,Jerry	145.00	11,962.50
80.00	Collings,Richard	145.00	11,600.00
80.00	Cubba,Carl	145.00	11,600.00
88.00	Dani,Sameer	145.00	12,760.00
60.00	Mueller,Barbara	150.00	9,000.00
		TOTAL	56,922.50

9/21/04

CW99611.445
UH12694
line#1

CIBER Invoice Hours/Qty Detail w[illegible]k

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-013258
Invoice Date: 07/30/2004
Billing Period: 7/10/2004 To 7/23/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Bitter,Jerry	Task 1	07/12/2004	9.00		
Bitter,Jerry	Task 1	07/13/2004	12.00		
Bitter,Jerry	Task 1	07/14/2004	13.00		
Bitter,Jerry	Task 1	07/15/2004	8.00		
Bitter,Jerry	Task 1	07/16/2004	0.50		
Bitter,Jerry	Task 1	07/19/2004	9.00		
Bitter,Jerry	Task 1	07/20/2004	11.50		
Bitter,Jerry	Task 1	07/21/2004	11.50		
Bitter,Jerry	Task 1	07/22/2004	8.00		
Bitter,Jerry Total:			**82.50**	145.00	11,962.
Collings,Richard	08002LBC00105	07/12/2004	10.00		
Collings,Richard	08002LBC00105	07/13/2004	10.00		
Collings,Richard	08002LBC00105	07/14/2004	10.00		
Collings,Richard	08002LBC00105	07/15/2004	10.00		
Collings,Richard	08002LBC00105	07/19/2004	12.00		
Collings,Richard	08002LBC00105	07/20/2004	11.00		
Collings,Richard	08002LBC00105	07/21/2004	10.00		
Collings,Richard	08002LBC00105	07/22/2004	7.00		
Collings,Richard Total:			**80.00**	145.00	11,600.(
Cubba,Carl	Task 1	07/12/2004	11.00		
Cubba,Carl	Task 1	07/13/2004	12.00		
Cubba,Carl	Task 1	07/14/2004	11.00		
Cubba,Carl	Task 1	07/15/2004	6.00		
Cubba,Carl	Task 1	07/19/2004	10.00		
Cubba,Carl	Task 1	07/20/2004	11.00		
Cubba,Carl	Task 1	07/21/2004	11.00		
Cubba,Carl	Task 1	07/22/2004	8.00		
Cubba,Carl Total:			**80.00**	145.00	11,600.0(
Dani,Sameer	08002LBC00105	07/12/2004	11.00		
Dani,Sameer	08002LBC00105	07/13/2004	11.00		
Dani,Sameer	08002LBC00105	07/14/2004	11.00		
Dani,Sameer	08002LBC00105	07/15/2004	10.00		
Dani,Sameer	08002LBC00105	07/19/2004	11.00		
Dani,Sameer	08002LBC00105	07/20/2004	11.00		
Dani,Sameer	08002LBC00105	07/21/2004	11.00		
Dani,Sameer	08002LBC00105	07/22/2004	12.00		
Dani,Sameer Total:			**88.00**	145.00	12,760.0(
Mueller,Barbara	Task 1	07/13/2004	11.00		
Mueller,Barbara	Task 1	07/14/2004	11.00		
Mueller,Barbara	Task 1	07/15/2004	10.00		
Mueller,Barbara	Task 1	07/19/2004	8.00		

ciber
An Equal Opportunity Employer
5251 DTC ..., Suite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT T

Dept. 1305
Denver CO 80291-1305

INVOICE

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INFORMATION SYSTEMS

OCT 01 2004

RECEIVED

INVOICE NO.	
08-014961	
DATE OF INVOICE	
09/24/2004	
CUSTOMER ACCOUNT NO.	
08002LBC001	
PAYMENT TERMS	
Net 20	
BILLING PERIOD	
BEGINNING	ENDING
09/04/2004	09/17/2004
PURCHASE ORDER NO./REFERENCE	

HRS/QTY	DESCRIPTION	RATE	AMOUNT
72.00	Collings,Richard	145.00	10,440
80.00	Dani,Sameer	150.00	12,000

10/4/04

CN99611.445
UH12694

TOTAL	22,440.0

9/24/2004 9:00:26 AM 451001
riginal

For billing questions, please call 925-609-3117

CIBER Invoice Hours/Qty Detail wi ...sk

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-014961
Invoice Date: 09/24/2004
Billing Period: 9/4/2004 To 9/17/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOUN
Collings,Richard	08002LBC00105	09/13/2004	12.00		
Collings,Richard	08002LBC00105	09/14/2004	11.00		
Collings,Richard	08002LBC00105	09/15/2004	10.00		
Collings,Richard	08002LBC00105	09/16/2004	7.00		
Collings,Richard	08002LBC00105	09/07/2004	12.50		
Collings,Richard	08002LBC00105	09/08/2004	12.00		
Collings,Richard	08002LBC00105	09/09/2004	7.50		
Collings,Richard Total:			**72.00**	**145.00**	10,440.0
Dani,Sameer	08002LBC00105	09/10/2004	8.00		
Dani,Sameer	08002LBC00105	09/13/2004	10.00		
Dani,Sameer	08002LBC00105	09/14/2004	11.00		
Dani,Sameer	08002LBC00105	09/15/2004	11.00		
Dani,Sameer	08002LBC00105	09/16/2004	8.00		
Dani,Sameer	08002LBC00105	09/07/2004	10.00		
Dani,Sameer	08002LBC00105	09/08/2004	11.00		
Dani,Sameer	08002LBC00105	09/09/2004	11.00		
Dani,Sameer Total:			**80.00**	**150.00**	12,000.0

Total: **22,440.00**

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An Equal Opportunity Employer
5251 DTC [illegible]ite 1400
Greenwood Village, CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INVOICE NO.
08-015428
DATE OF INVOICE
10/07/2004
CUSTOMER ACCOUNT NO.
08002LBC001
PAYMENT TERMS
Net 20
BILLING PERIOD
BEGINNING / ENDING
09/18/2004 / 10/01/2004
PURCHASE ORDER NO./REFERENCE

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INFORMATION SYSTEMS
OCT 12 2004
RECEIVED

HRS/QTY	DESCRIPTION	RATE	AMOUNT
80.00	Collings,Richard	150.00	12,000.
80.00	Dani,Sameer	150.00	12,000.
87.50	Gaston,Sandra	150.00	13,125.
		TOTAL	37,125.00

10/13/04

CN 99611.445
N # 12694

For billing questions, please call 925-609-3117

CIBER Invoice Hours/Qty Detail

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-015428
Invoice Date: 10/07/2004
Billing Period: 9/18/2004 To 10/1/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Collings,Richard	08002LBC00105	09/20/2004	11.00		
Collings,Richard	08002LBC00105	09/21/2004	11.00		
Collings,Richard	08002LBC00105	09/22/2004	11.00		
Collings,Richard	08002LBC00105	09/23/2004	7.00		
Collings,Richard	08002LBC00105	09/27/2004	11.00		
Collings,Richard	08002LBC00105	09/28/2004	12.00		
Collings,Richard	08002LBC00105	09/29/2004	11.00		
Collings,Richard	08002LBC00105	09/30/2004	6.00		
Collings,Richard Total:			**80.00**	150.00	12,000.(
Dani,Sameer	08002LBC00105	09/20/2004	10.00		
Dani,Sameer	08002LBC00105	09/21/2004	11.00		
Dani,Sameer	08002LBC00105	09/22/2004	11.00		
Dani,Sameer	08002LBC00105	09/23/2004	8.00		
Dani,Sameer	08002LBC00105	09/27/2004	12.00		
Dani,Sameer	08002LBC00105	09/28/2004	10.00		
Dani,Sameer	08002LBC00105	09/29/2004	10.00		
Dani,Sameer	08002LBC00105	09/30/2004	8.00		
Dani,Sameer Total:			**80.00**	150.00	12,000.(
Gaston,Sandra	Task 1	10/01/2004	4.50		
Gaston,Sandra	Task 1	09/20/2004	11.00		
Gaston,Sandra	Task 1	09/21/2004	11.00		
Gaston,Sandra	Task 1	09/22/2004	11.00		
Gaston,Sandra	Task 1	09/23/2004	7.00		
Gaston,Sandra	Task 1	09/27/2004	11.00		
Gaston,Sandra	Task 1	09/28/2004	11.00		
Gaston,Sandra	Task 1	09/29/2004	11.00		
Gaston,Sandra	Task 1	09/30/2004	10.00		
Gaston,Sandra Total:			**87.50**	150.00	13,125.0

Total: 37,125.0

ciber
An Equal Opportunity Employer
5251 DTC [illegible]ite 1400
Greenwood [illegible], CO 80111
EIN # 38-2046833

PLEASE REMIT TO:
Dept. 1305
Denver CO 80291-1305

INVOICE

INFORMATION SYSTEMS
OCT 26 2004
RECEIVED

ORIGINAL TO:
Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

INVOICE NO.	
08-015910	
DATE OF INVOICE	
10/21/2004	
CUSTOMER ACCOUNT NO.	
08002LBC001	
PAYMENT TERMS	
Net 20	
BILLING PERIOD	
BEGINNING	ENDING
10/02/2004	10/15/2004
PURCHASE ORDER NO./REFERENCE	

HRS/QTY	DESCRIPTION	RATE	AMOUNT
80.00	Collings,Richard	150.00	12,000.
80.00	Dani,Sameer	150.00	12,000.
69.00	Gaston,Sandra	150.00	10,350.
		TOTAL	34,350.0

CN 99611.4X5
U# 12694

Mario Valente 10/27/04

CIBER Invoice Hours/Qty Detail v

Client Name: Long Beach City College
Client ID: 08002LBC001
Invoice #: 08-015910
Invoice Date: 10/21/2004
Billing Period: 10/2/2004 To 10/15/2004

ORIGINAL TO: Long Beach City College
Mr. Mario Valente
4901 East Carson Street
Long Beach CA 90808

DESCRIPTION	TASK	DATE	HRS/QTY	RATE	AMOU
Collings,Richard	08002LBC00105	10/11/2004	11.00		
Collings,Richard	08002LBC00105	10/12/2004	11.00		
Collings,Richard	08002LBC00105	10/13/2004	11.00		
Collings,Richard	08002LBC00105	10/14/2004	7.00		
Collings,Richard	08002LBC00105	10/04/2004	8.50		
Collings,Richard	08002LBC00105	10/05/2004	12.00		
Collings,Richard	08002LBC00105	10/06/2004	12.00		
Collings,Richard	08002LBC00105	10/07/2004	7.50		
Collings,Richard Total:			**80.00**	**150.00**	**12,000.(**
Dani,Sameer	08002LBC00105	10/11/2004	10.00		
Dani,Sameer	08002LBC00105	10/12/2004	11.00		
Dani,Sameer	08002LBC00105	10/13/2004	11.00		
Dani,Sameer	08002LBC00105	10/14/2004	8.00		
Dani,Sameer	08002LBC00105	10/04/2004	11.00		
Dani,Sameer	08002LBC00105	10/05/2004	10.00		
Dani,Sameer	08002LBC00105	10/06/2004	11.00		
Dani,Sameer	08002LBC00105	10/07/2004	8.00		
Dani,Sameer Total:			**80.00**	**150.00**	**12,000.0**
Gaston,Sandra	Task 1	10/11/2004	11.00		
Gaston,Sandra	Task 1	10/12/2004	11.00		
Gaston,Sandra	Task 1	10/13/2004	10.00		
Gaston,Sandra	Task 1	10/14/2004	8.00		
Gaston,Sandra	Task 1	10/04/2004	11.00		
Gaston,Sandra	Task 1	10/05/2004	11.00		
Gaston,Sandra	Task 1	10/07/2004	7.00		
Gaston,Sandra Total:			**69.00**	**150.00**	**10,350.0(**

Total: 34,350.00

Board of Trustees
Dr. Thomas J. Clark
Jeffrey A. Kellogg
Dianne Theil McNinch
Douglas W. Otto
Roberto Uranga

Superintendent-President
E. Jan Kehoe, Ph.D.

Long Beach City College • Long Beach Community College District
4901 East Carson Street • Long Beach, California 90808

September 21, 2004

Ciber, Inc.
Michael Dillon
25161 Sea Vista Dr.
Dana Point, CA 92629

Subject: Contract No. CN99611.4 Software Implementation Services – Amendment #10

Dear Mr. Dillon:

Attached is a fully executed copy of Amendment #10 for CN99611.4 – Software Implementation Services.

Please invoice referencing CN #99611.4 to Long Beach Community College District, Fiscal Operations-Y14, 4901 East Carson Street, Long Beach, CA 90808.

For payment inquiries, call Fiscal Operations, (562) 938-4532 and for contract information, call Contracting & Procurement, (562) 938-4213.

Sincerely,

Sandy Mathis

Sandy Mathis
Contracting & Procurement
(562) 938-4215

Attachments (1)

cc: Los Angeles County, School Services Division
Fiscal Operations
Contracting & Procurement
ACIT

CN 99611.4

AMENDED AGREEMENT
Software Implementation Services - Amendment #10

This amended agreement, made and entered into this fourteenth day of July, 2004 in the County of Los Angeles, State of California, by and between LONG BEACH COMMUNITY COLLEGE DISTRICT, hereinafter called the DISTRICT, and CIBER, INC. hereinafter called the CONSULTANT.

WITNESSETH: The District and the Consultant do mutually agree to amend Agreement CN99611.4.1 entered into on the first day of March, 1999, as follows:

1. Increase the contract an additional Eight Hundred Thousand Dollars ($428,920.00) for consulting services to continue implementation of the additional Version 8 PeopleSoft modules for Student Administration for student access to online registration, counseling, instructor contracts and implementation and upgrade to PeopleSoft Financials Version 8.

Except as amended herein, all terms and conditions of original agreement CN99611.4 and any amendment thereto shall remain in full force and effect.

Long Beach Community College District

Denise Spencer Watkins 21 Sep 2004
Denise Spencer Watkins Date
Director of Contracting & Procurement

Consultant
Ciber, Inc.

7-14-04
Signature Date

Michael Dillon
Vice President

Approved by the Board of Trustees on July 13, 2004.

Schedule 4

Long Beach Community College District
308/95 Enrollment Fe llection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 04-05 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received			Not provided by client -- used CCCCO's website numbers			
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301		For 00-01 through 04-05 - unit fee			
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301					
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$58,214,336	$52,352,598	$595,885	$52,948,483
ENROLL FEE ADMIN (2%)	152,403	131,066	21,337	152,403
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,538,453	3,043,069	495,384	3,538,453
S.F.A.A.	992,751	827,638	165,113	992,751
E.O.P.S.	1,791,382	1,540,589	250,793	1,791,382
C.A.R.E.	252,407	217,070	35,337	252,407
D.S.P.S.	994,409	851,011	143,398	994,409
STATE HOSPITALS	0	0	0	0
CALWORKS	1,068,270	918,712	149,558	1,068,270
MATRICULATION (CREDIT)	807,863	686,846	121,017	807,863
MATRIC. (NONCREDIT)	215,531	185,357	30,174	215,531
FAC. & STAFF DIVERSITY	21,941	15,597	6,344	21,941
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	937,446	806,204	131,242	937,446
BLOCK GRANT (ONE-TIME)	450,138	387,119	63,019	450,138
ECON. DEVELOPMENT	1,231,919	1,008,863	25,949	1,034,812
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	250,344	215,296	35,048	250,344
VTEA LEADERSHIP	100,000	78,000	6,000	84,000
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	673,740	700,690	-134,748	565,942
PLANT & INSTRUCTIONAL	504,901	434,215	70,686	504,901
PRIOR YEAR CORRECTION	715,595	697,851	17,744	715,595
TOTAL	$73,035,732	$65,183,015	$2,254,951	$67,437,966

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

July 18, 2007

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Long Beach Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. J. Branvell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 231,440
Less: 10% Late Penalty		(14) $ 23,144
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 208,296
Due from State	(08)	(17) $ 208,296
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	127
(24) EFCW-1, (04)(A)(2)(a)(f)	275,791
(25) EFCW-1, (04)(B)(1)(a)(f)	47
(26) EFCW-1, (04)(B)(1)(b)(f)	392
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	17,915
(29) EFCW-1, (04)(B)(2)(c)(f)	2,207
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	100,388
(32) EFCW-1, (09)	144,866
(33) EFCW-1, (10)	20,561
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) I Ramos — **Date** 6-25-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Long Beach Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ] — Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 126.82	$ -	$ -	$ -	$ -	$ 126.82
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 275,791.39	$ -	$ -	$ -	$ -	$ 275,791.39
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 46.96	$ -	$ -	$ -	$ -	$ 46.96
b. Staff training (One time per employee)	$ 391.60	$ -	$ -	$ -	$ -	$ 391.60
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 17,915.35	$ -	$ -	$ -	$ -	$ 17,915.35
c. Reporting BOG fee waiver data to CCC	$ 2,207.12	$ -	$ -	$ -	$ -	$ 2,207.12
(05) Total Direct Costs	$ 296,479.24	$ -	$ -	$ -	$ -	$ 296,479.24

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	33.86%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 100,387.87
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 396,867.11
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 144,866.00
(10) Less: Enrollment Fee Waiver offsets		$ 20,561.03
(11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 231,440.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Robinson, Stacey Lead Cashier	$25.43	2.0	$ 50.86				
Hicks, Patricia Lead Cashier	$37.98	2.0	$ 75.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 126.82	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$16.10	5,672.9	$ 91,333.69				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$16.10	6,006.6	$ 96,706.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$16.10	5,450.4	$ 87,751.44				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 275,791.39	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

1) Claimant: Long Beach Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$93.92	0.5	$ 46.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 46.96	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
MacCallum, Michael	FA Counselor	$72.70	0.5	$ 36.35				
Allen, Marianne	FA Counselor	$55.80	0.5	$ 27.90				
Stepan, Betty	FA Counselor	$61.24	0.5	$ 30.62				
Turner, Lydia	FA Counselor	$53.53	0.5	$ 26.77				
Gutierrez, Dorothy	FA Advisor	$45.65	0.5	$ 22.83				
Ekhsigian, Arda	Associate Director FA	$47.82	0.5	$ 23.91				
Yentch, Richard	Associate Director FA	$47.82	0.5	$ 23.91				
Huerta, Maggie	FA Specialist	$28.47	0.5	$ 14.24				
Pope, Michele	FA Specialist	$29.42	0.5	$ 14.71				
Nguyen, Hue	FA Specialist	$33.28	0.5	$ 16.64				
Polly, Irene	FA Specialist	$31.64	0.5	$ 15.82				
Nachreiner, Ron	Office Assistant	$19.50	0.5	$ 9.75				
Atwood, Kathie	Secretary	$32.46	0.5	$ 16.23				
Thim, Monica	FA Specialist	$29.14	0.5	$ 14.57				
Duran, Susana	FA Specialist	$27.02	0.5	$ 13.51				
Vaughn, Dara	FA Specialist	$28.47	0.5	$ 14.24				
Tim, Sophorn	FA Data Software Specialist	$7.80	0.5	$ 3.90				
Menjivar, Juan Franc	FA Specialist	$25.68	0.5	$ 12.84				
Blassetti, Sara	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Overton, Kimberly	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Skille, Steve	Account Tech. II FA	$28.47	0.5	$ 14.24				
Gilliland, Shannon	Account Tech. II FA	$28.47	0.5	$ 14.24				
Sweet-Kelly, Deborah	Office Assistant	$24.55	0.5	$ 12.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 391.60	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	83.8	$ 2,292.77				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	138.4	$ 3,786.62				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 17,915.35	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

1) Claimant
ong Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$93.92	23.5	$ 2,207.12				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,207.12	$ -	$ -	$ -	$ -

New 04/06

Long Beach Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

20 6

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Allen, Marianne	FA Counselor	$55.80	$27.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Allen, Marianne Total**			$27.90		
8/3/2005	0.50	Atwood, Kathie	Secretary	$32.46	$16.23	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Atwood, Kathie Total**			$16.23		
8/3/2005	0.50	Blassetti, Sara	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Blassetti, Sara Total**			$6.05		
05-06	23.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$2,207.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
05-06	0.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$46.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,254.08		
8/3/2005	0.50	Duran, Susana	FA Specialist	$27.02	$13.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Duran, Susana Total**			$13.51		
8/3/2005	0.50	Ekhsigian, Arda	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Ekhsigian, Arda Total**			$23.91		
05-06	5,672.90	Enrollment Office Staff	Collecting Fees	$16.10	$91,333.69	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,006.60	Enrollment Office Staff	Collecting Fees	$16.10	$96,706.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,450.40	Enrollment Office Staff	Collecting Fees	$16.10	$87,751.44	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	17,129.90	**Enrollment Office Staff Total**			$275,791.39		
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Receiving waiver applications	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	83.80	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,292.77	Entering approved application information into district records; providing student award letter	Waiving student fees
	412.60	**Financial Aid Office Staff (BOG A/B) Total**			$11,288.75		
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Receiving waiver applications	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	138.40	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$3,786.62	Entering approved application information into district records; providing student award letter	Waiving student fees
	242.20	**Financial Aid Office Staff (BOG C) Total**			$6,626.60		
8/3/2005	0.50	Gilliland, Shannon	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gilliland, Shannon Total**			$14.24		
8/3/2005	0.50	Gutierrez, Dorothy	FA Advisor	$45.65	$22.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gutierrez, Dorothy Total**			$22.83		
05-06	2.00	Hicks, Patricia	Lead Cashier	$37.98	$75.96	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.96		
8/3/2005	0.50	Huerta, Maggie	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Huerta, Maggie Total**			$14.24		
8/3/2005	0.50	MacCallum, Michael	FA Counselor	$72.70	$36.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**MacCallum, Michael Total**			$36.35		
8/3/2005	0.50	Menjivar, Juan Franc	FA Specialist	$25.68	$12.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Menjivar, Juan Franc Total**			$12.84		
8/3/2005	0.50	Nachreiner, Ron	Office Assistant	$19.50	$9.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nachreiner, Ron Total**			$9.75		

Long Beach Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2 06
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Nguyen, Hue	FA Specialist	$33.28	$16.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nguyen, Hue Total**			$16.64		
8/3/2005	0.50	Overton, Kimberly	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Overton, Kimberly Total**			$6.05		
8/3/2005	0.50	Polly, Irene	FA Specialist	$31.64	$15.82	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Polly, Irene Total**			$15.82		
8/3/2005	0.50	Pope, Michele	FA Specialist	$29.42	$14.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Pope, Michele Total**			$14.71		
05-06	2.00	Robinson, Stacey	Lead Cashier	$25.43	$50.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Robinson, Stacey Total**			$50.86		
8/3/2005	0.50	Skille, Steve	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Skille, Steve Total**			$14.24		
8/3/2005	0.50	Stepan, Betty	FA Counselor	$61.24	$30.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Stepan, Betty Total**			$30.62		
8/3/2005	0.50	Sweet-Kelly, Deborah	Office Assistant	$24.55	$12.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Sweet-Kelly, Deborah Total**			$12.28		
8/3/2005	0.50	Thim, Monica	FA Specialist	$29.14	$14.57	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Thim, Monica Total**			$14.57		
8/3/2005	0.50	Tim, Sophorn	FA Data Software Specialist	$7.80	$3.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Tim, Sophorn Total**			$3.90		
8/3/2005	0.50	Turner, Lydia	FA Counselor	$53.53	$26.77	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Turner, Lydia Total**			$26.77		
8/3/2005	0.50	Vaughn, Dara	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Vaughn, Dara Total**			$14.24		
8/3/2005	0.50	Yentch, Richard	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Yentch, Richard Total**			$23.91		
	17,824.20	**Grand Total**			$296,479.24		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,194,957		$49,194,957	$903,650	$48,291,307
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,663,844		2,663,844	28,676	2,635,168
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	196,791		196,791	1,058	195,733
Other Instructional Administration & Instructional Governance	6090	252,724		252,724	1,132	251,592
Instructional Support Services	6100					
Learning Center	6110	962,512		962,512	10,164	952,348
Library	6120	1,852,763		1,852,763	3,719	1,849,044
Media	6130	952,522		952,522	62,578	889,944
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	103,287		103,287		103,287
Admissions and Records	6200	2,052,489		2,052,489	1,008	2,051,481
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,183,080		3,183,080	24,985	3,158,095
Matriculation and Student Assessment	6320	968,830		968,830	18,067	950,763
Transfer Programs	6330	648,165		648,165	399	647,766
Career Guidance	6340	266,960		266,960	2,119	264,841
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	743,541		743,541	20,102	723,439
Subtotal		$64,042,465	$0	$64,042,465	$1,077,657	$62,964,808

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,010,638		$1,010,638	$754	$1,009,884
Health Services	6440	442,697		442,697	3,600	439,097
Student Personnel Admin.	6450	1,267,712		1,267,712	8	1,267,704
Financial Aid Administration	6460	2,605,567		2,605,567	76,718	2,528,849
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	590,216		590,216	53,774	536,442
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,171,008		2,171,008	2,171,008	0
Custodial Services	6530	2,809,091		2,809,091	2,809,091	0
Grounds Maintenance and Repairs	6550	669,585		669,585	669,585	0
Utilities	6570	1,914,073		1,914,073	1,914,073	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,033,837		6,033,837	6,033,837	0
General Inst. Support Services	6700					
Community Relations	6710	515,752		515,752	515,752	0
Fiscal Operations	6720	2,503,134		2,503,134	2,503,134	0
Human Resources Management	6730	1,482,567		1,482,567	1,482,567	0
Noninstructional Staff Benefits & Incentives	6740	272,673		272,673	272,673	0
Staff Development	6750	144,599		144,599	144,599	0
Staff Diversity	6760	25,685		25,685	25,685	0
Logistical Services	6770	1,562,060		1,562,060	1,562,060	0
Management Information Systems	6780	3,112,541		3,112,541	3,112,541	0
Subtotal		$93,175,900	$0	$93,175,900	$24,429,116	$68,746,784

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	165,228		165,228	165,228	0
Community Services and Economic Development	6800					
Community Recreation	6810	81,018		81,018		81,018
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	3,657,034		3,657,034	110,701	3,546,333
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	26,593		26,593		26,593
Farm Operations	6930					
Food Services	6940					
Parking	6950	372,718		372,718	134,749	237,969
Student and Co-curricular Activities	6960	720,319		720,319		720,319
Student Housing	6970					
Other	6990	-8,463		-8,463		-8,463
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$98,190,347	$0	$98,190,347	$24,839,794	$73,350,553
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				33.86%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	347,491	7,097	8,251	31,150		393,989
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,883,586	63,359	47,516	7,914		2,002,375
Business and Management	0500	2,851,997	91,223	36,335	61,421		3,040,976
Communications	0600						
Computer and Information Science	0700	1,146,557	42,266	37,729	62,584		1,289,136
Education	0800	2,963,053	257,204	46,820	66,557		3,333,634
Engineering and Related Industrial Tech.	0900	3,764,729	177,615	285,630	322,702		4,550,676
Fine and Applied Arts	1000	5,227,230	197,222	95,495	91,665		5,611,612
Foreign Language	1100	1,208,644	58,346	5,695	1,335		1,274,020
Health	1200	2,924,793	229,799	114,941	62,958		3,332,491
Consumer Education and Home Economics	1300	2,988,994	170,056	52,390	15,977		3,227,417
Law	1400						
Humanities (Letters)	1500	8,403,710	392,567	39,374	71,897		8,907,548
Library Science	1600	813,607	115,323	69,875	78,212		1,077,017
[illegible]ematics	1700	2,921,689	93,488	14,055			3,029,232
[illegible]ary Studies	1800						
Physical Sciences	1900	1,436,078	32,431	21,798	14,913		1,505,220
Psychology	2000						
Public Affairs and Services	2100	649,794	35,454	471,754	1,204		1,158,206
Social Sciences	2200	3,727,451	124,631	20,862	3,517		3,876,461
Commercial Services	3000	557,157	29,192	17,863	5,368		609,580
Interdisciplinary Studies	4900	386,731	39,779	1,043	4,276		431,829
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	543,538					543,538
Subtotal - Instructional Activities	**599**	44,746,829	2,157,052	1,387,426	903,650		49,194,957

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,462,563	172,605	28,676		2,663,844
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		193,355	2,378	1,058		196,791
Other Instruct. Admin. & Instruct. Governance	6090		249,932	1,660	1,132		252,724
Subtotal - Instructional Administration	**6000**		2,905,850	176,643	30,866		3,113,359
Instructional Support Services (6100)							
Learning Center	6110		929,938	22,410	10,164		962,512
Library	6120		1,769,278	79,766	3,719		1,852,763
Media	6130		875,341	14,603	62,578		952,522
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		57,100	46,187			103,287
Subtotal - Instructional Support Services	**6100**		3,631,657	162,966	76,461		3,871,084
Admissions and Records	**6200**		1,926,090	125,391	1,008		2,052,489
[illegible]ent Counseling and Guidance (6300)							
[illegible]ounseling and Guidance	6310		3,092,458	65,637	24,985		3,183,080
Matriculation and Student Assessment	6320		905,070	45,693	18,067		968,830
Transfer Programs	6330		539,405	108,361	399		648,165
Career Guidance	6340		246,385	18,456	2,119		266,960
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,783,318	238,147	45,570		5,067,035

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		704,967	18,472	20,102		743,541
Extended Opportunity Prgms. & Services (EOPS)	6430		980,606	29,278	754		1,010,638
Health Services	6440		344,951	94,146	3,600		442,697
Student Personnel Administration	6450		1,249,634	18,070	8		1,267,712
Financial Aid Administration	6460		2,152,508	376,341	76,718		2,605,567
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		429,918	106,524	53,774		590,216
Subtotal - Other Student Services	**6400**		5,862,584	642,831	154,956		6,660,371
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,805,534	342,333	23,141		2,171,008
Custodial Services	6530		2,660,805	145,492	2,794		2,809,091
Grounds Maintenance and Repairs	6550		631,499	36,500	1,586		669,585
Utilities	6570			1,914,073			1,914,073
Other Operation and Maintenance of Plant	6590						
Total - Operation and Maintenance of Plant	6500		5,097,838	2,438,398	27,521		7,563,757
Planning, Policymaking, and Coordination	**6600**		3,407,925	2,616,442	9,470		6,033,837

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		412,457	103,295			515,752
Fiscal Operations	6720		1,857,114	645,804	216		2,503,134
Human Resources Management	6730		1,404,493	70,024	8,050		1,482,567
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		272,673				272,673
Staff Development	6750		126,104	17,424	1,071		144,599
Staff Diversity	6760			25,685			25,685
Logistical Services	6770		1,290,305	148,728	123,027		1,562,060
Management Information Systems	6780		2,168,816	820,708	123,017		3,112,541
Other General Institutional Support Services	6790		150,980	14,248			165,228
Subtotal - General Institutional Support Services	**6700**		7,682,942	1,845,916	255,381		9,784,239
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		77,010	4,008			81,018
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		2,929,472	616,861	110,701		3,657,034
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		3,006,482	620,869	110,701		3,738,052

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		26,593				26,593
Farm Operations	6930						
Food Services	6940						
Parking	6950		163,899	74,070	134,749		372,718
Student and Co-curricular Activities	6960		702,958	17,361			720,319
Student Housing	6970						
Other Ancillary Services	6990			(8,463)			(8,463)
Subtotal - Ancillary Services	**6900**		893,450	82,968	134,749		1,111,167
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
ng-Term Debt	7210						
ax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					3,648,802	3,648,802
Other Outgo	7330					516,328	516,328
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,165,130	4,165,130
TOTAL EXPENDITURES and OTHER OUTGO	**391**	44,746,829	41,355,188	10,337,997	1,750,333	4,165,130	102,355,477

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	66,740
Avg. time p/account	5.1
Total Time (in minutes)	340374
Per Hour	60
Hours Worked **(** Activity 11)**	**5672.9**
***EFC 2** **(Not provided by client - no substitute multiplier can be used for activity code 12)**	
Avg. time p/student	8.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 12)**	**0.0**
***EFC 1**	66,740
Avg. time p/question	5.4
Total Time (in minutes)	360396
Per Hour	60
Hours Worked **(** Activity 13)**	**6006.6**
***EFC 2** **(Not provided by client - substituted multiplier *EFC 1)**	66,740
Avg. time p/file	4.9
Total Time (in minutes)	327026
Per Hour	60
Hours Worked **(** Activity 14)**	**5450.4**
***EFC 4** **(Not provided by client)**	
Avg. time p/account (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5 (Not provided by client)**	
Avg. time p/student (Not provided by client)	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary for BOG A/B

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	13,152
Avg. time p/question	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 21)**	**109.6**
***EFW 6**	13,152
Avg. time p/application	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 22)**	**109.6**
***EFW 6**	13,152
Avg. time p/evaluation	0.5
Total Time (in minutes)	6576
Per Hour	60
Hours Worked **(** Activity 23)**	**109.6**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,056
Avg. time p/application	0.5
Total Time (in minutes)	5028
Per Hour	60
Hours Worked **(** Activity 25)**	**83.8**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 1C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary for BOG C

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

	***EFW 6**	2,076
	Avg. time p/question	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 21)**	**34.6**
	***EFW 6**	2,076
	Avg. time p/application	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 22)**	**34.6**
	***EFW 6**	2,076
	Avg. time p/evaluation	1.0
	Total Time (in minutes)	2076
	Per Hour	60
	Hours Worked **(** Activity 23)**	**34.6**
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 24)**	**0.0**
***	***EFW 7 (used *EFW 6)**	2,076
	Avg. time p/application	4.0
	Total Time (in minutes)	8304
	Per Hour	60
	Hours Worked **(** Activity 25)**	**138.4**
	***EFW 8**	
	Avg. time p/application	
	Total Time (in minutes)	0
	Per Hour	60
	Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

*** Normally we would not substitute *EFW 6 (# of applications received) for *EFW 7 (# of applications approved) because *EFW 6 would be a larger number than *EFW 7. Clients #'s for *EFW 6 (# of applications received) for BOG C was much, much lower than the CCCCO's website #'s for *EFW 7 (# of applications approved), so therefore we used multiplier *EFW 6 for code 25.

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See in workpapers of 04-05 claim only.)
Initial year claim 98-99 through 05-06. Ane timestudy used for all initial years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Acosta, Adelino	Admissions & Records Tech II	5	8	5	5		
Alvial, Bertha	Registration Worker	5	8	5	5		
Alvial, Lefia	Registration Worker	5	8	5	5		
Anderson, Amy	Registration Aide	5	8	5	5		
Brackman, Pamela	Admissions & Records Tech II	5	8	5	4		
Bronilla, Cheryl	Registration Aide	5	8	5	5		
Brown, Eileen	Admissions & Records Tech II	5	8	5	5		
Castillo, Josefina	Registration Worker	5	8	5	5		
Chamlern, Sombat	Registration Aide	5	8	5	5		
Clark, Kamryn	Registration Worker	5	8	5	5		
Collado, Carmen	Registration Aide	5	8	5	5		
Combs, April	Temporary Office Worker I	5	8	5	5		
De La Rama, Allen	Registration Aide	5	8	5	5		
De La Rama, Micah	Temporary Office Worker I	5	8	5	5		
Deweese, James	Registration Aide	5	8	5	5		
Dorsey, Krystal	Registration Aide	5	8	5	5		
Fairmen, Audrey	Registration Aide	5	8	5	5		
Franco, Dolores	International Admissions/Records Tech. II	5	9	7	5		
Galvan, Karen	Registration Worker	5	8	5	5		
Garces, Tim	Registration Worker	5	8	5	5		
Gardner, Darice	Registration Worker	5	8	5	5		
Gonzales, Mary	Registration Aide	5	8	5	5		
Heth, Linda	Temporary Office Worker I	5	8	5	5		
Hicks, Patricia	Lead Cashier	5	5	5	5	5	5
Hiemstra, Torri	Registration Aide	5	8	5	5		
Jelin, Ivan	Registration Worker	5	8	5	5		
Kemp, Erma	Registration Worker	5	5	8	5		
Kinsella, Denise	International Program Manager			10			
Lemle, Barbara	Casual - Registrar Worker	5	8	5	5		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II	5	7	6	6		
Liebrecht, Cathy (01-02)	Registration Aide	5	8	5	5		
MacCullen, Jana	Registration Worker	5	8	5	5		
MacCullen, Jennifer	Registration Worker	5	8	5	5		
MacCullen, Matthew	Registration Worker	5	8	5	5		
MacCullen, Ruth	Associate Registrar	10	12	15	8		
Maiava, Tulia	Registration Aide	5	8	5	5		
McKibben, Emily	Registration Worker	5	8	5	5		
Mello, Sandra (01-02)	Registration Aide	5	8	5	5		
Mello, Sandra (98-99 to 00-01)	Registration Worker	5	8	5	5		

Schedule 2
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Mendoza, Camelia	Registration Worker	5	8	5	5		
Milkes, Sharon	Senior Clerk/A&R Tech. II	6	9	6	5		
Miller, Margaret	Admissions & Records Tech II	5	8	5	5		
Moll, Corrin	Registration Worker	5	8	5	5		
Nguyen, Kevin	Registration Worker	5	8	5	5		
Nichols, Anthony	Registration Worker	5	8	5	5		
Odell, Renee	Registration Aide	5	8	5	5		
Olsen, Sharon	Registration Aide	5	8	5	5		
Parker, Jared	Registration Worker	5	8	5	5		
Pettit, Marcia	Associate Registrar	6	9	8	4		
Pouono, Pasadena	Registration Aide	5	8	5	5		
Quintus, Samantha	Registration Aide	5	8	5	5		
Robinson, Stacey	Lead Cashier	3	4	2	1	6	3
Rowan, Loretta	Registration Aide	5	8	5	5		
Rubalcava, Jorge	Registration Worker	5	8	5	5		
Rubalcava, Maria	Records Specialist	6	9	6	4		
Ruelas, Guadalupe	Admissions & Records Tech II	6	9	5	5		
Sanders, Sherrie	Registration Worker	5	8	5	5		
Satele, Leilva	Registration Aide	5	8	5	5		
Satele, Tauasosi Mary	Senior Clerk	4	7	8	4		
Stewart, Lisa	Records Specialist	4	8	5	4		
Tait, Sandra	Registration Worker	5	8	5	5		
Tarrab, Wafa	Registration Worker	5	8	5	5		
Togafau, Hubert	Registration Aide	5	8	5	5		
Tran, Christine	Admissions & Records Tech II	6	8	5	4		
Valle, Heather	Registration Worker	5	8	5	5		
Wade, Cherri	Admissions & Records Tech II	4	8	5	4		
Watson, Katherine	Registration Aide	5	8	5	5		
Wilson, Danny	Registration Aide	5	8	5	5		
Yarbrough, Charlotte	Admissions & Records Tech II	6	9	5	8		
Yost, Mary Margaret	Registration Aide	5	8	5	5		
Average		**5.1**	**8.0**	**5.4**	**4.9**	5.5	4.0

Conclusion: Findings go forward to Schedule 1A.

Only two responses to codes 15 and 16 - so these averages were not used.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Enrollment Fee Collection Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
Bolded PHR's -- see email from client dated 5/18/07 and fax cover sheet dated 5/21/07.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					$26.59	$30.47	$30.47	$30.77
Alvial, Bertha	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Alvial, Lefia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Anderson, Amy	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brackman, Pamela	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Bronilla, Cheryl	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Brown, Eileen	Admissions & Records Tech II				$26.11	$31.08	$35.64	$35.64	$37.98
Castillo, Josefina	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Chamlern, Sombat	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Clark, Kamryn	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Collado, Carmen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Combs, April	Temporary Office Worker I					$14.30	$14.30	$14.30	$14.30
De La Rama, Allen	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
e La Rama, Micah	Temporary Office Worker I				$12.10		$12.10		
Deweese, James	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Dorsey, Krystal	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Fairmen, Audrey	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Franco, Dolores	International Admissions/Records Tech. II				$29.56	$29.56	$33.85	$35.64	$36.00
Galvan, Karen	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Garces, Tim	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gardner, Darice	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Gonzales, Mary	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Heth, Linda	Temporary Office Worker I				$12.10	$12.10	$12.10		
Hicks, Patricia	Lead Cashier				$26.11	$31.08	$35.64	$37.60	$37.98
Hiemstra, Torri	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Jelin, Ivan	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kemp, Erma	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Kinsella, Denise	International Program Manager				$26.11	$31.08	$31.27	$37.04	$41.30
Lemle, Barbara	Casual - Registrar Worker				$9.08	$9.08	$9.08		
Liebrecht, Catherine (02-03)	Admissions & Records Tech II							$25.10	$26.35
Liebrecht, Cathy (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**		
MacCullen, Jana	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Jennifer	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Matthew	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
MacCullen, Ruth	Associate Registrar				$32.71	$34.34	$38.59		$40.99
Maiava, Tulia	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
McKibben, Emily	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (01-02)	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Mello, Sandra (98-99 to 00-01)	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Mendoza, Camelia	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Milkes, Sharon	Senior Clerk/A&R Tech. II				$22.74	$25.28	$28.93	$28.93	$30.77
Miller, Margaret	Admissions & Records Tech II				$26.56	$28.02	$32.09	$33.85	$34.19
Moll, Corrin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nguyen, Kevin	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Nichols, Anthony	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Odell, Renee	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Olsen, Sharon	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Parker, Jared	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Pettit, Marcia	Associate Registrar				$37.61	$42.27	$42.27	$42.27	$42.27
Pouono, Pasadena	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Quintus, Samantha	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Robinson, Stacey	Lead Cashier							$25.43	$25.43
Rowan, Loretta	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Jorge	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Rubalcava, Maria	Records Specialist				$21.78	$27.30	$30.47	$32.09	$32.41
Ruelas, Guadalupe	Admissions & Records Tech II				$25.21	$26.59	$30.47	$30.77	$30.77
Sanders, Sherrie	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Leilva	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Satele, Tauasosi Mary	Senior Clerk				$25.21	$26.59	$32.09	$32.09	$32.41
Stewart, Lisa	Records Specialist				$23.96	$26.59	$30.47	$30.47	$30.77
Tait, Sandra	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tarrab, Wafa	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Togafau, Hubert	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Tran, Christine	Admissions & Records Tech II					$17.04	$26.09	$27.46	$29.22
Valle, Heather	**Registration Worker**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wade, Cherri	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Watson, Katherine	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Wilson, Danny	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Yarbrough, Charlotte	Admissions & Records Tech II				$23.96	$26.59	$30.47	$30.47	$30.77
Yost, Mary Margaret	**Registration Aide**	**$8.79**	**$8.79**	**$8.79**	**$9.08**	**$9.08**	**$9.08**	**$9.08**	**$9.08**
Average PHR		**$11.22** *	**$11.79** *	**$12.38** *	**$12.99**	**$13.97**	**$15.00**	**$15.47**	**$16.10**

* Note that for FY's 98-99, 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 through 2005-06
PHRs

Purpose: To calculate an average productive hourly rate for staff performing Fee Waiver Functions.
Source: In resources of 05-06 claim only, see screen prints provided by client for each employee with calculation done by SixTen showing 21% benefits added for monthly employees and 10% benefits added for hourly employees.
The fiscal years that staff were involved in was taken from lists by fiscal year made by T. DuBois from LBCCCD.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Alvarado, Olga				$24.79	$29.52	$31.33		
Avila, Jason							$22.93	$22.93
Deering, JoAnn	FA Spec. 7/1/02 -- FA Tech. 1/1/02			$24.79	$29.52			
Duran, Susana	FA Spec. 1/1/04						$25.30	$27.02
Gilliland, Shannon	Account Tech. II FA 7/1/05						$22.93	
Huerta, Maggie				$22.34	$26.59	$28.19	$28.19	$28.47
Kwon, Jennifer								$24.38
Lane, Alan								
Lim, Janice								$24.38
McKibbin, Lori				$27.98				
Menjivar, Juan Franc	FA Spec.					$22.93	$24.13	$25.68
Nguyen, Hue				$26.16	$31.14	$31.33	$31.33	$33.28
Polly, Irene				$24.79	$29.52	$31.14	$31.33	$31.64
Pope, Michelle	FA Spec.				$28.02			
Ruiz, Noelia				$26.56	$23.82	$23.76		
Skille, Steve	Account Tech. II FA					$25.43		
Thim, Monica								
Vaughn, Dara							$26.75	$28.47
Average PHR		**$22.99** *	**$24.14** *	**$25.34**	**$28.30**	**$27.73**	**$26.61**	**$27.36**

* Note that for FY's 99-00 and 00-01 used 01-02's average PHR divided by 5% for each back year, due to client not able to provide back year PHRs

Conclusion: Findings go forward to EFCW-2.

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To calculate productive houlry rates for prior fiscal years not provided by client.
Source: SixTen calculated PHR's from annual salary provided by client.
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	**Admissions & Records Tech II**					$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	22.96	24.11	25.32	26.59				
	Divided by 5%	1.05	1.05	1.05	1.05				
	Current fiscal year phr	$21.87	$22.96	$24.11	$25.32				
Brown, Eileen	**Admissions & Records Tech II**				$26.11	$31.08	$35.64	$35.64	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Combs, April	**Temporary Office Worker I**					$14.30	$14.30	$14.30	$14.30
	Hourly employee - so used same hrly rate for missing year				$14.30				
De La Rama, Micah	**Temporary Office Worker I**				$12.10		$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Franco, Dolores	**Int'l Admissions/Records Tech. II**				$29.56	$29.56	$33.85	$35.64	$36.00
	Previous fiscal year phr	26.81	28.15	29.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$25.53	$26.81	$28.15					
Heth, Linda	**Temporary Office Worker I**				$12.10	$12.10	$12.10		
	Hourly employee - so used same hrly rate for missing year			$12.10					
Hicks, Patricia	**Lead Cashier**				$26.11	$31.08	$35.64	$37.60	$37.98
	Previous fiscal year phr	23.69	24.87	26.11					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.56	$23.69	$24.87					
Hilkes, Sharon	**Senior Clerk/A&R Tech. II**				$22.74	$25.28	$28.93	$28.93	$30.77
	Previous fiscal year phr	20.63	21.66	22.74					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$19.65	$20.63	$21.66					
Hiller, Margaret	**Admissions & Records Tech II**				$26.56	$28.02	$32.09	$33.85	$34.19
	Previous fiscal year phr	24.10	25.30	26.56					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$22.95	$24.10	$25.30					

Schedule 2C
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Pettit, Marcia	**Associate Registrar**				$37.61	$42.27	$42.27	$42.27	$42.27
	Previous fiscal year phr	$34.11	$35.82	37.61					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$32.49	$34.11	$35.82					
Rubalcava, Maria	**Records Specialist**				$21.78	$27.30	$30.47	$32.09	$32.41
	Previous fiscal year phr	19.75	20.74	21.78					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$18.81	$19.75	$20.74					
Ruelas, Guadalupe	**Admissions & Records Tech II**				$25.21	$26.59	$30.47	$30.77	$30.77
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$21.78	$22.87	$24.01					
Satele, Tauasosi Mary	**Senior Clerk**				$25.21	$26.59	$32.09	$32.09	$32.41
	Previous fiscal year phr	22.87	24.01	25.21					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$21.78	$22.87	$24.01					
Ste t, Lisa	**Records Specialist**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					
Wade, Cherri	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					
Yarbrough, Charlotte	**Admissions & Records Tech II**				$23.96	$26.59	$30.47	$30.47	$30.77
	Previous fiscal year phr	21.73	22.82	23.96					
	Divided by 5%	1.05	1.05	1.05					
	Current fiscal year phr	$20.70	$21.73	$22.82					

Conclusion: Findings go forward to the EFCW-2.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s.
(See in workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source			Totals 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students		59,221	62,569	63,787	66,733	75,701	72,546	64,570	66740
EFC 2	1.8-1 2.	Paid Enrollment fees									
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)									
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.								
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.								
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327	13,152	
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473	10,056	
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128	2,076	
EFW 7	1.8-3 2.	Waivers Approved	X -								
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Summer Term

Data Current As Of May 17, 2007 02:50:46

Total Headcount	13,073

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach
For 2005 Fall Term

Data Current As Of May 17, 2007 02:50:56

Total Headcount	25,214

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach For 2006 Spring Semester

Data Current As Of May 17, 2007 02:51:13

Total Headcount	25,378

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Community College District

Patricia Hicks — Employee Name

Lead Cashier — Exact Position Title

Fiscal Services/PCC Campus 562-938-3906 — College/Department/Location, Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: N/A

B. Enrollment Waiver Process: N/A

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 2 2 2 2 2 2 2 2 hrs.

B. Enrollment Waiver Process: N/A

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

N/A

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

N/A

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Long Beach Comm. College District

Stacey Robinson — Employee Name

Lead Cashier — Exact Position Title

Fiscal Services - LAC — College/Department/Location

(562) 938-4455 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	(05-06)
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								2
B. Enrollment Waiver Process:	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2005-06

Toni Du Bois — Employee Name

Dean, Stu. Fin Aid — Exact Position Title

Financial Aid — Dept. & Location #

x4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
6/15/05	write policy + procedure for 05-06 BOGFW		.5	
8/3/05	train staff on changes to BOGFW (RDP)		.5	
/ /				
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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. Du Bois — Employee Name: (print)

Dean, Stu. Fin Aid — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD Fiscal Year: 2004-05 2005-2006

Toni DuBois Dean, Student Fin Aid

Employee Name Exact Position Title

FinanaalAid x4573 (12mo/11mo/10mo/hrly)

Dept. & Location # Telephone # Work year length

Date	Description of Activities		Time in Hours	Leave Blank
4/29/04	write policy + procedure for 0405 BOG FW		1.00	
9/15/05	work on MIS data for BOG		1.5	
9/22/05	make corrections to BOG-MIS data		3.0	
9/28/05	make corrections to BOG-MIS data		5.0	
10/06/05	review final BOG-MIS data		.5	
/ /				
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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois Dean, Student Fin. Aid

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

1.7-3 AND 1.8-3

AU6 Time and Stats for BOG FW A & B BOG C

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 13,152 applications			
/ /	into PS Bolt-on for			
/ /	BOG FW A+B			
/ /	2 mins. per application			
/ /	for eligibility determination			
/ /	and input		438.4	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to EdExpress			
/ /	for 2,076 students			
/ /	at 7 minutes per			
/ /	student		242.2	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Student Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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TONI DUBOIS' Time Sheet

15,228

Attachment for ETCW 2.2

2005-06

Financial Aid Specialists

Hue Nguyen – LAC
Irene Poly – PCC
Maggie Huerta – LAC
Michele Pope – LAC
Monica Thim – LAC
Jenifer Kwok – LAC
Jason Avila – LAC
Susana Duran – PCC
Juan Franc Menjivar – PCC
Dara Vaughn – PCC
Janice Lim – PCC

Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

training on RDP + BOGFW
Activity

Queen Mary
Location

8-3-05
Date

10 to 10:30 am
Time

NAME	POSITION/TITLE	LOCATION	PREP TIME
Michael MacCallum	FA Counselor	LAC	
Betty Stepan	FA Counselor	PCC	
Marianne Allen	FA Counselor	LAC	
Lydia Turner	FA Counselor	PCC	
Sara Blassetti	FA - PT Counselor	LAC/PCC	
Kimberly Overton	FA - PT Counselor	LAC/PCC	
Dorothy Gutierrez	FA Advisor	LAC	
Richard Yentch	Assoc. Dir. FA	LAC	
Arda Eksigian	Assoc. Dir FA	PCC	
Steve Skille	Acct Tech II FA	LAC	
Shannon Gilliland	Acct Tech II FA	LAC	
Deborah Sweet-Kelly	Office Asst.	LAC	

Brief description of the purpose of the meeting: training on changes to 2005-06 BOG FW to include Registered Domestic Partner (RDP) definitions

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean Stud. Fin Aid
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Continuation 2005-06
8-3-05 staff training

✓ Ron Nachreiner	Office Asst.	PCC
✓ Kathie Atwood	Secretary	LAC
✓ Maggie Huerta	FA Specialist	LAC
✓ Michele Pope	FA Specialist	LAC
✓ Hue Nguyen	FA Specialist	LAC
✓ Monica Thim	FA Specialist	LAC
✓ Susana Duran	FA Specialist	PCC
✓ Dara Vaughn	FA Specialist	PCC
✓ J. Franc Menjivar	FA Specialist	PCC
✓ Irene Polly	FA Specialist	PCC
Sophorn Tim	FA Data Software Spec	LAC

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

ADELINO ACOSTA
Employee Name

AIR II
Exact Position Title

938-3993
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

BERTHA ALVIAL
Employee Name

Registration worker
Exact Position Title

938-3943
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 ~~99-00~~ (00-01) 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admissions / PCC
Department/Location

LEFIA ALVIAL
Employee Name

registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College — District
Admissions / LAC — Department/Location
Amy Anderson — Employee Name
Registration Aide — Exact Position Title
Telephone # — 12mo/11mo/10mo/hrly (circle) Work year length
Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH COMMUNITY COLLEGE DISTRICT — District
ADMISSIONS & RECORDS TECH I LAC — Department/Location

PAMELA BRACKMAN — Employee Name
ADMISSIONS & RECORDS TECH I — Exact Position Title

562-938-3948 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ OOPS OOPS

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela Brackman Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Cheryl Bronilla
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

EILEEN BROWN
Employee Name

A/R II
Exact Position Title

938-3948
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS / PCC
Department/Location

JOSEFINA CASTILLO
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sombat Chamlern
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION - PCC
Department/Location

KAMRYN CLARK
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Carmen Collado
Employee Name

Registration Aide
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

April Combs
Employee Name

Temporary Office Worker
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Allen J DeLa Rama
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/~~hrly~~
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Micah De La Rama
Employee Name

Temporary Office Worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

James Deweese
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records
Department/Location

Krystal Dorsey
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

~~Registration Aide~~ Admissions
Department/Location

Audrey Fairmen
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Department/Location

Dolores Franco
Employee Name

Int'l Admissions/Records Tech II
Exact Position Title

Ext. 4528
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dolores Franco Date 5 3 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission/PCC
Department/Location

Karen Galvan
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/RCC
Department/Location

TIM CARLES
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Darice Gardner
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Mary Gonzales
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Linda Heth
Employee Name

Temporary Office Worker I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District
District

Fiscal Services - PCC Campus
Department/Location

Patricia Hicks
Employee Name

Lead Cashier
Exact Position Title

562-938-3906
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2-5 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-5 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2-5 min	✓				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2-5 min	✓				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Hicks Date 4/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Torri Hiemstra
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSION / ACC
Department/Location

IVAN JELIN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS - PCC
Department/Location

ERMA KEMP
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College Dist. — District
International Student Program — Department/Location
Denise Kinsella — Employee Name
International Program Manager — Exact Position Title
562-938-4743 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)
Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Kinsella — Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIAN & RECORDS - PCC
Department/Location

Barbara Lemle
Employee Name

CASUAL - REGISTRAR WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Admissions/LAC
Department/Location

Catherine Liebrecht
Employee Name

A+R Tech II
Exact Position Title

4288
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ only through 2003
~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses. ✓	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report. ✓	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. ✓	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. ✓	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Catherine Liebrecht Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Cathy Liebrecht
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Registration - admission - PCC
Department/Location

Jana mac cullen
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

REGISTRATION-ADMISSION/PCC
Department/Location

JENNIFER MAC CULLEN
Employee Name

REGISTRATION WORKER
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / Rec
Department/Location

Matthew MacMillen
Employee Name

Registration
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

ADMISSIONS/PCC
Department/Location

RUTH MAC CULLEN
Employee Name

ASSOCIATE REGISTRAR
Exact Position Title

938-3940
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Tulia N. Maiava
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - Registration - PCC
Department/Location

Emily McKibben
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sandra Mello
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Sandra Mello
Employee Name

Registration worker
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Camelia Mendoza
Employee Name

Registration Worker / LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

PCC A&R
Department/Location

Sharon Mikes
Employee Name

Sr Clerk / AIR Tech II
Exact Position Title

(562) 938-3947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
✓ **Code 11** Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
✓ **Code 12** Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
✓ **Code 13** Answering Questions and/or referring student to the appropriate person for an answer.	6					
✓ **Code 14** Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Mikes Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Margaret Miller
Employee Name

Admissions & Records Tech II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Coreen Moll
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission - PCC
Department/Location

Kevin nguyen
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCE
Department/Location

Anthony Nichols
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Renee Odell
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/~~hrly~~ Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Sharon Olsen
Employee Name

Registration Aide
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/~~hrly~~
Work year length(~~circle~~)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admission / PCC
Department/Location

Jared Parker
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions & Records / LAC
Department/Location

Marcia Pettit
Employee Name

Associate Registrar
Exact Position Title

938-4719
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marcia Pettit Date 4/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Pasadena Pouono
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Samantha Quintus
Employee Name

Registration Aid
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
Fiscal Services - LAC Campus. — Department/Location
Stacey ROBINSON — Employee Name
Lead Cashier — Exact Position Title
(562) 938 4455 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson — Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Loretta Rowan
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Admission / PCE
Department/Location

JORGE RUBALCAVA
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCC
District

Admissions / PCC
Department/Location

Maria L Rubalcava
Employee Name

Records Specialist
Exact Position Title

562) 938-3994 Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica L Rubalcava Date 5-3-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

A&R PCCH II
Department/Location

Guadalupe Ruelas
Employee Name

A&R TECH II.
Exact Position Title

5629383946
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Guadalupe Ruelas Date 5/3/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Sherrie Sanders
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Leilya Satele
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

Admissions / LAC
Department/Location

Tauasosi Mary Satele
Employee Name

Senior Clerk
Exact Position Title

562 938 4138
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature T Mary Satele Date 5/2/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College District — District
A+R/ PCC — Department/Location
Lisa Stewart — Employee Name
Records Specialist — Exact Position Title
562 938 3943 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-99) 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Stewart Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions/PCC
Department/Location

Sandra Tait
Employee Name

Registration Worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 (99-00) (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH CITY COLLEGE
District

Registration - Admission / PCC
Department/Location

WARA TARRAB
Employee Name

Registration Worker & LTE
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions
Department/Location

Hubert Togafau
Employee Name

Registration Aide
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LONG BEACH
District

ADMISSIONS
Department/Location

CHRISTINE TRAN
Employee Name

ADMISSIONS TECH II
Exact Position Title

938-4748
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / PCC
Department/Location

Heather Valles
Employee Name

Registration worker
Exact Position Title

938-3942
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach
District

A & R CLAC)
Department/Location

CHERRI WADE
Employee Name

Admissions / Records Tech II
Exact Position Title

(562) 938 4137
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cher Wade Date 05/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / Registration
Department/Location

Katherine Watson
Employee Name

Registration Aide
Exact Position Title

_____ 12mo/11mo/10mo/hrly (circle)
Telephone # Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Danny Wilson
Employee Name

Registration Aid
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature DL Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.B.C.C.D.
District

AgR / PCC
Department/Location

CHARLOTTE YARBROUGH
Employee Name

AgR Tech. II
Exact Position Title

(562) 938-3949
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Admissions / LAC
Department/Location

Mary Margaret Yost
Employee Name

Registration Aide
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	½				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	½				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	½				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	½				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori M Date 5-4-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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2005-06

Financial Aid Specialists

Hue Nguyen - LAC
Irene Poly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Monica Thim - LAC
Jenifer Kwok - LAC
Jason Avila - LAC
Susana Duran - PCC
Juan Franc Menjivar - PCC
Dara Vaughn - PCC
Janice Lim - PCC

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG - C

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Financial Aid
Department/Location

See attached
Employee Name

Financial Aid Specialist
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. ~~Providing student with proof of eligibility and filing documents.~~	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-4-07

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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2005-06

Financial Aid Specialists

Hue Nguyen - LAC
Irene Polly - PCC
Maggie Huerta - LAC
Michele Pope - LAC
Monica Thim - LAC
Jenifer Kwok - LAC
Jason Avila - LAC
Susana Duran - PCC
Juan Franc Menjivar - PCC
Dara Vaughn - PCC
Janice Lim - PCC

LONG BEACH 1.8-1 #1

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Summer	12,431	13,446	13,661	15,287	17,605	12,854	13,837	14,000
Fall	24,196	24,504	24,426	22,724	28,317	30,970	25,047	26,296
Spring	22,594	24,619	25,700	28,722	29,779	28,722	25,686	26,444
Total	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740

Rec'd from Hannah Alford - Research Analyst
5/23/07

1.4-3 AND 1.8-3

BOG FW A & B
BOG C

EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LBCCD

Fiscal Year: 2005-06

see attached
Employee Name

Financial Aid Specialist
Exact Position Title

Financial Aid
Dept. & Location #

Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
/ /	input 13,152 applications			
/ /	into PS Bolt-on for			
/ /	BOG FW A+B			
/ /	2 mins. per application			
/ /	for eligibility determination			
/ /	and input		438.4	
/ /				
/ /	input FAFSA applications			
/ /	for BOG-C only			
/ /	FW recipients to EdExpress			
/ /	for 2,076 students			
/ /	at 7 minutes per			
/ /	student		242.2	
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 4-17-06

Toni M. DuBois
Employee Name: (print)

Dean, Student Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

15,228

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Long Beach Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ N/A	$ 2,718,590	$ 2,520,656	$ 2,748,095	$ 2,837,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 5-24-07

Toni M. DuBois
Employee Name: (print)

Dean, Stud. Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
CREASY, RICHARD	CUSTODIAL SUPERVISOR(Retired 12/04)	$ 46.65	
CROCKARD, BRUCE	DIRECTOR, HR & STAFF DIVERSITY		$ 79.51
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)		
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 71.03	$ 74.57
de la RAMA, CURIE	ADMINISTRATIVE SECRETARY	46.84	$ 49.77
DORSEY, CHRISTOPHER	ACCOUNTING TECHNICIAN I	$ 43.40	$ 48.23
DUBOIS, TONI	DIRECTOR, FINANCIAL AID	$ 89.46	$ 93.92
DUNCAN, YVONNE	PROJECT MANAGER-GOOD BEGINNINGS	$ 69.70	$ 69.70
ECKMAN, JONATHON	CUSTODIAN	$ 36.09	$ 38.33
EKHSIGIAN, ARDA	ASSOCIATE DIRECTOR, FINANCIAL AID	$ 56.89	$ 56.89
FALTADO, EXVI	ADMINISTRATIVE SECRETARY	37.95	$ 38.33
FERNANDEZ, YOLANDA	CLERK	38.01	$ 38.38
FLOYD, GREG	DEPUTY DIRECTOR, FACILITIES	$ 79.79	$ 79.79
FOOTDALE, JOE	COLLEGE POLICE SHIFT SUPERVISOR(Layoff 8/03)		
FORD-PANEK, EMMA	ADMINISTRATIVE CONTRACT TECH	$ 42.59	$ 44.63
FYLPAA, JOHN	DEAN, STUDENT AFFAIRS	$ 98.62	$ 98.62
GARCIA, KELLY	ADMIN SECRETARY	$ 52.14	$ 52.14
GIBBINS, ANITA	MANAGER, WOMENS CENTER	$ 56.89	$ 56.89
GONZALES, GLORIA	SENIOR CLERK, SUP'T-PRESIDENTS OFFICE		
GUIDAS, MARK	NETWORK SERVICES MANAGER	$ 74.58	$ 78.30

SixTen calculated Productive Hourly Rates w/ 21% benefits for month / 10% benefits for hourly

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acosta, Adelino	Admissions & Records Tech II					26.59	30.47	30.77	30.77
Alvarado, Olga					24.79	29.52	31.33	31.33	
Avila, Jason								22.93	*23.96
Brackman, Pamela	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Brown, Eileen	Admissions & Records Tech II				26.11	31.08	35.64	35.64	37.98
Combs, April	Temporary Office Worker I					14.30	14.30	14.30	14.30
De La Rama, Micah	Temporary Office Worker I				12.10		12.10		
Deering, JoAnn					24.79	29.52	29.52	22.93	
Duran, Susana	FA Spec						22.93	*25.30	27.02
Franco, Dolores	Int'l Admissions/Records Tech. II				29.56	29.56	33.85	35.64	36.00
Gilliland, Shannon	Account Tech. II FA							25.43	28.47
Heth, Linda	Temporary Office Worker I				12.10	12.10	12.10		
Hicks, Patricia	Lead Cashier				26.11	31.08	35.64	37.60	37.98
Huerta, Maggie	FA Spec				22.34	26.59	28.19	28.47	28.47
Kinsella, Denise	International Program Manager				26.11	31.08	31.27	37.04	41.30
Kwon, Jennifer								28.19	24.38
Lane, Alan									
Lemle, Barbara	Casual - Registrar Worker				9.08	9.08	9.08	25.10	
Liebrecht, Catherine	Admissions & Records Tech II							*20.88	26.35
Lim, Janice									**24.38
MacCullen, Ruth	Associate Registrar				32.71	34.34	38.59		40.99
McKibbin, Lori					27.98		29.52		
Menjivar, Juan Franc	FA Spec						22.93	24.13	25.68
Milkes, Sharon	Senior Clerk/A&R Tech. II				22.74	25.28	28.93	*29.46	30.77
Miller, Margaret	Admissions & Records Tech II				26.56	28.02	32.09	33.85	34.19
Nguyen, Hue	FA Spec				26.16	31.14	31.33	31.33	33.28
Pettit, Marcia	Associate Registrar				37.61	42.27	42.27	42.27	*43.49
Polly, Irene	FA Spec				24.79	29.52	31.14	31.33	31.64
Pope, Irene									
Robinson, Stacey	Lead Cashier							25.43	28.14
Rubalcava, Maria	Records Specialist				21.78	27.30	30.47	32.09	32.41
Ruelas, Guadalupe	Admissions & Records Tech II			***	25.21	26.59	30.47	30.77	30.77
Ruiz, Noelia					26.56	23.82	23.76		
Satele, Tauasosi Mary	Senior Clerk				25.21	26.59	32.09	32.09	32.41
Skille, Steve	Account Tech. II FA				12.10	22.80	25.43	26.75	28.47
Stewart, Lisa	Records Specialist				23.96	26.59	30.47	30.47	30.77
Sim, Monica	FA Spec								29.14
Tan, Christine	Admissions & Records Tech II					17.04	26.09	27.46	29.22
Vaughn, Dara	FA Spec				20.53	22.80	24.13	26.75	28.47
Wade, Sherri	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77
Yarbrough, Charlotte	Admissions & Records Tech II				23.96	26.59	30.47	30.47	30.77

where back-up was not provided - used same DIFF as previous FY. If no previous PHR available used following FY PHR and divided by 5%

= Changed PHR w/ no back-up the difference or average difference of all other yrs provided

** = No Back-up - gave the same as Jennifer Kwon

* = No Back-up - Fa

Staff	Title	PHRs 02-03	PHRs 05-06
Allen, Marianne	FA Counselor	48.76	55.80
Atwood, Kathie	Secretary LAC	29.52	32.46
Bla tti, Sara	FA - PT Counselor	N/W	12.10
Catipon, Mary	FA - PT Counselor	N/N	52.23
Davis, Judy	Secretary		N/W
Douglass, Genevieve	Account Tech. II		N/N
Haksigian, Arda	Assoc. Director FA	40.83	47.82
Garvey, Peggy	Account Tech. II	28.02	29.70
Gutierrez, Dorothy	FA Advisor	44.93	45.65
MacCallum, Michael	FA Counselor	64.82	72.70
Miller, Laura	Account Tech. II	29.48	
Nachreiner, Ron	Office Assistant		19.50
Overton, Kimberly	FA - PT Counselor	N/W	
Pope, Michele	FA Specialist	28.02	29.42
Stepan, Betty	FA Counselor	58.32	61.24
Sweet-Kelly, Deborah	Office Assistant	23.38	24.55
Tait, Sandra	Office Assistant	19.56	21.79
Tim, Sophorn	FA Data Software Spec.	7.43	7.80
Turner, Lydia	FA Counselor		53.53
Yentch, Richard	Assoc. Director FA		47.82

NW - not working

There are two other employees w/ this title Blassetti & Catipon - used lower of the two = 12.10

Sixten Calculated Productive Hourly Rates w/ 21% benefits for monthly + 6% benefits for hourly

FA Specialists

0•	C	
Duran 27•02		+
Huerta 28•47		+
menjivar 25•68		+
Nguyen 33•28		+
Polly 31•64		+
Vaughn 28•47		+
Pope, Michele 29•42		+
203•98		*
203•98		÷
7•		=
29•14		*
Avg FA Specialist for Thim, Monica		
0•	C	

0•	C	
0•	C	
Pope 28•02		x
1•05		=
29•42		*
0•	C	
Stepan 58•32		x
1•05		=
61•24		*
0•	C	
Sweet-Kelly 23•38		x
1•05		=
24•55		*
0•	C	
0•	C	
7•43		x
1•05		=
7•80		*
0•	C	

FAX

For: **Sergio Perez**

Fax Number: **(858) 514-8645**

From: **Linda Roseth,**
Long Beach City College- Mandated Cost Specialist

Fax Number: **(562) 938-4364**

Date: 5/21/07

Regarding: Signed EFCW 1.7-2 forms

Number of pages:

Comments:

Hi Sergio,

Ross signed these forms on Friday.

The Registration Worker rate from 7/1/01 is $8.25

Before 7/1/01 the rate was $7.99.

I am working on the rates for A/R II and Temporary Office Worker.

Thank you.

Linda

0• C
7•99 x
1•1 =
8•79 *
0• C
8•25 x
1•1 =
9•08 *
0• C

Schedule 4
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 04-05 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers						
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843	272,320
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301						
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**	**$ 389,417**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 05-06 fees are $26.00.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$68,697,779	$59,554,598	$3,660,866	$63,215,464
EQUALIZATION	775,786	713,723	62,063	775,786
ENROLL FEE ADMIN (2%)	144,866	133,276	11,590	144,866
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	593,764	546,263	47,501	593,764
S.F.A.A.	919,278	844,662	74,616	919,278
E.O.P.S.	1,774,345	1,632,399	141,946	1,774,345
C.A.R.E.	251,965	229,934	22,031	251,965
D.S.P.S.	1,048,903	964,990	83,913	1,048,903
STATE HOSPITALS	0	0	0	0
CALWORKS	1,238,270	982,810	255,460	1,238,270
MATRICULATION (CREDIT)	816,099	742,531	73,568	816,099
MATRIC. (NONCREDIT)	181,267	166,765	14,502	181,267
FAC.& STAFF DIVERSITY	24,493	20,709	3,784	24,493
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	937,446	862,451	74,995	937,446
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	501,260	461,160	40,100	501,260
ECON. DEVELOPMENT	1,357,017	1,139,893	1	1,139,894
TANF	250,344	230,318	20,026	250,344
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	15,802	47,408	63,210
VTEA TITLE I C	964,030	681,335	128,450	809,785
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	1,594,930	1,579,911	15,019	1,594,930
TOTAL	$82,199,424	$71,537,292	$4,796,409	$76,333,701

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch[illegible] 4A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 61.51	$ 64.59	$ 3,135.64	$ 256.03	$ 78.73	$ 44.73	$ 46.96
	EFCW-1 B. 1. b.		$ 180.59	$ 28.15	$ 97.38	$ 1,038.20			$ 391.60
	EFCW-1 B. 2. a.								
	EFCW-1 B. 2. b.		$ 14,235.42	$ 15,490.64	$ 16,242.94	$ 22,470.20	$ 22,494.58	$ 18,241.16	$ 17,915.35
	EFCW-1 B. 2. c.			$ 1,227.21	$ 1,254.67	$ 1,645.88		$ 2,102.31	$ 2,207.12
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 14,477.52	$ 16,810.59	$ 20,730.63	$ 25,410.31	$ 22,573.31	$ 20,388.20	$ 20,561.03
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 244,673.00	$ 258,940.00	$ 282,099.00	$ 296,585.00	$ 363,527.00	$ 412,824.00	$ 389,417.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (230,195.48)	$ (242,129.41)	$ (261,368.37)	$ (271,174.69)	$ (340,953.69)	$ (392,435.80)	$ (368,855.97)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 14,477.52**	**$ 16,810.59**	**$ 20,730.63**	**$ 25,410.31**	**$ 22,573.31**	**$ 20,388.20**	**$ 20,561.03**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Long Beach College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 16, 2007 01:55:38

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	390	116,207
BOGW - Part A-2 based on SSI recipient status	316	68,289
BOGW - Part A-3 based on general assistance recipient status	133	32,929
BOGW - Part A basis unreported	295	109,785
BOGW - Part B based on income standards	8,922	2,728,260
BOGW - Part C based on financial need	9,724	4,024,854

Total Amount = $ 7,080,324

Back to Top of Page

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0• C

390•00 +
316•00 +
133•00 +
295•00 +
8,922•00 +
A+B Total 10,056•00 *

0• C

10,056•00 +
9,724•00 +
A,B+C Total 19,780•00 *

0• C

Client CCCCO

A+B 13,152 19056

C 2,076 9,724

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

October 18, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8611

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Long Beach Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers ***(AMENDED)*** 2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC 19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 231,440
Less: 10% Late Penalty		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
...et Claimed Amount		(16) $ 221,440
Due from State	(08)	(17) $ 221,440
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	127
(24) EFCW-1, (04)(A)(2)(a)(f)	275,791
(25) EFCW-1, (04)(B)(1)(a)(f)	47
(26) EFCW-1, (04)(B)(1)(b)(f)	392
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	17,915
(29) EFCW-1, (04)(B)(2)(c)(f)	2,207
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	100,388
(32) EFCW-1, (09)	144,866
(33) EFCW-1, (10)	20,561
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 10-11-07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Long Beach Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 126.82	$ -	$ -	$ -	$ -	$ 126.82
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 275,791.39	$ -	$ -	$ -	$ -	$ 275,791.39
3. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 46.96	$ -	$ -	$ -	$ -	$ 46.96
b. Staff training (One time per employee)	$ 391.60	$ -	$ -	$ -	$ -	$ 391.60
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 17,915.35	$ -	$ -	$ -	$ -	$ 17,915.35
c. Reporting BOG fee waiver data to CCC	$ 2,207.12	$ -	$ -	$ -	$ -	$ 2,207.12
5) Total Direct Costs	$ 296,479.24	$ -	$ -	$ -	$ -	$ 296,479.24

direct Costs		
6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	33.86%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 100,387.87
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 396,867.11
st Reduction		
) Less: Enrollment Fee Revenue offset		$ 144,866.00
) Less: nrollment Fee Waiver offsets		$ 20,561.03
) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 231,440.08

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Robinson, Stacey Lead Cashier	$25.43	2.0	$ 50.86				
Hicks, Patricia Lead Cashier	$37.98	2.0	$ 75.96				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 126.82	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$16.10	5,672.9	$ 91,333.69				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$16.10	6,006.6	$ 96,706.26				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$16.10	5,450.4	$ 87,751.44				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 275,791.39	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Du Bois, Toni Dean, Financial Aid	$93.92	0.5	$ 46.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 46.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
MacCallum, Michael	FA Counselor	$72.70	0.5	$ 36.35				
Allen, Marianne	FA Counselor	$55.80	0.5	$ 27.90				
Stepan, Betty	FA Counselor	$61.24	0.5	$ 30.62				
Turner, Lydia	FA Counselor	$53.53	0.5	$ 26.77				
Gutierrez, Dorothy	FA Advisor	$45.65	0.5	$ 22.83				
Ekhsigian, Arda	Associate Director FA	$47.82	0.5	$ 23.91				
Yentch, Richard	Associate Director FA	$47.82	0.5	$ 23.91				
Huerta, Maggie	FA Specialist	$28.47	0.5	$ 14.24				
Pope, Michele	FA Specialist	$29.42	0.5	$ 14.71				
Nguyen, Hue	FA Specialist	$33.28	0.5	$ 16.64				
Polly, Irene	FA Specialist	$31.64	0.5	$ 15.82				
Nachreiner, Ron	Office Assistant	$19.50	0.5	$ 9.75				
Atwood, Kathie	Secretary	$32.46	0.5	$ 16.23				
Thim, Monica	FA Specialist	$29.14	0.5	$ 14.57				
Duran, Susana	FA Specialist	$27.02	0.5	$ 13.51				
Vaughn, Dara	FA Specialist	$28.47	0.5	$ 14.24				
Tim, Sophom	FA Data Software Specialist	$7.80	0.5	$ 3.90				
Menjivar, Juan Franc	FA Specialist	$25.68	0.5	$ 12.84				
Blassetti, Sara	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Overton, Kimberly	FA - PT - Counselor	$12.10	0.5	$ 6.05				
Skille, Steve	Account Tech. II FA	$28.47	0.5	$ 14.24				
Gilliland, Shannon	Account Tech. II FA	$28.47	0.5	$ 14.24				
Sweet-Kelly, Deborah	Office Assistant	$24.55	0.5	$ 12.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 391.60	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Receiving waiver applications								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Evaluating waiver applications and verifying application documents								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	109.6	$ 2,998.66				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	34.6	$ 946.66				
Entering approved application information into district records; providing student award letter								
Financial Aid Office Staff (BOG A/B)	Waiving Enrollment Fees	$27.36	83.8	$ 2,292.77				
Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	138.4	$ 3,786.62				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 17,915.35	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Beach Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Du Bois, Toni Dean, Financial Aid	$93.92	23.5	$ 2,207.12				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,207.12	$ -	$ -	$ -	$ -

Long Beach Community College District

308/95 ENROLLMENT F[illegible]OLLECTIONS/WAIVERS

2[illegible]06

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Allen, Marianne	FA Counselor	$55.80	$27.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Allen, Marianne Total**			$27.90		
8/3/2005	0.50	Atwood, Kathie	Secretary	$32.46	$16.23	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Atwood, Kathie Total**			$16.23		
8/3/2005	0.50	Blassetti, Sara	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Blassetti, Sara Total**			$6.05		
05-06	23.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$2,207.12	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
05-06	0.50	Du Bois, Toni	Dean, Financial Aid	$93.92	$46.96	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	24.00	**Du Bois, Toni Total**			$2,254.08		
8/3/2005	0.50	Duran, Susana	FA Specialist	$27.02	$13.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Duran, Susana Total**			$13.51		
8/3/2005	0.50	Ekhsigian, Arda	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Ekhsigian, Arda Total**			$23.91		
05-06	5,672.90	Enrollment Office Staff	Collecting Fees	$16.10	$91,333.69	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,006.60	Enrollment Office Staff	Collecting Fees	$16.10	$96,706.26	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,450.40	Enrollment Office Staff	Collecting Fees	$16.10	$87,751.44	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	17,129.90	**Enrollment Office Staff Total**			$275,791.39		
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Receiving waiver applications	Waiving student fees
05-06	109.60	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,998.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	83.80	Financial Aid Office Staff (BOG A/B	Waiving Enrollment Fees	$27.36	$2,292.77	Entering approved application information into district records; providing student award letter	Waiving student fees
	412.60	**Financial Aid Office Staff (BOG A/B) Total**			$11,288.75		
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Receiving waiver applications	Waiving student fees
05-06	34.60	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$946.66	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	138.40	Financial Aid Office Staff (BOG C)	Waiving Enrollment Fees	$27.36	$3,786.62	Entering approved application information into district records; providing student award letter	Waiving student fees
	242.20	**Financial Aid Office Staff (BOG C) Total**			$6,626.60		
8/3/2005	0.50	Gilliland, Shannon	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gilliland, Shannon Total**			$14.24		
8/3/2005	0.50	Gutierrez, Dorothy	FA Advisor	$45.65	$22.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Gutierrez, Dorothy Total**			$22.83		
05-06	2.00	Hicks, Patricia	Lead Cashier	$37.98	$75.96	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Hicks, Patricia Total**			$75.96		
8/3/2005	0.50	Huerta, Maggie	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Huerta, Maggie Total**			$14.24		
8/3/2005	0.50	MacCallum, Michael	FA Counselor	$72.70	$36.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**MacCallum, Michael Total**			$36.35		
8/3/2005	0.50	Menjivar, Juan Franc	FA Specialist	$25.68	$12.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Menjivar, Juan Franc Total**			$12.84		
8/3/2005	0.50	Nachreiner, Ron	Office Assistant	$19.50	$9.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nachreiner, Ron Total**			$9.75		

Long Beach Community College District

308/95 ENROLLMENT [illegible]OLLECTIONS/WAIVERS

2[illegible]06

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
8/3/2005	0.50	Nguyen, Hue	FA Specialist	$33.28	$16.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Nguyen, Hue Total**			$16.64		
8/3/2005	0.50	Overton, Kimberly	FA - PT - Counselor	$12.10	$6.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Overton, Kimberly Total**			$6.05		
8/3/2005	0.50	Polly, Irene	FA Specialist	$31.64	$15.82	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Polly, Irene Total**			$15.82		
8/3/2005	0.50	Pope, Michele	FA Specialist	$29.42	$14.71	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Pope, Michele Total**			$14.71		
05-06	2.00	Robinson, Stacey	Lead Cashier	$25.43	$50.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Robinson, Stacey Total**			$50.86		
8/3/2005	0.50	Skille, Steve	Account Tech. II FA	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Skille, Steve Total**			$14.24		
8/3/2005	0.50	Stepan, Betty	FA Counselor	$61.24	$30.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Stepan, Betty Total**			$30.62		
8/3/2005	0.50	Sweet-Kelly, Deborah	Office Assistant	$24.55	$12.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Sweet-Kelly, Deborah Total**			$12.28		
8/3/2005	0.50	Thim, Monica	FA Specialist	$29.14	$14.57	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Thim, Monica Total**			$14.57		
8/3/2005	0.50	Tim, Sophorn	FA Data Software Specialist	$7.80	$3.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Tim, Sophorn Total**			$3.90		
8/3/2005	0.50	Turner, Lydia	FA Counselor	$53.53	$26.77	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Turner, Lydia Total**			$26.77		
8/3/2005	0.50	Vaughn, Dara	FA Specialist	$28.47	$14.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Vaughn, Dara Total**			$14.24		
8/3/2005	0.50	Yentch, Richard	Associate Director FA	$47.82	$23.91	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Yentch, Richard Total**			$23.91		
	17,824.20	**Grand Total**			$296,479.24		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,194,957		$49,194,957	$903,650	$48,291,307
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,663,844		2,663,844	28,676	2,635,168
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	196,791		196,791	1,058	195,733
Other Instructional Administration & Instructional Governance	6090	252,724		252,724	1,132	251,592
Instructional Support Services	6100					
Learning Center	6110	962,512		962,512	10,164	952,348
Library	6120	1,852,763		1,852,763	3,719	1,849,044
Media	6130	952,522		952,522	62,578	889,944
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	103,287		103,287		103,287
Admissions and Records	6200	2,052,489		2,052,489	1,008	2,051,481
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,183,080		3,183,080	24,985	3,158,095
Matriculation and Student Assessment	6320	968,830		968,830	18,067	950,763
Transfer Programs	6330	648,165		648,165	399	647,766
Career Guidance	6340	266,960		266,960	2,119	264,841
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	743,541		743,541	20,102	723,439
Subtotal		$64,042,465	$0	$64,042,465	$1,077,657	$62,964,808

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,010,638		$1,010,638	$754	$1,009,884
Health Services	6440	442,697		442,697	3,600	439,097
Student Personnel Admin.	6450	1,267,712		1,267,712	8	1,267,704
Financial Aid Administration	6460	2,605,567		2,605,567	76,718	2,528,849
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	590,216		590,216	53,774	536,442
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,171,008		2,171,008	2,171,008	0
Custodial Services	6530	2,809,091		2,809,091	2,809,091	0
Grounds Maintenance and Repairs	6550	669,585		669,585	669,585	0
Utilities	6570	1,914,073		1,914,073	1,914,073	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,033,837		6,033,837	6,033,837	0
General Inst. Support Services	6700					
Community Relations	6710	515,752		515,752	515,752	0
Fiscal Operations	6720	2,503,134		2,503,134	2,503,134	0
Human Resources Management	6730	1,482,567		1,482,567	1,482,567	0
Noninstructional Staff Benefits & Incentives	6740	272,673		272,673	272,673	0
Staff Development	6750	144,599		144,599	144,599	0
Staff Diversity	6760	25,685		25,685	25,685	0
Logistical Services	6770	1,562,060		1,562,060	1,562,060	0
Management Information Systems	6780	3,112,541		3,112,541	3,112,541	0
Subtotal		$93,175,900	$0	$93,175,900	$24,429,116	$68,746,784

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES	FORM FAM-29C

(01) Claimant Long Beach Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	165,228		165,228	165,228	0
Community Services and Economic Development	6800					
Community Recreation	6810	81,018		81,018		81,018
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	3,657,034		3,657,034	110,701	3,546,333
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	26,593		26,593		26,593
Farm Operations	6930					
Food Services	6940					
Parking	6950	372,718		372,718	134,749	237,969
Student and Co-curricular Activities	6960	720,319		720,319		720,319
Student Housing	6970					
Other	6990	-8,463		-8,463		-8,463
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$98,190,347	$0	$98,190,347	$24,839,794	$73,350,553
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				33.86%		

(07) Notes

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	347,491	7,097	8,251	31,150		393,989
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,883,586	63,359	47,516	7,914		2,002,375
Business and Management	0500	2,851,997	91,223	36,335	61,421		3,040,976
Communications	0600						
Computer and Information Science	0700	1,146,557	42,266	37,729	62,584		1,289,136
Education	0800	2,963,053	257,204	46,820	66,557		3,333,634
Engineering and Related Industrial Tech.	0900	3,764,729	177,615	285,630	322,702		4,550,676
Fine and Applied Arts	1000	5,227,230	197,222	95,495	91,665		5,611,612
Foreign Language	1100	1,208,644	58,346	5,695	1,335		1,274,020
Health	1200	2,924,793	229,799	114,941	62,958		3,332,491
Consumer Education and Home Economics	1300	2,988,994	170,056	52,390	15,977		3,227,417
Law	1400						
Humanities (Letters)	1500	8,403,710	392,567	39,374	71,897		8,907,548
Library Science	1600	813,607	115,323	69,875	78,212		1,077,017
[illegible]ematics	1700	2,921,689	93,488	14,055			3,029,232
[illegible]y Studies	1800						
Physical Sciences	1900	1,436,078	32,431	21,798	14,913		1,505,220
Psychology	2000						
Public Affairs and Services	2100	649,794	35,454	471,754	1,204		1,158,206
Social Sciences	2200	3,727,451	124,631	20,862	3,517		3,876,461
Commercial Services	3000	557,157	29,192	17,863	5,368		609,580
Interdisciplinary Studies	4900	386,731	39,779	1,043	4,276		431,829
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	543,538					543,538
Subtotal - Instructional Activities	**599**	44,746,829	2,157,052	1,367,426	903,650		49,194,957

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,462,563	172,605	28,676		2,663,844
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		193,355	2,378	1,058		196,791
Other Instruct. Admin. & Instruct. Governance	6090		249,932	1,660	1,132		252,724
Subtotal - Instructional Administration	**6000**		2,905,850	176,643	30,866		3,113,359
Instructional Support Services (6100)							
Learning Center	6110		929,938	22,410	10,164		962,512
Library	6120		1,769,278	79,766	3,719		1,852,763
Media	6130		875,341	14,603	62,578		952,522
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		57,100	46,187			103,287
Subtotal - Instructional Support Services	**6100**		3,631,657	162,966	76,461		3,871,084
Admissions and Records	**6200**		1,926,090	125,391	1,008		2,052,489
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,092,458	65,637	24,985		3,183,080
Matriculation and Student Assessment	6320		905,070	45,693	18,067		968,830
Transfer Programs	6330		539,405	108,361	399		648,165
Career Guidance	6340		246,385	18,456	2,119		266,960
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,783,318	238,147	45,570		5,067,035

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		704,967	18,472	20,102		743,541
Extended Opportunity Prgms. & Services (EOPS)	6430		980,606	29,278	754		1,010,638
Health Services	6440		344,951	94,146	3,600		442,697
Student Personnel Administration	6450		1,249,634	18,070	8		1,267,712
Financial Aid Administration	6460		2,152,508	376,341	76,718		2,605,567
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		429,918	106,524	53,774		590,216
Subtotal - Other Student Services	**6400**		5,862,584	642,831	154,956		6,660,371
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,805,534	342,333	23,141		2,171,008
Custodial Services	6530		2,660,805	145,492	2,794		2,809,091
Grounds Maintenance and Repairs	6550		631,499	36,500	1,586		669,585
Utilities	6570			1,914,073			1,914,073
Other Operation and Maintenance of Plant	6590						
Total - Operation and Maintenance of Plant	**6500**		5,097,838	2,438,398	27,521		7,563,757
Planning, Policymaking, and Coordination	**6600**		3,407,925	2,616,442	9,470		6,033,837

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		412,457	103,295			515,752
Fiscal Operations	6720		1,857,114	645,804	216		2,503,134
Human Resources Management	6730		1,404,493	70,024	8,050		1,482,567
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		272,673				272,673
Staff Development	6750		126,104	17,424	1,071		144,599
Staff Diversity	6760			25,685			25,685
Logistical Services	6770		1,290,305	148,728	123,027		1,562,060
Management Information Systems	6780		2,168,816	820,708	123,017		3,112,541
Other General Institutional Support Services	6790		150,980	14,248			165,228
Subtotal - General Institutional Support Services	**6700**		7,682,942	1,845,916	255,381		9,784,239
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		77,010	4,008			81,018
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		2,929,472	616,861	110,701		3,657,034
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		3,006,482	620,869	110,701		3,738,052

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		26,593				26,593
Farm Operations	6930						
Food Services	6940						
Parking	6950		163,899	74,070	134,749		372,718
Student and Co-curricular Activities	6960		702,958	17,361			720,319
Student Housing	6970						
Other Ancillary Services	6990			(8,463)			(8,463)
Subtotal - Ancillary Services	**6900**		893,450	82,968	134,749		1,111,167
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
ong-Term Debt	7210						
ax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					3,648,802	3,648,802
Student Aid	7320					516,328	516,328
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,165,130	4,165,130
TOTAL EXPENDITURES and OTHER OUTGO	**391**	44,746,829	41,355,188	10,337,997	1,750,333	4,165,130	102,355,477

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
2 Balboa Avenue, Suite 900
Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 11, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Long Beach Community College District CC 19250

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Long Beach Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

Claimant Identification Number: CC19250

(02) Claimant Name: Long Beach Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 4901 East Carson Street

City: Long Beach | State: CA | Zip Code: 90808

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 166,400	(13) $ 151,285
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 151,285
Due from State	(08) $ 166,400	(17) $ 151,285
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	198,025
(25) EFCW-1, (04)(B)(1)(a)(f)	22
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	106,385
(29) EFCW-1, (04)(B)(2)(c)(f)	1,110
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	99,912
(32) EFCW-1, (09)	146,652
(33) EFCW-1, (10)	107,517
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**: 12/20/07

Irma Ramos
Type or Print Name

Administrative Dean, Human Resources
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
ong Beach Community College District	Reimbursement	X	2006-2007
	Estimated		

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 198,024.87	$ -	$ -	$ -	$ -	$ 198,024.87
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P ing district policies & procedures fo V.B.	$ 22.19	$ -	$ -	$ -	$ -	$ 22.19
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 106,384.75	$ -	$ -	$ -	$ -	$ 106,384.75
c. Reporting BOG fee waiver data to CCC	$ 1,109.60	$ -	$ -	$ -	$ -	$ 1,109.60
Total Direct Costs	$ 305,541.41	$ -	$ -	$ -	$ -	$ 305,541.41

irect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.70%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 99,912.04
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 405,453.45
t Reduction		
Less: Enrollment Fee Revenue offset		$ 146,652.00
Less: Enrollment Fee Waiver offsets		$ 107,516.54
Tota aimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 151,284.91

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$41.16	1,062.2	$ 43,720.15				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$41.16	910.4	$ 37,472.06				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$41.16	1,745.0	$ 71,824.20				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$41.16	834.6	$ 34,352.14				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$41.16	83.2	$ 3,424.51				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$41.16	175.7	$ 7,231.81				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 198,024.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination DuBois, Toni Dean, Financial Aid	$110.96	0.2	$ 22.19				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 22.19	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Long Beach Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Receiving waiver applications							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Evaluating waiver applications and verifying application documents							
Financial Aid Staff Various	$48.50	334.9	$ 16,242.65				
Entering approved application information into district records; providing student award letter							
Financial Aid Staff Various	$48.50	1,188.8	$ 57,656.80				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 106,384.75	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Long Beach Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
DuBois, Toni Dean, Financial Aid	$110.96	10.0	$ 1,109.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,109.60	$ -	$ -	$ -	$ -

Long Beach Community College District
308/95 ENROLLMF EE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	10.00	DuBois, Toni	Dean, Financial Aid	$110.96	$1,109.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
06-07	0.20	DuBois, Toni	Dean, Financial Aid	$110.96	$22.19	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for §
	10.20	**DuBois, Toni Total**			$1,131.79		
06-07	1,062.20	Enrollment Office Staf	Various	$41.16	$43,720.15	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	910.40	Enrollment Office Staf	Various	$41.16	$37,472.06	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	1,745.00	Enrollment Office Staf	Various	$41.16	$71,824.20	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	834.60	Enrollment Office Staf	Various	$41.16	$34,352.14	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	175.70	Enrollment Office Staf	Various	$41.16	$7,231.81	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
06-07	83.20	Enrollment Office Staf	Various	$41.16	$3,424.51	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	4,811.10	**Enrollment Office Staff Total**			$198,024.87		
06-07	1,188.80	Financial Aid Staff	Various	$48.50	$57,656.80	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	334.90	Financial Aid Staff	Various	$48.50	$16,242.65	Receiving waiver applications	Waiving student fees
	2,193.50	**Financial Aid Staff Total**			$106,384.75		
	7,014.80	**Grand Total**			$305,541.41		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$53,110,562		$53,110,562	$868,912	$52,241,650
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,902,807		2,902,807	28,005	2,874,802
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	180,923		180,923		180,923
Other Instructional Administration & Instructional Governance	6090	264,898		264,898	2,225	262,673
Instructional Support Services	6100					
Learning Center	6110	970,132		970,132	4,896	965,236
Library	6120	1,838,953		1,838,953	11,457	1,827,496
Media	6130	1,001,439		1,001,439	30,472	970,967
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	72,011		72,011	7,786	64,225
Admissions and Records	6200	2,205,355		2,205,355	17,412	2,187,943
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,456,275		3,456,275	42,690	3,413,585
Matriculation and Student Assessment	6320	816,099		816,099		816,099
Transfer Programs	6330	740,167		740,167	3,642	736,525
Career Guidance	6340	282,029		282,029	2,872	279,157
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	868,008		868,008	5,962	862,046
Subtotal		$68,709,658	$0	$68,709,658	$1,026,331	$67,683,327

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,350,823		$1,350,823	$10,417	$1,340,406
Health Services	6440	467,273		467,273	2,554	464,719
Student Personnel Admin.	6450	1,177,387		1,177,387	821	1,176,566
Financial Aid Administration	6460	2,504,427		2,504,427	39,850	2,464,577
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	581,687		581,687	47,401	534,286
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,281,157		2,281,157	2,281,157	0
Custodial Services	6530	2,886,471		2,886,471	2,886,471	0
Grounds Maintenance and Repairs	6550	602,263		602,263	602,263	0
Utilities	6570	2,286,858		2,286,858	2,286,858	0
Other	6590					
Planning, Policy Making, and Coordination	6600	6,233,767		6,233,767	6,233,767	0
General Inst. Support Services	6700					
Community Relations	6710	785,798		785,798	785,798	0
Fiscal Operations	6720	2,227,400		2,227,400	2,227,400	0
Human Resources Management	6730	1,516,246		1,516,246	1,516,246	0
Noninstructional Staff Benefits & Incentives	6740	221,240		221,240	221,240	0
Staff Development	6750	164,436		164,436	164,436	0
Staff Diversity	6760	22,110		22,110	22,110	0
Logistical Services	6770	1,527,703		1,527,703	1,527,703	0
Management Information Systems	6780	3,522,834		3,522,834	3,522,834	0
Subtotal		$99,069,538	$0	$99,069,538	$25,405,657	$73,663,881

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Long Beach Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	483,895		483,895	483,895	0
Community Services and Economic Development	6800					
Community Recreation	6810	75,626		75,626		75,626
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	4,577,040		4,577,040	20,998	4,556,042
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	9,530		9,530		9,530
Farm Operations	6930					
Food Services	6940					
Parking	6950	147,595		147,595	18,017	129,578
Student and Co-curricular Activities	6960	845,332		845,332	2,641	842,691
Student Housing	6970					
Other	6990	27,749		27,749		27,749
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$105,236,305	$0	$105,236,305	$25,931,208	$79,305,097
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.70%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	468,963	36,631	10,938	20,042		536,574
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	2,065,899	82,139	72,822	42,570		2,263,430
Business and Management	0500	2,957,372	94,832	35,506	16,426		3,104,136
Communications	0600						
Information Technology	0700	1,239,279	49,133	23,789	79,408		1,391,609
Education	0800	3,207,531	312,215	53,335	49,682		3,622,763
Engineering and Industrial Tech.	0900	3,957,188	235,851	305,134	389,760		4,887,933
Fine and Applied Arts	1000	5,606,680	216,681	114,256	49,981		5,987,598
Foreign Language	1100	1,266,511	51,111	7,125	5,516		1,330,263
Health	1200	3,445,740	222,375	71,262	23,365		3,762,742
Family and Consumer Sciences	1300	2,574,865	175,274	63,468	4,733		2,818,340
Law	1400						
Humanities (Letters)	1500	9,247,177	441,354	46,392	55,617		9,790,540
Library Science	1600	960,690	125,138	29,005	100,353		1,215,186
Mathematics	1700	3,359,297	107,212	17,369	1,981		3,485,859
Military Studies	1800						
Physical Sciences	1900	1,541,019	34,188	76,491	2,392		1,654,090
Psychology	2000			✓			
Public and Protective Services	2100	656,080	54,818	539,168			1,250,066
Social Sciences	2200	4,113,671	125,133	26,440	5,597		4,270,841
Commercial Services	3000	604,059	36,296	11,910	21,489		673,754
Interdisciplinary Studies	4900	499,159	19,619	3,869			522,647
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	542,191					542,191
Subtotal - Instructional Activities	**599**	48,313,371	2,420,000	1,508,279	868,912		53,110,562

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

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Long Beach Community College District | 840 | District Code No.

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010						
Course and Curriculum Development	6020		2,610,522	264,280	28,005		2,902,807
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		176,491	4,432			180,923
Subtotal - Instructional Administration	**6000**		260,027	2,646	2,225		264,898
Instructional Support Services (6100)			3,047,040	271,358	30,230		3,348,628
Learning Center	6110						
Library	6120		935,984	29,252	4,896		970,132
Media	6130		1,751,963	75,533	11,457		1,838,953
Museums and Galleries	6140		941,657	29,310	30,472		1,001,439
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		46,617	17,608	7,786		72,011
Admissions and Records	**6200**		3,676,221	151,703	54,611		3,882,535
Student Counseling and Guidance (6300)			2,065,838	122,105	17,412		2,205,355
Counseling and Guidance	6310						
Matriculation and Student Assessment	6320		3,369,855	43,730	42,690		3,456,275
Transfer Programs	6330		770,417	45,682			816,099
Career Guidance	6340		632,234	104,291	3,642		740,167
Other Student Counseling and Guidance	6390		264,313	14,844	2,872		282,029
Subtotal - Student Counseling and Guidance	**6300**		5,036,819	208,547	49,204		5,294,570

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		841,624	20,422	5,962		868,008
Extended Opportunity Prgms. & Services (EOPS)	6430		1,294,039	46,367	10,417		1,350,823
Health Services	6440		363,463	101,256	2,554		467,273
Student Personnel Administration	6450		1,147,814	28,752	821		1,177,387
Financial Aid Administration	6460		2,192,636	271,941	39,850		2,504,427
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		454,960	79,326	47,401		581,687
Operation and Maintenance of Plant (6500)			6,294,536	548,064	107,005		6,949,605
Building Maintenance and Repairs	6510						
Custodial Services	6530		1,864,328	392,836	23,993		2,281,157
Grounds Maintenance and Repairs	6550		2,643,370	198,260	44,841		2,886,471
Utilities	6570		602,219	44			602,263
Other Operation and Maintenance of Plant	6590			2,286,858			2,286,858
Subtotal - Operation and Maintenance of Plant	**6500**		5,109,917	2,877,998	68,834		8,056,749
Planning, Policymaking, and Coordination	**6600**		3,514,785	2,701,218	17,764		6,233,767

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		528,623	242,703	14,472		785,798
Fiscal Operations	6720		1,908,662	312,098	6,640		2,227,400
Human Resources Management	6730		1,331,297	180,451	4,498		1,516,246
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		221,240				221,240
Staff Development	6750		147,816	16,620			164,436
Staff Diversity	6760			21,132	978		22,110
Logistical Services	6770		1,321,674	82,668	123,361		1,527,703
Management Information Systems	6780		2,357,886	942,737	222,211		3,522,834
Other General Institutional Support Services	6790		279,682	143,842	60,371		483,895
Subtotal - General Institutional Support Services	**6700**		8,096,880	1,942,251	432,531		10,471,662
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		69,639	5,987			75,626
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		3,109,627	1,446,415	20,998		4,577,040
Subtotal - Community Services	**6800**		3,179,266	1,452,402	20,998		4,652,666

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		9,530				9,530
Farm Operations	6930						
Food Services	6940						
Parking	6950		85,373	44,205	18,017		147,595
Student and Co-curricular Activities	6960		820,975	21,716	2,641		845,332
Student Housing	6970						
Other Ancillary Services	6990		29,043	(1,294)			27,749
Subtotal - Ancillary Services	**6900**		944,921	64,627	20,658		1,030,206
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					5,499,802	5,499,802
Other Outgo	7330					552,266	552,266
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	48,313,371	43,366,223	11,848,552	1,688,159	6,052,068	6,052,068
						6,052,068	111,288,373

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Long Beach Community College District | 940 | District Code No.

Schedule 1A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 2**	22,761
Avg. time p/account	2.8
Total Time (in minutes)	63731
Per Hour	60
Hours Worked **(** Activity 11)**	**1062.2**
***EFC 2**	22,761
Avg. time p/student	2.4
Total Time (in minutes)	54626
Per Hour	60
Hours Worked **(** Activity 12)**	**910.4**
***EFC 2**	22,761
Avg. time p/question	4.6
Total Time (in minutes)	104701
Per Hour	60
Hours Worked **(** Activity 13)**	**1745.0**
***EFC 2**	22,761
Avg. time p/file	2.2
Total Time (in minutes)	50074
Per Hour	60
Hours Worked **(** Activity 14)**	**834.6**
***EFC 4**	1,663
Avg. time p/account (Not provided by client)	3.0
Total Time (in minutes)	4989
Per Hour	60
Hours Worked **(** Activity 15)**	**83.2**
***EFC 5**	2,636
Avg. time p/student (Not provided by client)	4.0
Total Time (in minutes)	10544
Per Hour	60
Hours Worked **(** Activity 16)**	**175.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3 and schedule 3.
Findings:

***EFW 6**	20,096
Avg. time p/question	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 21)**	**334.9**
***EFW 6**	20,096
Avg. time p/application	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 22)**	**334.9**
***EFW 6**	20,096
Avg. time p/evaluation	1.0
Total Time (in minutes)	20096
Per Hour	60
Hours Worked **(** Activity 23)**	**334.9**
***EFW 8**	818
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	19,278
Avg. time p/application	3.7
Total Time (in minutes)	71329
Per Hour	60
Hours Worked **(** Activity 25)**	**1188.8**
***EFW 8**	818
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		2	2	2	2	4	5	
		**Activity Codes						
Staff	Title	11	12	13	14	15	16	PHR
Baldwin, Francine	Cashier	3	2	5	2			33.60
Galtan, Sharonnac	Cashier	3	2	5	2			33.60
Haitana-Olsen, Sharon	Cashier	3	2	5	2			33.60
Hicks, Pat	Lead Cashier	3	2	5	2	3	4	56.66
Robinson, Stacy	Lead Cashier	2	4	3	3	3	4	48.36
Average		**2.8**	**2.4**	**4.6**	**2.2**	3.0	4.0	41.16

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2B
Long Beach Community College
308/95 Enrollment Fee Collection Waivers
Fiscal Year 2006-2007
Bog A B Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waivers Functions, Bog A & B.
Source: EFCW 1.7-3.
Findings:

		*EFC Workload Multiplier						
		6	6	6	8	7	8	
		**Activity Codes						
Staff	Title	21	22	23	24	25	26	PHR
Avila, Jason	Financial Aid Specialist	1	1	1		4.0		28.57
DuBois, Toni	Financial Aid Specialist	1	1	1		1.0		110.96
Duran, Susana	Financial Aid Specialist	1	1	1		4.0		42.42
Huerta, Magdalena	Financial Aid Specialist	1	1	1		4.0		44.67
Lim, Janice	Financial Aid Specialist	1	1	1		4.0		38.24
Mason, Ryan	Financial Aid Specialist	1	1	1		4.0		36.33
Nguyen, Hue	Financial Aid Specialist	1	1	1		4.0		49.63
Polly, Irene	Financial Aid Specialist	1	1	1		4.0		47.13
Pope, Michele	Financial Aid Specialist	1	1	1		4.0		44.67
Vaughn, Dara	Financial Aid Specialist	1	1	1		4.0		42.42
Average		1	1	1		3.7		48.50

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

21 - Answer Questions *regarding fee waivers or referring them to the appropriate person for an answer.*
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 2.2 for BOG A/B and EFCW 2.2 for BOG C from T. DuBois and CCCCO website #s.
(See in workpapers of 04-05 claim only.)
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1.	Enrolled Students	59,221	62,569	63,787	66,733	75,701	72,546	64,570	66,740	67,336
EFC 2	1.8-1 2.	Paid Enrollment fees									22,761
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)									19,278
EFC 4	1.8-2 1.	Delinquencies collections	Not needed. Only two employees gave an average for Codes 15 that uses multiplier *EFC 4, so we are not claiming time for this code.								1,663
EFC 5	1.8-2 2.	Refunds	Not needed. Only two employees gave an average for Codes 16 that uses multiplier *EFC 5, so we are not claiming time for this code.								2,636
EFW 6 for BOG A/B	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	9,615	9,628	9,767	12,774	12,907	14,327	13,152	20,096
EFW 7	1.8-3 2. (CCCCO website #'s)	Waivers Approved	X -	6,951	8,339	7,997	9,605	9,280	9,473	10,056	19,278
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG A/B for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							818
EFW 6 for BOG C	1.8-3 1. (EFCW 2.2 from T. DuBois)	Waivers Requested	X	1,568	1,557	1,562	1,783	1,940	2,128	2,076	
EFW 7	1.8-3 2.	Waivers Approved	X -								
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Not needed. T. DuBois reported N/A on her EFCW 1.7-3 for BOG C for Codes 24 and 26 which are the only two codes that use multiplier *EFW 8.							

Conclusion: Findings will go forward to the Schedule 1A, 1B and 1C.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2007 Spring Semester

Data Current As Of October 30, 2007 07:42:14

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	25,739

© 2001 State of California. California Community Colleges, Chancellor's Office

25,739 Spring
25,943 Fall
12,875 Summer
Total 64,557

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2006 Fall Term

Data Current As Of October 30, 2007 07:42:37

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	25,943

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Long Beach CCD
For 2006 Summer Term

Data Current As Of October 30, 2007 07:42:47

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	12,875

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LBCCD

Toni M. DuBois — Employee Name

Dean — Exact Position Title

Financial Aid — College/Department/Location

4573 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		10mins.	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		0	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		10hrs	
TOTALS:			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Toni M DuBois Date 10-13-07

If you have any questions, please contact Linda Roseth at Ext.4512

PLEASE SUBMIT THIS INFORMATION BY October 1, 2007 to Linda Roseth 2007

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Student Accounts N104
Department/Location

FRANCINE BALDWIN
Employee Name

Cashier
Exact Position Title

562-938-4010
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Francine Baldwin Date 9-28-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FISCAL/STUD. ACCTS-PCC
Department/Location

Sharonmae GAITAN
Employee Name

CASHIER Acct. Asst. I
Exact Position Title

(562) 938-3907
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/03/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach City College
District

Student Accounts N104.
Department/Location

Sharon Haitana-Olsen
Employee Name

Cashier
Exact Position Title

(562) 938-4009
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature S Haitana Olsen Date 9/27/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

Student Accts - Pcc
Department/Location

Pat Hicks
Employee Name

LEAD CASHIER ACCT. Tech III
Exact Position Title

(562) 938-3906 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pat Hicks Date 10/3/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Long Beach Community College
District

Fiscal Services - Cashiering
Department/Location

Stacey Robinson
Employee Name

Lead Cashier
Exact Position Title

562 938-4455 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Robinson Date 9/26/07

If you have any questions, please contact _____, at _____

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BY:

NOV 15 2007
BY:

EFCW 1.7-3

Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS
BOG A & B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

JASON AVILA
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4588
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A+B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

Toni DuBois
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4573
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1/2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1/2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1/2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	No			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1/2			
Code 26 Denied Applications: Reviewing additional documentation ...tification to student	NA			

...equires that school district personnel maintain a record of ...e reimbursement. Your signature on this form certifies that ...aith estimate which you "certify (or declare) under penalty of ...e and correct based on your personal knowledge or ...g purposes only. PLEASE USE BLUE INK

...26 Date 10-13-07

..., at ...

...; TO ...

January 2006

LongB
EFCW
1.7-3

Tony DuBois
Code 21, 22, 23

1/2 minute
30 seconds

Linda Roseth

RECEIVED
OCT 16 2007
BY:

NOV 15 2007
BY:

EFCW 1.7-3

Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A & B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

OCT 16 2007

LBCCD — District

FINANCIAL AID — Department/Location

SUSANA DURAN — Employee Name

FINANCIAL AID SPECIALIST — Exact Position Title

3063 — Telephone #

12mo/11mo/10mo/hrly Work year length (circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10-13-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

MAGDALENA HUERTA
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4571
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG Fee

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

JANICE LIM
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

3158
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

RYAN MASON
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4032
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications; notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

HUE NGUYEN
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4570
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

IRENE POLLY
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

3953
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step.1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD
District

FINANCIAL AID
Department/Location

OCT 16 2007

MICHELE POPE
Employee Name

FINANCIAL AID SPECIALIST
Exact Position Title

4054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature _____ Date 10-13-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BY:

EFCW 1.7-3

Employee AVERAGE Time Record for ~~Mandated Costs~~
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

BOG A&B

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBCCD — District

FINANCIAL AID — Department/Location

OCT 16 2007

DARA VAUGHN — Employee Name

FINANCIAL AID SPECIALIST — Exact Position Title

3954 — Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

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Employee Signature [signature] Date 10-13-07

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		13,621	
Fall		26,944	
~~Winter/ Intersession~~		–	
Spring		26,771	
Total		67,336	
2. Number of students who paid enrollment fees:			
Summer			
Fall			
~~Winter/ Intersession~~			
Spring			
Total			
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
~~Winter/ Intersession~~			
Spring			
Total		19,278	

From Hanna Afford

From Patti Davis

From Toni DuBois

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean, Financial Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer			
Fall			
Winter/ Intersession		NA	
Spring			
Total			
2. Number of students who paid enrollment fees:			
Summer 2006		3546	
Fall 2006		9543	
Winter/ Intersession-NA			
Spring 2007		9672	
Total		22761	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer 2006		5959	
Fall 2006		12714	
Winter/ Intersession - NA			
Spring 2007		12328	
Total		31001	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Chris Dorsey/LR Date 12/3/07

CHRIS DORSEY Business Analyst III

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
		06-7	
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		325	
Fall		670	
Winter/Intersession		—	
Spring		668	
Total		1663	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		151	
Fall		1654	
Winter/Intersession		—	
Spring		831	
Total		2636	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Patricia Davis Date 10/19/07

Patricia Davis
Employee Name: (print)

Deputy Director Finance & Acctg
Position or Title

If you have any questions, please contact Linda Roseth, at Ext. 4512.

PLEASE SUBMIT THIS INFORMATION BY October 1, 2007 ; TO Linda Roseth .

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. only

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
~~Winter/Intersession~~			
Spring			
Total		20,096	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
~~Winter/Intersession~~			
Spring			
Total		19,278	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean Stu Fin Aid
Position or Title

If you have any questions, please contact _____ at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: LBCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7 only	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ $6,039,921	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ $120,798	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
~~C. Winter/Intersession~~			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Toni M DuBois Date 10-13-07

Toni M. DuBois
Employee Name: (print)

Dean, Stu Fin Aid
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
0 Page(s) attachment

FAX TRANSMITTAL

DATE: November 21, 2007

FAX TO: FR Linda Roseth
Long Beach CCD
562-938-4364

FROM: To Keith Petersen KBP

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee and Collection Waivers
Fiscal Year: 2006-2007

PLEASE RESPOND BY: December 6, 2007

In order to complete the above claim we need the following PHR's:

Name	Title	2006-2007 PHR	
Avila, Jason	Financial Aid Specialist	$ 28.57	2842.90
Baldwin, Francine	Cashier	$ 33.60	3344.19
Duran, Susana	Financial Aid Specialist	$ 42.42	4221.72
Gaitan, Sharonnac	Cashier	$ 33.60	3344.19
Haitana-Olsen, Sharon	Cashier	$ 33.60	3344.19
Hicks, Pat	Lead Cashier	$ 56.66	5638.74
Huerta, Magdalena	Financial Aid Specialist	$ 44.67	4445.93
Lim, Janice	Financial Aid Specialist	$ 38.24	3805.40
Mason, Ryan	Financial Aid Specialist	$ 36.33	3615.40
Nguyen, Hue	Financial Aid Specialist	$ 49.63	4939.11
Polly, Irene	Financial Aid Specialist	$ 47.13	4690.40
Pope, Michele	Financial Aid specialist	$ 44.67	4445.93
Robinson, Stacy	Lead Cashier	$ 48.36	4813.15
Vaughn, Dara	Financial aid Specialist	$ 42.42	4221.72

Thank You.

KBP:te

Name	Title	05-06	06-07
CHAO, SEM	BUDGET OFFICER	$ 55.39	$ 64.16
CHOW-OSAKA, ANGELINA	HUMAN RESOURCES ASSISTANT (Resigned 2004)		
CHRIST, GREG	EVENTS ASSISTANT	$ 8.33	$ 8.33
COLLINS, VICTOR	EXECUTIVE VP, HUMAN RESOURCES (Retired 6/04)		
COMPIAN, LAURA	ACADEMIC ADMIN SECRETARY	$ 38.33	$ 43.80
COSTA, ALTA	HONORS PROGRAM SECRETARY	$ 42.54	$ 46.15
CREASON, PAUL	DIRECTOR OF GRANTS	$ 91.35	$ 102.79
CREASY, RICHARD	CUSTODIAL SUPERVISOR(Retired 12/04)		
CROCKARD, BRUCE	DIRECTOR, HR & STAFF DIVERSITY (Resigned 07/06)	$ 79.51	
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)		
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 74.57	$ 89.77
de la RAMA, CURIE	ADMINISTRATIVE SECRETARY	$ 49.77	$ 54.00
DORSEY, CHRISTOPHER	BUSINESS SYSTEMS ANALYST II	$ 48.23	$ 62.13
DUBOIS, TONI	DEAN, FINANCIAL AID	$ 93.92	$ 110.96
DUNCAN, YVONNE	PROJECT MANAGER-GOOD BEGINNINGS	$ 69.70	$ 78.42
ECKMAN, JONATHON	CUSTODIAN	$ 38.33	$ 43.80
EKHSIGIAN, ARDA	BUSINESS PROCESS SUPPORT SUPERVISOR	$ 56.89	$ 68.50
ESTACIO, RON	RECEIVING CLERK	$ 36.39	$ 43.80
FALTADO, EXVI	ADMINISTRATIVE SECRETARY (Resigned 2006)	$ 38.33	
FEENSTRA, DARREN	VEHICLE & SMALL ENGINE MECHANIC	$ 46.70	$ 52.68

Name	Title	05-06	06-07
CHAO, SEM	BUDGET OFFICER	$ 55.39	$ 64.16
CHOW-OSAKA, ANGELINA	HUMAN RESOURCES ASSISTANT (Resigned 2004)		
CHRIST, GREG	EVENTS ASSISTANT	$ 8.33	$ 8.33
COLLINS, VICTOR	EXECUTIVE VP, HUMAN RESOURCES (Retired 6/04)		
COMPIAN, LAURA	ACADEMIC ADMIN SECRETARY	$ 38.33	$ 43.80
COSTA, ALTA	HONORS PROGRAM SECRETARY	$ 42.54	$ 46.15
CREASON, PAUL	DIRECTOR OF GRANTS	$ 91.35	$ 102.79
CREASY, RICHARD	CUSTODIAL SUPERVISOR(Retired 12/04)		
CROCKARD, BRUCE	DIRECTOR, HR & STAFF DIVERSITY (Resigned 07/06)	$ 79.51	
DANDOY, MAURY	COLLEGE POLICE SHIFT SUPERVISOR (DEMOTED)		
DAVIS, PATRICIA	CONTROLLER, ASST DIR FISCAL AFFAIRS	$ 74.57	$ 89.77
de la RAMA, CURIE	ADMINISTRATIVE SECRETARY	$ 49.77	$ 54.00
DORSEY, CHRISTOPHER	BUSINESS SYSTEMS ANALYST II	$ 48.23	$ 62.13
DUBOIS, TONI	DEAN, FINANCIAL AID	$ 93.92	$ 110.96
DUNCAN, YVONNE	PROJECT MANAGER-GOOD BEGINNINGS	$ 69.70	$ 78.42
ECKMAN, JONATHON	CUSTODIAN	$ 38.33	$ 43.80
EKHSIGIAN, ARDA	BUSINESS PROCESS SUPPORT SUPERVISOR	$ 56.89	$ 68.50
ESTACIO, RON	RECEIVING CLERK	$ 36.39	$ 43.80
FALTADO, EXVI	ADMINISTRATIVE SECRETARY (Resigned 2006)	$ 38.33	
FEENSTRA, DARREN	VEHICLE & SMALL ENGINE MECHANIC	$ 46.70	$ 52.68

APPENDIX 1

Resolution of the Board of Governors of the California Community Colleges No. 2006-02

Whereas, California Education Code section 76300 was recently amended by Assembly Bill 1802 (Stats. 2006, ch. 79) to reduce the enrollment fee from $26 per unit to "($20) per unit per semester, effective with the spring term of the 2006-07 academic year;" and

Whereas, There are indications that the Legislature actually intended to have the reduction in the enrollment fee begin with any term beginning on or after January 1, 2007, even if that term begins before the "Spring 2007" semester or quarter; and

Whereas, Many colleges with intersessions beginning before the Spring 2007 term will soon begin early registration during which students will be simultaneously enrolling in classes for both the intersession and for the regular Spring term; and

Whereas, Under these circumstances it will be administratively difficult and confusing to students to require colleges to charge $26 per unit for intersessions and $20 for the Spring term; and

Whereas, California Education Code section 76300 also gives the Board of Governors authority to proportionately adjust the per unit enrollment fee for intersessions; *now therefore, be it*

Resolved, That the Board of Governors of the California Community Colleges hereby takes the following actions:

For any term or intersession beginning on or after January 1, 2007, and prior to the Spring 2007 semester or quarter, a community college district may charge an enrollment fee of $20 per semester unit or $13 per quarter unit. In addition, for any subsequent term or intersession for which the Legislature has authorized a fee of $20 per semester unit, a community college district shall charge an enrollment fee of $13 per quarter unit if applicable.

Schedule 4
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers							
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 2,718,590	$ 2,520,656	$ 2,746,095	$ 2,887,116	$ 4,656,270	$ 6,998,349	$ 7,080,324	$ 6,039,921.00
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606	$ 120,798
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 190,301	For 00-01 through 06-07 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 20.00
Total # of credits	Line 4A divided by unit fee		229,150	249,645	262,465	297,145	299,843	272,320	301,996
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811	$ 274,816
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 54,372	$ 50,413	$ 54,922	$ 57,742	$ 93,125	$ 139,967	$ 141,606	$ 120,798
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 190,301							
1.8-4 5.	Credit Units Waived		$ 208,527	$ 227,177	$ 238,843	$ 270,402	$ 272,857	$ 247,811	$ 274,816
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 244,673**	**$ 258,940**	**$ 282,099**	**$ 296,585**	**$ 363,527**	**$ 412,824**	**$ 389,417**	**$ 395,614**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2006-07 fees are $20.00.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Long Beach
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$83,642,183	$73,633,954	$4,732,448	$78,366,402
ENROLL FEE ADMIN (2%)	146,652	134,920	11,732	146,652
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	937,055	0	937,055	937,055
S.F.A.A.	894,005	822,484	71,521	894,005
E.O.P.S.	1,793,109	1,649,661	143,448	1,793,109
C.A.R.E.	300,826	276,760	24,066	300,826
D.S.P.S.	1,544,367	1,420,817	123,550	1,544,367
STATE HOSPITALS	0	0	0	0
CALWORKS	1,428,377	1,130,107	298,270	1,428,377
MATRICULATION (CREDIT)	1,202,793	1,100,129	102,664	1,202,793
MATRIC. (NONCREDIT)	240,291	221,067	19,224	240,291
FAC.& STAFF DIVERSITY	20,615	18,965	1,650	20,615
PART-TIME FAC. ALLO.	937,446	862,451	74,995	937,446
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	214,102	196,974	17,128	214,102
SCHDL. MAINT. & REPAIR	214,122	196,993	17,129	214,122
TANF	237,827	218,801	19,026	237,827
ECON. DEVELOPMENT	1,440,742	1,210,223	0	1,210,223
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	100,577	100,577	0	100,577
PRIOR YEAR CORRECTION	2,074,787	2,074,787	0	2,074,787
ONE TIME FUNDS				
TRANSITION PAYMENT	235,129	205,143	29,986	235,129
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	380,093	380,093	0	380,093
BASIC SKILLS -REAPPROP	534,568	534,568	0	534,568
CAR. TECH. TRAILER BIL	676,900	676,900	0	676,900
GEN. PUR. TRAILER BILL	1,324,258	1,324,258	0	1,324,258
INST. MATERIAL TRAILER	799,087	799,087	0	799,087
SCHLD.MAINT. TRAILER B	799,087	799,087	0	799,087
FACULTY STAFF DEV	85,063	85,063	0	85,063
TOTAL	$102,256,019	$90,112,631	$6,637,088	$96,749,719

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch 4A
Long Beach Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 61.51	$ 64.59	$ 3,135.64	$ 256.03	$ 78.73	$ 44.73	$ 46.96	$ 22.19
	EFCW-1 B. 1. b.		$ 180.59	$ 28.15	$ 97.38	$ 1,038.20			$ 391.60	
	EFCW-1 B. 2. a.									
	EFCW-1 B. 2. b.		$ 14,235.42	$ 15,490.64	$ 16,242.94	$ 22,470.20	$ 22,494.58	$ 18,241.16	$ 17,915.35	$ 106,384.75
	EFCW-1 B. 2. c.			$ 1,227.21	$ 1,254.67	$ 1,645.88		$ 2,102.31	$ 2,207.12	$ 1,109.60
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 14,477.52	$ 16,810.59	$ 20,730.63	$ 25,410.31	$ 22,573.31	$ 20,388.20	$ 20,561.03	$ 107,516.54
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 244,673.00	$ 258,940.00	$ 282,099.00	$ 296,585.00	$ 363,527.00	$ 412,824.00	$ 389,417.00	395614
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (230,195.48)	$ (242,129.41)	$ (261,368.37)	$ (271,174.69)	$ (340,953.69)	$ (392,435.80)	$ (368,855.97)	$ (288,097.46)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 14,477.52**	**$ 16,810.59**	**$ 20,730.63**	**$ 25,410.31**	**$ 22,573.31**	**$ 20,388.20**	**$ 20,561.03**	**$ 107,516.54**

California Home

Tuesday, May 22, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Long Beach College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 22, 2012 03:25:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	361	89,796
BOGW - Part A-2 based on SSI recipient status	247	50,427
BOGW - Part A-3 based on general assistance recipient status	103	24,443
BOGW - Part A basis unreported	142	47,171
BOGW - Part B based on income standards	8,672	2,344,546
BOGW - Part C based on financial need	9,616	3,565,231
Fee Waiver – Dependent child of deceased or disabled Veteran	70	25,562

Total Amount = $ 6,147,176

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

ITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 28, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4785

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Los Rios Community College District CC34050

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Los Rios Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC34050

(02) Claimant Name: Los Rios Community College District

County of Location: Sacramento

Street Address or P.O. Box: 1919 Spanos Court

City: Sacramento | State: CA | Zip Code: 95825

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 1,205,200	(13) $ 1,095,641
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,095,641
Due from State	(08) $ 1,205,200	(17) $ 1,095,641
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	31,374
(23) EFCW-1, (04)(A)(1)(b)(f)	260
(24) EFCW-1, (04)(A)(2)(a)(f)	913,678
(25) EFCW-1, (04)(B)(1)(a)(f)	7,490
(26) EFCW-1, (04)(B)(1)(b)(f)	4,783
(27) EFCW-1, (04)(B)(2)(a)(f)	91,790
(28) EFCW-1, (04)(B)(2)(b)(f)	428,481
(29) EFCW-1, (04)(B)(2)(c)(f)	37,878
(30) EFCW-1, (06)	32
(31) EFCW-1, (07)	484,429
(32) EFCW-1, (09)	334,101
(33) EFCW-1, (10)	570,422
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**

Jon Sharpe — **Type or Print Name**

Deputy Chancellor — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Los Rios Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs (04) Reimbursable Components	Object Accounts (a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 31,374.48	$ -	$ -	$ -	$ -	$ 31,374.48
b. Staff training (One time per employee)	$ 260.26	$ -	$ -	$ -	$ -	$ 260.26
4. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 913,678.45	$ -	$ -	$ -	$ -	$ 913,678.45
3. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 7,489.79	$ -	$ -	$ -	$ -	$ 7,489.79
b. Staff training (One time per employee)	$ 4,782.70	$ -	$ -	$ -	$ -	$ 4,782.70
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 91,790.37	$ -	$ -	$ -	$ -	$ 91,790.37
b. Waiving student fees	$ 428,481.41	$ -	$ -	$ -	$ -	$ 428,481.41
c. Reporting BOG fee waiver data to CCC	$ 37,877.62	$ -	$ -	$ -	$ -	$ 37,877.62
5) Total Direct Costs	$ 1,515,735.08	$ -	$ -	$ -	$ -	$ 1,515,735.08

direct Costs

6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	31.96%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 484,428.93
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 2,000,164.01

ost Reduction

9) Less: Enrollment Fee Revenue offset		$ 334,101.00
0) Le Enrollment Fee Waiver offsets		$ 570,421.89
) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 1,095,641.12

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Paulson, Jan	Director III	$73.39	32.0	$ 2,348.48				
Flash, Kevin	Application Systems Specialist	$63.10	460.0	$ 29,026.00				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 31,374.48	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Haney, Brenda	Account Clerk III	$29.93	2.0	$ 59.86				
Wurzer, Christine	AR Supervisor	$50.10	4.0	$ 200.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 260.26	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records							
Various A&R Staff Collecting Fees	$22.79	10,561.0	$ 240,685.19				
Calculating total enrollment fee to be collected							
Various A&R Staff Collecting Fees	$22.79	7,104.9	$ 161,920.67				
Answering student's questions regarding enrollment fee collection							
Various A&R Staff Collecting Fees	$22.79	9,727.2	$ 221,682.89				
Updating written and computer records for enrollment fee information							
Various A&R Staff Collecting Fees	$22.79	11,410.9	$ 260,054.41				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Various A&R Staff Collecting Fees	$22.79	992.0	$ 22,607.68				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Various A&R Staff Collecting Fees	$22.79	295.2	$ 6,727.61				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 913,678.45	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Maga, Pat	Financial Aid Supervisor	$51.09	62.5	$ 3,193.13				
Iwamasa, Debra	Financial Aid Officer	$36.53	2.0	$ 73.06				
Poncini, Carol	Assistant Financial Aid Officer	$33.42	3.0	$ 100.26				
Rud, Yeleva	Financial Aid Clerk II	$27.12	100.0	$ 2,712.00				
Solorio, Jeannette	Financial Aid Officer	$43.53	1.0	$ 43.53				
Flash, Kevin	Application Systems Specialist	$63.10	20.0	$ 1,262.00				
Moua, Theng	Assistant Financial Aid Officer	$35.27	3.0	$ 105.81				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 7,489.79	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Iwamasa, Debra	Financial Aid Officer	$36.53	1.0	$ 36.53				
Lor, Ge	Financial Aid Officer	$38.89	68.0	$ 2,644.52				
Osorio, Eduardo	Financial Aid Clerk II	$24.89	4.0	$ 99.56				
Phillip, Cathy	Financial Aid Officer	$38.68	19.0	$ 734.92				
Poncini, Carol	Assistant Financial Aid Officer	$33.42	7.0	$ 233.94				
Redmond, Kaila	Financial Aid Clerk II	$23.95	30.0	$ 718.50				
Rud, Yeleva	Financial Aid Clerk II	$27.12	10.0	$ 271.20				
Solorio, Jeannette	Financial Aid Officer	$43.53	1.0	$ 43.53				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,782.70	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Duques, Melba	Assistant Financial Aid Officer	$31.81	11.0	$ 349.91				
Lor, Ge	Financial Aid Officer	$38.89	20.0	$ 777.80				
Osorio, Eduardo	Financial Aid Clerk II	$24.89	1.0	$ 24.89				
Poncini, Carol	Assistant Financial Aid Officer	$33.42	15.0	$ 501.30				
Rud, Yeleva	Financial Aid Clerk II	$27.12	81.0	$ 2,196.72				
Solorio, Jeannette	Financial Aid Officer	$43.53	1.0	$ 43.53				
Backus, Kristine	IT Analyst	$64.22	3.0	$ 192.66				
Paulson, Jan	Director III	$73.39	28.0	$ 2,054.92				
Gomolka, Jerome	IT Analyst	$61.09	780.0	$ 47,650.20				
Heaton, Ruth	Business Analyst	$57.82	650.0	$ 37,583.00				
Wiles, Gregory	Programmer	$51.93	8.0	$ 415.44				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 91,790.37	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
s Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Staff Waiving Enrollment Fees	$27.96	3,266.7	$ 91,336.93				
Receiving waiver applications							
Various Financial Staff Waiving Enrollment Fees	$27.96	2,831.1	$ 79,157.56				
Evaluating waiver applications and verifying application documents							
Various Financial Staff Waiving Enrollment Fees	$27.96	3,484.5	$ 97,426.62				
Notifying students of additional documentation requirements and how to obtain information							
Various Financial Staff Waiving Enrollment Fees	$27.96	628.3	$ 17,567.27				
Entering approved application information into district records; providing student award letter							
Various Financial Staff Waiving Enrollment Fees	$27.96	4,446.0	$ 124,310.16				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Staff Waiving Enrollment Fees	$27.96	668.2	$ 18,682.87				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 428,481.41	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Rios Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Lor, Ge	Financial Aid Officer	$38.89	280.0	$ 10,889.20				
Phillip, Cathy	Financial Aid Officer	$38.68	4.0	$ 154.72				
Poncini, Carol	Assistant Financial Aid Officer	$33.42	15.0	$ 501.30				
Rud, Yeleva	Financial Aid Clerk II	$27.12	80.0	$ 2,169.60				
Solorio, Jeannette	Financial Aid Officer	$43.53	2.0	$ 87.06				
Day. Michael	Senior IT Analyst	$68.90	8.0	$ 551.20				
Paulson, Jan	Director III	$73.39	46.0	$ 3,375.94				
Shuler, Qing	IT Analyst	$53.93	320.0	$ 17,257.60				
Heaton, Ruth	Business Analyst	$57.82	50.0	$ 2,891.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 37,877.62	$ -	$ -	$ -	$ -

Los Rios Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3.00	Backus, Kristine	IT Analyst	$64.22	$192.66	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3.00	**Backus, Kristine Total**			$192.66		
04-05	8.00	Day, Michael	Senior IT Analyst	$68.90	$551.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	8.00	**Day, Michael Total**			$551.20		
04-05	11.00	Duques, Melba	Assistant Financial Aid Of	$31.81	$349.91	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	11.00	**Duques, Melba Total**			$349.91		
04-05	460.00	Flash, Kevin	Application Systems Spec	$63.10	$29,026.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	20.00	Flash, Kevin	Application Systems Spec	$63.10	$1,262.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	480.00	**Flash, Kevin Total**			$30,288.00		
04-05	780.00	Gomolka, Jerome	IT Analyst	$61.09	$47,650.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	780.00	**Gomolka, Jerome Total**			$47,650.20		
04-05	2.00	Haney, Brenda	Account Clerk III	$29.93	$59.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.00	**Haney, Brenda Total**			$59.86		
04-05	650.00	Heaton, Ruth	Business Analyst	$57.82	$37,583.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	50.00	Heaton, Ruth	Business Analyst	$57.82	$2,891.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	700.00	**Heaton, Ruth Total**			$40,474.00		
04-05	2.00	Iwamasa, Debra	Financial Aid Officer	$36.53	$73.06	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	1.00	Iwamasa, Debra	Financial Aid Officer	$36.53	$36.53	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	3.00	**Iwamasa, Debra Total**			$109.59		
04-05	68.00	Lor, Ge	Financial Aid Officer	$38.89	$2,644.52	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	20.00	Lor, Ge	Financial Aid Officer	$38.89	$777.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	280.00	Lor, Ge	Financial Aid Officer	$38.89	$10,889.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	368.00	**Lor, Ge Total**			$14,311.52		
04-05	62.50	Maga, Pat	Financial Aid Supervisor	$51.09	$3,193.13	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	62.50	**Maga, Pat Total**			$3,193.13		
04-05	3.00	Moua, Theng	Assistant Financial Aid Of	$35.27	$105.81	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	3.00	**Moua, Theng Total**			$105.81		
04-05	4.00	Osorio, Eduardo	Financial Aid Clerk II	$24.89	$99.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	1.00	Osorio, Eduardo	Financial Aid Clerk II	$24.89	$24.89	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	5.00	**Osorio, Eduardo Total**			$124.45		
04-05	32.00	Paulson, Jan	Director III	$73.39	$2,348.48	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	28.00	Paulson, Jan	Director III	$73.39	$2,054.92	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	46.00	Paulson, Jan	Director III	$73.39	$3,375.94	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	106.00	**Paulson, Jan Total**			$7,779.34		
04-05	19.00	Phillip, Cathy	Financial Aid Officer	$38.68	$734.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	4.00	Phillip, Cathy	Financial Aid Officer	$38.68	$154.72	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	23.00	**Phillip, Cathy Total**			$889.64		
04-05	3.00	Poncini, Carol	Assistant Financial Aid Of	$33.42	$100.26	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	7.00	Poncini, Carol	Assistant Financial Aid Of	$33.42	$233.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	15.00	Poncini, Carol	Assistant Financial Aid Of	$33.42	$501.30	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	15.00	Poncini, Carol	Assistant Financial Aid Of	$33.42	$501.30	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	40.00	**Poncini, Carol Total**			$1,336.80		
04-05	30.00	Redmond, Kaila	Financial Aid Clerk II	$23.95	$718.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	30.00	**Redmond, Kaila Total**			$718.50		
04-05	100.00	Rud, Yeleva	Financial Aid Clerk II	$27.12	$2,712.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	10.00	Rud, Yeleva	Financial Aid Clerk II	$27.12	$271.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	81.00	Rud, Yeleva	Financial Aid Clerk II	$27.12	$2,196.72	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	80.00	Rud, Yeleva	Financial Aid Clerk II	$27.12	$2,169.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	271.00	**Rud, Yeleva Total**			$7,349.52		
04-05	270.00	Shuler, Chris	IT Analyst	$53.93	$17,257.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC

Los Rios Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	320.00	**Shuler, Qing Total**			$17,257.60		
04-05	1.00	Solorio, Jeannette	Financial Aid Officer	$43.53	$43.53	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	1.00	Solorio, Jeannette	Financial Aid Officer	$43.53	$43.53	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	1.00	Solorio, Jeannette	Financial Aid Officer	$43.53	$43.53	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	2.00	Solorio, Jeannette	Financial Aid Officer	$43.53	$87.06	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	5.00	**Solorio, Jeannette Total**			$217.65		
04-05	10,561.00	Various A&R Staff	Collecting Fees	$22.79	$240,685.19	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	7,104.90	Various A&R Staff	Collecting Fees	$22.79	$161,920.67	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	9,727.20	Various A&R Staff	Collecting Fees	$22.79	$221,682.89	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	11,410.90	Various A&R Staff	Collecting Fees	$22.79	$260,054.41	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	992.00	Various A&R Staff	Collecting Fees	$22.79	$22,607.68	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	295.20	Various A&R Staff	Collecting Fees	$22.79	$6,727.61	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	40,091.20	**Various A&R Staff Total**			$913,678.45		
04-05	3,266.70	Various Financial Staff	Waiving Enrollment Fees	$27.96	$91,336.93	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	2,831.10	Various Financial Staff	Waiving Enrollment Fees	$27.96	$79,157.56	Receiving waiver applications	Waiving student fees
04-05	3,484.50	Various Financial Staff	Waiving Enrollment Fees	$27.96	$97,426.62	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	628.30	Various Financial Staff	Waiving Enrollment Fees	$27.96	$17,567.27	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	4,446.00	Various Financial Staff	Waiving Enrollment Fees	$27.96	$124,310.16	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	668.20	Various Financial Staff	Waiving Enrollment Fees	$27.96	$18,682.87	In case of denied applications, reviewing and evaluating information if denial is appealed by stud	Waiving student fees
	15,324.80	**Various Financial Staff Total**			$428,481.41		
04-05	8.00	Wiles, Gregory	Programmer	$51.93	$415.44	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	8.00	**Wiles, Gregory Total**			$415.44		
04-05	4.00	Wurzer, Christine	AR Supervisor	$50.10	$200.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	4.00	**Wurzer, Christine Total**			$200.40		
	58,648.50	**Grand Total**			$1,515,735.08		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Los Rios CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$109,084,683		$109,084,683	$1,045,907	$108,038,776
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	10,297,582		10,297,582	24,086	10,273,496
Course and Curriculum Development	6020	346,205		346,205	4,856	341,349
Academic/Faculty Senate	6030	956,159		956,159		956,159
Other Instructional Administration & Instructional Governance	6090	259,673		259,673		259,673
Instructional Support Services	6100					
Learning Center	6110	2,130,845		2,130,845	85,825	2,045,020
Library	6120	3,944,413		3,944,413	241,494	3,702,919
Media	6130	697,510		697,510	28,979	668,531
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	9,621		9,621	3,328	6,293
Other Instructional Support Services	6190	1,125,238		1,125,238	59,590	1,065,648
Admissions and Records	6200	2,407,471		2,407,471	22,265	2,385,206
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	7,899,771		7,899,771	7,806	7,891,965
Matriculation and Student Assessment	6320	2,972,437		2,972,437	159,902	2,812,535
Transfer Programs	6330	434,705		434,705	2,632	432,073
Career Guidance	6340	210,279		210,279	11,718	198,561
Other Student Counseling and Guidance	6390	73,730		73,730		73,730
Other Student Services	6400					
Disabled Students Programs & Services	6420	3,131,404		3,131,404	226,614	2,904,790
Subtotal		$145,981,726	$0	$145,981,726	$1,925,002	$144,056,724

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Los Rios CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,977,638		$1,977,638	$35,201	$1,942,437
Health Services	6440	732,953		732,953	5,202	727,751
Student Personnel Admin.	6450	1,062,323		1,062,323	980	1,061,343
Financial Aid Administration	6460	2,818,545		2,818,545	322,500	2,496,045
Job Placement Services	6470	795,549		795,549	43,134	752,415
Veterans Services	6480	172,559		172,559		172,559
Miscellaneous Student Services	6490	3,576,367		3,576,367	78,649	3,497,718
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	6,107,311		6,107,311	6,107,311	0
Custodial Services	6530	4,301,707		4,301,707	4,301,707	0
Grounds Maintenance and Repairs	6550	1,021,183		1,021,183	1,021,183	0
Utilities	6570	5,662,574		5,662,574	5,662,574	0
Other	6590	58,705		58,705	58,705	0
Planning, Policy Making, and Coordination	6600	4,717,618		4,717,618	4,717,618	0
General Inst. Support Services	6700					
Community Relations	6710	1,633,373		1,633,373	1,633,373	0
Fiscal Operations	6720	5,550,547		5,550,547	5,550,547	0
Human Resources Management	6730	1,320,971		1,320,971	1,320,971	0
Noninstructional Staff Benefits & Incentives	6740	1,164,526		1,164,526	1,164,526	0
Staff Development	6750	212,209		212,209	212,209	0
Staff Diversity	6760	32,155		32,155	32,155	0
Logistical Services	6770	7,762,642		7,762,642	7,762,642	0
Management Information Systems	6780	8,335,408		8,335,408	8,335,408	0
Subtotal		$204,998,589	$0	$204,998,589	$50,291,597	$154,706,992

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Los Rios CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	435,146		435,146	435,146	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	909,119		909,119	2,016	907,103
Community Use of Facilities	6830	100,313		100,313	314	99,999
Economic Development	6840	1,482,618		1,482,618	30,089	1,452,529
Other Community Services & Economic Development	6890	73,279		73,279		73,279
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	22,399		22,399	2,990	19,409
Farm Operations	6930					
Food Services	6940	-7,657		-7,657	-202	-7,455
Parking	6950	314,176		314,176	1,740	312,436
Student and Co-curricular Activities	6960	142,994		142,994		142,994
Student Housing	6970					
Other	6990	279,325		279,325	8,437	270,888
Auxiliary Operations	7000					
Contract Education	7010	1,135,615		1,135,615		1,135,615
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	81,901		81,901	81,901	0
(05) Total		$209,967,817	$0	$209,967,817	$50,854,028	$159,113,789
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				31.96%		
(07) Notes						

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S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	634,724	8,653	13,746	22,096		679,219
Architecture and Environmental Design	0200	233,651		1,450			235,101
Biological Sciences	0400	4,080,509	188,535	68,179	82,722		4,419,945
Business and Management	0500	5,525,670	216,863	17,946	28,183		5,788,662
Communications	0600	783,067	62,372	17,857	8,516		871,812
Computer and Information Science	0700	4,947,889	192,642	87,272	220,465		5,448,268
Education	0800	6,334,035	668,123	864,817	36,356		7,903,331
Engineering and Related Industrial Tech.	0900	5,642,362	1,151,498	3,007,475	264,563		10,065,898
Fine and Applied Arts	1000	7,652,865	333,433	486,833	99,791		8,572,922
Foreign Language	1100	2,629,724		899			2,630,623
Health	1200	4,372,156	837,436	805,814	137,707		6,153,113
Consumer Education and Home Economics	1300	3,317,822	227,183	213,263	65,801		3,824,069
Law	1400	250,468					250,468
Humanities (Letters)	1500	15,304,409	156,470	107,130	5,573		15,573,582
Library Science	1600	77,249					77,249
Mathematics	1700	9,824,815	133,456	25,431	11,128		9,994,830
Military Studies	1800						
Physical Sciences	1900	5,781,861	163,657	164,654	36,312		6,146,484
Psychology	2000	2,731,313	3,022	6,683			2,741,018
Public Affairs and Services	2100	1,809,030	345,193	2,215,951	18,731		4,388,905
Social Sciences	2200	6,886,834	236,121	25,008	220		7,148,183
Commercial Services	3000	488,729	61,114	8,689			558,532
Interdisciplinary Studies	4900	4,232,493	160,738	9,230	7,743		4,410,204
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,202,265					1,202,265
Subtotal - Instructional Activities	**599**	94,743,940	5,146,509	8,148,327	1,045,907		109084,683

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible] COMMUNITY COLLEGES
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S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		9,397,374	876,122	24,086		10,297,582
Course and Curriculum Development	6020		299,989	41,360	4,856		346,205
Academic/Faculty Senate	6030		932,215	23,944			956,159
Other Instruct. Admin. & Instruct. Governance	6090		230,972	28,701			259,673
Subtotal - Instructional Administration	6000		10,860,550	970,127	28,942		11,859,619
Instructional Support Services (6100)							
Learning Center	6110	530,266	1,378,968	135,786	85,825		2,130,845
Library	6120		3,298,171	404,748	241,494		3,944,413
Media	6130		600,466	68,065	28,979		697,510
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150			6,293	3,328		9,621
Other Instructional Support Services	6190		676,922	388,726	59,590		1,125,238
Subtotal - Instructional Support Services	6100	530,266	5,954,527	1,003,618	419,216		7,907,627
Admissions and Records	6200		2,282,759	102,447	22,265		2,407,471
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		7,835,609	56,356	7,806		7,899,771
Matriculation and Student Assessment	6320		2,534,943	277,592	159,902		2,972,437
Transfer Programs	6330		325,936	106,137	2,632		434,705
Career Guidance	6340		167,230	31,331	11,718		210,279
Other Student Counseling and Guidance	6390		64,455	9,275			73,730
Subtotal - Student Counseling and Guidance	6300		10,928,173	480,691	182,058		11,590,922

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible] COMMUNITY COLLEGES
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SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expe[illegible]itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		2,616,804	287,986	226,614		3,131,404
Extended Opportunity Prgms. & Services (EOPS)	6430		1,866,283	76,154	35,201		1,977,638
Health Services	6440		704,382	23,369	5,202		732,953
Student Personnel Administration	6450		996,983	64,360	980		1,062,323
Financial Aid Administration	6460		2,142,289	353,756	322,500		2,818,545
Job Placement Services	6470		735,197	17,218	43,134		795,549
Veterans Services	6480		172,559				172,559
Miscellaneous Student Services	6490		2,771,978	725,740	78,649		3,576,367
Subtotal - Other Student Services	**6400**		12,006,475	1,548,583	712,280		14,267,338
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		5,034,341	896,648	176,322		6,107,311
Custodial Services	6530		3,785,806	514,825	1,076		4,301,707
Grounds Maintenance and Repairs	6550		1,002,763	9,519	8,901		1,021,183
Utilities	6570			5,662,574			5,662,574
Other Operation and Maintenance of Plant	6590		4,024	23,661	31,020		58,705
Subtotal - Operation and Maintenance of Plant	**6500**		9,826,934	7,107,227	217,319		17,151,480
Planning, Policymaking, and Coordination	**6600**		4,099,943	591,903	25,772		4,717,618

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
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Expe. itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		1,097,124	524,460	11,789		1,633,373
Fiscal Operations	6720		4,850,069	645,326	55,152		5,550,547
Human Resources Management	6730		1,321,197	(9,607)	9,381		1,320,971
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,164,526				1,164,526
Staff Development	6750		74,393	114,532	23,284		212,209
Staff Diversity	6760		26,010	6,145			32,155
Logistical Services	6770		4,872,429	2,754,756	135,457		7,762,642
Management Information Systems	6780		5,339,891	2,862,142	133,375		8,335,408
Other General Institutional Support Services	6790		228,272	203,740	3,134		435,146
Subtotal - General Institutional Support Services	6700		18,973,911	7,101,494	371,572		26,446,977
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		653,180	253,923	2,016		909,119
Community Use Facilities	6830		96,555	3,444	814		100,313
Economic Development	6840		1,025,718	426,811	30,089		1,482,618
Other Community Svcs. & Economic Development	6890		26,745	46,534			73,279
Subtotal - Community Services	6800		1,802,198	730,712	32,419		2,565,329

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Expe..itures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		13,425	5,984	[illegible]		22,399
Farm Operations	6930						
Food Services	6940			(7,455)	(202)		(7,657)
Parking	6950		163,719	148,717	1,740		314,176
Student and Co-curricular Activities	6960		73,260	69,734			142,994
Student Housing	6970						
Other Ancillary Services	6990		191,892	78,996	8,487		279,325
Subtotal - Ancillary Services	**6900**		442,296	295,976	12,965		751,237
Auxiliary Operations (7000)							
Contract Education	7010	13,262	517,502	604,851			1,135,615
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	13,262	517,502	604,851			1,135,615
Physical Property and Related Acquisitions (7100)	**7100**		61,009	36,878	(15,986)		81,901
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290			(29,371)			(29,371)
Subtotal - Long-Term Debt and Other Financing	**7200**			(29,371)			(29,371)
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					11,114,215	11,114,215
Student Aid	7320					2,359,377	2,359,377
Other Outgo	7330					146,692	146,692
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					13,620,284	13,620,284
TOTAL EXPENDITURES and OTHER OUTGO	**391**	95,287,468	82,902,786	28,693,463	3,054,729	13,620,284	223,558,730

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedule 2A, Schedule 4
Findings:

EFC 1	166,752
Average time to reference student account	3.8
Total Time (in minutes)	633658
Per Hour	60
Hours Worked **(Activity 11)**	**10,561.0**
EFC 2	129,180
Average time to calculate enrollment fee	3.3
Total Time (in minutes)	426294
Per Hour	60
Hours Worked **(Activity 12)**	**7,104.9**
EFC 1	166,752
Average time spent answering questions	3.5
Total Time (in minutes)	583632
Per Hour	60
Hours Worked **(Activity 13)**	**9,727.2**
EFC 2	129,180
Average time to update student file	5.3
Total Time (in minutes)	684654
Per Hour	60
Hours Worked **(Activity 14)**	**11,410.9**
EFC 4	7,534
Average time spent on receivable/delinquencies	7.9
Total Time (in minutes)	59519
Per Hour	60
Hours Worked **(Activity 15)**	**992.0**
EFC 5	5,061
Average time to refund enrollment fee per waivers	3.5
Total Time (in minutes)	17714
Per Hour	60
Hours Worked **(Activity 16)**	**295.2**

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load)

Activity Codes

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12- Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 2B, Schedule 4
Findings:

EFW 6	43,556
Average time to answer questions regarding waivers	4.5
Total Time (in minutes)	196002
Per Hour	60
Hours Worked **(Activity 21)**	**3,266.7**
EFW 6	43,556
Average time to receive/start processing waiver applications	3.9
Total Time (in minutes)	169868
Per Hour	60
Hours Worked **(Activity 22)**	**2,831.1**
EFW 6	43,556
Average time to evaluate/verify eligibility standards	4.8
Total Time (in minutes)	209069
Per Hour	60
Hours Worked **(Activity 23)**	**3,484.5**
EFW 8	5,984
Average time to notify student of incomplete application	6.3
Total Time (in minutes)	37699
Per Hour	60
Hours Worked **(Activity 24)**	**628.3**
EFW 7	37,572
Average time to copy/file approved waiver applications	7.1
Total Time (in minutes)	266761
Per Hour	60
Hours Worked **(Activity 25)**	**4,446.0**
EFW 8	5,984
Average time to review add'l data for appealed waiver denials	6.7
Total Time (in minutes)	40093
Per Hour	60
Hours Worked **(Activity 26)**	**668.2**

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)
EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enrollment fee waivers denied

Activity Codes
21 - Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22 - Receiving Applications from students by mail, fax, computer online access, or in person, or in the fo information processed by the financial aid office.
23 - Evaluating Applications: each application and verification of documents for compliance with eligibili
24 - Incomplete Applications: notifying the student of the additional required information. Holding the stu suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information i *providing student with proof of eligibility and filing documents.*
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Provi student of final eligibility status.

Schedule 2A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

			*Multiplier						
			1	2	1	2	4	5	
			**Activity Codes						PHR
Staff	Title	Title	11	12	13	14	15	16	04-05
Hallberg, John	Administrative Services Analyst	ARC	3.0	4.0	3.0	2.0	n/a	n/a	$38.84
Banh, Kristy	Accounting Specialist	ARC	10.0	5.0	5.0	5.0	5.0	2.0	$36.22
Lloyd, Shelly	Account Clerk II	ARC	2.0	5.0	5.0	5.0	n/a	2.0	$25.11
Cottrell, B. Jean	Account Clerk III	ARC	10.0	10.0	3.0	60.0	10.0	2.0	$27.12
Marjanyan, Hasmik	Account Clerk I	ARC	3.0	3.0	4.0	2.0	3.0	2.0	$23.28
Ortega-Carr, Evie	Student Help	ARC	2.0		5.0	n/a	n/a	2.0	$7.11
Buinievich, Iryna	Clerk I	ARC	4.0	3.0	5.0	3.0	n/a	2.0	$21.21
Kalachik, Tatyana	Account Clerk I	ARC	3.0	3.0	2.0	2.0	n/a	2.0	$23.28
Timofeyer, Anastasia	Clerk I	ARC	2.0	5.0	2.0	2.0	4.0	n/a	$21.21
Tsyor, Larisa	Clerk I	ARC	2.0	3.0	2.0	2.0	3.0	2.0	$21.21
Veri, Ron	Account Clerk III	CRC	3.0	2.0	3.0	1.0	4.0	3.0	$27.12
Chasengnou, Chou	Account Clerk III	CRC	3.0	2.0	2.0	3.0	7.0	7.0	$27.12
Rogers, Leanne	Account Clerk II	CRC	1.0	3.0	5.0	1.0	n/a	3.0	$25.11
Tran, Van	Account Clerk II	CRC	4.0	2.0	3.0	2.0	n/a	2.0	$25.11
Popov, Elena	Clerk I	CRC	2.0	2.0	1.0	2.0	3.0	4.0	$21.21
Jeffries, Brittney	Student Help	CRC	2.0	2.0	1.0	1.0	n/a	2.0	$7.11
Carter, Jarrod	Student Help	CRC	7.0	3.0	5.0	5.0	8.0	5.0	$7.11
Mason, Krista	Student Help	CRC	1.0	1.0	2.0	2.0	2.0	3.0	$7.11
Blair, Laurel	Account Clerk III	FLC	2.5	3.0	1.0	6.0	10.0	5.0	$27.12
Haney, Brenda	Account Clerk III	FLC	3.5	5.0		4.0	15.0	3.0	$29.93
Various	Account Clerk II - 2004-05 (40%)	SCC	6.0	2.0	6.0	2.0	15.0	7.0	$25.11
Various	Account Clerk III - 2004-05 (40%)	SCC	6.0	2.0	6.0	2.0	15.0	7.0	$27.12
Various	Account Clerk I - 2004-05 (20%)	SCC	6.0	2.0	6.0	2.0	15.0	7.0	$23.28
Average			**3.8**	**3.3**	**3.5**	**5.3**	**7.9**	**3.5**	$22.79

Conclusion: Findings will go forward to the Schedule 1A-1.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load)

Activity Codes

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12- Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.

			*Multiplier						
			6			8	7	8	
			**Activity Codes						PHR
Staff	Title	Location	21	22	23	24	25	26	04-05
Kwoka-Coleman, Randi	Financial Aid Clerk II	ARC	2	2	5	1	1		25.11
Doshi, Alicia	Financial Aid Officer	ARC	1	1	2	4	4		35.08
Carlson Michael	Financial Aid Officer (Temp - Classified)	ARC	3	2	2	1	2	1	35.08
Avila, Crystal	Clerk II	ARC	2.5	3	3	2	3.5	n/a	22.84
Gardner, Kim	Financial Aid Officer	ARC	3	2	2	2	3	3	35.08
Quayle, Judy	Financial Aid Clerk II	ARC	2	1	2	2	2	3	25.11
Brutski, Marina	Financial Aid Clerk II	ARC	3	2	4	3	3	3	25.11
Kwong, Alice	Financial Aid Supervisor	CRC	3.0	1.0	1.0	5.0	5.0	5.0	42.67
Lucero-Ruiz	Financial Aid Officer	CRC	10.0	2.0	5.0	10.0	10.0	10.0	35.08
Skubenich, Elena	Financial Aid Clerk II	CRC	1.0	3.5	2.5	4.0	7.5	7.5	25.11
Kimura, Kevin	Financial Aid Clerk	CRC	5.0	8.0	2.0	10.0	5.0	2.0	23.28
Deters, Daniel	Financial Aid Clerk II	CRC	4.0	1.0	1.0	3.0	2.0	2.0	25.11
Chasengnou, Mee	Financial Aid Clerk II	CRC	5.0	10.0	10.0	10.0	10.0	10.0	25.11
Coelho, Roseanna	Clerk II	CRC	7.5	10.0	7.5	7.5	7.5	7.5	22.84
Walker, MaryLouise	Financial Aid Clerk II	CRC	5.0	6.5	7.5	6.5	10.0	10.5	25.11
de Jesus Perez, Maria	Financial Aid Clerk II	CRC	10.0	20.0	10.0	30.0	10.0	20.0	25.11
Haney, Brenda	Account Clerk III	FLC	4						29.93
Blair, Laurel	Account Clerk III	FLC	3						27.12
Bates, Rukiya	Financial Aid Officer	FLC	3	4	2	4	5	2	35.08
Padash, Ali	Financial Aid Officer	FLC	3	4	2	5	5	3	35.08
Various	Account Clerk II	SCC	3.0						25.11
Various	Account Clerk III	SCC	3.0						27.12
Duques, Melba	Asst. Financial Aid	SCC	3.0	1.0	2.0	3.0			31.81
Dauangmany, Hanna	Student Help	SCC	5.0	7.0	15.0	10.0	9.0	6.0	7.11
Dudriguez, LoriAnn	Financial Aid Clerk II	SCC	8.0	1.0	5.0	5.0	2.0	8.0	25.11
Guadiana, Steven	Student Help	SCC	8.0	13.5	16.0	11.0	8.0	15.0	7.11
Iwamasa, Debra	Financial Aid Officer	SCC	1.0						36.53
Lagat, Charito	Student Help	SCC	10.0	10.0	10.0	30.0	20.0	5.0	7.11
Lor, Ge	Financial Aid Officer	SCC	3.0	1.0	2.0	1.0	10.0	10.0	38.89
Osorio, Eduardo	Financial Aid Clerk II	SCC	5.0	1.0	5.0	5.0	5.0	10.0	24.89
Phillip, Cathy	Financial Aid Officer	SCC	3.0	1.0	3.0	2.0	10.0	10.0	38.68
Poncini, Carol	Financial Aid Officer	SCC	2.0	1.0	1.0		2.0		33.42
Quiroz, Vivian	Asst. Financial Aid Officer	SCC	5.0	1.0	3.0	3.0	3.0	3.0	33.03
Redmond, Kaila	Financial Aid Clerk II	SCC	5.0	3.0	5.0	4.0	8.0	10.0	23.95
Rud, Yeleva	Financial Aid Clerk II	SCC	7.5	1.0	7.0	5.0	3.0	5.0	27.12
Reyes, Laura	Financial Aid Clerk II	SCC	6.0	2.0	5.0	7.0	10.0	7.0	25.11
Rodriguez, LoriAnn	Financial Aid Clerk II	SCC	8.0	1.0	5.0	5.0	2.0	8.0	25.11
Ruiz, Ruben	Financial Aid Clerk II	SCC	4.0	8.0	3.0	8.0	50.0	3.0	25.11
Solorio, Jeanette	Asst. Financial Aid Officer	SCC	5.0	2.0	5.0	2.0	3.0	3.0	43.53
Moua, Theng	Asst. Financial Aid Officer	SCC	3.0	1.0	5.0	5.0	5.0	8.0	35.27
Tran, Minh	Financial Aid Clerk II	SCC	5.0	1.0	5.0	3.0	3.0	6.0	25.11
Average			**4.5**	**3.9**	**4.8**	**6.3**	**7.1**	**6.7**	27.96

Conclusion: Findings go forward to Schedule 1B.

Workload Multipliers (Default)
EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enrollment fee waivers denied

Activity Codes
21 - Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22 - Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: each application and verification of documents for compliance with eligibility standards.
24 - Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records and providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Los Rios Community College District (District)
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	145,158	154,379	156,858	172,055	173,871	166,057	166,752
EFC 2	1.8-1 2.	Paid Enrollment fees	123,345	131,426	132,137	144,661	146,264	133,812	129,180
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	21,813	22,953	24,721	27,394	27,607	32,245	37,572
EFC 4	1.8-2 1.	Delinquencies collections	6,851	7,780	8,034	9,758	12,759	8,867	7,534
EFC 5	1.8-2 2.	Refunds	2,959	3,361	3,471	4,215	3,216	4,224	5,061
EFW 6	1.8-3 1.	Waivers Requested*	x	26,504	28,343	31,698	32,320	37,563	43,556
		*(Waivers Approved used where Waivers Requested not supplied)							
EFW 7	1.8-3 2.	Waivers Approved	x	22,953	24,721	27,394	27,607	32,245	37,572
EFW 8	1.8-3 (1-2)	Waivers Denied	x	3,551	3,622	4,304	4,713	5,318	5,984

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Wednesday, June 20, 2012

Student Demographics By Academic Year

Student Headcount
For American River For 2004-2005
Data Current As Of June 20, 2012 02:50:24

Download The Result In Comma Delimited Format

Headcount
49,332

Back to Top of Page

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California Home Wednesday, June 20, 2012

Student Demographics By Academic Year

Student Headcount
For Cosumnes River For 2004-2005
Data Current As Of June 20, 2012 02:50:39

Download The Result In Comma Delimited Format

Headcount
17,512

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Folsom Lake For 2004-2005
Data Current As Of June 20, 2012 02:50:51

Download The Result In Comma Delimited Format

Headcount
9,517

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Sacramento City For 2004-2005

Data Current As Of June 20, 2012 02:51:04

Download The Result In Comma Delimited Format

Headcount
33,818

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College

Kristine E. Backus — Employee Name

IT Analyst II — Exact Position Title

District Office IT — College/Department/Location

(916) 568-3091 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								13
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.				120		63	3	80
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:				120		63	3	94

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristine E Backus — Date 5-2-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios

Michael Day — Employee Name

Sr. IT Analyst — Exact Position Title

District office - IT — College/Department/Location

(916) 568-3176 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS--Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.				424	216	140	8	
TOTALS:				424	216	140	8	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael K. Day Date 5-2-06

If you have any questions, please contact _____, at _____

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EFCW 1.0A

Employee ACTUAL Time Record Sheet for Mandated Costs
5098/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: URCCD

Fiscal Year: 04-05

Melton Duques
Employee Name

Asst - Fin. Aid Officer
Exact Position Title

Financial Aid Office 558-2672
Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
8/ /04	1A 1B 2A (2B) 3 4	ISSUED FEE WAIVER & COUNTED	6
12/ /04	1A 1B 2A 2B (3) 4	POST & AUDIT BOG WAIVER	5
01/ /05	1A 1B 2A (2B) 3 4	ISSUED BOG TO STD COUNTED	6
03/ /05	1A 1B 2A (2B) 3 4	ISSUED BOG BASED ON ~~FAFSA~~ AND S	
05/ /05	1A 1B 2A 2B (3) 4	AUDIT BOG & PERFORM QUALITY CONTROL	6
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 2B : 6	
/ /	1A 1B 2A 2B 3 4	Code 3 : 11	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melton Duques Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College

Kevin Flash — Employee Name

Applications Business Specialist — Exact Position Title

D.O. Information Technology — College/Department/Location

916 568-3024 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	____	____	____	____	1210	860	460	500
B. Enrollment Waiver Process:	____	____	____	____	140	220	20	160
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	____	____	____	____	____	____	____	____
B. Enrollment Waiver Process:	____	____	____	____	____	____	____	____
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	____	____	____	____	____	____	____	____
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	____	____	____	____	____	____	____	____
TOTALS:	____	____	____	____	____	____	____	____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin M Flash — Date 5-2-2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios CCD

Jerome M Gomolka — Employee Name

IT Analyst II — Exact Position Title

District — College/Department/Location

3016 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.				920 1080	1100	1380	780	1120
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

Corrected based on attached.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date May 2, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LRCCD

Brenda Haney — Employee Name

Account Clerk III — Exact Position Title

Folsom Lake College/Bus. Services — College/Department/Location

916.608.6635 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	7	12	4	4	2	2
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
TOTALS:	0	0	7	12	4	4	2	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brenda D Haney Date 04/25/06

If you have any questions, please contact Joany Harman, at FLC, Bus Svc

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andres

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College Dist

RUTH HEPTIN — Employee Name

Analyst I - Business — Exact Position Title

DISTRICT OFFICE — College/Department/Location

568-3178 — Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		200	50					
B. Enrollment Waiver Process:			50					
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		120		100				
B. Enrollment Waiver Process:				50				
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.		500	750	1000	950	1140	650	850
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						100	50	
TOTALS:		820	850	1150	950	1240	700	850

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Heptin — Date 5/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios Comm. Coll Dist Fiscal Year: 04 - 05

Debra Williams
Employee Name

Fin Aid Officer
Exact Position Title

Fin Aid Office - SCC
Department/Location

(916) 558-2353
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/ 1/05	1A (1B) 2A 2B 3 4	BOG info on Web Page	(1)
1/ 1/05	1A (1B) 2A 2B 3 4	BOG info on SCC Handbook	(1)
3/ 1/05	1A 1B 2A (2B) 3 4	BOG Orientation Web	(1)
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 1B: 2	
/ /	1A 1B 2A 2B 3 4	" 2B: 1	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/21/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LRCCD.

Fiscal Year: 04-05

Employee Name: Ge Lor

Exact Position Title: FA Officer

Department/Location: FAO / SCC

Telephone #: X2037

Work year length (circle): 12mo/11mo/10mo/hrly

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4	FA Website	10
/ /	1A 1B 2A (2B) 3 4	Hand book	8
/ /	1A 1B 2A (2B) 3 4	orientation	10
/ /	1A 1B 2A (2B) 3 4	FA website ADA	8
/ /	1A 1B 2A 2B 3 (4)	MIS	280
/ /	1A 1B 2A 2B (3) 4	filing	20
/ /	1A 1B 2A (2B) 3 4	form	16
/ /	1A 1B 2A (2B) 3 4	training	16
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 2B: 18	
/ /	1A 1B 2A 2B 3 4	Code 4: 20	
/ /	1A 1B 2A 2B 3 4	Total A: 120	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ge V. Lor Date: 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LRCCD SCC Fiscal Year: 04-05

Pat Maga — Employee Name

FA Supervisor — Exact Position Title

Financial Aid - SCC — Department/Location

916 558-2043 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/9/04	1A 1B 2A (2B) 3 4	Prepare Online BOGW Design Team Mtg	2.0
9/10/04	1A 1B 2A (2B) 3 4	Attend Online " " " "	6.0
9/14/04	1A 1B 2A (2B) 3 4	Review Online BOGW documentation	2.0
9/20/04	1A 1B 2A (2B) 3 4	" " " "	1.0
9/23/04	1A 1B 2A (2B) 3 4	Attend Online BOGW Team Mtg	6.0
9/29/04	1A 1B 2A (2B) 3 4	Review documentation	4.0
11/5/04	1A 1B 2A (2B) 3 4	Prepare for mtg	2.0
11/5/04	1A 1B 2A (2B) 3 4	Attend meeting	5.0
11/8/04	1A 1B 2A (2B) 3 4	Review documentation	1.0
11/9/04	1A 1B 2A (2B) 3 4	Testing	3.0
11/11/04	1A 1B 2A (2B) 3 4	Review documentation	1.0
11/19/04	1A 1B 2A (2B) 3 4	Prepare	6.0

10 Dec 15

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Maga Date 5.5.05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Take all records to 15 : 29

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LRCCD Fiscal Year: 04-05

Pat Magg — Employee Name
FA Supervisor — Exact Position Title

Financial Aid - SCC — Department/Location
916 558-2043 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
12/15/04	1A 1B 2A (2B) 3 4	Attend mtg	6.0
1/19/05	~~1A 1B 2A (2B) 3 4~~	~~Attn~~	—
1/18/05	1A 1B 2A (2B) 3 4	Prepare for mtg	2.0
1/19/05	1A 1B 2A (2B) 3 4	Attend mtg	6.0
2/24/05	1A 1B 2A (2B) 3 4	Testing	2.0
2/25/05	1A 1B 2A (2B) 3 4	Testing	2.0
3/11/05	1A 1B 2A (2B) 3 4	Review process	2.0
3/15/05	1A 1B 2A (2B) 3 4	Review documentation	2.0
4/18/05	1A 1B 2A (2B) 3 4	" "	1.5
[illegible]	1A 1B 2A (2B) 3 4		
/ /	1A 1B 2A 2B 3 4	2B: 62.5	
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pat Magg Date 5/5/06

If you have any questions, please contact Pat Magg, at 558-2043

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

Total 2B 10/15/04 to 4/18/05: 62.5

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EFCW 1.8A

Employee ACTUAL Time Record Sheet for Mandated Costs
303/96 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LRCCD

Fiscal Year: 04/05

Theng Mona
Employee Name

Asst. Financial Aid Officer
Exact Position Title

Financial Aid/SCC
Department/Location

916-558-2503
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
1 104	1A 1B 2A (2B) 3 4	Issued Bog Waiver	2
91 104	~~1A~~ (1B) 2A 2B 3 4	Financial Aid Handbook	3
1 105	1A 1B 2A (2B) 3 4	Issued Bog Waiver	5
41 105	1A 1B 2A (2B) 3 4	Issued Bog Waiver	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 1B: 3	
/ /	1A 1B 2A 2B 3 4	Code 3B activities taken from	
/ /	1A 1B 2A 2B 3 4	WEAVE I.T-3	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Theng Mona Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LRCCD

Fiscal Year: 04-05

Edwardo C. Osorio
Employee Name

Student help / Temp / Permanent
Exact Position Title

Financial Aid
Department/Location

(916)558-2265
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4	Trained Students, review and post BOG	4 hrs
/ /	1A 1B 2A 2B (3) 4	Post Boggs	1 hr
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 2B: 4	
/ /	1A 1B 2A 2B 3 4	Code 3: 1	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/2/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios CCD

JAN PAULSON — Employee Name

DIRECTOR III — Exact Position Title

DISTRICT - IT — College/Department/Location

568-3143 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					60	6	32	14
B. Enrollment Waiver Process:					24			60
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					~~35~~ 33	72	28	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						120	46	
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jan Paulson Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
96/97 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LRCCD

Fiscal Year: 04-05

Cathy Phillip
Employee Name

FA Officer
Exact Position Title

FAO / SCC
Department/Location

X 2044
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4	FA Website	1
/ /	1A 1B 2A (2B) 3 4	FA Handbook	4
/ /	1A 1B 2A (2B) 3 4	Orientation	10
/ /	1A 1B 2A 2B 3 (4)	MIS	4
/ /	1A 1B 2A 2B (3) 4	training	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 2B : 19	
/ /	1A 1B 2A 2B 3 4	Code 4 : 4	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy Phillip GW Date 4/24/06

If you have any questions, please contact _____, at _____

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BROWN 1.3A

Employee ACTUAL Time Record Sheet for Mandated Costs
00/01 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LLCCD

Fiscal Year: 0405

Carol Ponuni
Employee Name

Asst. F.A.O
Exact Position Title

Fin Aid/Sca
Department/Location

60-2723
Telephone #

12mo/11mo/10mo/hrly
Work year length (circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/ 1/04	1A 1B 2A (2B) 3 4	issued fee waivers at counter	2
9/ 1/04	(1A) 1B 2A 2B 3 4	Financial Aid Handbook policies	3
1/ 1/05	1A 1B (2A) 2B 3 4	Staff training - AB 205	5
2/ 1/05	1A 1B 2A 2B (3) 4	Quality Control	15
4/ 1/05	1A 1B 2A 2B 3 (4)	BOGG Reconciliation	15
4/ 1/05	1A 1B 2A (2B) 3 4	New 05/06 fee waiver	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 1B: 2	
/ /	1A 1B 2A 2B 3 4	Code 2B: 7	
/ /	1A 1B 2A 2B 3 4	Code 3: 15	
/ /	1A 1B 2A 2B 3 4	Code 4: 17	
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carol Ponuni Date 4/20/06

If you have any questions, please contact _____, at _____

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EFCW 1.8A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College District Fiscal Year: 04-05

Kaila Redmond
Employee Name

Financial Aid Clerk II
Exact Position Title

Financial Aid/SCC
Department/Location

(916) 558-2028
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/1/05	1A 1B 2A (2B) 3 4	Train Students on Bog Process & Eligibility	30hrs
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code of 30	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
3068/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LRCCD

Fiscal Year: 2004-05

Velena Reed
Employee Name

Financial Aid clerk II
Exact Position Title

Financial Aid / SCC
Department/Location

916-650-2731
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A (1B) 2A 2B 3 4	Update form and procedures	100
/ /	1A 1B 2A (2B) 3 4	Trained student staff, went over update info	10
6/ '04	1A 1B 2A 2B 3 (4)	Go through 2004-05 report and correct mistakes	80
/ /	1A 1B 2A 2B (3) 4	Orginize group of students to packet 03-04 records	80
/ /	1A 1B 2A 2B (3) 4	Quality control for fee waivers	1
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 1B: 100	
/ /	1A 1B 2A 2B 3 4	Code 2B: 10	
/ /	1A 1B 2A 2B 3 4	Code 3: 81	
/ /	1A 1B 2A 2B 3 4	Code 4: 80	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Velena Reed Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College District

Qing Shuler — Employee Name

IT Analyst — Exact Position Title

DO/IT/ — College/Department/Location

568-3187 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						400	320	30

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Qing Shuler Date 05-03-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ : TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
00/01 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: 1 RCCD

Fiscal Year: 04/05

Jeanette Solorio
Employee Name

Financial Aid Officer
Exact Position Title

Financial Aid/SCC
Department/Location

(951) 558-2045
Telephone #

12mo/11mo/10mo/hrly
Work year length (circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
1/1/04	1A (1B) 2A 2B 3 4	Interpreter policies + procedures to trained staff	1hr
3/1/04	1A 1B 2A (2B) 3 4	Preparing new fee waiver form, trained staff	1hr
5/10/04	1A 1B 2A 2B (3) 4	Quality control	1hr
8/1/04	1A 1B 2A 2B 3 (4)	Preparing reconciliation report to MIS	3hrs
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Code 1B: 1	
/ /	1A 1B 2A 2B 3 4	Code 2B: 1	
/ /	1A 1B 2A 2B 3 4	Code 3: 1	
/ /	1A 1B 2A 2B 3 4	Code 4: 2	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeanette Solorio Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LOS RIOS

GREGORY B. WILES — Employee Name

PROGRAMMER — Exact Position Title

D.O. I.T. — College/Department/Location

916-568-3053 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	591	887			178	66	8	48
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	591	887			178	66	8	48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gregory B. Wiles — Date 5-2-2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios

CHRISTINE WERZER — Employee Name

A&R SUPERVISOR — Exact Position Title

FLC - A&R — College/Department/Location

6500 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	2	10	4	4	4
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	0	0	0	4	8	4
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	0	4	4	0	8	0	8	4
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-25-06

If you have any questions, please contact Joanie Harmeier, at FLC Bus Srvc

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andres - HCCD

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Reg Staff - Bus Svc Analyst
Fees 10%

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

JOHN HALBERG — 6/13/06

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
3-4	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3-4	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2-3	3. Answering questions and/or referring student top appropriate person for an answer.
2-3	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
N/A	6. Refunds for students who later become eligible for waivers.

Reg Emp. – Summer Counselor + Temps Fees 30% Acctg Specialist

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Kristy Bank — 4/13/04

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
10	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5	3. Answering questions and/or referring student top appropriate person for an answer.
5	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
20	6. Refunds for students who later become eligible for waivers.

Reg Exp - Office Fees 10%
Was Counter Fees 80%

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

SHELLY LLOYD — 4/13/06 — Acct Clerk II

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2 MINUTES	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5 MINUTES	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1 TO 10 MINUTES	3. Answering questions and/or referring student to appropriate person for an answer.
5 MINUTES	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2 MINUTES	6. Refunds for students who later become eligible for waivers.

Requires Staff Acct Clk III 90% of Job is Student Fees.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

B. Jean Cottrell 4/13/06

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
10	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
10	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
3	3. Answering questions and/or referring student top appropriate person for an answer.
60	4. Updating student file for the enrollment fee information, and providing a copy to the student.
10	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

Regular Employee Acct Clerk
Fall 75%

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Hasmik Manjanyan 4/17/06
Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2-4	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
2-3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
depending on question 2-5	3. Answering questions and/or referring student top appropriate person for an answer.
1-3	4. Updating student file for the enrollment fee information, and providing a copy to the student.
1-4	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2-3	6. Refunds for students who later become eligible for waivers.

Research skills

Student Help Office
Feb 25

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

EVIE ORTEGA-CARR 4-13-06

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
0	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5	3. Answering questions and/or referring student top appropriate person for an answer.
0	4. Updating student file for the enrollment fee information, and providing a copy to the student.
0	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2 min	6. Refunds for students who later become eligible for waivers.

Emp @ counter.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY Fees 85% Clerk I

Tryna Bamiesch 04-13-2006.

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes

4	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5	3. Answering questions and/or referring student top appropriate person for an answer.
3	4. Updating student file for the enrollment fee information, and providing a copy to the student.
—	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

Temp – 100% Fees Cleft

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Tatyana Kalachik 4/17/06

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
1/4	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

Temp-98
Fees
Clerk I

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Anastasia Timofeyev — April 17, 2006
Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2-3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
4-5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3-5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
/	6. Refunds for students who later become eligible for waivers.

Research Data

Temp - 90 days
Fees Clerk I

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

LARISA TSVOR — 4/17/06

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

Research Fees

EFCW Mandated Costs Form 1.7-2
Cosumnes River College
Business Services Office

Name	Title	Code 11	Code 12	Code 13	Code 14	Code 15	Code 16
Ron Veri	Account Clerk III	3	2	3	1	4	3
Chou Chasengnou	Account Clerk III	3	2	2	3	7	7
Leanne Rogers	Account Clerk II	1	3	5	1	n/a	3
Van Tran	Account Clerk II	4	2	3	2	n/a	2
Elena Popov	Clerk I	2	2	1	2	3	4
Brittney Jeffries	Student Help	2	2	1	1	n/a	2
Jarrod Carter	Student Help	7	3	5	5	8	5
Krista Mason	Student Help	1	1	2	2	2	3
Total		23	17	22	17	24	29
Average		2.9	2.1	2.8	2.1	4.8	3.6

1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Business Services CRC
Department/Location

Ronald Veri
Employee Name

Account Clerk III
Exact Position Title

691-7240
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ronald Veri Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District
Business Services — Department/Location
Chou Chasengnou — Employee Name
Account Clerk III — Exact Position Title
(916) 691-7335 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College
District

CRC Business Services Office
Department/Location

Leigh Ann Rogers
Employee Name

Account Clerk II
Exact Position Title

691-7509
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Leigh Ann Rogers Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Folsom Lake College Business Services
Department/Location

Laurel Blair
Employee Name

Account Clerk III
Exact Position Title

916-608-6549
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	25	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10		X			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	X	X			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurel Blair Date 4/25/06

If you have any questions, please contact Joanie Hanna at FLC Bus Svc

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andres

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Business Services / Folsom Lake College
Department/Location

Brenda Haney
Employee Name

Account Clerk III
Exact Position Title

916.608.6635
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	0	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3		✓			

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PLEASE USE BLUE INK

Employee Signature Brenda Haney Date 04/25/06

If you have any questions, please contact Joan Otterman at FLC Bus Svc

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andrew

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Temp. Account Clerk I
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 20% of Trans.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Hewett Date 5-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk II
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 4% of Trans

~~Reimbursable Activities:~~ ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Hrick Date 5-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk III
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 40% of Trans.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Hirst Date 5-3-06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

ARC - Financial Aid
Department/Location

Randi Kwoka-Coleman
Employee Name

Financial Aid Clerk II
Exact Position Title

8081
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Randi Kwoka-Coleman Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/96 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin Aid / ARC
Department/Location

Alicia Doshi
Employee Name

Financial Aid Officer
Exact Position Title

916-484-8927 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alicia Doshi Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios C.C.D.
District

FINANCIAL AID
Department/Location

Michael Carlson
Employee Name

TEMPORARY CLASSIFIED FINANCIAL AID OFFICER
Exact Position Title

484-8881
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

ARC - Financial Aid Office
Department/Location

CRYSTAL AVILA
Employee Name

Clerk II
Exact Position Title

(916) 484-8457 (12mo/11mo/10mo/hrly)
Telephone # ~~work~~ year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal Avila Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

ARC - Financial Aid
Department/Location

Kim Gardner
Employee Name

Financial Aid Officer
Exact Position Title

8003
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS C.C.
District

ARC
Department/Location

JUDY O VAYL
Employee Name

FINANCIAL Aid Clerk II
Exact Position Title

-2395
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy A. Vayl Date 4-25-2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin Aid office, ARC
Department/Location

Brutski, Marina
Employee Name

Fin-Aid Clerk II
Exact Position Title

916-484-8623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-25-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Fin Aid / CRC
Department/Location

Alice Kwong
Employee Name

FA Supervisor
Exact Position Title

916 691-T278 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alice Kwong Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Form for each function per year if function changed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist. — District

Financial Aid — Department/Location

Yolanda Lucero-Ruiz — Employee Name

Financial Aid Officer — Exact Position Title

916/691-7450 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yolanda Lucero-Ruiz Date 4/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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FORM FOR ENROLL FUNCTIONS PER YEAR IF FUNCTION CHANGED (ONE FORM)

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: LRCCD
Department/Location: FAO

Employee Name: ELENA SKUBENICH
Exact Position Title: FA CLK II

Telephone #: 691-7421
Work year length(circle): (12mo)/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 - 5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 - 3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 - 5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 - 10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 - 10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-12-06

If you have any questions, please contact ______________, at ______________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________.

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FORM FOR EACH FUNCTION PER YEAR IF FUNCTION TIME CHANGED

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm College — District

Financial Aid — Department/Location

Kevin Kimura — Employee Name

FA Clk — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin Kimura Date 5/12/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Form FA Enroll Function for Year of Function Changed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Los Rios

Department/Location: CRC FAO

Employee Name: Daniel Peters

Exact Position Title: FA Clerk II

Telephone #: ____

Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Daniel Peters Date: 5-12-06

If you have any questions, please contact ____________________, at ____________

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________________.

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Form for each function per year if function time spent changed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios District
District

Financial Aid ~~Dept~~ Office
Department/Location

Mee Chasengnou
Employee Name

Financial Aid Clerk II.
Exact Position Title

(916) 691-7209 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for ~~which~~ you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mee Chasengnou Date 5/10/06

If you have any questions, please contact _____, at _____

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I think for each function the type of function changed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LACCD
District

FAO-CRC
Department/Location

[illegible]
Employee Name

Clerk II
Exact Position Title

916 691-7256
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-10				
Code 24 Incompiete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5-10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5-10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5-10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/12/2006

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Also for Bogg Functions Ask Your IF Function Changed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

CRC Fin Aid
Department/Location

MARYLouise Walker
Employee Name

Fin Aid Clk II
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4-6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5-8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5-8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10+				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6-15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MLWalker Date 5/12/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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1 Form for each function per year of function changed. (Line Items)

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Los Rios Comm. College District
Department/Location: Fin. Aid

Employee Name: Maria de Jesus Perez
Exact Position Title: Fin. Aid Clerk II

Telephone #: 691-7558
Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/1/06

If you have any questions, please contact ______________________, at ____________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________.

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1 form for each function per year if function (time) changed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Business Services / FLC
Department/Location

Brenda Haren
Employee Name

Account Clerk III
Exact Position Title

916 608-6635 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brenda J Haren Date 05/03/2006

If you have any questions, please contact Joann J Harman, at FLC Bus. Srvc.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andres

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Svcs/FLC
Department/Location

Laurel Blair
Employee Name

Account Clerk III
Exact Position Title

916-608-6549 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurel Blair Date 5/3/06

If you have any questions, please contact Yvonne Hennessy, at FLC Bus. Svcs

PLEASE SUBMIT THIS INFORMATION BY 5/5/06; TO Raymond Andres

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Financial Aid / Student Services
Department/Location

BuKiya Bates
Employee Name

Financial Aid Officer
Exact Position Title

608-6047
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature BuKiya Bates Date 5/5/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FINANCIAL AID / STUDENT SERVICES
Department/Location

ALI PADASH
Employee Name

FINANCIAL AID OFFICER
Exact Position Title

(916)608-6648
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ali Padash Date 5/4/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk III
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 **02-03** 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1 40% of Trans

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	17-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓ 10%		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K. Hazlett Date 5-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk II
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1 60% of Trans.

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓ 10%		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K. Hradt Date 5-3-06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
3086/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid office
Department/Location

Melba DuBois
Employee Name

Asst. Financial Aid
Exact Position Title

558-2672
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melba L DuBois Date 4/21/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO: _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3068/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS community college.
District

3835 Freeport Blvd.
Department/Location

[illegible]
Employee Name

student help
Exact Position Title

(916) 665-1007
Telephone #

(12mo/11mo/10mo/hrly)
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-20				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	9				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [illegible]

Date 04/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

FINANCIAL AID SCC
Department/Location

LORIANN RODRIGUEZ
Employee Name

FINANCIAL AID CLERK II + student help
Exact Position Title

916 558 2131
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LoriAnn Rodriguez Date 4/21/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3096/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios school district — District

Financial Aid office — Department/Location

Steven Guadiana — Employee Name

Student help — Exact Position Title

(916)558-2546 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6-10	8			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	12-15	13.5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	16				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	11				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
3098/98 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Fin Aid Office - SCC
Department/Location

Debra Iwamasa
Employee Name

Fin Aid Officer
Exact Position Title

(916) 558-2353
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 4/24/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
00/01 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the average amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial aid
Department/Location

Charito Lagat
Employee Name

student help
Exact Position Title

Telephone # 12mo/11mo/10mo/hriv (circle) Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty erjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Charito Lagat Date 04/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO-SCC
Department/Location

Ge Lor
Employee Name

FA officer
Exact Position Title

X2137
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 ~~03-04~~ 04-05 ~~05-06~~
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature G. V. L Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
3098/98 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Eduardo C Osorio
Employee Name

Temp/Permanent PA Clerk II
Exact Position Title

(916) 538-2265
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/28/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO - SCC
Department/Location

Cathy Phillip
Employee Name

FA Officer
Exact Position Title

X2044
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy Phillip GM Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid / SCC
Department/Location

Carol Poncini
Employee Name

Assistant F.A.O.
Exact Position Title

916/650-2723 (12mo/11mo/10mo/hrly)
Telephone # ~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carol Poncini Date 4-24-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College D.
District

Financial Aid
Department/Location

Vivian Quiros
Employee Name

Asst. Financial Aid Officer
Exact Position Title

(916) 558-2046
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vivian M Quiros Date 4/21/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
3098/98 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Las Rios Community College Dist.
District

Financial Aid / Sce
Department/Location

Kaila Redmond
Employee Name

Financial Aid Clerk II
Exact Position Title

(916) 558-2028
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
3098/99 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Financial Aid / SCC
Department/Location

Yelena Rud
Employee Name

Financial Aid Clerk II
Exact Position Title

650-2731
Telephone #

~~12mo~~/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yelena Rud Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO: _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Com Coll Dist.
District

Financial Aid
Department/Location

Laura Reyes
Employee Name

Financial Aid Clerk II (Temp)
Exact Position Title

(916)558-2352
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laura Reyes Date 4.21.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

FINANCIAL AID SCC
Department/Location

LORI ANN RODRIGUEZ
Employee Name

FINANCIAL AID CLERK II
Exact Position Title

916 558 2131
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8				

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Employee Signature Lori Ann Rodriguez Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.R.C.C.D.
District

Financial Aid / S.C.C.
Department/Location

Ruben Ruiz
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2601
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	50				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature Ruben R. Date 4-21-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LACCD
District

Financial Aid Office / SCC
Department/Location

Jeannette Solorio
Employee Name

Financial Aid Clerk
Exact Position Title

558-2045
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
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Employee Signature Jeannette Solorio Date 4/23/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LACCD
District

Financial Aid officer
Department/Location

THENG Nhora
Employee Name

Asst. Financial Aid officer
Exact Position Title

916-558-2503
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
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Employee Signature Theng Nhora Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3098/99 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Minh Tran
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2763
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
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Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6				

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Employee Signature Minh Tran Date 4.21.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Statistical Data

Enrollment Statistics (EFCW 1.8-1)

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	22,314	23,234	24,659	26,952	28,990	26,103	25,975	0
Fall	60,801	64,599	66,700	71,755	74,251	70,339	69,982	0
Winter/ Intersession								
Spring	62,043	66,546	65,499	73,348	70,630	69,615	70,795	0
Annual data available only	0	0	0	0	0	0	0	0
Total	145,158	154,379	156,858	172,055	173,871	166,057	166,752	0
2. Number of students who paid enrollment fees:								
Summer	22,314	23,234	24,659	26,952	28,990	26,103	25,975	0
Fall	60,801	64,599	66,700	71,755	74,251	70,339	69,982	0
Winter/ Intersession								
Spring	62,043	66,546	65,499	73,348	70,630	69,615	70,795	0
Annual data available only	(21,813)	(22,953)	(24,721)	(27,394)	(27,607)	(32,245)	(37,572)	0
Total	123,345	131,426	132,137	144,661	146,264	133,812	129,180	0
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	0	0	0	0	0	0	0	0
Fall	0	0	0	0	0	0	0	0
Winter/ Intersession								
Spring	0	0	0	0	0	0	0	0
Annual data available only	21,813	22,953	24,721	27,394	27,607	32,245	37,572	0
Total	21,813	22,953	24,721	27,394	27,607	32,245	37,572	0

Summer	U98	U99	U00	U01	1026	1036	1046	1056
FALL	F98	F99	F00	F01	1029	1039	1049	1059
Spring	S99	S00	S01	S02	1033	1043	1053	1063

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature _____ Date 5/30/2006

SUMMARY

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-2)

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	
1. Number of enrollment fee accounts receivable requiring collection:									
Summer									
Fall									
Winter/Intersession									
Spring									
Annual Data Available Only	6,851	7,780	8,034	9,758	12,759	8,867	7,534	13,222	
Total	6,851	7,780	8,034	9,758	12,759	8,867	7,534	13,222	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility									GA_EFCW_SF_REFUND_DUETO_WAIVER
Summer					598	663	888	959	
Fall					1,645	2,396	2,787	2,548	
Winter/Intersession									
Spring					973	1,165	1,386	902	
Annual Data Available Only	2,959	3,361	3,471	4,215					
Total	2,959	3,361	3,471	4,215	3,216	4,224	5,061	4,409	
	U98	U99	U00	U01	1026	1036	1046	1056	
	F98	F99	F00	F01	1029	1039	1049	1059	
	S99	S00	S01	S02	1033	1043	1053	1063	
Per EFCW 1.8-1 (1) Total	145,158	154,379	156,858	172,055	173,871	166,057	166,752		
% diff next year vs. prior	6.35%	1.61%	9.69%	1.06%					
% used to est line 1	4.72%	5.04%	5.12%	5.67%	7.34%	5.34%	4.52%	5.73%	
	estimate avg % factoring diff in fm yr to yr							avg over 02-03 thru 04-05	
% used to est line 2	2.04%	2.18%	2.21%	2.45%	1.85%	2.54%	3.04%	2.48%	
	estimate avg % factoring diff in fm yr to yr							avg over 02-03 thru 04-05	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature _____ Date 5/30/2006

SUMMARY

Los Rios Commun College District
Enrollment Fee Collection/Waivers

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-3)

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	
1. Number of enrollment fee waivers requested (BOGG etc.)									
Summer									
Fall									
Winter/Intersession									
Spring									
Annual data available only	24,889	26,504	28,343	31,698	32,320	37,563	43,556	0	
Total	24,889	26,504	28,343	31,698	32,320	37,563	43,556	0	
2. Number of enrollment fee waivers approved (BOGG, etc.)									
Summer									
Fall									
Winter/Intersession									
Spring									
Annual data available only	21,813	22,953	24,721	27,394	27,607	32,245	37,572	0	from form EFCS 1.8-1 line 3.
Total	21,813	22,953	24,721	27,394	27,607	32,245	37,572	0	
	87.64%	86.60%	87.22%	86.42%	85.42%	85.84%	86.26%		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature _____ Date 5/30/2006

Statistical Data($)

Enrollment Fee Revenues (EFCW1.8-4)

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	NOTES
Enrollment Revenue on G/L	$6,921,623.00	$6,702,554.00	$6,743,945.00	$11,938,519.00	$12,529,128.00	$19,721,082.00	$29,607,418.00	FROM G/L
Accounts Receivable								
BOG Waivers	3,894,075.00	3,787,024.00	4,048,108.00	4,574,394.00	4,883,429.00	10,207,270.00	13,921,630.00	FROM CCCCO WEB SITE.
1. Enrollment Fees Collected	7,155,268.00	6,929,775.00	6,986,831.00	12,212,983.00	10,464,504.00	14,157,830.00	18,936,911.00	GA_MC_EFCW_SF_CASH_ITEM_TYPES (Actual cash received)
2. Enrollment Fees Refunded	233,645.00	227,221.00	242,886.00	274,464.00	309,910.00	557,874.00	959,431.00	LR_SF_REFUNDS_DUE_TO_WAIVER (Only refunds due to BOG)
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	6,921,623.00	6,702,554.00	6,743,945.00	11,938,519.00	10,154,594.00	13,599,956.00	17,977,480.00	
4A. Total Enrollment Fees Waived (BOGG, etc.)	3,894,075.00	3,787,024.00	4,048,108.00	4,574,394.00	4,883,429.00	10,207,270.00	13,921,630.00	FROM CCCCO WEB SITE. (Only BOG waivers, in this case BOG A, B, & C).
4B. 2% Enrollment Fees Waived (Line 4A x 2%)		75,740.00	80,962.00	91,488.00	97,669.00	204,145.00	278,438.00	
4C. 7% Enrollment Fees Waived (Line 4A x 7%)		265,092.00						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL Credits Waived			368,010	415,854	443,948	567,071	535,447	
TOTAL x $0.91 per credit			$334,889	$378,427	$403,993	$516,035	$487,257	

U98 -13	U99-12	U00-11	U01-11	1026-11	1036-11	1046-18
F98 -13	F99-12	F00-11	F01-11	1029-11	1039-18	1049-26
S99 -12	S00-11	S01-11	S02-11	1033-11	1043-18	1053-26

BOG IN SEPARATE LINE	N	N	N	Y	Y	Y	Y	
CASH OR ACCRUAL	C	C	C	Y	Y	A	A	
REFUNDS INCLUDED	Y	Y				N	N	
% EF refunded vs. EF collected					3%	4%	5%	
% EF refunded vs. BOG Waivers	6.00%	6.00%	6.00%	6.00%	6.00%	5.00%	7.00%	AVG OVER LAST 3 Fys 6%.

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Employee Signature _____ Date _____

SUMMARY

LOS RIOS COMMUNITY COLLEGE DISTRICT
CLAIMAF 'ME AND
PRODUCTIVE JRLY RATES
2004-2005

Last Name	First Name	EE ID #	Position Title	Campus	Retirement Class	Employment Class	Current Fiscal Year Productive Hourly Rate	EFCW Cost
PAULSON	JAN	0935537	DIRECTOR III, SYSTEMS & PROGRAMMING	DO	PERS	Mgmt Class	73.39	7,779
SHULER	QING	0011617	IT ANALYST II	DO	PERS	Class Reg - LRCEA	53.93	17,258
GOMOLKA	JEROME M	0019335	IT ANALYST II	DO	PERS	Class Reg - LRCEA	61.09	47,650
HEATION	RUTH	0000756	IT ANALYST I - BUSINESS	DO	PERS	Class Reg - LRCEA	57.82	40,474
WILES	GREGORY B.	0001453	PROGRAMMER II	DO	PERS	Class Reg - LRCEA	51.93	415
FLASH	KEVIN	0023700	IT APPLICATION SYSTEM SUPERVISOR	DO	PERS	Class Reg	63.10	30,288
BACKUS	KRISTINE E.	0003255	IT ANALYST II - BUSINESS	DO	PERS	Class Reg - LRCEA	64.22	193
DAY	MICHAEL	0011616	SENIOR IT ANALYST	DO	PERS	Class Reg - LRCEA	68.90	551
HANEY	BRENDA	0003246	ACCOUNT CLERK III	FLC	PERS	Class Reg - LRCEA	29.93	60
WURZER	CHRISTINE	0003894	ADMISSIONS & RECORDS SUPERVISOR	FLC	PERS	Class Reg - LRCEA	50.10	200
MAGA	PATRICIA	0005242	FINANCIAL AID SUPERVISOR	SCC	PERS	Class Reg	51.09	3,193
LOR	GE	0005760	FINANCIAL AID OFFICER	SCC	PERS	Class Reg - LRCEA	38.89	14,312
PHILLIP	CATHY	0002787	FINANCIAL AID OFFICER	SCC	PERS	Class Reg - LRCEA	38.68	890
SOLORIO	JEANNETTE	0005635	FINANCIAL AID OFFICER	SCC	PERS	Class Reg - LRCEA	43.53	218
DUQUES	MELBA	0006071	ASSISTANT FINANCIAL AID OFFICER	SCC	PERS	Class Reg - LRCEA	31.81	891
PONCINI	CAROL	0002508	ASSISTANT FINANCIAL AID OFFICER	DO	PERS	Class Reg - LRCEA	33.42	1,404
MOUA	THENG	0020137	ASSISTANT FINANCIAL AID OFFICER	DO	PERS	Class Reg - LRCEA	35.27	459
OSORIO	EDUARDO C	0729552	FINANCIAL AID CLERK II	DO	PERS	Class Reg - LRCEA	24.89	124
RUD	YELEVA	0005835	FINANCIAL AID CLERK II	DO	PERS	Class Reg - LRCEA	27.12	7,350
IWAMASA	DEBRA K.	0002407	FINANCIAL AID OFFICER	DO	PERS	Class Reg - LRCEA	36.53	110
REDMOND	KAILA C.	0018413	FINANCIAL AID CLERK II	DO	PERS	Class Reg - LRCEA	23.95	719
			BUSINESS SERVICES SUPERVISOR	ALL	PERS	Class Reg	45.75	-
			ACCOUNTING SPECIALIST	ALL	PERS	Class Reg - LRCEA	36.22	-
			ACCOUNT CLERK III	ALL	PERS	Class Reg - LRCEA	27.12	-
			ACCOUNT CLERK II	ALL	PERS	Class Reg - LRCEA	25.11	-
			ACCOUNT CLERK I	ALL	PERS	Class Reg - LRCEA	23.28	-
			CLERK III	ALL	PERS	Class Reg - LRCEA	24.64	-
			CLERK II	ALL	PERS	Class Reg - LRCEA	22.84	-
			CLERK I	ALL	PERS	Class Reg - LRCEA	21.21	-
			STUDENT HELP	ALL	N/A	Stud Hlp	7.11	-
			FINANCIAL AIDS SUPERVISOR	ALL	PERS	Class Reg	42.67	-
			FINANCIAL AIDS OFFICER	ALL	PERS	Class Reg - LRCEA	35.08	-
			ASSISTANT FINANCIAL AID OFFICER	ALL	PERS	Class Reg - LRCEA	33.03	-
			FINANCIAL AIDS CLERK II	ALL	PERS	Class Reg - LRCEA	25.11	-
			FINANCIAL AIDS CLERK I	ALL	PERS	Class Reg - LRCEA	23.28	-
			RECORDS & ADMISSIONS SUPERVISOR	ALL	PERS	Class Reg	42.67	-
			ADMISSIONS/RECORDS CLERK III	ALL	PERS	Class Reg - LRCEA	26.10	-
			OUTREACH CLERK	ALL	PERS	Class Reg - LRCEA	25.60	-
			COUNSELING CLERK	ALL	PERS	Class Reg - LRCEA	25.11	-
			EDUCATION CENTER CLERK	ALL	PERS	Class Reg - LRCEA	27.12	-
			LEAVE LINE BLANK					
			TOTALS CALCULATED LRCCD				38.25	174,538.00
			Materials & Supplies					$ -
			Consultant Contractor					$ -
			Equipment					$ -
			Employee Travel					$ -
			Employee Training					$ -
			Software & Service					$ -
			INDIRECT COST RATE - Add amount calculated by Six-Ten upon receipt of claim prepared.	31.96%				$ 55,782
			LEAVE LINE BLANK					
			TOTALS				38.25	$ 230,320
			Amount on claim per Six-Ten					$ -
			Difference					$ 230,320

GA_MC_IWM_GROSSPAY
PREPARED BY RHF
LRios EFCW PHRs(smp edits).xls
6/1/2006
1 1

Schedule 5
Los Rios Comm[illegible]y College District
308/95 Enrollment F[illegible]ollection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received						
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 3,787,024	$ 4,048,108	$ 4,574,394	$ 4,883,429	$ 10,207,270	$ 13,921,630
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 265,092	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		368,009	415,854	443,948	651,389	596,470
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 265,092					
1.8-4 5.	Credit Units Waived		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 340,832**	**$ 415,850**	**$ 469,915**	**$ 501,662**	**$ 796,909**	**$ 821,221**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Los Rios
COUNTY: Sacramento

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$121,426,880	$109,523,677	$320,886	$109,844,563
ENROLL FEE ADMIN (2%)	334,101	287,327	46,774	334,101
APPRENTICE ALLOWANCE	1,361,184	1,147,045	214,139	1,361,184
BASIC SKILLS	0	1,951,928	-1,951,928	0
PARTNERSHIP FOR EXCEL.	7,477,295	6,430,474	1,046,821	7,477,295
S.F.A.A.	1,973,540	1,654,346	319,194	1,973,540
E.O.P.S.	3,622,531	3,115,377	507,154	3,622,531
C.A.R.E.	541,730	462,257	79,473	541,730
D.S.P.S.	2,935,737	2,512,392	423,345	2,935,737
STATE HOSPITALS	0	0	0	0
CALWORKS	1,796,949	1,713,076	83,873	1,796,949
MATRICULATION (CREDIT)	2,667,217	2,285,890	381,327	2,667,217
MATRIC. (NONCREDIT)	0	0	0	0
FAC. & STAFF DIVERSITY	40,004	28,436	11,568	40,004
PART-TIME FACULTY INS.	120,785	0	120,785	120,785
PART-TIME FACULTY OFFIC	229,899	0	229,899	229,899
PART-TIME FACULTY ALLOC	1,997,475	1,717,829	279,646	1,997,475
BLOCK GRANT (ONE-TIME)	983,389	845,715	137,674	983,389
ECON. DEVELOPMENT	1,607,872	1,244,017	106,595	1,350,612
TELECOMMUNICATIONS	228,818	126,238	102,580	228,818
TANF	507,516	436,463	71,053	507,516
VTEA LEADERSHIP	93,750	14,625	64,125	78,750
VTEA TECH. PREP.	275,200	160,992	70,176	231,168
VTEA TITLE I C	1,819,176	1,418,958	109,150	1,528,108
PLANT & INSTRUCTIONAL	1,103,026	948,603	154,423	1,103,026
PRIOR YEAR CORRECTION	-4,093,014	-4,125,366	32,352	-4,093,014
TOTAL	$149,051,060	$133,900,299	$2,961,084	$136,861,383

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc e 5A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ -	$ 2,190.86	$ 34.75	$ 9,200.09	$ 13,195.88	$ 7,489.79
2	Staff Training	(04)(B)(1)(b)	$ -	$ 1,580.98	$ 4,085.23	$ 1,879.70	$ 3,029.99	$ 4,782.70
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 50,619.74	$ 31,463.42	$ 109,338.41	$ 119,040.79	$ 155,603.04	$ 91,790.37
4	Waiving student fees	(04)(B)(2)(b)	$ 183,689.15	$ 209,628.24	$ 244,415.28	$ 276,094.86	$ 389,962.54	$ 428,481.41
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ -	$ 563.52	$ 25,672.75	$ 14,820.09	$ 43,584.98	$ 37,877.62
6	EFCW - Fee Waiver Costs	Total	$ 234,308.89	$ 245,427.02	$ 383,546.42	$ 421,035.53	$ 605,376.43	$ 570,421.89
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 340,832.00	$ 415,850.00	$ 469,915.00	$ 501,662.00	$ 796,909.00	$ 821,221.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (106,523.11)	$ (170,422.98)	$ (86,368.58)	$ (80,626.47)	$ (191,532.57)	$ (250,799.11)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 234,308.89**	**$ 245,427.02**	**$ 383,546.42**	**$ 421,035.53**	**$ 605,376.43**	**$ 570,421.89**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 14, 2006 10:04:27

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	832	305,402
BOGW - Part B based on income standards	10,024	3,485,855
BOGW - Part C based on financial need	4,391	1,955,203

Total Unduplicated Count = 14,914
Total Amount = $ 5,746,460

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 14, 2006 09:47:15

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	599	234,246
BOGW - Part B based on income standards	7,176	2,502,399
BOGW - Part C based on financial need	1,268	469,137

Total Unduplicated Count = 9,011
Total Amount = $ 3,205,782

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 14, 2006 10:04:41

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	2	186
BOGW - Part B based on income standards	25	3,745
BOGW - Part C based on financial need	16	1,853

Total Unduplicated Count = 43
Total Amount = $ 5,784

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 14, 2006 10:18:31

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	747	278,500
BOGW - Part B based on income standards	10,079	3,576,518
BOGW - Part C based on financial need	2,858	1,108,586

Total Unduplicated Count = 13,604
Total Amount = $ 4,963,604

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 11, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8673

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Los Rios Community College District CC34050

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Los Rios Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC34050

(02) Claimant Name: Los Rios Community College District

County of Location: Sacramento

Street Address or P.O. Box: 1919 Spanos Court

City: Sacramento | State: CA | Zip Code: 95825

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,046,983
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,036,983
Due from State	(08)	(17) $ 1,036,983
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	35,375
(23) EFCW-1, (04)(A)(1)(b)(f)	959
(24) EFCW-1, (04)(A)(2)(a)(f)	873,585
(25) EFCW-1, (04)(B)(1)(a)(f)	22,729
(26) EFCW-1, (04)(B)(1)(b)(f)	9,695
(27) EFCW-1, (04)(B)(2)(a)(f)	144,613
(28) EFCW-1, (04)(B)(2)(b)(f)	444,612
(29) EFCW-1, (04)(B)(2)(c)(f)	206
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	454,638
(32) EFCW-1, (09)	317,575
(33) EFCW-1, (10)	621,855
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) **Date**

12/21/07

Jon Sharpe
Type or Print Name

Deputy Chancellor
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

) Cl[illegible]t:

s Rios Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2005-2006

3) Leave Blank

'ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 35,375.38	$ -	$ -	$ -	$ -	$ 35,375.38
b. Staff training (One time per employee)	$ 959.21	$ -	$ -	$ -	$ -	$ 959.21
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 873,585.43	$ -	$ -	$ -	$ -	$ 873,585.43
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P[illegible]ing district policies & procedures fo[illegible]V.B.	$ 16,837.16	$ -	$ 5,892.00	$ -	$ -	$ 22,729.16
b. Staff training (One time per employee)	$ 9,694.53	$ -	$ -	$ -	$ -	$ 9,694.53
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 134,190.50	$ -	$ 10,422.80	$ -	$ -	$ 144,613.30
b. Waiving student fees	$ 444,612.29	$ -	$ -	$ -	$ -	$ 444,612.29
c. Reporting BOG fee waiver data to CCC	$ 205.85	$ -	$ -	$ -	$ -	$ 205.85
Total Direct Costs	$ 1,515,460.35	$ -	$ 16,314.80	$ -	$ -	$ 1,531,775.15

'ect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	30.00%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 454,638.11
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,986,413.26
Reduction		
.ess: Enrollment Fee Revenue offset		$ 317,575.00
.ess: Enrollment Fee Waiver offsets		$ 621,855.13
Tota[illegible]med Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,046,983.13

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Flash, Kevin	IT Application System	$68.52	500.0	$ 34,260.00				
Paulson, Jan	Director	$79.67	14.0	$ 1,115.38				
(05) Total [x] Subtotal [ ]		Page 1 of 1		$ 35,375.38	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Heidt, Rob	Business Services Supervisor	$57.33	13.0	$ 745.29				
Wurzer, Christine	A&R Supervisor	$53.48	4.0	$ 213.92				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 959.21	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ *Adopting Procedures, Recording, and Maintaining Records*
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
A&R Office Staff	Various	$24.97	9,713.7	$ 242,551.09				
Calculating total enrollment fee to be collected								
A&R Office Staff	Various	$24.97	6,653.6	$ 166,140.39				
Answering student's questions regarding enrollment fee collection								
A&R Office Staff	Various	$24.97	11,427.9	$ 285,354.66				
Updating written and computer records for enrollment fee information								
A&R Office Staff	Various	$24.97	5,795.1	$ 144,703.65				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies								
A&R Office Staff	Various	$24.97	1,101.9	$ 27,514.44				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
A&R Office Staff	Various	$24.97	293.2	$ 7,321.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 873,585.43	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Thomas, Carol	Financial Aid Supervisor	$41.17	16.0	$ 658.72				
Flash, Kevin	IT Application System	$68.52	171.0	$ 11,716.92				
Paulson, Jan	Director	$79.67	56.0	$ 4,461.52				
XAP Corporation	Contractor	$100.00	58.9			$ 5,892.00		
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 16,837.16	$ -	$ 5,892.00	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Los Rios Community College District

(02) Fiscal Year: 2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Heidt, Rob	Business Services Supervisor	$57.33	6.1	$ 349.71				
Maga, Pat	Interim Dean, AR/AP	$67.40	13.5	$ 909.90				
Thomas, Carol	Financial Aid Supervisor	$41.17	79.0	$ 3,252.43				
Flash, Kevin	IT Application System	$68.52	9.0	$ 616.68				
Gomolka, Jerry	IT Technician	$67.38	5.3	$ 357.11				
Heaton, Ruth	IT Analyst I-Business	$63.08	8.5	$ 536.18				
Paulson, Jan	Director	$79.67	4.0	$ 318.68				
Andres, Raymond	Accounting Supervisor	$52.96	8.8	$ 466.05				
Andrews, Richard	R&A Supervisor	$49.81	5.5	$ 273.96				
Iwamosa, Deb	Financial Aid Officer	$40.72	6.0	$ 244.32				
Lor, Ge	Interim FA Supervisor	$42.73	6.0	$ 256.38				
Brutski, Marina	Financial Aid Clerk	$27.11	7.0	$ 189.77				
Luong, Lana	Financial Aid Officer	$37.00	5.5	$ 203.50				
Meyer, Russ	Programmer	$58.65	6.0	$ 351.90				
Sayles, Kim	Interim Accounting Director	$58.66	4.5	$ 263.97				
Beckhom, Roy	Financial Aid Supervisor	$49.90	4.5	$ 224.55				
Lucero-Ruiz, Yolanda	Financial Aid Officer	$41.40	3.0	$ 124.20				
Skubenich, Elena	Financial Aid Clerk	$28.90	3.0	$ 86.70				
Kwong, Alice	Financial Aid Supervisor	$53.40	4.5	$ 240.30				
Backus, Kris	Program Analyst	$70.70	4.5	$ 318.15				
Williams, Susie	Communications	$104.43	0.5	$ 52.22				
Bates, Rukiya	Financial Aid Officer	$38.58	1.5	$ 57.87				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 9,694.53	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Gomolka, Jerry	IT Technician	$67.38	1,120.0	$ 75,465.60				
Heaton, Ruth	IT Analyst I-Business	$63.08	850.0	$ 53,618.00				
Paulson, Jan	Director	$79.67	30.0	$ 2,390.10				
Wiles, Gregory	Programmer	$56.60	48.0	$ 2,716.80				
XAP Corporation	Contractor	$100.00	104.2			$ 10,422.80		
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 134,190.50	$ -	$ 10,422.80	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. A.

☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. B.

☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

☐ Adopting Procedures, Recording, and Maintaining Records

☒ Waiving Student Fees

☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$29.66	3,190.9	$ 94,642.09				
Receiving waiver applications Financial Aid Office Staff Various	$29.66	2,792.1	$ 82,813.69				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$29.66	3,190.9	$ 94,642.09				
Notifying students of additional documentation requirements and how to obtain information Financial Aid Office Staff Various	$29.66	452.8	$ 13,430.05				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$29.66	4,832.4	$ 143,328.98				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Various	$29.66	531.2	$ 15,755.39				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 444,612.29	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2005-2006

) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. A.

☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

☐ Prepare District Policies & Procedures for § IV. B.

☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

☐ Adopting Procedures, Recording, and Maintaining Records

☐ Waiving Student Fees

☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Thomas, Carol Financial Aid Supervisor	$41.17	5.0	$ 205.85				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 205.85	$ -	$ -	$ -	$ -

New 04/06

Los Rios Community College District
308/95 ENROLL[illegible]EE COLLECTIONS/WAIVERS
[illegible]005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	9,713.70	A&R Office Staff	Various	$24.97	$242,551.09	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	6,653.60	A&R Office Staff	Various	$24.97	$166,140.39	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	11,427.90	A&R Office Staff	Various	$24.97	$285,354.66	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,795.10	A&R Office Staff	Various	$24.97	$144,703.65	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	1,101.90	A&R Office Staff	Various	$24.97	$27,514.44	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	293.20	A&R Office Staff	Various	$24.97	$7,321.20	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	34,985.40	**A&R Office Staff Total**			$873,585.43		
3/29/2006	3.00	Andres, Raymond	Accounting Supervisor	$52.96	$158.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	2.00	Andres, Raymond	Accounting Supervisor	$52.96	$105.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	2.00	Andres, Raymond	Accounting Supervisor	$52.96	$105.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.80	Andres, Raymond	Accounting Supervisor	$52.96	$95.33	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.80	**Andres, Raymond Total**			$466.05		
3/29/2006	2.50	Andrews, Richard	R&A Supervisor	$49.81	$124.53	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Andrews, Richard	R&A Supervisor	$49.81	$74.72	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Andrews, Richard	R&A Supervisor	$49.81	$74.72	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.50	**Andrews, Richard Total**			$273.97		
4/10/2006	1.50	Backus, Kris	Program Analyst	$70.70	$106.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Backus, Kris	Program Analyst	$70.70	$106.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Backus, Kris	Program Analyst	$70.70	$106.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.50	**Backus, Kris Total**			$318.15		
4/26/2006	1.50	Bates, Rukiya	Financial Aid Officer	$38.58	$57.87	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.50	**Bates, Rukiya Total**			$57.87		
4/10/2006	1.50	Beckhom, Roy	Financial Aid Supervisor	$49.90	$74.85	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Beckhom, Roy	Financial Aid Supervisor	$49.90	$74.85	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Beckhom, Roy	Financial Aid Supervisor	$49.90	$74.85	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.50	**Beckhom, Roy Total**			$224.55		
3/29/2006	3.50	Brutski, Marina	Financial Aid Clerk	$27.11	$94.89	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Brutski, Marina	Financial Aid Clerk	$27.11	$40.67	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	2.00	Brutski, Marina	Financial Aid Clerk	$27.11	$54.22	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	7.00	**Brutski, Marina Total**			$189.78		
05-06	3,190.90	Financial Aid Office Staff	Various	$29.66	$94,642.09	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	2,792.10	Financial Aid Office Staff	Various	$29.66	$82,813.69	Receiving waiver applications	Waiving student fees
05-06	3,190.90	Financial Aid Office Staff	Various	$29.66	$94,642.09	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	452.80	Financial Aid Office Staff	Various	$29.66	$13,430.05	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	4,832.40	Financial Aid Office Staff	Various	$29.66	$143,328.98	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	531.20	Financial Aid Office Staff	Various	$29.66	$15,755.39	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	14,990.30	**Financial Aid Office Staff Total**			$444,612.29		
3/29/2006	4.50	Flash, Kevin	IT Application System	$68.52	$308.34	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Flash, Kevin	IT Application System	$68.52	$102.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Flash, Kevin	IT Application System	$68.52	$102.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Flash, Kevin	IT Application System	$68.52	$102.78	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	500.00	Flash, Kevin	IT Application System	$68.52	$34,260.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	171.00	Flash, Kevin	IT Application System	$68.52	$11,716.92	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	680.00	**Flash, Kevin Total**			$46,593.60		
3/29/2006	3.50	Gomolka, Jerry	IT Technician	$67.38	$235.83	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.80	Gomolka, Jerry	IT Technician	$67.38	$121.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	1,120.00	Gomolka, Jerry	IT Technician	$67.38	$75,465.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	1,125.30	**Gomolka, Jerry Total**			$75,822.71		

Los Rios Community College District
308/95 ENROLL[illegible]FEE COLLECTIONS/WAIVERS
[illegible]2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
3/29/2006	5.50	Heaton, Ruth	IT Analyst I-Business	$63.08	$346.94	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Heaton, Ruth	IT Analyst I-Business	$63.08	$94.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Heaton, Ruth	IT Analyst I-Business	$63.08	$94.62	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	850.00	Heaton, Ruth	IT Analyst I-Business	$63.08	$53,618.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	858.50	**Heaton, Ruth Total**			$54,154.18		
2/13/2006	1.00	Heidt, Rob	Business Services Superv	$57.33	$57.33	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/2/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/13/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/17/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/20/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/27/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
3/29/2006	2.60	Heidt, Rob	Business Services Superv	$57.33	$149.06	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/7/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
4/10/2006	2.00	Heidt, Rob	Business Services Superv	$57.33	$114.66	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Heidt, Rob	Business Services Superv	$57.33	$86.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	19.10	**Heidt, Rob Total**			$1,095.01		
3/29/2006	4.50	Iwamosa, Deb	Financial Aid Officer	$40.72	$183.24	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Iwamosa, Deb	Financial Aid Officer	$40.72	$61.08	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Iwamosa, Deb Total**			$244.32		
4/10/2006	1.50	Kwong, Alice	Financial Aid Supervisor	$53.40	$80.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Kwong, Alice	Financial Aid Supervisor	$53.40	$80.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Kwong, Alice	Financial Aid Supervisor	$53.40	$80.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.50	**Kwong, Alice Total**			$240.30		
3/29/2006	4.50	Lor, Ge	Interim FA Supervisor	$42.73	$192.29	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Lor, Ge	Interim FA Supervisor	$42.73	$64.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Lor, Ge Total**			$256.39		
4/10/2006	1.50	Lucero-Ruiz, Yolanda	Financial Aid Officer	$41.40	$62.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Lucero-Ruiz, Yolanda	Financial Aid Officer	$41.40	$62.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	3.00	**Lucero-Ruiz, Yolanda Total**			$124.20		
3/29/2006	2.50	Luong, Lana	Financial Aid Officer	$37.00	$92.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Luong, Lana	Financial Aid Officer	$37.00	$55.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Luong, Lana	Financial Aid Officer	$37.00	$55.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.50	**Luong, Lana Total**			$203.50		
2/1/2006	5.00	Maga, Pat	Interim Dean, AR/AP	$67.40	$337.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
3/14/2006	2.00	Maga, Pat	Interim Dean, AR/AP	$67.40	$134.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
3/29/2006	3.50	Maga, Pat	Interim Dean, AR/AP	$67.40	$235.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Maga, Pat	Interim Dean, AR/AP	$67.40	$101.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Maga, Pat	Interim Dean, AR/AP	$67.40	$101.10	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	13.50	**Maga, Pat Total**			$909.90		
3/29/2006	1.50	Meyer, Russ	Programmer	$58.65	$87.98	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/10/2006	1.50	Meyer, Russ	Programmer	$58.65	$87.98	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Meyer, Russ	Programmer	$58.65	$87.98	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Meyer, Russ	Programmer	$58.65	$87.98	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Meyer, Russ Total**			$351.92		
3/29/2006	1.00	Paulson, Jan	Director	$79.67	$79.67	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Paulson, Jan	Director	$79.67	$119.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Paulson, Jan	Director	$79.67	$119.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	14.00	Paulson, Jan	Director	$79.67	$1,115.38	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.

Los Rios Community College District
308/95 ENROLL FEE COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	56.00	Paulson, Jan	Director	$79.67	$4,461.52	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	30.00	Paulson, Jan	Director	$79.67	$2,390.10	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	104.00	**Paulson, Jan Total**			$8,285.69		
4/10/2006	1.50	Sayles, Kim	Interim Accounting Directo	$58.66	$87.99	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Sayles, Kim	Interim Accounting Directo	$58.66	$87.99	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/26/2006	1.50	Sayles, Kim	Interim Accounting Directo	$58.66	$87.99	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.50	**Sayles, Kim Total**			$263.97		
4/10/2006	1.50	Skubenich, Elena	Financial Aid Clerk	$28.90	$43.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Skubenich, Elena	Financial Aid Clerk	$28.90	$43.35	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	3.00	**Skubenich, Elena Total**			$86.70		
2/1/2006	1.50	Thomas, Carol	Financial Aid Supervisor	$41.17	$61.76	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
2/6/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/2/2006	2.50	Thomas, Carol	Financial Aid Supervisor	$41.17	$102.93	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/7/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/13/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/20/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/27/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
4/7/2006	2.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$82.34	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
4/10/2006	1.50	Thomas, Carol	Financial Aid Supervisor	$41.17	$61.76	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/17/2006	1.50	Thomas, Carol	Financial Aid Supervisor	$41.17	$61.76	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	76.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$3,128.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	5.00	Thomas, Carol	Financial Aid Supervisor	$41.17	$205.85	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Thomas, Carol Total**			$4,117.02		
05-06	48.00	Wiles, Gregory	Programmer	$56.60	$2,716.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	48.00	**Wiles, Gregory Total**			$2,716.80		
4/10/2006	0.50	Williams, Susie	Communications	$104.43	$52.22	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	0.50	**Williams, Susie Total**			$52.22		
05-06	4.00	Wurzer, Christine	A&R Supervisor	$53.48	$213.92	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	4.00	**Wurzer, Christine Total**			$213.92		
1/6/2006	20.00	XAP Corporation	Contractor	$100.00	$2,000.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
1/19/2006	58.92	XAP Corporation	Contractor	$100.00	$5,892.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
3/30/2006	25.26	XAP Corporation	Contractor	$100.00	$2,526.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
6/8/2006	58.97	XAP Corporation	Contractor	$100.00	$5,896.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	163.15	**XAP Corporation Total**			$16,314.80		
	53,162.05	**Grand Total**			$1,531,775.24		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: June 29, 2005

INSTITUTION:
Los Rios Community College District
1919 Spanos Court

FILING REF.: The preceding Agreement was dated June 30, 1989

Sacramento CA 95825-3981

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/05	06/30/07	30.0	On-Campus	All Programs

*BASE:
Direct salaries and wages excluding all fringe benefits.

Schedule 1A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedule 2A, Schedule 4
Findings:

EFC 1	171,418
Average time to reference student account	3.4
Total Time (in minutes)	582821
Per Hour	60
Hours Worked **(Activity 11)**	**9,713.7**
EFC 2	128,779
Average time to calculate enrollment fee	3.1
Total Time (in minutes)	399215
Per Hour	60
Hours Worked **(Activity 12)**	**6,653.6**
EFC 1	171,418
Average time spent answering questions	4.0
Total Time (in minutes)	685672
Per Hour	60
Hours Worked **(Activity 13)**	**11,427.9**
EFC 2	128,779
Average time to update student file	2.7
Total Time (in minutes)	347703
Per Hour	60
Hours Worked **(Activity 14)**	**5,795.1**
EFC 4	8,815
Average time spent on receivable/delinquencies	7.5
Total Time (in minutes)	66113
Per Hour	60
Hours Worked **(Activity 15)**	**1,101.9**
EFC 5	4,630
Average time to refund enrollment fee per waivers	3.8
Total Time (in minutes)	17594
Per Hour	60
Hours Worked **(Activity 16)**	**293.2**

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load)

Activity Codes

Schedule 1A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12- Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 2B, Schedule 4
Findings:

EFW 6	47,864
Average time to answer questions regarding waivers	4.0
Total Time (in minutes)	191456
Per Hour	60
Hours Worked **(Activity 21)**	**3,190.9**
EFW 6	47,864
Average time to receive/start processing waiver applications	3.5
Total Time (in minutes)	167524
Per Hour	60
Hours Worked **(Activity 22)**	**2,792.1**
EFW 6	47,864
Average time to evaluate/verify eligibility standards	4.0
Total Time (in minutes)	191456
Per Hour	60
Hours Worked **(Activity 23)**	**3,190.9**
EFW 8	5,225
Average time to notify student of incomplete application	5.2
Total Time (in minutes)	27170
Per Hour	60
Hours Worked **(Activity 24)**	**452.8**
EFW 7	42,639
Average time to copy/file approved waiver applications	6.8
Total Time (in minutes)	289945
Per Hour	60
Hours Worked **(Activity 25)**	**4,832.4**
EFW 8	5,225
Average time to review add'l data for appealed waiver denials	6.1
Total Time (in minutes)	31873
Per Hour	60
Hours Worked **(Activity 26)**	**531.2**

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)

EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enrollment fee waivers denied

Activity Codes

21 - Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22 - Receiving Applications from students by mail, fax, computer online access, or in person, or in the fc information processed by the financial aid office.
23 - Evaluating Applications: each application and verification of documents for compliance with eligibili
24 - Incomplete Applications: notifying the student of the additional required information. Holding the st suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information i providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Prov student of final eligibility status.

Schedule 2A
Los Rios Com[illegible]nity College District
308/95 Enrollment [illegible] Collection and Waivers
Fiscal Year 2005-2006
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

			*Multiplier						
			1	2	1	2	4	5	
			**Activity Codes						PHR
Staff	Title	Location	11	12	13	14	15	16	04-05
Anderson, Susanne	Account Clerk	ARC	3.0	3.0	5.0	4.0	5.0	2.0	
Banh, Kristy	Accountant	ARC	3	1.5	1.5	3			36.22
Cottrell, Jean	Account Clerk	ARC	1	2	6	5	5	4	27.12
Eaton, Patricia	Account Clerk	ARC	7	6	15	3	30	4	
Hafer, Nancy	Account Clerk	ARC	2	4	4	3		5	
Hallberg, John	Admin. Services Analyst	ARC	3.5	4.5	1.5	3			38.84
Jackson, Sandra	Clerk	ARC	5	5	5	5		3	
Kalachik, Tatyana	Account Clerk	ARC	2	3	1.5	1.5		2.5	23.28
Kurdyumoua, Nadya	Clerk	ARC	5	5	8	4		2	
Marjanyan, Hasmik	Account Clerk	ARC	2.5	4	3.5	2	4	4	23.28
Tran, Tang	Account Clerk	ARC	2	4	3	2	3	3	25.11
Vang, Koue	Business Services Supervisor	ARC	3	4	5	3	2	3	
Voda, Lyubov	Clerk	ARC	2	6	3	3	4	3	
Yarmolyuk, Mariya	Clerk	ARC	2	7	2	1	5	2	
Carter, Jarrod	Cashier	CRC	7	3	5	5	8	5	7.11
Chasengrion, Chou	Account Clerk	CRC	3	2	2	3	7	7	27.12
DeLeon, Katie	Business Services Supervisor	CRC	2.9	2.1	2.8	2.1	4.8	3.6	
Jeffries, Brittney	Student Assistant	CRC	2	2	1	1		2	7.11
Mason, Krista	Student Assistant	CRC	1	1	2	2	2	3	7.11
Popov, Yelena	Clerk	CRC	2	2	1	2	3	4	21.21
Rogers, Leigh Ann	Account Clerk	CRC	1	3	5	1		3	25.11
Tran, Van Thoai	Account Clerk	CRC	4	2	3	2		2	25.11
Veri, Ronald	Account Clerk	CRC	3	2	3	1	4	3	27.12
Blair, Laurel	Account Clerk	FLC	2.5	3	1	6	10	5	27.12
Harman, Joany	Business Services Supervisor	FLC	5	1	5		1		50.96
Various	Account Clerk I 2005-06 20%	SCC	6	2	6	2	15	7	23.28
Various	Account Clerk II 2005-06 40%	SCC	6	2	6	2	15	7	25.11
Various	Account Clerk III 2005-06 40%	SCC	6	2	6	2	15	7	27.12
Average			**3.4**	**3.1**	**4.0**	**2.7**	**7.5**	**3.8**	**24.97**

*Used 04-05 PHR's, 05-06 were not submitted by client.

Conclusion: Findings will go forward to the Schedule 1A-1.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college.
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration).
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load.

Activity Codes

11 - Referencethe student account or record which lists students courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12- Calculating the enrollment fee,collect the payment or receivable, update student account/record, and print out receipt/course list/other other report.
13 - Answer questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers, (not just course changes), explain the process, and update student account/record.

Schedule 2B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

			*Multiplier						
			6			8	7	8	
			**Activity Codes						PHR
Staff	Title	Location	21	22	23	24	25	26	04-05
Avila, Crystal	Clerk	ARC	2.5	3.0	3.0	2.0	3.5		22.84
Beckhorn, Roy	Financial Aid Supervisor	ARC	2.4	1.9	4.7	2.2	2.7	1.4	
Brutski, Marina	Financial Aid Clerk	ARC	3.0	2.0	4.0	3.0	3.0	3.0	25.11
Carlson, Michael	Temp. Financial Aid Officer	ARC	3.0	2.0	2.0	1.0	2.0	1.0	35.08
Doshi, Alicia	Financial Aid Officer	ARC	1.0	1.0	2.0	4.0	4.0		35.08
Gardner, Kim	Financial Aid Officer	ARC	3.0	2.0	2.0	2.0	3.0	3.0	35.08
Kwoka-Coleman, Randi	Financial Aid Clerk	ARC	2.0	2.0	5.0	1.0	1.0		25.11
Quayle, Judy	Financial Aid Clerk	ARC	2.0	1.0	2.0	2.0	2.0	3.0	25.11
Bates, Rukiya	Financial Aid Officer	CRC	3.0	4.0	2.0	4.0	5.0	2.0	35.08
Chasengnou, Mee	Financial Aid Clerk	CRC	5.0	10.0	10.0	10.0	10.0	10.0	25.11
Coellio, Roseana	Clerk	CRC	7.5	10.0	7.5	7.5	7.5	7.5	22.84
Deters, Daniel	Financial Aid Clerk	CRC	4.0	1.0	1.0	3.0	2.0	2.0	25.11
Kimura, Kevin	Financial Aid Clerk	CRC	5.0	8.0	2.0	10.0	5.0	2.0	23.28
Kwong, Alice	Financial Aid Supervisor	CRC	3.0	1.0	1.0	5.0	5.0	5.0	42.67
Lucero-Ruiz, Yolanda	Financial Aid Officer	CRC	10.0	2.0	5.0	10.0	10.0	10.0	35.08
Padasy, Ali	Financial Aid Officer	CRC	3.0	4.0	2.0	5.0	5.0	3.0	35.08
Perez, Marta de Jesus	Financial Aid Clerk	CRC	10.0	20.0	10.0	30.0	10.0	20.0	25.11
Skubenich, Elena	Financial Aid Clerk	CRC	1.0	3.5	2.5	4.0	7.5	7.5	25.11
Walken, Mary Louise	Financial Aid Clerk	CRC	5.0	6.5	7.5	6.5	10.0	10.5	25.11
Blair, Laurel	Account Clerk	FLC	3.0						27.12
Haney, Brenda	Account Clerk	FLC	4.0						29.93
Chu, Mei	Temp. Account Clerk	SCC	3.0						
Coles, Linda	Account Clerk	SCC	3.0						
Dudrilee, Lori Ann	Financial Aid Clerk	SCC	8.0	1.0	5.0	5.0	2.0	8.0	25.11
Duques, Melba	Assistant Financial Aid	SCC	3.0	1.0	2.0	3.0			31.81
Iwamasi, Debra	Financial Aid Officer	SCC	1.0						36.53
Gano, Dana	Account Clerk	SCC	3.0						
Lee, Sheri	Temp. Account Clerk	SCC	3.0						
Lopez, Peggi	Account Clerk	SCC	3.0						
Lor, Ge	Financial Aid Officer	SCC	3.0	1.0	2.0	1.0	10.0	10.0	38.89
Osorio, Eduardo C.	Financial Aid Clerk	SCC	5.0	1.0	5.0	5.0	5.0	10.0	24.89
Phillip, Cathy	Financial Aid Officer	SCC	3.0	1.0	3.0	2.0	10.0	10.0	38.68
Quiros, Vivian	Assistant Financial Aid Officer	SCC	5.0	1.0	3.0	3.0	3.0	3.0	33.03
Redmond, Kaila	Financial Aid Clerk	SCC	5.0	3.0	5.0	4.0	8.0	10.0	23.95
Reed, Yelleco	Financial Aid Clerk	SCC	7.5	1.0	7.0	5.0	3.0	5.0	27.12
Reyes, Laura	Financial Aid Clerk	SCC	6.0	2.0	5.0	7.0	10.0	7.0	25.11
Ruiz, Ruben	Financial Aid Clerk	SCC	4.0	8.0	3.0	8.0	50.0	3.0	25.11
Smyth, Matt	Temp. Account Clerk	SCC	3.0						
Smith, Shakeya	Account Clerk	SCC	3.0						
Solorio, Jeannette	Financial Aid Officer	SCC	5.0	2.0	5.0	2.0	3.0	3.0	43.53
Tran, Minh	Financial Aid Clerk	SCC	5.0	1.0	5.0	3.0	3.0	6.0	25.11
Average			**4.0**	**3.5**	**4.0**	**5.2**	**6.8**	**6.1**	**$29.66**

Conclusion: Findings go forward to Schedule 1B.

*Used 04-05 PHR's, 05-06 were not submitted by client.

Workload Multipliers (Default)

EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enrollment fee waivers denied

Activity Codes

21- Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22- Receiving Applications from students by mail, fax computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: each application and verification of documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documents and filing the information. Entering information into district records and providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Los Rios Community College District (District)
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	145,158	154,379	156,858	172,055	173,871	166,057	166,752	171,418
EFC 2	1.8-1 2.	Paid Enrollment fees	123,345	131,426	132,137	144,661	146,264	133,812	129,180	128,779
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	21,813	22,953	24,721	27,394	27,607	32,245	37,572	42,639
EFC 4	1.8-2 1.	Delinquencies collections	6,851	7,780	8,034	9,758	12,759	8,867	7,534	8,815
EFC 5	1.8-2 2.	Refunds	2,959	3,361	3,471	4,215	3,216	4,224	5,061	4,630
EFW 6	1.8-3 1.	Waivers Requested*	x	26,504	28,343	31,698	32,320	37,563	43,556	47,864
		*(Waivers Approved used where Waivers Requested not supplied)								
EFW 7	1.8-3 2.	Waivers Approved	x	22,953	24,721	27,394	27,607	32,245	37,572	42,639
EFW 8	1.8-3 (1-2)	Waivers Denied	x	3,551	3,622	4,304	4,713	5,318	5,984	5,225

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River
For 2005 Summer Term

Data Current As Of November 14, 2007 12:16:42

Total Headcount	12,711

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River
For 2005 Fall Term

Data Current As Of November 14, 2007 12:16:59

Total Headcount	31,050

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River
For 2006 Spring Semester

Data Current As Of November 14, 2007 12:17:29

Total Headcount	32,690

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cosumnes River
For 2005 Summer Term

Data Current As Of November 14, 2007 12:19:01

Total Headcount	4,185

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cosumnes River
For 2005 Fall Term

Data Current As Of November 14, 2007 12:18:51

Total Headcount	11,542

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cosumnes River
For 2006 Spring Semester

Data Current As Of November 14, 2007 12:18:36

Total Headcount	11,622

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Folsom Lake
For 2005 Summer Term

Data Current As Of December 01, 2006 01:15:37

Total Headcount	1,297

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Folsom Lake
For 2005 Fall Term

Data Current As Of December 01, 2006 01:15:54

Total Headcount	6,507

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Folsom Lake
For 2006 Spring Semester

Data Current As Of December 01, 2006 01:16:38

Total Headcount	6,657

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sacramento City
For 2005 Summer Term

Data Current As Of November 14, 2007 12:22:01

Total Headcount	10,176

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sacramento City
For 2005 Fall Term

Data Current As Of November 14, 2007 12:21:53

Total Headcount	22,107

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sacramento City
For 2006 Spring Semester

Data Current As Of November 14, 2007 12:21:42

Total Headcount	20,874

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College

Kevin Flash
Employee Name

Applications Systems Specialist
Exact Position Title

D.O. Information Technology
College/Department/Location

916 568-3084
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 A. Enrollment Collection Process:					1210	860	460	500
Code 1 B. Enrollment Waiver Process:					140	220	20	180 - 9 = 171 (182.4)
Code 2 A. Enrollment Collection Process:								
Code 2 B. Enrollment Waiver Process:								
Code 3 Record Retention:								
Code 4 State Reporting:								
TOTALS:								

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kevin M Flash Date 5-2-2006

If you have any questions, please contact _____ at _____

PLEASE RETURN THIS INFORMATION BY _____ ; TO _____

RECEIVED
NOV 1 2007
BY: _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LOS RIOS CCD

Jerome M Gomolka — Employee Name

IT Analyst II — Exact Position Title

District — College/Department/Location

3016 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ~~920~~ 1080 1100 1380 ~~740~~ 780 1120

Corrected based on attached.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date May 2, 2006

If you have any questions, please contact _____, at _____

PLEASE RETURN INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College Dist

RUTH HEATON
Employee Name

Analyst I - Business
Exact Position Title

DISTRICT OFFICE
College/Department/Location

568-3178
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		200	50					
B. Enrollment Waiver Process:			50					
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:		120		100				
B. Enrollment Waiver Process:				50				
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.		[redacted] 500	750	1000	950	1140	650	850
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.						100	50	
TOTALS:		820	850	1150	950	1240	700	850

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Heaton Date 5/2/06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios CCD — Fiscal Year: 2005-06

Robert Heidt — Employee Name

Business Services Supervisor — Exact Position Title

Business Office — Department/Location

(916) 558-2328 — Telephone #

12mo/11mo/10mo/hrly — Work year length (circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one): 1A 1B 2A 2B 3 4	Describe the activity:	Time in Hours
2/13/06	1A 1B (2A) 2B 3 4	Online BOG Waiver Implementation Mtg	1.0
3/2/06	1A 1B (2A) 2B 3 4		2.0
3/17/06	1A 1B (2A) 2B 3 4		2.0
3/13/06	1A 1B (2A) 2B 3 4		2.0
3/20/06	1A 1B (2A) 2B 3 4		2.0
3/27/06	1A 1B (2A) 2B 3 4		2.0
4/7/06	1A 1B (2A) 2B 3 4		2.0
4/10/06	1A 1B (2A) 2B 3 4		2.0
4/17/06	1A 1B (2A) 2B 3 4		~~2.0~~ DUP.
4/26/06	1A 1B (2A) 2B 3 4		~~2.0~~ DUP.
/ /	1A 1B 2A 2B 3 4		~~2.0~~ DUP.
/ /	1A 1B 2A 2B 3 4		~~15.00~~ 13.00

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature R. Heidt — Date 5-3-06

If you have any questions, please contact _____, at _____

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BY: _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: LRCCD Fiscal Year: 05-06

Pat Maga — Employee Name

Dean AR FA FAPS — Exact Position Title

FA SCC — Department/Location

916 558-2043 — Telephone #

12mo/11mo/10mo/hrly (Interim) — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
2/1/06	1A 1B 2A (2B) 3 4	to 2/16/06 Review Process 06-07	5.0
3/14/06	1A 1B 2A (2B) 3 4	Review Process	2.0
4/10/06	1A 1B 2A (2B) 3 4	" "	1.0 -Dup
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

8

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Pat M-Maga Date 5-5-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios CCD

JAN PAULSON — DIRECTOR III
Employee Name — Exact Position Title

DISTRICT - IT — 568-3143 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	___	___	60	6	32	14 ✓
B. Enrollment Waiver Process:	___	___	___	___	24	___	___	60 (24 + 9 = 33)
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	~~34~~ 33	72	28	30 ✓
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	120	46	___
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jan Paulson Date 5/4/06

If you have any questions, please contact _____, at _____

Please return this information BY _____; TO _____

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BY: _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College

Carol Thomas — Financial Aid Supervisor
Employee Name — Exact Position Title

Financial Aid Folsom Lake College — 916 608-6720 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								4.0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								76.0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								5.0
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carol Thomas — Date 5/5/06

If you have any questions, please contact _____, at _____

RETURN THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Los Rios Community College Fiscal Year: 2006

Carol Thomas
Employee Name

Financial Aid Supervisor
Exact Position Title

Financial Aid Folsom/Lake 916 608-6720 (12mo/11mo/10mo/hrly)
Department/Location College Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours	
2/1/2006	1A 1B 2A 2B 3 4	Online BOG Application Meeting	1 1/2	
2/16/2006	1A 1B 2A 2B 3 4	Online BOG Application Meeting	2	
3/2/2006	1A 1B 2A 2B 3 4	Wrap-up Online BOG & Automation Online BOG meetings	2 1/2	
3/17/2006	1A 1B 2A 2B 3 4	Automated BOG	2	
3/19/2006	1A 1B 2A 2B 3 4	BOG Waiver Automation Meeting	2	
3/20/2006	1A 1B 2A 2B 3 4	BOG Waiver Automation Meeting	2	
3/27/2006	1A 1B 2A 2B 3 4	BOG Waiver Automation Meeting	2	
4/7/2006	1A 1B 2A 2B 3 4	Automated BOG Testing	2	
4/10/2006	1A 1B 2A 2B 3 4	BOG Waiver Automation	~~2~~	DUP
4/17/2006	1A 1B 2A 2B 3 4	BOG Waiver Automation	~~2~~	DUP
4/26/2006	1A 1B 2A 2B 3 4	Bog Mandate Meeting + Automated BOG Waiver	~~2~~	DUP
/ /	1A 1B 2A 2B 3 4			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/5/06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: LOS RIOS

GREGORY B. WILES — Employee Name

PROGRAMMER — Exact Position Title

D.O. I.T. — College/Department/Location

916-568-3053 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

591 887 ____ ____ 178 66 8 48 ✓

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 591 887 ____ ____ 178 66 8 48

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gregory B. Wiles Date 5-2-2006

If you have any questions, please contact ____, at ____

PLEASE SUBMIT THIS INFORMATION BY ____; TO ____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Los Rios Fiscal Year: 01-06 (See below)

CHRISTINE WURZER Asst Supervisor
Employee Name Exact Position Title

Asst-FLC 6500 (12mo/11mo/10mo/hrly)
Department/Location Telephone # Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
01/-02	1A 1B (2A) 2B 3 4	Training staff on use of PS financials & CORE	2
02/-03	1A 1B (2A) 2B 3 4	"	10
03/-04	1A 1B (2A) 2B 3 4	"	4
04/-05	1A 1B (2A) 2B 3 4	"	4
05/-06	1A 1B (2A) 2B 3 4	"	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-25-06

If you have any questions, please contact Joany Harman, at FLC Bus Srvc.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06; TO Raymond Andres-LRCCD

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BY:

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ATTACHED
- EMAIL - SIGN UP MEETING
- AGENDA
- MINUTES
- DOCUMENTS PASSED OUT DURING MEETING

EFCW 2.4

Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD

Fiscal Year: 2005 - 2006

EFCW - BOG WAIVER AUTOMATION MEETING

Activity

IT CONFERENCE ROOM

Location

3/29/2006

Date

9AM — 11:30 AM

Time

2.5H

MEETING RAN OVER TIME

PLEASE PRINT NAME	POSITION/TITLE	LOCATION	PREP TIME
RAYMOND ANDRES	GENERAL ACCTG SUPVR	DO	.50
RUTH HERTON		DO	3.00
RICHARD ANDREWS	RECORDS/ADMISSIONS SUPERVISOR	CRC	—
Pat Maas	Interim Dean AR/FA	SCC	1.00
DOD Inumerable	Fin Aid Officer	SCC	2.00
Gc Lor	Interim FA Supv.	SCC	2:00
Jerry Gomollon	IT tech II	DO	1:00
Marina Brutski	Fin. Aid Clerk II	ARC	1:00
Bob Heath	B.O. Supv.	SCC	5 min.
KEVIN FLASH	D.O. IT.	DO.	2:00
Lana Luong	FA Officer	CRC	—
RUSS MEYER	PROGRAMMER	DO (CAME TO MEETING LATE)	—

(CONT.)

Brief description of the purpose of the meeting:

REVIEW ON-LINE BOG PROCESS AND TEST APPLICATION.

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BY:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 3/29/2006

RAYMOND ANDRES
Employee Name: (print)

GENERAL ACCTG SUPERVISOR
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD

Fiscal Year: 2005-2006

EFCW - BOG WAIVER AUTOMATION MEETING
Activity

IT CONF ROOM
Location

3/29/2006
Date

9AM - 11:30 AM
Time

NAME	POSITION/TITLE	LOCATION	PREP TIME
JAN PAULSON	DIRECTOR, IT APPLICATION SERVICES	DO - IT (CAME TO MEETING LATE)	—

Brief description of the purpose of the meeting:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 3/29/2006

RAYMOND ANDRES
Employee Name: (print)

General Acctg Supervisor
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD Fiscal Year: 2005 - 2006

Activity: EFCW - BOG WAIVER AUTOMATION MEETING Location: IT CONF. ROOM

Date: 4/10/2006 Time: 1PM - 2:30PM

NAME	POSITION/TITLE	LOCATION	PREP TIME
[illegible]	[illegible]	[illegible]	[illegible]
KRIS BRIGGS	PROGRAM ANALYST	IT	—
SUSIE WILLIAMS	COMMUNICATIONS	PO (CHECK CASHED) — (LEFT EARLY)	
ROB HEUER	BUS SERVICES SUPV	SCC	30 MIN.

Brief description of the purpose of the meeting:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date: 4/10/2006

Employee Name: (print) RAYMOND ANDRES Position or Title: GENERAL ACCTG SUPERVISOR

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD Fiscal Year: 2005 - 2006

EFCW - BOG WAIVER AUTOMATION MEETING — Activity

IT CONFERENCE ROOM — Location

4/10/2006 — Date

1PM - 2:30 PM — Time

	PLEASE PRINT NAME	POSITION/TITLE	LOCATION	PREP TIME
X	RAYMOND ANDRES	General Acctg Supvr	DO	.50
X	Kim Sayles	Interim Acctg Dir	DO	—
X	Roy Barkhor	Financial Aid Sup	ARC	—
X	RICHARD ANDREWS	R/A SUPERVISOR	CRC	—
X	DEO INAMASU	FA Officer	SCC	—
X	Pat Maga	Interim Dean AR/FA	SCC	—
X	Lana Luong	FA officer	ARC	—
X	Yolanda Lucero Ruiz	FA Officer	CRC	—
X	ELENA SKUBENICH	FA CLERK	CRC	—
X	Alice Kwong	FA Super	CRC	—
X	GUSSMEYER	PROGRAMMER	DO	—
X	KEVIN KUSH	IT SPECIALIST	DO	—
	Brief description of the purpose of the meeting:			
	RUTH HEATON	SF ANALYST	DO	—
	Carol Thomas	FA Sup	FLC	—

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BY:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/10/2006

RAYMOND ANDRES — Employee Name: (print)

General Acctg Supervisor — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 2.4

Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LACCD Fiscal Year: 2005 - 2006

Activity: EFCW - BOG WAIVER AUTOMATION MEETING Location: IT CONFERENCE ROOM

Date: 4/17/2006 Time: 1PM - 2:30PM

	PLEASE PRINT NAME	POSITION/TITLE	LOCATION	PREP TIME
X	RAYMOND ANDRES	General Accg Supvr	DO	.50
X	ELENA SKUBENICH	FA CLERK II	CRC	-
X	Lana Luong	FA Officer	ARC	-
X	Alice Kwan	FA Supervisor	CRC	-
X	RUSS MEYER	PROGRAMMER	DO	-
X	Jon Paulsen	Director	DO	-
X	Kris Beckius	IT Analyst	DO	-
X	JESUS FLORES	IT SUPERVISOR	DO	-
X	RICHARD ANDREWS	FA SUPERVISOR	CRC	-
X	Bechtlaw, Raj	ARC Fin-Aid	ARC	-
X	Bracken, Marian	ARC Fin Aid	ARC	-
X	Carol Thomas	FLC FA Supervisor	FLC	-
X	Juana Urena-Ruiz	CRC FA Officer	CRC	-
X	Kim Sayles	DO Interim Accg Dir		-

Brief description of the purpose of the meeting: REVIEW OF BOG MAINTENANCE SCREENS ON PS AND MAINTENANCE TABLES.

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for various mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/17/2006

RAYMOND ANDRES
Employee Name: (print)

General Accg Supervisor
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD Fiscal Year: 2005-2006

EFCW - BOG WAIVER AUTOMATION Meeting IT CONFERENCE ROOM
Activity Location

4/26/2006 10:30AM - 12:00 NOON
Date Time

	NAME	POSITION/TITLE	LOCATION	PREP TIME
X	RAYMOND ANDRES	GENERAL ACCTG SUPVR	DO	.25
X	Alice Kwong	Fin Aid Supervisor	CRC	-
X	Rukiya Bates	Fin Aid Officer	FLC	-
X	RUSS MEYER	PROGRAMMER	DO	-
X	Pat Maga	Dean AR/FA	SCC	-
X	Jon Paulson	Director, IT	DO	-
X	Kristine Backes	IT Analyst, IT	DO	-
X	Russ Heitz	IT Analyst	DO	-
X	Marina Brattesi	Fin Aid Clerk	FRC	.50 SIB .50
X	Kim Sayles	Interim Acctg Dir	DO	-
X	GeLor	" FA Supervisor	ACC	-
X	Rob Heidt	Bus. Svcs Supv	SCC	-

Brief description of the purpose of the meeting:

REVIEW THE IMPLEMENTATION OF THE AUTOMATED BOG WAIVER.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee Signature: _____ Date 4/26/06

RAYMOND ANDRES
Employee Name: (print)

GENERAL ACCOUNTING SUPERVISOR
Position or Title

If you have any questions, please contact _____, at _____.

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Sign-In Sheet for Mandate Activities

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: LRCCD

Fiscal Year: 2005 - 2006

Activity: EFCW - BOG Waiver Automation Meeting

Location: IT Conference Room

Date: 4/26/2006

Time: 10:30 AM - 12:00 NOON

NAME	POSITION/TITLE	LOCATION	PREP TIME
Jerome Gonalka	IT Analyst	DO	15 min
[illegible]	ARC Financial Aid	ARC/DO	—
[illegible]	IT Support	DO	—

Brief description of the purpose of the meeting:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 4/26/06

Raymond Andrzes
Employee Name: (print)

General Accounting Supervisor
Position or Title

If you have any questions, please contact ______ at ______

PLEASE SUBMIT THIS INFORMATION BY ______ TO ______

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Suzanne Anderson 3-21-07

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5	3. Answering questions and/or referring student top appropriate person for an answer.
4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
~~5~~	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Kristy Bank — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
15	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
1-2	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student top appropriate person for an answer.
15	4. Updating student file for the enrollment fee information, and providing a copy to the student.
0	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
0	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Jean Cottrell — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
1 min.	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
2 min.	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
3 min.	3. Answering questions and/or referring student top appropriate person for an answer.
5 min.	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5 min.	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
4 min.	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Patricia Eaton — 3-23-07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
7	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
2-10	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
15	3. Answering questions and/or referring student to appropriate person for an answer.
1-5	4. Updating student file for the enrollment fee information, and providing a copy to the student.
30	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
4	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Nancy Hafer — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
4	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
4	3. Answering questions and/or referring student top appropriate person for an answer.
3	4. Updating student file for the enrollment fee information, and providing a copy to the student.
	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
5	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

JOHN HALLBERG — MARCH 21 2007

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes

2-5	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
4-5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student to appropriate person for an answer.
2-4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
N/A	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Sandra Jackson — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
5 mins or less	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5 mins or less	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5 mins or less	3. Answering questions and/or referring student top appropriate person for an answer.
5 mins or less	4. Updating student file for the enrollment fee information, and providing a copy to the student.
Ø	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3 mins or less	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Tatyana Kalachik — 8/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student top appropriate person for an answer.
1.5	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2.5	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Nadia Kuodyumova — 3/23/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
5 min	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5 min	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
8 min	3. Answering questions and/or referring student top appropriate person for an answer.
4 min	4. Updating student file for the enrollment fee information, and providing a copy to the student.
0	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2 min	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Hasmik Marjanyan — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2-3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3-5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2-5	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3-5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3-5	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Trang Tran — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3-5 Minutes	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc. ?
3	6. Refunds for students who later become eligible for waivers.

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implement each of the reimbursable activities for the mandated program.

Los Rios — District
ARC Business Services — Department/Location
Kim Wong — Employee Name
Business Services Supervisor — Exact Position Title
484-8589 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: **05-06**

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of [illegible] mandates in order for the district to receive reimbursement. Your signature on this form certifies that

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you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/2/07

If you have any questions, please contact Kate Vang, at 484-8589

PLEASE SUBMIT THIS INFORMATION BY Setember 1, 2006 ; TO Raymond Andres, General Accounting, DO .

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Voda, Lyubov — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5-7	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
3	3. Answering questions and/or referring student top appropriate person for an answer.
2-4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3-5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Mariya Yarmolyuk — 03.22.07.

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
7	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student to appropriate person for an answer.
1	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Business Services/Business Office
Department/Location

Jarrod Carter
Employee Name

Cashier
Exact Position Title

(510) 320-3481
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jarrod Carter Date 9/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District
Business Services — Department/Location
Chon Chasengnou — Employee Name
Account Clerk III — Exact Position Title
(916) 691-7335 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District
Cosumnes River College Business Services Offi — Department/Location
Katie Deheon — Employee Name
Business Services Supervisor — Exact Position Title
(916) 691-7193 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4.8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3.6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katie Deheon — Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
NOV 1 2007
BY: _____

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CRC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS District
District

Business Service Dept Loc. CC
Department/Location

Brittney Flores
Employee Name

Student Assistant
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brittney Flores Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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CRC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College Business Services Office
District / Department/Location

Krista Mason
Employee Name

Student Help
Exact Position Title

691-7509
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED
NOV 1 2007

Employee Signature Krista Mason PLEASE USE BLUE INK

Date 4/27/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios District
District

College Center/Business Office
Department/Location

Yelena Popov CRC
Employee Name

Clerk I
Exact Position Title

996-4689
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yelena Popov Date 04/04/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College
District

CRC Business Services Office
Department/Location

Leigh Ann Rogers
Employee Name

Account Clerk II
Exact Position Title

1691-7509
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 7 2006
BY:

Employee Signature Leigh Ann Rogers Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District
Business Services Office - CRC — Department/Location
Van Thoai Tran — Employee Name
Account Clerk II — Exact Position Title
(916) 691-7294 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Business Services CRC
Department/Location

Ronald Vari
Employee Name

Account Clerk III
Exact Position Title

691-7240
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Folsom Lake College Business Services
Department/Location

Laurel Blair
Employee Name

Account Clerk III
Exact Position Title

916-608-6549
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99/99-00/00-01/01-02/02-03/03-04/04-05/05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	25	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10		X			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	X	X			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

RECEIVED
NOV - 1 2007
BY:

Employee Signature Laurel Blair Date 4/25/06

If you have any questions, please contact Jeanie Hanna at FC Bus Svcs

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andrews

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Folsom Lake College
Department/Location

Joany Harman
Employee Name

Business Services Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~N/A~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007
BY:

Employee Signature Joany Harman Date 2/28/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Temp. Account Clerk I
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 20% of Trans.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ~~you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or~~ information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007

Employee Signature K. Heidt Date 5-3-06

~~If you have any questions~~, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk II
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 40% of Trans

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature F. Hall Date 5-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk III
Exact Position Title

(916)558-2321
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 40% of Trans.

~~Reimbursable Activities:~~ ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	~~Workload Multiplier From 1.7-1~~(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or belief. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007
BY

Employee Signature K Strickt Date 5-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

ARC - Financial Aid Office
Department/Location

CRYSTAL AVILA
Employee Name

Clerk II
Exact Position Title

(916) 484-8457
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal Avila Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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ARC — Financial Aid Office

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios C C D.
District

ARC - Financial Aid
Department/Location

Roy Beckhorn
Employee Name

ARC Financial Aid Supervisor
Exact Position Title

916-484-8401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 ALL YEARS

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.36				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.86				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.72				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.65				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.43				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Roy Beck Date

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BY:

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin. Aid office, ARC
Department/Location

Bratski, Marina
Employee Name

Fin-Aid Clerk II
Exact Position Title

916-484-8623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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BY:

Employee Signature _____ Date 4-25-6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios C.C.D.
District

FINANCIAL AID
Department/Location

Michael Carlson
Employee Name

TEMPORARY CLASSIFIED FINANCIAL AID OFFICER
Exact Position Title

484-8881
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 mins				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 mins				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin Aid / ARC
Department/Location

Alicia Doshi
Employee Name

Financial Aid Officer
Exact Position Title

916-484-8927
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alicia Doshi Date 4/25/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

ARC - Financial Aid
Department/Location

Kim Gardner
Employee Name

Financial Aid Officer
Exact Position Title

8003
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the *appropriate workload multiplier* from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

BY: Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

ARC - Financial Aid
Department/Location

Randi Kwaka-Coleman
Employee Name

Financial Aid Clerk II
Exact Position Title

8081
Telephone #

(12mo) 1mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of costs for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED
NOV 1 2007
BY:

PLEASE USE BLUE INK

Employee Signature Randi Kwaka-Coleman Date 4/25/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS C.C.
District

ARC
Department/Location

JUDY O VAYLE
Employee Name

FINANCIAL AID CLERK II
Exact Position Title

8895
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy A. Vayle Date 4-25-2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Financial Aid / Student Services
Department/Location

RuKiya Bates
Employee Name

Financial Aid Officer
Exact Position Title

608-6647
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have recorded actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios District
District

Financial Aid ~~Dept~~ Office
Department/Location

Mee Chasengnou
Employee Name

Financial Aid Clerk II.
Exact Position Title

(916) 691-7209
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mee Chasengnou Date 5/10/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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I FORM FOR EACH FUNCTION AND YEAR IF ACTIVITIES CHANGED

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LACCD
District

FAO-CRC
Department/Location

[redacted]
Employee Name

Clerk II
Exact Position Title

9/10 891-7256 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 10 7.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 10 7.5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 10 7.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 10 7.5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 10 7.5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED NOV 1 2007 BY:

Employee Signature [redacted] PLEASE USE BLUE INK

Date 5/12/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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FILL OUT FOR EACH FUNCTION AND YOUR OF FUNCTION CLAIMED

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

CRC FAO
Department/Location

Daniel Deters
Employee Name

FA Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Daniel Deters

Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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I Fund the Benefit Function for Year of Audit Period

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm College — District

Financial Aid — Department/Location

Kevin Kimura — Employee Name

FA Clk — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

RECEIVED NOV 1 2007 BY:

Employee Signature Kevin Kimura — PLEASE USE BLUE INK — Date 5/12/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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FORM FOR EACH FUNCTION PER YEAR IF FUNCTION CHANGED. (LINE DANCE)

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Fin Aid / CRC
Department/Location

Alice Kwong
Employee Name

FA Supervisor
Exact Position Title

916 691-7270
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007
BY:

Employee Signature Alice Kwong Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Form for each function per year if different claimed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist.
District

Financial Aid
Department/Location

Yolanda Lucero-Ruiz
Employee Name

Financial Aid Officer
Exact Position Title

916/691-7450
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yolanda Lucero-Ruiz Date 5/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1 Form for each function and total of functions claimed

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FINANCIAL AID / STUDENT SERVICES
Department/Location

ALI PADASH
Employee Name

FINANCIAL AID OFFICER
Exact Position Title

(916)608-6648
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ali Padash Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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MAY 12 2006
BY:

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College District — District
Fin. Aid — Department/Location
Maria de Jesus Perez — Employee Name
Fin. Aid Clerk II — Exact Position Title
691-7558 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria de Jesus Perez — Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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MAY 1 2007
BY:

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Form for each function per year of function claimed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO
Department/Location

ELENA SKUBENICH
Employee Name

FA CLK II
Exact Position Title

691-7421
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3.25 2-5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5 2-3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3.75 3-5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7.5 5-10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7.5 5-10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1 Form for Each Function and Year of Function Claimed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

CRC Fin Aid
Department/Location

MARYLouise Walker
Employee Name

Fin Aid Clk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 4-6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6.5 5-8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7.5 5-10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6.5 5-8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10+				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10.5 6-15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MLWalker Date 5/12/06

If you have any questions, please contact _____, at _____

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JAN 1 2007
BY:

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1 Form for each function per year if function changed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Svcs/FLC
Department/Location

Laurel Baker
Employee Name

Account Clerk III
Exact Position Title

916-608-6471
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
JAN 1 2007
BY:

Employee Signature [signature] Date 5/3/06

If you have any questions, please contact Jeanne Herman, at FLC, Bus. Svcs.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andrews

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Business Services / FLC
Department/Location

Brenda Harney
Employee Name

Account Clerk III
Exact Position Title

916 608-6035
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
JAN 17 2007
BY:

Employee Signature Brenda J Harney Date 05/03/2006

If you have any questions, please contact Joany J Harman, at FLC Bus. Srvc.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andres

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implement each of the reimbursable activities for the mandated program.

LRCCD — District
SLC Business Office — Department/Location
Mei Chu — Employee Name
Temporary Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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NOV 1 2007

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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implement each of the reimbursable activities for the mandated program.

LRCCD — District
SCC Business Office — Department/Location
Linda Colas — Employee Name
Account Clerk III — Exact Position Title
558-2321 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Y:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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Linda C. Colas 04-24-07

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

FINANCIAL AID SCC
Department/Location

LORIANN DUDRIGUEZ
Employee Name

FINANCIAL AID CLERK II + student help
Exact Position Title

9165582131
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LoriAnn Dudriguez Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid office
Department/Location

Melba Duenes
Employee Name

Asst. Financial Aid
Exact Position Title

558-2672
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melba L Duenes Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
NOV 2007

Employee AVERAGE Time Record for Mandated Costs
3098/99 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the average amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Fin Aid Office - SCC
Department/Location

Debra Iwamasa
Employee Name

Fin Aid Officer
Exact Position Title

(916) 558-2353
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/24/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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implement each of the reimbursable activities for the mandated program.

LRCCD — District

SCC Business Office — Department/Location

Dana Grano — Employee Name

Account Clerk II — Exact Position Title

558-2321 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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Dana Grano 4-24-07

implement each of the reimbursable activities for the mandated program.

LRCCD — District
SCC Business Office — Department/Location
Sherri Lee — Employee Name
Temporary Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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implement each of the reimbursable activities for the mandated program.

LACCD — District

SCC Business Office — Department/Location

Peggi Lopez — Employee Name

Account Clerk III — Exact Position Title

558-2321 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

Peggi G. Lopez 4-24-07

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO-SCC
Department/Location

Ge Lor
Employee Name

FA officer
Exact Position Title

X2137
Telephone #

12mo/11mo/10mo/hrly (12mo circled)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee Signature _____ Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Eduardo C Osorio
Employee Name

Temp/Permanent FA Clerk II
Exact Position Title

(916)538-2265
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Eduardo C Osorio Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO - SCC
Department/Location

Cathy Phillip
Employee Name

FA Officer
Exact Position Title

X2044
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee Signature Cathy Phillip GN Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College D.
District

Financial Aid
Department/Location

Vivian Quiros
Employee Name

Asst. Financial Aid Officer
Exact Position Title

(916) 558-2046
Telephone #

(12mo) 11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee Signature Vivian M. Quiros Date 4/21/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Las Rios Community College Dist. — District
Financial Aid /Sce — Department/Location
Kaila Redmond — Employee Name
Financial Aid Clerk II — Exact Position Title
(916) 558-2028 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the *appropriate workload multiplier from Form 17-1*

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information and belief. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Y:

Employee Signature [signature] Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Financial Aid / SCC
Department/Location

Yelena Rud
Employee Name

Financial Aid Clerk II
Exact Position Title

650-2731
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee Signature Yelena Rud Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Com Coll Dist.
District

Financial Aid
Department/Location

Laura Reyes
Employee Name

Financial Aid Clerk II (Temp)
Exact Position Title

(916)558-2352
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laura Reyes Date 4.21.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.R.C.C.D.
District

Financial Aid / S.C.C.
Department/Location

Ruben Ruiz
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2601
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	50				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruben R. Date 4-21-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

implement each of the reimbursable activities for the mandated program.

LRCCD — District
SCC Business Office — Department/Location
Matt Smyth — Employee Name
Temporary Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hriv (circle) — Work year length
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Matt Smyth 4-25-07

implement each of the reimbursable activities for the mandated program.

LACCD — District
SLC Business Office — Department/Location
Shakeya Smith — Employee Name
Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

Shakeya Smith 4.28.07

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LACCD
District

Financial Aid Office / SCC
Department/Location

Jeannette Solorzo
Employee Name

Financial Aid Officer
Exact Position Title

558-2045
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature Jeannette Solorzo Date 4/23/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFOW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Minh Tran
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2763
Telephone #

(2mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Minh Tran Date 4.21.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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DISTRICT WIDE
Enrollment Statistics (EFCW 1.8-1)

Statistical Data

	05-06	
1. Number of students enrolled each fiscal year. (Not FTE's)		CCCCO Student Enrollment
Summer	28,369	
Fall	71,206	
Winter/ Intersession		
Spring	71,843	
Annual data available only	0	
Total	171,418	
2. Number of students who paid enrollment fees:		
Summer	28,369	
Fall	71,206	
Winter/ Intersession		
Spring	71,843	
Annual data available only	(42,639)	
Total	128,779	
3 Number of students exempted from paying enrollment fees (BOGG, etc):		CCCCO Exemptions
Summer	0	
Fall	0	
Winter/ Intersession		
Spring	0	
Annual data available only	42,639	
Total	42,639	
	1056	
	1059	
	1063	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Name: _____ Date: 10/29/2007

DISTRICT WIDE

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-2)

	05-06	
1. Number of enrollment fee accounts receivable requiring collection:		GA_MC_EFCW_AR_REQ_COLL
Summer	607	
Fall	2,326	
Winter/Intersession		
Spring	5,882	
Annual Data Available Only		
Total	8,815	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility		GA_MC_EFCW_REFUND_DUETO_WAIVER
Summer	990	
Fall	2,645	
Winter/Intersession		
Spring	995	
Annual Data Available Only		
Total	4,630	
	1056	
	1059	
	1063	
Per EFCW 1.8-1 (1) Total	171,418	
	5.14%	% AR requiring collection vs. total enrollment

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature: _____ Date: 10/29/2007

PREPARED BY RA
G:\Financial Accounting\MANDATED COSTS\Enrollment Fee and Coll Waiver\2006\EFCW 18-1 thru 18-4.xls
10/29/2007
1 1

DISTRIC. WIDE

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-3)

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07	
1. Number of enrollment fee waivers requested (BOGG etc.)										
Summer										
Fall										
Winter/Intersession										
Spring										
Annual data available only	24,889	26,504	28,343	31,698	32,320	37,563	43,556	47,864	48,451	GA_MC_EFCW_BOG_MAI
Total	24,889	26,504	28,343	31,698	32,320	37,563	43,556	47,864	48,451	
2. Number of enrollment fee waivers approved (BOGG, etc.)										
Summer										
Fall										
Winter/Intersession										
Spring										
Annual data available only	21,813	22,953	24,721	27,394	27,607	32,245	37,572	42,639	47,193	
Total	21,813	22,953	24,721	27,394	27,607	32,245	37,572	42,639	47,193	
	87.64%	86.60%	87.22%	86.42%	85.42%	85.84%	86.26%	89.08%	97.40%	

SOURCE::

Line 2:: from for EFSW 1.8-1 Line 3

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature:_____ Date:_____

DISTRI(VIDE

Statistical Data($)

Enrollment Fee Revenues (EFCW1.8-4)

	05-06
Enrollment Revenue on "Revenue By Guideline" report. GENFD 11 8874 REV.XXX 00000 R0000 0A31 Accounts Receivable BOG Waivers	$30,934,634.00
1. Enrollment Fees Collected	15,655,947.00
2. Enrollment Fees Refunded	19,404,310.00
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	1,013,554.00
4A. Total Enrollment Fees Waived (BOGG, etc.)	18,390,756.00
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	15,655,947.00
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	313,119.00
5 Number of credit units for which enrollment fees were waived.	
Summer	
Fall	
Winter/Intersession	
Spring	
TOTAL Credits Waived	602,152
TOTAL x $0.91 per credit	$547,958
	1056-26
	1059-26
	1063-26
BOG IN SEPARATE LINE	Y
CASH OR ACCRUAL	A
REFUNDS INCLUDED	N

LR_DW_PY_Public

CCCCO - Students Exempt
GA_MC_EFCW_SF_CASH_ITEM_TYPES
FROM 1.8-2 QUERY & PIVOT TABLES.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you Acertify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information @ This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date: 10/29/2007

COMMUNITY COLLEGE DISTRICT NAME: Los Rios Community College District

Name	Title	Fiscal Years: 05-06	06-07
TURNER, MARY	DEAN, ALLIED HEALTH	$ 81.79	
TYLER, ARTHUR	COLLEGE PRESIDENT	$ 104.56	
VANEGAS, CLEMENTINA	CUSTODIAN	$ 33.25	
WALKER, PAMELA	ASSOCIATE VP, INSTRUCTION	$ 83.12	
WATHEN, CORY	DIRECTOR, ADMINISTRATIVE SERVICES	$ 79.37	
WEBB, DONNETTA	DEAN, TECHNOLOGY	$ 66.56	
WEGLIN, JANET	OPERATIONS SUPERVISOR	$ 44.68	
WERNER, BRUCE			
WILES, GREGORY B	PROGRAMMER	$ 56.60	$ 56.60
WILLIAMS, SUSIE	ASSOCIATE VP, COMMUNICATIONS	$ 104.43	$ 100.40
WINKLEBACK, LOUISE	CONTRACT ED PROGRAM DEVELOPER	$ 73.58	
WISHNICK, KATHLEEN	DIRECTOR	$ 87.09	
WOFFORD, ED	HEAD CUSTODIAN	$ 33.66	
WURZER, CHRISTINE	ADMISSIIONS & RECORDS	$ 53.48	
YAMAMURA, WHITNEY	DEAN, BEHAVIORAL/SOCIAL SCIENCE	$ 79.31	

LOS RIOS COMMUNITY COLLEGE DISTRICT
CLAIMABLE TIME AND
PRODUCTIVE HOURLY RATES

Last Name	First Name	Union	Position Title	Campus	ENTER 05-06 Salary	Total Benefits	Salary & Benefits	Productive Hours	Current Fiscal Year Productive Hourly Rate
Andres	Raymond J	S	General Accounting Supervisor	DO	72,359	22,970	95,329	1,800	52.96
Andrews	Richard	S	Records & Admissions Supervisor	CRC	67,577	22,084	89,661	1,800	49.81
BACKUS	KRISTINE E.	C	IT ANALYST II - BUSINESS	DO	99,458	27,809	127,267	1,800	70.70
Bates	Rukiya	C	FINANCIAL AID OFFICER	FLC	50,437	18,998	69,435	1,800	38.58
Beckhorn	Roy	S	Financial Aid Supervisor	ARC	67,705	22,107	89,812	1,800	49.90
Blair	Laurel	C	ACCOUNT CLERK III	FLC	41,211	17,270	58,481	1,800	32.49
Brutski	Marina	C	FINANCIAL AID CLERK II	ARC	33,056	15,743	48,799	1,800	27.11
FLASH	KEVIN	S	IT APPLICATION SYSTEM	DO	96,103	27,239	123,342	1,800	68.52
GOMOLKA	JEROME M	C	IT ANALYST II	DO	94,108	27,176	121,284	1,800	67.38
HANEY	BRENDA	C	ACCOUNT CLERK III	FLC	42,215	17,458	59,673	1,800	33.15
Harman	Joany	S	Business Services Supervisor	FLC	69,321	22,407	91,728	1,800	50.96
HEATON	RUTH	C	IT ANALYST I - BUSINESS	DO	87,589	25,955	113,544	1,800	63.08
Heidt	Rob	S	Business Services Supervisor	SCC	78,990	24,200	103,190	1,800	57.33
IWAMASA	DEBRA K.	C	FINANCIAL AID OFFICER	DO	53,696	19,608	73,304	1,800	40.72
Kwong	Alice	S	FINANCIAL AID SUPERVISOR	CRC	73,031	23,095	96,126	1,800	53.40
LOR	GE	C	INTERIM FINANCIAL AID SUPERVISOR	SCC	56,734	20,177	76,911	1,800	42.73
Lucero Ruiz	Yolanda	C	FINANCIAL AID OFFICER	CRC	54,724	19,801	74,525	1,800	41.40
Luong	Lana	C	FINANCIAL AID OFFICER	CRC	48,056	18,552	66,608	1,800	37.00
MAGA	PATRICIA	S	FINANCIAL AID SUPERVISOR	SCC	94,303	27,021	121,324	1,800	67.40
Meyer	Russ	C	Programmer	DO	80,875	24,698	105,573	1,800	58.65
PAULSON	JAN	N	DIRECTOR III, SYSTEMS &	DO	114,357	29,046	143,403	1,800	79.67
Sayles	Kim	S	Supervisor, Grants and Contracts	DO	81,017	24,576	105,593	1,800	58.66
Skubenich	Elena	C	Financial Aid Clerk	CRC	35,766	16,251	52,017	1,800	28.90
Thomas	Carol	S	FINANCIAL AID SUPERVISOR	FLC	54,461	19,651	74,112	1,800	41.17
Wiles	Gregory	C	Programmer II	DO	77,765	24,115	101,880	1,800	56.60
Williams	Susie	N	Associate VP, Communications &	DO	154,119	33,852	187,971	1,800	104.43
WURZER	CHRISTINE	S	ADMISSIONS & RECORDS SUPERVISOR	FLC	73,031	23,229	96,260	1,800	53.48
			LEAVE LINE BLANK						
			TOTALS CALCULATED LRCCD						
			WINTON ACT BASE YEAR ADJUSTMENT (CB CLAIM ONLY)						
			Legal payment for collective bargaining						

PREPARED BY RA
Legal payments DA_MC_PHR_GROSS_PAY

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-179893

56-382/412

Date Jan/19/2006

Pay Amount $5,892.00***

Pay ****FIVE THOUSAND EIGHT HUNDRED NINETY-TWO AND XX/100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Jan/19/2006 GENFD GENERAL FUND Warrant No.179893

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001030847	050477	Dec/31/2005	00184506	5,892.00	0.00	5,892.00

File Copy

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Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	Date		Total Amount	Discounts Taken	Total Paid Amount
179893	Jan/19/2006		$5,892.00	$0.00	$5,892.00

www.xap.com

XAP CORPORATION
3534 Hayden Avenue
Culver City, California 90232
p: 310.842.9800 f: 310.842.9898

Invoice No. 050468
Invoice Date 12/16/2005

Bill To	Ship To
Catherine McKenzie c/o Butte College Chancellors Office, CA Community College 1102 Q Street, 3rd Floor Sacramento, CA 95814-6511	Los Rios CCD District Office RECEIVING 1919 Spanos Court Sacramento, CA 95825-3981

P.O. / Contract No. PO # 0001030847

Terms Net 30

Description	Qty	Rate	Amount
Set-up Fee for Los Rios Community College District's participation in California Community Colleges System (CCCApply.org) Electronic Online Admission Application	1	5,050.00	5,050.00
For the Los Rios Community College District's CCCApply Operations, Maintenance and Technical Support for the periods:			
December 2005 1/4/06 BP Ep	1	842.00	842.00

per attached

COURTESY COPY
DO NOT PAY

Total $5,892.00

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-187011

56-382/412

Date Mar/30/2006

Pay Amount $2,526.00***

Pay ****TWO THOUSAND FIVE HUNDRED TWENTY-SIX AND XX/100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Mar/30/2006 GENFD GENERAL FUND Warrant No.187011

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001030847	60075	Mar/10/2006	00189125	2,526.00	0.00	2,526.00

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Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	Date	Total Amount	Discounts Taken	Total Paid Amount
187011	Mar/30/2006	$2,526.00	$0.00	$2,526.00

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-191363

56-382/412

Date Jun/08/2006

Pay Amount $5,896.80***

Pay ****FIVE THOUSAND EIGHT HUNDRED NINETY-SIX AND 80 /100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Jun/08/2006 GENFD GENERAL FUND Warrant No.191363

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001030110	60192	May/16/2006	00194822	3,370.80	0.00	3,370.80
0001030847	60196	May/16/2006	00194755	2,526.00	0.00	2,526.00

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Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	Date	Total Amount	Discounts Taken	Total Paid Amount
191363	Jun/08/2006	$5,896.80	$0.00	$5,896.80

194755

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

INVOICE ID: 60196
DATE: May 16,2006

Bill To:
Los Rios CCD
Attn: Accounts Payable

1030147

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

P.O./Contract #	Description	Amount
	Apr-Jun 2006 Operations For the Los Rios CCD CCCApply Online Application Operations, Maintenance, Client Services and Student Support for the Period: April 2006 - June 2006	2,526.00
	Total	$2,526.00

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Tuesday, October 23, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of October 23, 2007 01:12:20

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	165	52,693
BOGW - Part B based on income standards	6,510	2,396,814
BOGW - Part C based on financial need	1,375	447,036
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	416
Fee Waiver – Dependent of (children) deceased or disabled Veteran	85	40,184

Total Amount = $ 2,937,143

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Friday, December 1, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of December 01, 2006 01:23:23

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	641	207,890
BOGW - Part B based on income standards	10,779	3,810,180
BOGW - Part C based on financial need	5,631	2,408,969
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	2	364
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	676
Fee Waiver – Dependent of (children) deceased or disabled Veteran	53	22,282

Total Amount = $ 6,450,361

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Friday, December 1, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of December 01, 2006 01:21:55

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	489	182,195
BOGW - Part B based on income standards	10,837	3,963,016
BOGW - Part C based on financial need	3,632	1,353,552
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	104
Fee Waiver – Dependent of (children) deceased or disabled Veteran	8	1,014
Fee Waiver – Dependent of (children) of Congressional Medal of Honor recipient (CMH) or CMH recipient	1	0

Total Amount = $ 5,499,881

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Friday, December 1, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of December 01, 2006 01:22:45

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	90	25,754
BOGW - Part B based on income standards	1,808	587,663
BOGW - Part C based on financial need	510	148,242
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	104
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	78
Fee Waiver – Dependent of (children) deceased or disabled Veteran	18	6,721

Total Amount = $ 768,562

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Friday, December 1, 2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of December 01, 2006 01:23:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	165	52,693
BOGW - Part B based on income standards	6,510	2,396,814
BOGW - Part C based on financial need	1,375	447,036
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	416
Fee Waiver – Dependent of (children) deceased or disabled Veteran	85	40,184

Total Amount = $ 2,937,143

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 14, 2007 12:26:09

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	641	207,890
BOGW - Part B based on income standards	10,779	3,810,180
BOGW - Part C based on financial need	5,631	2,408,969
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	2	364
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	676
Fee Waiver – Dependent of (children) deceased or disabled Veteran	53	22,282

Total Amount = $ 6,450,361

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 14, 2007 12:25:49

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	165	52,693
BOGW - Part B based on income standards	6,510	2,396,814
BOGW - Part C based on financial need	1,375	447,036
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	416
Fee Waiver – Dependent of (children) deceased or disabled Veteran	85	40,184

Total Amount = $ 2,937,143

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California Home

Wednesday, November 14, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 14, 2007 12:25:02

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	90	25,754
BOGW - Part B based on income standards	1,808	587,663
BOGW - Part C based on financial need	510	148,242
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	104
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	78
Fee Waiver – Dependent of (children) deceased or disabled Veteran	18	6,721

Total Amount = $ 768,562

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Wednesday, November 14, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 14, 2007 12:23:43

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	489	182,195
BOGW - Part B based on income standards	10,837	3,963,016
BOGW - Part C based on financial need	3,632	1,353,552
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	104
Fee Waiver – Dependent of (children) deceased or disabled Veteran	8	1,014
Fee Waiver – Dependent of (children) of Congressional Medal of Honor recipient (CMH) or CMH recipient	1	0

Total Amount = $ 5,499,881

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LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-178972

56-382/412

Date Jan/06/2006

Pay Amount $2,000.00***

Void

Pay ****TWO THOUSAND AND XX / 100 DOLLAR****

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Jan/06/2006 GENFD GENERAL FUND Warrant No.178972

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001030847	050467	Dec/16/2005	00184060	2,000.00	0.00	2,000.00

File Copy

RECEIVED
NOV 1 2007

Y:----------

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
rant Number	Date	Total Amount	Discounts Taken	Total Paid Amount
178972	Jan/06/2006	$2,000.00	$0.00	$2,000.00

Los Rios Community College District
308/95 Enrollment Fee [illegible]ection and Waivers
Fiscal Years: 1999-[illegible]hrough 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received							$ 18,390,756
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ 367,815
1.8-4 line 4A	Enrollment Fees Waived	$ 3,787,024	$ 4,048,108	$ 4,574,394	$ 4,883,429	$ 10,207,270	$ 13,921,630	$ 15,655,947.00
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433	$ 313,119
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 265,092	For 00-01 through 04-05 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 24.00
Total # of credits	Line 4A divided by unit fee		368,009	415,854	443,948	651,389	596,470	652,331
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788	$ 593,621
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433	$ 313
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 265,092						
1.8-4 5.	Credit Units Waived		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788	$ 593,621
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 340,832**	**$ 415,850**	**$ 469,915**	**$ 501,662**	**$ 796,909**	**$ 821,221**	**$ 906,740**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 03-04 Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 04-05 Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 05-06 summer and fall $26.00, spring $20.00. ($26.00+$26.00+20=Average of $24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Los Rios
COUNTY: Sacramento

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$134,744,233	$123,643,554	$347,634	$123,991,188
EQUALIZATION	1,763,424	1,622,350	141,074	1,763,424
ENROLL FEE ADMIN (2%)	317,575	292,169	25,406	317,575
APPRENTICE ALLOWANCE	1,451,969	1,384,913	67,056	1,451,969
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,254,715	1,154,337	100,378	1,254,715
S.F.A.A.	1,958,820	1,797,817	161,003	1,958,820
E.O.P.S.	3,890,707	3,579,452	311,255	3,890,707
C.A.R.E.	646,116	594,426	51,690	646,116
D.S.P.S.	3,229,870	2,971,482	258,388	3,229,870
STATE HOSPITALS	0	0	0	0
CALWORKS	1,595,549	2,018,238	-422,689	1,595,549
MATRICULATION (CREDIT)	2,919,439	2,685,884	233,555	2,919,439
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	43,905	37,122	6,783	43,905
PART-TIME FAC. INS.	104,543	0	104,543	104,543
PART-TIME FAC. OFF. HRS	229,823	0	229,823	229,823
PART-TIME FAC. ALLO.	1,997,475	1,837,677	159,798	1,997,475
TELECOMMUNICATIONS	224,963	135,045	89,918	224,963
PLANT & INSTRUCTIONAL	1,128,432	1,038,159	90,273	1,128,432
ECON. DEVELOPMENT	1,472,477	1,236,880	1	1,236,881
TANF	507,516	466,914	40,602	507,516
VTEA LEADERSHIP	300,000	126,000	126,000	252,000
VTEA TECH. PREP.	225,750	189,630	0	189,630
VTEA TITLE I C	1,768,121	1,514,153	-28,931	1,485,222
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	-1,850,296	-1,844,102	-6,194	-1,850,296
TOTAL	$159,925,126	$146,482,100	$2,087,366	$148,569,466

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sche 5A
Los Rios Commu College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ -	$ 2,190.86	$ 34.75	$ 9,200.09	$ 13,195.88	$ 7,489.79	$ 22,729.16
2	Staff Training	(04)(B)(1)(b)	$ -	$ 1,580.98	$ 4,085.23	$ 1,879.70	$ 3,029.99	$ 4,782.70	$ 9,694.53
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 50,619.74	$ 31,463.42	$ 109,338.41	$ 119,040.79	$ 155,603.04	$ 91,790.37	$ 144,613.30
4	Waiving student fees	(04)(B)(2)(b)	$ 183,689.15	$ 209,628.24	$ 244,415.28	$ 276,094.86	$ 389,962.54	$ 428,481.41	$ 444,612.29
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ -	$ 563.52	$ 25,672.75	$ 14,820.09	$ 43,584.98	$ 37,877.62	$ 205.85
6	EFCW - Fee Waiver Costs	Total	$ 234,308.89	$ 245,427.02	$ 383,546.42	$ 421,035.53	$ 605,376.43	$ 570,421.89	$ 621,855.13
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 340,832.00	$ 415,850.00	$ 469,915.00	$ 501,662.00	$ 796,909.00	$ 821,221.00	$ 906,740.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (106,523.11)	$ (170,422.98)	$ (86,368.58)	$ (80,626.47)	$ (191,532.57)	$ (250,799.11)	$ (284,884.87)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 234,308.89**	**$ 245,427.02**	**$ 383,546.42**	**$ 421,035.53**	**$ 605,376.43**	**$ 570,421.89**	**$ 621,855.13**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 04:04:44

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	641	207,890
BOGW - Part B based on income standards	10,779	3,810,180
BOGW - Part C based on financial need	5,631	2,408,969
Fee Waiver – Dependent child of Deceased Law Enforcement/Fire Suppression	2	364
Fee Waiver – Dependent surviving spouse or child of deceased or disabled member of CA National Guard	1	676
Fee Waiver – Dependent child of deceased or disabled Veteran	53	22,282

Total Amount = $ 6,450,361

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 04:05:11

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	165	52,693
BOGW - Part B based on income standards	6,510	2,396,814
BOGW - Part C based on financial need	1,375	447,036
Fee Waiver – Dependent child of Deceased Law Enforcement/Fire Suppression	1	416
Fee Waiver – Dependent child of deceased or disabled Veteran	85	40,184

Total Amount = $ 2,937,143

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 04:05:23

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	90	25,754
BOGW - Part B based on income standards	1,808	587,663
BOGW - Part C based on financial need	510	148,242
Fee Waiver – Dependent child of Deceased Law Enforcement/Fire Suppression	1	104
Fee Waiver – Dependent surviving spouse or child of deceased or disabled member of CA National Guard	1	78
Fee Waiver – Dependent child of deceased or disabled Veteran	18	6,721

Total Amount = $ 768,562

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California Home Wednesday, June 20, 2012

Student Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 04:05:42

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	489	182,195
BOGW - Part B based on income standards	10,837	3,963,016
BOGW - Part C based on financial need	3,632	1,353,552
Fee Waiver – Dependent surviving spouse or child of deceased or disabled member of CA National Guard	1	104
Fee Waiver – Dependent child of deceased or disabled Veteran	8	1,014
Fee Waiver – Dependent child of Congressional Medal of Honor recipient (CMH) or CMH recipient	1	0

Total Amount = $ 5,499,881

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 22, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8871

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Los Rios Community College District CC34050

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Los Rios Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2007-2008
308/95	Enrollment Fee Collection and Waivers	2006-2007
308/95	Enrollment Fee Collection and Waivers	2007-2008
764/99	Integrated Waste Management	2007-2008

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

(01) Claimant Identification Number: CC34050

LABEL HERE

(02) Claimant Name: Los Rios Community College District
County of Location: Sacramento
Street Address or P.O. Box: 1919 Spanos Court
City: Sacramento | State: CA | Zip Code: 95825

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,191,376
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,181,376
Due from State	(08)	(17) $ 1,181,376
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	151
(23) EFCW-1, (04)(A)(1)(b)(f)	2,646
(24) EFCW-1, (04)(A)(2)(a)(f)	951,210
(25) EFCW-1, (04)(B)(1)(a)(f)	686
(26) EFCW-1, (04)(B)(1)(b)(f)	7,681
(27) EFCW-1, (04)(B)(2)(a)(f)	14,569
(28) EFCW-1, (04)(B)(2)(b)(f)	443,101
(29) EFCW-1, (04)(B)(2)(c)(f)	1,114
(30) EFCW-1, (06)	38
(31) EFCW-1, (07)	527,099
(32) EFCW-1, (09)	291,730
(33) EFCW-1, (10)	465,151
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 1/19/09

Jon Sharpe — **Type or Print Name**

Deputy Chancellor — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

1) Cl t:
s Rios Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year 2006-2007

3) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ 151.27	$ -	$ -	$ -	$ -	$ 151.27
Staff training (One time per employee)	$ 2,646.26	$ -	$ -	$ -	$ -	$ 2,646.26
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 930,190.37	$ -	$ 21,019.19	$ -	$ -	$ 951,209.56
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Pr g district policies & procedures for § .B.	$ 686.31	$ -	$ -	$ -	$ -	$ 686.31
Staff training (One time per employee)	$ 7,680.79	$ -	$ -	$ -	$ -	$ 7,680.79
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ 14,569.29	$ -	$ -	$ -	$ -	$ 14,569.29
Waiving student fees	$ 441,100.56	$ -	$ 2,000.00	$ -	$ -	$ 443,100.56
Reporting BOG fee waiver data to CCC	$ 1,114.48	$ -	$ -	$ -	$ -	$ 1,114.48
otal Direct Costs	$ 1,398,139.33	$ -	$ 23,019.19	$ -	$ -	$ 1,421,158.52

t Costs		
direct Cost Rate	[From OMB A-21, FAM-29C, or 7%]	37.70%
otal Indirect Costs	[Line (06) x line (05)(a)]	$ 527,098.53
tal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,948,257.05
eduction		
s: Enrollment Fee Revenue offset		$ 291,730.00
s: Enrollment Fee Waiver offsets		$ 465,151.43
al C d Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,191,375.62

06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Padash, Ali	Financial Aid Officer	$46.51	1.0	$ 46.51				
Thomas, Carol	Financial Aid Supervisor	$52.38	2.0	$ 104.76				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 151.27	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Los Rios Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
McDonald, Zhrinna	Financial Aid Supervisor	$41.16	3.0	$ 123.48				
Oakley, Nadine	Financial Aid Clerk II	$7.75	300.0	$ 2,325.00				
Padash, Ali	Financial Aid Officer	$46.51	2.0	$ 93.02				
Thomas, Carol	Financial Aid Supervisor	$52.38	2.0	$ 104.76				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,646.26	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
A&R Office Staff	Various	$25.15	10,283.7	$ 258,635.06				
XAP Corporation	Software M & O Costs - Enrolling Students	$100.00	210.2			$ 21,019.19		
Calculating total enrollment fee to be collected								
A&R Office Staff	Various	$25.15	6,938.0	$ 174,490.70				
Answering student's questions regarding enrollment fee collection								
A&R Office Staff	Various	$25.15	12,098.5	$ 304,277.28				
ıg written and computer records for enrollment fee information								
A&R Office Staff	Various	$25.15	6,042.8	$ 151,976.42				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies								
A&R Office Staff	Various	$25.15	1,363.3	$ 34,287.00				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
A&R Office Staff	Various	$25.15	259.4	$ 6,523.91				
(05) Total ☒ Subtotal ☐	Page 1 of 1			$ 930,190.37	$ -	$ 21,019.19	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Fuller, Dorothy	Financial Aid Clerk	$15.45	32.0	$ 494.40				
Padash, Ali	Financial Aid Officer	$46.51	3.0	$ 139.53				
Thomas, Carol	Financial Aid Supervisor	$52.38	1.0	$ 52.38				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 686.31	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Karagadyan, Margaret	Financial Aid Clerk II	$16.44	200.0	$ 3,288.00				
McDonald, Zhrinna	Financial Aid Supervisor	$41.16	8.0	$ 329.28				
Padash, Ali	Financial Aid Officer	$46.51	1.0	$ 46.51				
Ramirez, Cecilia	Financial Aid Clerk I	$15.45	100.0	$ 1,545.00				
Rockwell, Marcia	Financial Aid Clerk I	$15.45	160.0	$ 2,472.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 7,680.79	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Los Rios Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Fuller, Dorothy	Financial Aid Clerk	$15.45	8.0	$ 123.60				
Karagadyan, Margaret	Financial Aid Clerk II	$16.44	200.0	$ 3,288.00				
McDonald, Zhrinna	Financial Aid Supervisor	$41.16	30.0	$ 1,234.80				
Oakley, Nadine	Financial Aid Clerk II	$7.75	300.0	$ 2,325.00				
Parish, Denise	Financial Aid Clerk I	$16.44	280.0	$ 4,603.20				
Paulson, Jan	Director III, Systems & Programming	$86.93	3.0	$ 260.79				
Rockwell, Marcia	Financial Aid Clerk I	$15.45	160.0	$ 2,472.00				
Thomas, Carol	Financial Aid Supervisor	$52.38	5.0	$ 261.90				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 14,569.29	$ -	$ -	$ -	$ -

w 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Los Rios Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$29.66	3,230.1	$ 95,804.77				
Receiving waiver applications							
Financial Aid Office Staff Various	$29.66	2,826.3	$ 83,828.06				
XAP Corp. Software M & O Costs - Processing Waivers	$100.00	20.0			$ 2,000.00		
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$29.66	3,230.1	$ 95,804.77				
g students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$29.66	109.0	$ 3,232.94				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$29.66	5,348.5	$ 158,636.51				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$29.66	127.9	$ 3,793.51				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 441,100.56	$ -	$ 2,000.00	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Los Rios Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	(d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Paulson, Jan	Director III, Systems & Programming	$86.93	8.0	$ 695.44				
Thomas, Carol	Financial Aid Supervisor	$52.38	8.0	$ 419.04				
(05) Total ☒ Subtotal ☐	Page 1 of 1			$ 1,114.48	$ -	$ -	$ -	$ -

Los Rios Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

006-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	10,283.70	A&R Office Staff	Various	$25.15	$258,635.06	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	6,938.00	A&R Office Staff	Various	$25.15	$174,490.70	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	12,098.50	A&R Office Staff	Various	$25.15	$304,277.28	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	6,042.80	A&R Office Staff	Various	$25.15	$151,976.42	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	1,363.30	A&R Office Staff	Various	$25.15	$34,287.00	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	259.40	A&R Office Staff	Various	$25.15	$6,523.91	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	36,985.70	**A&R Office Staff Total**			$930,190.37		
06-07	3,230.10	Financial Aid Office Staf	Various	$29.66	$95,804.77	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	2,826.30	Financial Aid Office Staf	Various	$29.66	$83,828.06	Receiving waiver applications	Waiving student fees
06-07	3,230.10	Financial Aid Office Staf	Various	$29.66	$95,804.77	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	109.00	Financial Aid Office Staf	Various	$29.66	$3,232.94	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	5,348.50	Financial Aid Office Staf	Various	$29.66	$158,636.51	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	127.90	Financial Aid Office Staf	Various	$29.66	$3,793.51	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	14,871.90	**Financial Aid Office Staff Total**			$441,100.56		
06-07	32.00	Fuller, Dorothy	Financial Aid Clerk	$15.45	$494.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	8.00	Fuller, Dorothy	Financial Aid Clerk	$15.45	$123.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	40.00	**Fuller, Dorothy Total**			$618.00		
06-07	200.00	Karagadyan, Margaret	Financial Aid Clerk II	$16.44	$3,288.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	200.00	Karagadyan, Margaret	Financial Aid Clerk II	$16.44	$3,288.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	400.00	**Karagadyan, Margaret Total**			$6,576.00		
06-07	3.00	McDonald, Zhrinna	Financial Aid Supervisor	$41.16	$123.48	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	8.00	McDonald, Zhrinna	Financial Aid Supervisor	$41.16	$329.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	30.00	McDonald, Zhrinna	Financial Aid Supervisor	$41.16	$1,234.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	41.00	**McDonald, Zhrinna Total**			$1,687.56		
06-07	300.00	Oakley, Nadine	Financial Aid Clerk II	$7.75	$2,325.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	300.00	Oakley, Nadine	Financial Aid Clerk II	$7.75	$2,325.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	600.00	**Oakley, Nadine Total**			$4,650.00		
06-07	1.00	Padash, Ali	Financial Aid Officer	$46.51	$46.51	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	3.00	Padash, Ali	Financial Aid Officer	$46.51	$139.53	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	2.00	Padash, Ali	Financial Aid Officer	$46.51	$93.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	1.00	Padash, Ali	Financial Aid Officer	$46.51	$46.51	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	7.00	**Padash, Ali Total**			$325.57		
06-07	280.00	Parish, Denise	Financial Aid Clerk I	$16.44	$4,603.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
	280.00	**Parish, Denise Total**			$4,603.20		
7/31/2006	2.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$173.86	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
8/29/2006	1.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$86.93	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
10/26/2006	1.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$86.93	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
11/7/2006	1.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$86.93	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
11/30/2006	2.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$173.86	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
1/19/2007	1.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$86.93	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
1/22/2007	2.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$173.86	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
6/15/2007	1.00	Paulson, Jan	Director III, Systems & Programming	$86.93	$86.93	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	11.00	**Paulson, Jan Total**			$956.23		
06-07	100.00	Ramirez, Cecilia	Financial Aid Clerk I	$15.45	$1,545.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	100.00	**Ramirez, Cecilia Total**			$1,545.00		
06-07	160.00	Rockwell, Marcia	Financial Aid Clerk I	$15.45	$2,472.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	160.00	Rockwell, Marcia	Financial Aid Clerk I	$15.45	$2,472.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	320.00	**Rockwell, Marcia Total**			$4,944.00		
06-07	2.00	Thomas, Carol	Financial Aid Supervisor	$52.38	$104.76	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	1.00	Thomas, Carol	Financial Aid Supervisor	$52.38	$52.38	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2006-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	2.00	Thomas, Carol	Financial Aid Supervisor	$52.38	$104.76	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	5.00	Thomas, Carol	Financial Aid Supervisor	$52.38	$261.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
06-07	8.00	Thomas, Carol	Financial Aid Supervisor	$52.38	$419.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	18.00	**Thomas, Carol Total**			$942.84		
06-07	20.00	XAP Corp.	Software M & O Costs - Processing Waivers	$100.00	$2,000.00	Receiving waiver applications	Waiving student fees
	20.00	**XAP Corp. Total**			$2,000.00		
06-07	210.19	XAP Corporation	Software M & O Costs - Enrolling Students	$100.00	$21,019.19	Referencing student accounts and records	Calculating and collecting enrollment fees
	210.19	**XAP Corporation Total**			$21,019.19		
	53,904.79	**Grand Total**			$1,421,158.52		

LOS RIOS COMMUNITY COLLEGE DISTRICT
INDIRECT COST RATE
FAM 29-C
FYE 6/30/07

Activity	EDP	CCF-311	Less: Capital Outlay & Other Outgo	Adjusted	Indirect	Direct
Instructional Activities	599	144,210,824.00	(1,878,765.00)	142,332,059.00		142,332,059.00
Instruct. Admin. & Instruct. Governance	6000	15,919,966.00	(66,104.00)	15,853,862.00		15,853,862.00
Instrucitonal Support Services	6100	9,332,104.00	(477,881.00)	8,854,223.00		8,854,223.00
Admissions and Records	6200	2,994,142.00	(26,258.00)	2,967,884.00		2,967,884.00
Student Counseling and Guidance	6300	15,001,885.00	(231,140.00)	14,770,745.00		14,770,745.00
Other Student Services	6400	17,210,188.00	(475,630.00)	16,734,558.00		16,734,558.00
Operation and Maintenance of Plant	6500	21,818,041.00	(264,153.00)	21,553,888.00	21,553,888.00	
Planning, Policy Making, and Coordination	6600	6,335,846.00	(39,224.00)	6,296,622.00	6,296,622.00	
General Institutional Support Services	6700			-		
Community Relations	6710	1,796,908.00	(12,264.00)	1,784,644.00		1,784,644.00
Fiscal Operations	6720	7,379,914.00	(24,031.00)	7,355,883.00	7,355,883.00	
Human Resources Management	6730	1,930,143.00	(48,520.00)	1,881,623.00	1,881,623.00	
Non-instructional Staff Retirees' Benefits and Retirement Incentives	6740	3,159,794.00	-	3,159,794.00	3,159,794.00	
Staff Development	6750	564,996.00	(12,996.00)	552,000.00	552,000.00	
Staff Diversity	6760	57,079.00	-	57,079.00	57,079.00	
Logistical Services	6770	10,913,284.00	(135,706.00)	10,777,578.00	10,777,578.00	
Management Information Systems	6780	10,246,375.00	(331,373.00)	9,915,002.00	9,915,002.00	
Other General Institutional Support Services	6790	250,917.00	(13,693.00)	237,224.00	237,224.00	
Community Services and Economic Development	6800	3,031,013.00	(17,622.00)	3,013,391.00		3,013,391.00
Anciliary Services	6900	855,114.00	(155,006.00)	700,108.00		700,108.00
Auxilliary Operations	7000	1,316,048.00	(5,600.00)	1,310,448.00		1,310,448.00
Depreciation - Building				-	7,599,303.00	
Depreciation - Equipment				-	9,156,163.00	
		274,324,581.00	(4,215,966.00)	270,108,615.00	78,542,159.00	208,321,922.00
		274,324,581.00	(4,215,966.00)		37.70%	

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.IFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	751,359	37,826	42,772	79,656		911,613
Architecture and Environmental Design	0200	288,130		3,344			291,474
Environmental Sciences and Technologies	0300			156			156
Biological Sciences	0400	5,930,280	285,302	220,852	61,779		6,498,213
Business and Management	0500	6,728,754	201,282	29,873	57,122		7,017,031
Communications	0600	979,638	57,307	73,238	58,380		1,168,563
Information Technology	0700	5,838,043	187,123	172,690	317,824		6,515,680
Education	0800	7,981,529	758,328	1,248,026	17,356		10,005,239
Engineering and Industrial Tech.	0900	6,461,912	1,066,818	2,930,835	440,340		10,899,905
Fine and Applied Arts	1000	9,891,500	382,355	447,700	137,878		10,859,433
Foreign Language	1100	3,423,936	3,556	19,954	278		3,447,724
Health	1200	5,439,489	1,507,404	2,009,856	478,884		9,435,633
Family and Consumer Sciences	1300	4,776,578	281,223	279,141	50,112		5,387,054
Law	1400	309,748					309,748
Humanities (Letters)	1500	18,956,787	273,923	78,304	24,282		19,333,296
Library Science	1600	148,581		6,173	1,521		156,275
Mathematics	1700	12,882,999	148,201	27,367	4,949		13,063,516
Military Studies	1800						
Physical Sciences	1900	7,819,503	194,799	417,114	96,690		8,528,106
ychology	2000	3,585,974		9,331			3,595,305
ublic and Protective Services	2100	2,434,066	476,441	2,986,050	14,792		5,911,349
Social Sciences	2200	9,312,384	310,659	67,466	26,679		9,717,188
Commercial Services	3000	677,717	73,295	85,469			836,481
Interdisciplinary Studies	4900	5,357,022	182,210	117,068	10,243		5,666,543
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	4,655,299					4,655,299
Subtotal - Instructional Activities	**599**	124631,228	6,428,052	11,272,779	1,878,765		144210,824

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Los Rios Community College District **230** District Code No.

FORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		12,942,537	1,168,466	61,747		14,172,750
Course and Curriculum Development	6020		348,974	19,866	4,357		373,197
Academic/Faculty Senate	6030		984,275	17,733			1,002,008
Other Instruct. Admin. & Instruct. Governance	6090		332,627	39,384			372,011
Subtotal - Instructional Administration	**6000**		14,608,413	1,245,449	66,104		15,919,966
Instructional Support Services (6100)							
Learning Center	6110	623,303	1,870,943	96,328	148		2,590,722
Library	6120		4,180,688	198,489	440,166		4,819,343
Media	6130		851,244	118,386	24,439		994,069
Museums and Galleries	6140			88			88
Academic Information Systems and Tech.	6150			1,020	3,531		4,551
Other Instructional Support Services	6190		779,495	134,239	9,597		923,331
Subtotal - Instructional Support Services	**6100**	623,303	7,682,370	548,550	477,881		9,332,104
Admissions and Records	**6200**		2,828,300	139,584	26,258		2,994,142
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		9,119,273	78,304	20,191		9,217,768
Matriculation and Student Assessment	6320		4,253,872	531,537	199,547		4,984,956
Transfer Programs	6330		398,587	113,181	4,088		515,856
Career Guidance	6340		186,554	25,670	7,314		219,538
Other Student Counseling and Guidance	6390		55,969	7,798			63,767
Subtotal - Student Counseling and Guidance	**6300**		14,014,255	756,490	231,140		15,001,885

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Los Rios Community College District | 230 | District Code No.

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		3,514,676	(649,501)	284,549		3,149,724
Extended Opportunity Prgms. & Services (EOPS)	6430		2,503,547	94,970	7,146		2,605,663
Health Services	6440		624,810	22,280			647,090
Student Personnel Administration	6450		1,194,576	56,132	18,434		1,269,142
Financial Aid Administration	6460		3,606,319	278,347	99,567		3,984,233
Job Placement Services	6470		662,106	9,551			671,657
Veterans Services	6480		153,824				153,824
Miscellaneous Student Services	6490		3,876,237	786,684	65,934		4,728,855
Subtotal - Other Student Services	**6400**		16,136,095	598,463	475,630		17,210,188
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		6,372,392	1,385,067	239,821		7,997,280
Custodial Services	6530		4,940,025	644,336	22,715		5,607,076
Grounds Maintenance and Repairs	6550		1,205,982	7,563	1,617		1,215,162
Utilities	6570			6,959,395			6,959,395
Other Operation and Maintenance of Plant	6590			39,128			39,128
Subtotal - Operation and Maintenance of Plant	**6500**		12,518,399	9,035,489	264,153		21,818,041
Planning, Policymaking, and Coordination	**6600**		5,290,585	1,006,037	39,224		6,335,846

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Los Rios Community College District **230** District Code No.

.IFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		1,283,380	501,264	12,264		1,796,908
Fiscal Operations	6720		6,128,221	1,227,662	24,031		7,379,914
Human Resources Management	6730		1,638,633	242,990	48,520		1,930,143
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		3,159,794				3,159,794
Staff Development	6750		187,003	364,997	12,996		564,996
Staff Diversity	6760		41,233	15,846			57,079
Logistical Services	6770		6,623,157	4,154,421	135,706		10,913,284
Management Information Systems	6780		7,181,676	2,733,326	331,373		10,246,375
Other General Institutional Support Services	6790		2,258	234,966	13,693		250,917
Subtotal - General Institutional Support Services	**6700**		26,245,355	9,475,472	578,583		36,299,410
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		641,538	166,482	3,895		811,915
Community Use Facilities	6830		125,877	3,414	375		129,666
Economic Development	6840		1,113,245	294,122	7,186		1,414,553
Other Community Svcs. & Economic Development	6890		272,384	396,329	6,166		674,879
Subtotal - Community Services	**6800**		2,153,044	860,347	17,622		3,031,013

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Los Rios Community College District **230** District Code No.

FORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910			888			888
Child Development Centers	6920		73,716	11,017	391		85,124
Farm Operations	6930						
Food Services	6940			33,053	1,569		34,622
Parking	6950		72,899	(59,493)	153,046		166,452
Student and Co-curricular Activities	6960		110,985	338,735			449,720
Student Housing	6970						
Other Ancillary Services	6990		118,308				118,308
Subtotal - Ancillary Services	**6900**		375,908	324,200	155,006		855,114
Auxiliary Operations (7000)							
Contract Education	7010		797,823	503,548	5,600		1,306,971
Other Auxiliary Operations	7090			9,077			9,077
Subtotal - Auxiliary Operations	**7000**		797,823	512,625	5,600		1,316,048
Physical Property and Related Acquisitions (7100)	**7100**		69,741	14,679			84,420
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			1,135			1,135
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			1,135			1,135
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					17,634,099	17,634,099
Student Aid	7320					2,412,632	2,412,632
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					20,046,731	20,046,731
TOTAL EXPENDITURES and OTHER OUTGO	**391**	125,254,531	109,148,340	35,791,299	4,215,966	20,046,731	294,456,867

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Los Rios Community College District **230** District Code No.

Schedule 1A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedule 2A, Schedule 4
Findings:

EFC 1	
Average time to reference student account	181,477
Total Time (in minutes)	3.4
Per Hour	617022
Hours Worked **(Activity 11)**	60
	10,283.7
EFC 2	
Average time to calculate enrollment fee	134,284
Total Time (in minutes)	3.1
Per Hour	416280
Hours Worked **(Activity 12)**	60
	6,938.0
EFC 1	
Average time spent answering questions	181,477
Total Time (in minutes)	4.0
Per Hour	725908
Hours Worked **(Activity 13)**	60
	12,098.5
EFC 2	
Average time to update student file	134,284
Total Time (in minutes)	2.7
Per Hour	362567
Hours Worked **(Activity 14)**	60
	6,042.8
EFC 4	
Average time spent on receivable/delinquencies	10,906
Total Time (in minutes)	7.5
Per Hour	81795
Hours Worked **(Activity 15)**	60
	1,363.3
EFC 5	
Average time to refund enrollment fee per waivers	4,095
Total Time (in minutes)	3.8
Per Hour	15561
Hours Worked **(Activity 16)**	60
	259.4

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load)

tivity Codes

Schedule 1A
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

1 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.

12- Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.

13 - Answer Questions and/or referring student to the appropriate person for an answer.

14 - Updating Student File for the enrollment fee information, and providing a copy to the student.

15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)

16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 2B, Schedule 4
Findings:

EFW 6	
Average time to answer questions regarding waivers	48,451
Total Time (in minutes)	4.0
Per Hour	193804
Hours Worked **(Activity 21)**	60
	3,230.1
EFW 6	
Average time to receive/start processing waiver applications	48,451
Total Time (in minutes)	3.5
Per Hour	169579
Hours Worked **(Activity 22)**	60
	2,826.3
EFW 6	
Average time to evaluate/verify eligibility standards	48,451
Total Time (in minutes)	4.0
Per Hour	193804
Hours Worked **(Activity 23)**	60
	3,230.1
EFW 8	
Average time to notify student of incomplete application	1,258
Total Time (in minutes)	5.2
Per Hour	6542
Hours Worked **(Activity 24)**	60
	109.0
W 7	
Average time to copy/file approved waiver applications	47,193
Total Time (in minutes)	6.8
Per Hour	320912
Hours Worked **(Activity 25)**	60
	5,348.5
EFW 8	
Average time to review add'l data for appealed waiver denials	1,258
Total Time (in minutes)	6.1
Per Hour	7674
Hours Worked **(Activity 26)**	60
	127.9

Conclusion: Findings will go forward to the EFCW-2.

Workload Multipliers (Default)

EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enroliment fee waivers denied

Activity Codes

21 - Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22 - Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: each application and verification of documents for compliance with eligibility standards.
24 - Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records and providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2A
Los Rios Com ity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 05-06 timestudy.
Findings:

			*Multiplier						
			1	2	1	2	4	5	
			**Activity Codes						PHR
Staff	Title	Location	11	12	13	14	15	16	04-05
Anderson, Susanne	Account Clerk	ARC	3.0	3.0	5.0	4.0	5.0	2.0	
Banh, Kristy	Accountant	ARC	3	1.5	1.5	3			36.22
Cottrell, Jean	Account Clerk	ARC	1	2	6	5	5	4	27.12
Eaton, Patricia	Account Clerk	ARC	7	6	15	3	30	4	
Hafer, Nancy	Account Clerk	ARC	2	4	4	3		5	
Hallberg, John	Admin. Services Analyst	ARC	3.5	4.5	1.5	3			38.84
Jackson, Sandra	Clerk	ARC	5	5	5	5		3	
Kalachik, Tatyana	Account Clerk	ARC	2	3	1.5	1.5		2.5	23.28
Kurdyumoua, Nadya	Clerk	ARC	5	5	8	4		2	
Marjanyan, Hasmik	Account Clerk	ARC	2.5	4	3.5	2	4	4	23.28
Tran, Tang	Account Clerk	ARC	2	4	3	2	3	3	25.11
Vang, Koue	Business Services Supervisor	ARC	3	4	5	3	2	3	
Voda, Lyubov	Clerk	ARC	2	6	3	3	4	3	
Yarmolyuk, Mariya	Clerk	ARC	2	7	2	1	5	2	
Carter, Jarrod	Cashier	CRC	7	3	5	5	8	5	7.11
Chasengrion, Chou	Account Clerk	CRC	3	2	2	3	7	7	27.12
DeLeon, Katie	Business Services Supervisor	CRC	2.9	2.1	2.8	2.1	4.8	3.6	
Jeffries, Brittney	Student Assistant	CRC	2	2	1	1		2	7.11
Mason, Krista	Student Assistant	CRC	1	1	2	2	2	3	7.11
Popov, Yelena	Clerk	CRC	2	2	1	2	3	4	21.21
Rogers, Leigh Ann	Account Clerk	CRC	1	3	5	1		3	25.11
Tran, Van Thoai	Account Clerk	CRC	4	2	3	2		2	25.11
Veri, Ronald	Account Clerk	CRC	3	2	3	1	4	3	27.12
Blair, Laurel	Account Clerk	FLC	2.5	3	1	6	10	5	30.60
Harman, Joany	Business Services Supervisor	FLC	5	1	5		1		50.96
Various	Account Clerk I 2005-06 20%	SCC	6	2	6	2	15	7	23.28
Various	Account Clerk II 2005-06 40%	SCC	6	2	6	2	15	7	25.11
Various	Account Clerk III 2005-06 40%	SCC	6	2	6	2	15	7	27.12
Average			**3.4**	**3.1**	**4.0**	**2.7**	**7.5**	**3.8**	**25.15**

*Used 04-05 PHR's, 06-07 were not submitted by client.

Conclusion: Findings will go forward to the Schedule 1A.

Workload Multipliers (Default)

EFC-1 Total number of students that enroll in the college.
EFC-2 Total number of students that paid enrollment fees
EFC-4 Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration).
EFC-5 Total number of enrollment fee refunds due to change in waiver eligibility (not resulting from a change in class load.

Activity Codes

11 - Reference the student account or record which lists students courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12- Calculating the enrollment fee,collect the payment or receivable, update student account/record, and print out receipt/course list/other other report.
13 - Answer questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers, (not just course changes), explain the process, and update student account/record.

Schedule 2B
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Summary

Purpose: To summarize time spent by district staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 05-06 timestudy.
Findings:

Staff	Title	Location	*Multiplier						PHR
			6			8	7	8	
			**Activity Codes						
			21	22	23	24	25	26	04-05
Avila, Crystal	Clerk	ARC	2.5	3.0	3.0	2.0	3.5		22.84
Beckhorn, Roy	Financial Aid Supervisor	ARC	2.4	1.9	4.7	2.2	2.7	1.4	
Brutski, Marina	Financial Aid Clerk	ARC	3.0	2.0	4.0	3.0	3.0	3.0	25.11
Carlson, Michael	Temp. Financial Aid Officer	ARC	3.0	2.0	2.0	1.0	2.0	1.0	35.08
Doshi, Alicia	Financial Aid Officer	ARC	1.0	1.0	2.0	4.0	4.0		35.08
Gardner, Kim	Financial Aid Officer	ARC	3.0	2.0	2.0	2.0	3.0	3.0	35.08
Kwoka-Coleman, Randi	Financial Aid Clerk	ARC	2.0	2.0	5.0	1.0	1.0		25.11
Quayle, Judy	Financial Aid Clerk	ARC	2.0	1.0	2.0	2.0	2.0	3.0	25.11
Bates, Rukiya	Financial Aid Officer	CRC	3.0	4.0	2.0	4.0	5.0	2.0	35.08
Chasengnou, Mee	Financial Aid Clerk	CRC	5.0	10.0	10.0	10.0	10.0	10.0	25.11
Coellio, Roseana	Clerk	CRC	7.5	10.0	7.5	7.5	7.5	7.5	22.84
Deters, Daniel	Financial Aid Clerk	CRC	4.0	1.0	1.0	3.0	2.0	2.0	25.11
Kimura, Kevin	Financial Aid Clerk	CRC	5.0	8.0	2.0	10.0	5.0	2.0	23.28
Kwong, Alice	Financial Aid Supervisor	CRC	3.0	1.0	1.0	5.0	5.0	5.0	42.67
Lucero-Ruiz, Yolanda	Financial Aid Officer	CRC	10.0	2.0	5.0	10.0	10.0	10.0	35.08
Padash, Ali	Financial Aid Officer	CRC	3.0	4.0	2.0	5.0	5.0	3.0	35.08
Perez, Marta de Jesus	Financial Aid Clerk	CRC	10.0	20.0	10.0	30.0	10.0	20.0	25.11
Skubenich, Elena	Financial Aid Clerk	CRC	1.0	3.5	2.5	4.0	7.5	7.5	25.11
Walken, Mary Louise	Financial Aid Clerk	CRC	5.0	6.5	7.5	6.5	10.0	10.5	25.11
Blair, Laurel	Account Clerk	FLC	3.0						27.12
Haney, Brenda	Account Clerk	FLC	4.0						29.93
Chu, Mei	Temp. Account Clerk	SCC	3.0						
Coles, Linda	Account Clerk	SCC	3.0						
Dudrilee, Lori Ann	Financial Aid Clerk	SCC	8.0	1.0	5.0	5.0	2.0	8.0	25.11
Duques, Melba	Assistant Financial Aid	SCC	3.0	1.0	2.0	3.0			31.81
Iwamasi, Debra	Financial Aid Officer	SCC	1.0						36.53
Gano, Dana	Account Clerk	SCC	3.0						
Lee, Sheri	Temp. Account Clerk	SCC	3.0						
Lopez, Peggi	Account Clerk	SCC	3.0						
Lor, Ge	Financial Aid Officer	SCC	3.0	1.0	2.0	1.0	10.0	10.0	38.89
Osorio, Eduardo C.	Financial Aid Clerk	SCC	5.0	1.0	5.0	5.0	5.0	10.0	24.89
Phillip, Cathy	Financial Aid Officer	SCC	3.0	1.0	3.0	2.0	10.0	10.0	38.68
Quiros, Vivian	Assistant Financial Aid Officer	SCC	5.0	1.0	3.0	3.0	3.0	3.0	33.03
Redmond, Kaila	Financial Aid Clerk	SCC	5.0	3.0	5.0	4.0	8.0	10.0	23.95
Reed, Yelleco	Financial Aid Clerk	SCC	7.5	1.0	7.0	5.0	3.0	5.0	27.12
Reyes, Laura	Financial Aid Clerk	SCC	6.0	2.0	5.0	7.0	10.0	7.0	25.11
Ruiz, Ruben	Financial Aid Clerk	SCC	4.0	8.0	3.0	8.0	50.0	3.0	25.11
Smyth, Matt	Temp. Account Clerk	SCC	3.0						
Smith, Shakeya	Account Clerk	SCC	3.0						
Solorio, Jeannette	Financial Aid Officer	SCC	5.0	2.0	5.0	2.0	3.0	3.0	43.53
Tran, Minh	Financial Aid Clerk	SCC	5.0	1.0	5.0	3.0	3.0	6.0	25.11
Average			**4.0**	**3.5**	**4.0**	**5.2**	**6.8**	**6.1**	**$29.66**

Conclusion: Findings go forward to Schedule 1B.

*Used 04-05 PHR's, 06-07 were not submitted by client.

Workload Multipliers (Default)
EFW-6 Total number of enrollment fee waivers requested
EFW-7 Total number of enrollment fee waivers granted
EFW-8 Total number of enrollment fee waivers denied

Activity Codes
21- Answering Questions regarding fee waivers or referring them to appropriate person for an answer.
22- Receiving Applications from students by mail, fax computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: each application and verification of documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documents and filing the information. Entering information into district records and providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Los Rios Community College District (District)
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1.	Enrolled Students	145,158	154,379	156,858	172,055	173,871	166,057	166,752	171,418	181,477
EFC 2	1.8-1 2.	Paid Enrollment fees	123,345	131,426	132,137	144,661	146,264	133,812	129,180	128,779	134,284
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	21,813	22,953	24,721	27,394	27,607	32,245	37,572	42,639	47,193
EFC 4	1.8-2 1.	Delinquencies collections	6,851	7,780	8,034	9,758	12,759	8,867	7,534	8,815	10,906
EFC 5	1.8-2 2.	Refunds	2,959	3,361	3,471	4,215	3,216	4,224	5,061	4,630	4,095
EFW 6	1.8-3 1.	Waivers Requested*	x	26,504	28,343	31,698	32,320	37,563	43,556	47,864	48,451
		*(Waivers Approved used where Waivers Requested not supplied)									
EFW 7	1.8-3 2.	Waivers Approved	x	22,953	24,721	27,394	27,607	32,245	37,572	42,639	47,193
EFW 8	1.8-3 (1-2)	Waivers Denied	x	3,551	3,622	4,304	4,713	5,318	5,984	5,225	1,258

Conclusion: *Findings will go forward to the Schedule 1A and 1B.*

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Los Rios Community College District
)8/95 Enrollment Fee and Collection Waiv
Fiscal Year 2006-2007
Headcount Summary

Purpose: To calculate the total headcount for Los Rios Community College District.
Source: Headcount totals, per semester, from the CCCCD website.
Findings:

College	Semester	Headcount
American River	Summer	13,441
	Fall	32,460
	Spring	34,993
Cosumnes	Summer	4,541
	Fall	12,180
	Spring	11,964
Folsom Lake	Summer	1,665
	Fall	7,381
	Spring	7,392
Sacramento City	Summer	10,266
	Fall	22,990
	Spring	22,197
TOTAL		**181,470**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River
For 2006 Summer Term

Data Current As Of November 04, 2008 09:03:29

Total Headcount	13,441

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River For 2006 Fall Term

Data Current As Of November 04, 2008 09:03:36

Total Headcount	32,460

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For American River For 2007 Spring Semester

Data Current As Of November 04, 2008 09:03:47

Total Headcount	34,993

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cosumnes River
For 2006 Summer Term

Data Current As Of November 04, 2008 09:04:22

Total Headcount	4,541

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cosumnes River For 2006 Fall Term

Data Current As Of November 04, 2008 09:04:16

Total Headcount	12,180

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Student Demographics

Student Total Headcount For Cosumnes River
For 2007 Spring Semester

Data Current As Of November 04, 2008 09:04:07

Total Headcount	11,964

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Student Demographics

Student Total Headcount For Folsom Lake For 2006 Summer Term

Data Current As Of November 04, 2008 09:05:08

Total Headcount	1,665

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Student Demographics

Student Total Headcount For Folsom Lake For 2006 Fall Term

Data Current As Of November 04, 2008 09:05:14

Total Headcount	7,381

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Student Demographics

Student Total Headcount For Folsom Lake
For 2007 Spring Semester

Data Current As Of November 04, 2008 09:05:25

Total Headcount	7,392

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Student Demographics

Student Total Headcount For Sacramento City
For 2006 Summer Term

Data Current As Of November 04, 2008 09:05:56

Total Headcount	10,266

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Student Demographics

Student Total Headcount For Sacramento City
For 2006 Fall Term

Data Current As Of November 04, 2008 09:05:50

Total Headcount	22,990

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Student Demographics

Student Total Headcount For Sacramento City
For 2007 Spring Semester

Data Current As Of November 04, 2008 09:05:41

Total Headcount	22,197

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

Dorothy Annie Fuller — Employee Name

Financial Aid Clerk Temp — Exact Position Title

Financial Aid-FLC — Department/Location

916 608-9494 — Telephone #

12mo/11mo/10mo/hrly (Please circle) — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
2007 May to present	1A (1B) 2A 2B 3 4	Processing BOG applications @ the Counter Processing BOG C Thru FAESA	624
307 May	1A (1B) 2A 2B 3 4	Teaching others how to fill out + Process Applications	8
2007 July	1A 1B 2A 2B (3) 4	Filing Bog - Preparing applications for hey file.	8
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Annie Fuller Date 9-13-2007

Time required to complete this form 15 min

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District Fiscal Year: 2006 / 2007

Margaret Karagiozyan (Employee Name) Financial Aid Clerk II Temp (Exact Position Title)

Folsom Lake College (Department/Location) 916/608-6646 (Telephone #) 12mo/11mo/10mo/hrly (Work year length) (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/11/06 6/13/07	1A 1B 2A (2B) 3 4	staff training, determine students eligibility	2.00
7/ 06 6/13/07	1A 1B 2A 2B (3) 4	staff training, determine students eligibility	2.00
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature _____ Date 9.18.07

Time required to complete this form 10

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

Shonna McDonald — Employee Name

Financial Aid Officer — Exact Position Title

Financial Aid/FIC — Department/Location

916-568-7804 — Telephone #

12mo/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/06 10/30/07	1A 1B (2A) 2B 3 4	Explanation of EFF Fee training for collection of fees	3
10/30/07	1A 1B 2A (2B) 3 4	Processing BOGS training for students that are eligible	8
10/30/07	1A 1B 2A 2B (3) 4	Maintaining/Updating BOG Applications	3D
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature [signature] Date 9/17/07

Time required to complete this form 15 minutes

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July 1'04 – June 30, '07

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

Nadine Oakley — Employee Name

work study student — Exact Position Title

Financial aid — Department/Location

(916) 608-6646 — Telephone #

12mo/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/7/06 → 6/30/07	1A 1B (2A) 2B 3 4	Waiver of the enrollment fees	300
11/'06 → 6/30/07	1A 1B 2A 2B (3) 4	recording & maintaining records of waivers	350
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature [signature] Date 9/18/07

Time required to complete this form 10 min

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

ALI PADASH — FINANCIAL AID OFFICER
Employee Name — Exact Position Title

FINANCIAL AID — (916) 608-6648 — (12mo/11mo/10mo/hrly)
Department/Location — Telephone # — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
07-01-06 to 06/30/07	(1A) 1B 2A 2B 3 4	Updating Policy Procedure Online	1
07-06 to 06/30/07	1A (1B) 2A 2B 3 4	Determing eligibility for students	3
07-06 to 06/30/07	1A 1B (2A) 2B 3 4	Training Classified Temp & FWS	2
07-01-06 to 06/30/07	1A 1B 2A (2B) 3 4	Processing BOG Applications	1
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature Ali Padash Ali Padash Date 9/17/07

Time required to complete this form 15 mins

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

Denise Parrish — Employee Name

Financial Aid Clerk II — Exact Position Title — Temp

El Dorado Center/FLC — Department/Location

(530) 642-5651 — Telephone #

12mo/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/11/06	1A 1B 2A (2B) (3) 4	Hosting BOGS in PeopleSOFT	240 240
6/30/07	1A 1B 2A (2B) (3) 4	Training Students to fill out BOGS	40
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature _____ Date 9-17-07 9-17-07

Time required to complete this form 15 min 15 min

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

JAN PAULSON — Employee Name

DIRECTOR, IT APP. SERVICES — Exact Position Title

IT — Department/Location

(916) 568-3143 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/31/06	1A 1B 2A 2B (3) 4	Credit card & fee payments	2
8/29/06	1A 1B 2A 2B 3 (4)	mtg on fees	1
10/20/06	1A 1B 2A 2B 3 (4)	mtg Fin Aid waivers	1
11/7/06	1A 1B 2A 2B (3) 4	Cashiering mtg	1
11/30/06	1A 1B 2A 2B 3 (4)	Fin Aid waivers	2
1/19/07	1A 1B 2A 2B 3 (4)	mtg Fin Aid	1
1/22/07	1A 1B 2A 2B 3 (4)	VTEA & fee waivers	2
6/15/07	1A 1B 2A 2B 3 (4)	BOG waivers	1
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature Jan Paulson Date 9/10/07

Time required to complete this form 1 hour

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District Fiscal Year: 2006 / 2007

Cecilia S Ramirez — Employee Name

Financial Aid Clerk I Temp — Exact Position Title

FLC Financial Aid Office — Department/Location

916 6086644 — Telephone #

12mo/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/12/07 – 6/30/07	1A 1B 2A (2B) 3 4	Processing Fee Waivers	100
/ /	1A 1B 2A 2B (3) 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature Cecilia S Ramirez Date 9/18/07

Time required to complete this form 10 min.

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

MARCIA ROCKWELL — Employee Name

Fin Aid Clerk I - Classified/Temp — Exact Position Title

Fin Aid/FLC — Department/Location

_____ — Telephone #

12mo/11mo/10mo/hrly — Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Dec 2006
June 2007

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4	Org/train students re: BOG	.60
/ /	1A 1B 2A 2B (3) 4	Review and Entering BOG fee waivers/ltrs mailed	.60
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

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Employee Signature M. Rockwell Date 9/14/07

Time required to complete this form 10 mins

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Los Rios Community College District — Fiscal Year: 2006 / 2007

Carol Thomas — Employee Name

FA Supervisor — Exact Position Title

FA — Department/Location

916 608-6720 — Telephone #

12mo/11mo/10mo/hrly Work year length (Please circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

July 166

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
9/17/07	(1A) 1B 2A 2B 3 4	update P&Ps & Procedure Manual	2
/ /	1A (1B) 2A 2B 3 4	determine elig students	1
/ /	1A 1B (2A) 2B 3 4	Training	2
/ /	1A 1B 2A 2B 3 4	Process Bags	1
/ /	1A 1B 2A 2B 3 (4)	MIS Reporting	4
/ /	1A 1B 2A 2B (3) 4	Bag Spreadsheet	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

SHE

15 mins

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carol Thomas Date 9/17/07

Time required to complete this form 15 mins

If you have any questions, please contact Raymond Andres, at x3033

PLEASE SUBMIT THIS INFORMATION BY September 17, 2007; TO Raymond Andres, General Accounting, DO

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Suzanne Anderson 3-21-07

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5	3. Answering questions and/or referring student top appropriate person for an answer.
4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Kristy Bank — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
15	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
1-2	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student top appropriate person for an answer.
15	4. Updating student file for the enrollment fee information, and providing a copy to the student.
0	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
0	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Jean Cottrell 3/21/07

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes

1 min	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
2 min	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5 min	3. Answering questions and/or referring student top appropriate person for an answer.
5 min	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5 min	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
4 min	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Patricia Eaton — 3-23-07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
7	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
2-10	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
15	3. Answering questions and/or referring student to appropriate person for an answer.
1-5	4. Updating student file for the enrollment fee information, and providing a copy to the student.
30	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
4	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Nancy Hafer — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
4	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
4	3. Answering questions and/or referring student top appropriate person for an answer.
3	4. Updating student file for the enrollment fee information, and providing a copy to the student.
	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
5	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

JOHN HALLBERG — MARCH 21, 2007

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2-5	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
4-5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student to appropriate person for an answer.
2-4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
N/A	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Sandra Jackson — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
5 mins or less	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5 mins. or less	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
5 mins or less	3. Answering questions and/or referring student top appropriate person for an answer.
5 mins or less	4. Updating student file for the enrollment fee information, and providing a copy to the student.
Ø	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3 mins or less	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Tatyana Halachik — 3/21/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
1-2	3. Answering questions and/or referring student top appropriate person for an answer.
1.5	4. Updating student file for the enrollment fee information, and providing a copy to the student.
N/A	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2.5	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Marisa Kuroyanagi — 11/23/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
5 min	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5 min	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
8 min	3. Answering questions and/or referring student top appropriate person for an answer.
4 min	4. Updating student file for the enrollment fee information, and providing a copy to the student.
0	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2 min	6. Refunds for students who later become eligible for waivers.

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Hasmik Manjanyan 3/22/07

Employee Name Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2-3	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3-5	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2-5	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3-5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3-5	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Tranx Tran — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
3-5 Minutes	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student top appropriate person for an answer.
2	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc. 2
3	6. Refunds for students who later become eligible for waivers.

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implement each of the reimbursable activities for the mandated program.

Los Rios — District
ARC Business Services — Department/Location
Kim Wong — Employee Name
Business Services Supervisor — Exact Position Title
484-8589 — Telephone #
12mo/11mo/10mo/hrly Work year length(circle)
Fiscal Year: **05-06**

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of [illegible] mandates in order for the district to receive reimbursement. Your signature on this form certifies that

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you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/25/07

If you have any questions, please contact Kobi Vang, at 484-8589

PLEASE SUBMIT THIS INFORMATION BY Setember 1, 2006 ; TO Raymond Andres, General Accounting, DO

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PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Voda, Lyubov — 3/22/07

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
5-7	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
3	3. Answering questions and/or referring student top appropriate person for an answer.
2-4	4. Updating student file for the enrollment fee information, and providing a copy to the student.
3-5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
3	6. Refunds for students who later become eligible for waivers.

PLEASE COMPLETE AND RETURN TO PHYLLIS IMMEDIATELY

Mariya Yarmolyuk — 03.22.07.

Employee Name — Date

Please estimate the average time it would take you to perform the following functions for one student.

Average time In Minutes	
2	1. Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out of enrolled courses.
7	2. Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
2	3. Answering questions and/or referring student top appropriate person for an answer.
1	4. Updating student file for the enrollment fee information, and providing a copy to the student.
5	5. Amounts receivable/delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collections agencies, small claims court, etc.
2	6. Refunds for students who later become eligible for waivers.

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1.6's, 1.7's &/or 1.8's used in multiple years

CRC

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Business Services/Business Office
Department/Location

Jarrod Carter
Employee Name

Cashier
Exact Position Title

(916) 320-3484
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/27/06

If we have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District

Business Services — Department/Location

Chou Chasengnou — Employee Name

Account Clerk III — Exact Position Title

(916) 691-7335 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Cosumnes River College Business Services Offic
Department/Location

Katie Deheon
Employee Name

Business Services Supervisor
Exact Position Title

(916)691-7193
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4.8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3.6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katie Deheon Date 5/5/06

u have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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BY: _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS DISTRICT
District

Business Service Dept Loc. CC
Department/Location

Brittney Lefebvre
Employee Name

Student Assistant
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brittney Lefebvre Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College — District

Business Services Office — Department/Location

Krista Mason — Employee Name

Student Help — Exact Position Title

6911-7509 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

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Employee Signature Krista Mason — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios District
District

College Center/Business Office
Department/Location

Yelena Popov CRC
Employee Name

Clerk I
Exact Position Title

916-4689
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	~~2~~ 1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yelena Popov Date 04/05/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College
District

CRC Business Services Office
Department/Location

Leigh Ann Rogers
Employee Name

Account Clerk II
Exact Position Title

1691-7509
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and fee eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
MAY 1 2006

Employee Signature Leigh Ann Rogers Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District — District
Business Services Office - CRC — Department/Location
Van Thoai Tran — Employee Name
Account Clerk II — Exact Position Title
(916) 691-7294 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Business Services CRC
Department/Location

Ronald Veri
Employee Name

Account Clerk III
Exact Position Title

691-7240
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Folsom Lake College Business Services
Department/Location

Laurel Blair
Employee Name

Account Clerk III
Exact Position Title

916-608-6549 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	25	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10		X			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5	X	X			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have recorded actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV - 1 2007

Employee Signature Laurel Blair Date 4/25/06

If you have any questions, please contact Joanie Hanna at FLC Bus Svcs

PLEASE SUBMIT THIS INFORMATION BY 5/5/06 ; TO Raymond Andrus

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Folsom Lake College
Department/Location

Joany Harman
Employee Name

Business Services Supervisor
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~N/A~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1		✓			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007
BY:

Employee Signature Joany Harman Date 2/28/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Temp. Account Clerk I
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 20% of Trans.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have recorded actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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NOV 1 2007

Employee Signature L. Hardt Date 5-3-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk II
Exact Position Title

(916) 558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 40% of Trans

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature F. Hall Date 5-3-06

If you have any questions, please contact _____ at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Office
Department/Location

all
Employee Name

Account Clerk II
Exact Position Title

(916) 558-2321
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 40% of Trans.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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NOV 1 2007

Employee Signature K Hirdt Date 5-3-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

ARC - Financial Aid Office
Department/Location

CRYSTAL AVILA
Employee Name

Clerk II
Exact Position Title

(916) 484-8457
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal Avila Date 4/25/06

If you have any questions, please contact _____, at _____

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ARC — Financial Aid Office

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios C C D.
District

ARC - Financial Aid
Department/Location

Roy Beckhorn
Employee Name

ARC Financial Aid Supervisor
Exact Position Title

916-484-8401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 ALL YEARS

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.36				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.86				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.72				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.65				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1.43				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Roy Beck Date

If you have any questions, please contact , at

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NOV 1 2006

BY:

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin. Aid office, ARC
Department/Location

Bratski, Marina
Employee Name

Fin-Aid Clerk II
Exact Position Title

916-484-8623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring ...m to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED
JAN 1 2007

PLEASE USE BLUE INK

Employee Signature _____ Date 4-25-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios C.C.D.
District

FINANCIAL AID
Department/Location

Michael Carlson
Employee Name

TEMPORARY CLASSIFIED FINANCIAL AID OFFICER
Exact Position Title

484-8881
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ ~~01-02~~ 02-03 03-04 ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 mins				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

Fin Aid / ARC
Department/Location

Alicia Doshi
Employee Name

Financial Aid Officer
Exact Position Title

916-484-8927
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Alicia Doshi Date 4/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios
District

ARC - Financial Aid
Department/Location

Kim Gardner
Employee Name

Financial Aid Officer
Exact Position Title

8003
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
NOV 1 2007
BY:

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

ARC - Financial Aid
Department/Location

Randi Kwoka-Coleman
Employee Name

Financial Aid Clerk II
Exact Position Title

8081
Telephone #

12mo/9mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED
NOV 1 2007
BY:

Employee Signature Randi Kwoka-Coleman

PLEASE USE BLUE INK

Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS C.C.
District

ARC
Department/Location

JUDY O'VAYLE
Employee Name

FINANCIAL AID CLERK II
Exact Position Title

-8895
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature Judy A. O'Vayle Date 4-25-2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College District
District

Financial Aid / Student Services
Department/Location

Bukiya Bates
Employee Name

Financial Aid Officer
Exact Position Title

608-6047
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature [signature] Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Los Rios District
Department/Location: Financial Aid ~~[illegible]~~ Office

Employee Name: Mee Chasengnou
Exact Position Title: Financial Aid Clerk II.

Telephone #: (916) 691-7209
Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date: 5/12/06

If you have any questions, please contact ______________________, at ____________

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Form for each function per year if [illegible] [illegible] [illegible]

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD — District

[redacted] — Employee Name

FAO-ORC — Department/Location

Clerk II — Exact Position Title

[redacted] — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10 7.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5-10 7.5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5-10 7.5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5-10 7.5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5-10 7.5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

RECEIVED NOV 1 2007

Employee Signature [redacted] PLEASE USE BLUE INK

Date 5/12/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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* For each function per type of position claimed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Los Rios.
Department/Location: CRC FAO
Employee Name: Daniel Peters
Exact Position Title: FA Clerk II
Telephone #: ______
Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature: Daniel Peters Date: 5-12-06

If you have any questions, please contact ______________________, at ______________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________

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Form for BOGG functions per year of function [illegible]

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm College
District

Financial Aid
Department/Location

Kevin Kimura
Employee Name

FA Clk
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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PLEASE USE BLUE INK

Employee Signature Kevin Kimura Date 5/12/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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* FOR EACH FUNCTION PER YEAR IF FUNCTION CHANGED

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Fin Aid / CRC
Department/Location

Alice Kwong
Employee Name

FA Supervisor
Exact Position Title

916 691-T278 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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RECEIVED
NOV 1 2007

Employee Signature Alice Kwong Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO: _____

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* For each function, list your if function changed since last claim

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Financial Aid
Department/Location

Yolanda Lucero-Ruiz
Employee Name

Financial Aid Officer
Exact Position Title

916/691-7450
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Yolanda Lucero-Ruiz Date 5/2/06

If you have any questions, please contact ______________________, at ______________

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________

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Form for each function per year if function time/amount changed

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FINANCIAL AID / STUDENT SERVICES
Department/Location

ALI PADASH
Employee Name

FINANCIAL AID OFFICER
Exact Position Title

(916) 608-6648
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Ali Padash Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
MAY 1 2006

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College District — District

Fin. Aid — Department/Location

Maria de Jesus Perez — Employee Name

Fin. Aid Clerk II — Exact Position Title

691-7558 — Telephone #

12mo/11mo/10mo/hrly — Work year length (circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	.8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria de Jesus Perez — Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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JAN 1 2007
COMMISSION ON STATE MANDATES

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2a For each function per year if function changed

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO
Department/Location

ELENA SKUBENICH
Employee Name

FA CLK II
Exact Position Title

691-7421
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ (02-03) (03-04) ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3.25 2-5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.5 2-3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3.75 3-5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7.5 5-10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7.5 5-10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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FORM FOR EACH FUNCTION AND YEAR IF FUNCTION CHANGED. (NOT SHOWN)

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

CRC Fin Aid
Department/Location

MARYlouise Walker
Employee Name

Fin Aid Clk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 4-6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6.5 5-8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7.5 5-10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6.5 5-8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10+				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10.5 6-15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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JAN 2007

Employee Signature MLWalker Date 5/12/06

If you have any questions, please contact _____, at _____

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Please fill out for each function for year it function changed.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Business Svcs/FLC
Department/Location

Laurel Blair
Employee Name

Account Clerk III
Exact Position Title

916-608-6549
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
JAN 1 2007

Employee Signature [signature] Date 5/3/06

If you have any questions, please contact Jenny Herman, at FLC, Bus. Svcs.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06; TO Raymond Andrea

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Business Services / FLC
Department/Location

Brenda Harney
Employee Name

Account Clerk III
Exact Position Title

916 608-6635 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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MAY 1 2006
BY:

Employee Signature Brenda J Harney Date 05/03/2006

If you have any questions, please contact Joan J Harman, at FLC Bus. Srvc.

PLEASE SUBMIT THIS INFORMATION BY 5/5/06; TO Raymond Andres

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implement each of the reimbursable activities for the mandated program.

LRCCD — District
Sec Business Office — Department/Location
Mei Chu — Employee Name
Temporary Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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implement each of the reimbursable activities for the mandated program.

LRCCD — District
SCC Business Office — Department/Location
Linda Colas — Employee Name
Account Clerk III — Exact Position Title
558-2321 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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Linda C. Colas 04-24-07

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LOS RIOS
District

FINANCIAL AID SCC
Department/Location

LORIANN DUDRIGUEZ
Employee Name

FINANCIAL AID CLERK II
Exact Position Title

9165582031
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

+ student help

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature [signature] PLEASE USE BLUE INK

Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid office
Department/Location

Melba DuBoues
Employee Name

Asst. Financial Aid
Exact Position Title

558-2672
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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CEIVED
JAN 2007

Employee Signature Melba L DuBoues Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/98 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Comm. College Dist
District

Fin Aid Offic - SCC
Department/Location

Debra Inamasu
Employee Name

Fin Aid Officer
Exact Position Title

(916) 558-2353
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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PLEASE USE BLUE INK

Employee Signature _____ Date 4/24/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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implement each of the reimbursable activities for the mandated program.

LRCCD — District

SCC Business Office — Department/Location

Dana Gano — Employee Name

Account Clerk II — Exact Position Title

558-2321 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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Dana Gano 4-24-07

implement each of the reimbursable activities for the mandated program.

LRCCD — District
SCC Business Office — Department/Location
Sherri Lee — Employee Name
Temporary Account Clerk I — Exact Position Title
558-2321 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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implement each of the reimbursable activities for the mandated program.

LRccd — District

SCC Business Office — Department/Location

Peggi Lopez — Employee Name

Account Clerk III — Exact Position Title

558-2321 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

Peggi Lopez 4-24-07

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO-SCC
Department/Location

Ge Lor
Employee Name

PA officer
Exact Position Title

X2137
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
ode 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

RECEIVED
JAN 1 2007

Employee Signature G. V. Lor Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Eduardo C Osorio
Employee Name

Temp/Permanent FA Clerk II
Exact Position Title

(916)538-2265
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have entered actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information and belief. This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Eduardo C Osorio Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

FAO - SCC
Department/Location

Cathy Phillip
Employee Name

FA officer
Exact Position Title

X2544
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Cathy Phillip GR Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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JAN 2007

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College D.
District

Financial Aid
Department/Location

Vivian Quiros
Employee Name

Asst. Financial Aid Officer
Exact Position Title

(916) 558-2046
Telephone #

(12mo) 11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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JUL 1 2007

Employee Signature Vivian M. Quiros Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFOW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Community College Dist.
District

Financial Aid /SCE
Department/Location

Kaila Redmond
Employee Name

Financial Aid Clerk II
Exact Position Title

(gw) 558-2028
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios CCD
District

Financial Aid / SCC
Department/Location

Yolanda Rud
Employee Name

Financial Aid Clerk II
Exact Position Title

650-2731
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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2007

Employee Signature Yolanda Rud Date 4/27/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3/8/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Los Rios Com Coll Dist.
District

Financial Aid
Department/Location

Laura Reyes
Employee Name

Financial Aid Clerk II (Temp)
Exact Position Title

(916)558-2352
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7				

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Employee Signature Laura Reyes Date 4-21-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

L.R.C.C.D.
District

Financial Aid / S.C.C.
Department/Location

Ruben Ruiz
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2601
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	8				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	8				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	50				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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Employee Signature Ruben R. Date 4-21-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

implement each of the reimbursable activities for the mandated program.

LRCCD — District

SCC Business Office — Department/Location

Matt Smythe — Employee Name

Temporary Account Clerk I — Exact Position Title

559-2321 — Telephone #

12mo/11mo/10mo/hriv — Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

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Matt Smythe 4-25-07

implement each of the reimbursable activities for the mandated program.

LRCCD
District

SEC Business Office
Department/Location

Shakeya Smith
Employee Name

Account Clerk I
Exact Position Title

558-2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of

Shakeya Smith 4.28.07

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid Office / SCC
Department/Location

Jeannette Solorio
Employee Name

Financial Aid Officer
Exact Position Title

558-2045 Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
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Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

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PLEASE USE BLUE INK

Employee Signature Jeannette Solorio Date 4/23/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LRCCD
District

Financial Aid
Department/Location

Minh Tran
Employee Name

Financial Aid Clerk II
Exact Position Title

558-2763
Telephone #

(2mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6				

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PLEASE USE BLUE INK

Employee Signature Minh Tran Date 4.21.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

DISTRICT WIDE
Enrollment Statistics (EFCW 1.8-1)

Statistical Data

	06-07	
1. Number of students enrolled each fiscal year. (Not FTE's)		CCCCO Student Enrollment
Summer	29,914	
Fall	75,012	
Winter/ Intersession		
Spring	76,551	
Annual data available only	0	
Total	181,477	
2. Number of students who paid enrollment fees:		
Summer	29,914	
Fall	75,012	
Winter/ Intersession		
Spring	76,551	
Annual data available only	(47,193)	
Total	134,284	
3 Number of students exempted from paying enrollment fees (BOGG, etc):		CCCCO Exemptions
Summer	0	
Fall	0	
Winter/ Intersession		
Spring	0	
Annual data available only	47,193	
Total	47,193	
	1066	
	1067	
	1073	

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Employee Name: _____ Date: 10/24/2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For American River
For 2007 Spring Semester

Data Current As Of October 23, 2007 01:04:05

Total Headcount	34,997

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California Home

Tuesday, October 23, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For American River
For 2006 Fall Term

Data Current As Of October 23, 2007 01:03:57

Total Headcount	32,460

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For American River For 2006 Summer Term

Data Current As Of October 23, 2007 01:03:45

Total Headcount	13,441

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For Cosumnes River
For 2006 Summer Term

Data Current As Of October 23, 2007 01:04:19

Total Headcount	4,541

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For Cosumnes River
For 2006 Fall Term

Data Current As Of October 23, 2007 01:04:26

Total Headcount	12,180

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For Cosumnes River
For 2007 Spring Semester

Data Current As Of October 23, 2007 01:04:41

Total Headcount	11,965

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Demographics

Student Total Headcount For Folsom Lake
For 2006 Summer Term

Data Current As Of October 23, 2007 01:04:55

Total Headcount	1,665

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

udent Demographics

Student Total Headcount For Folsom Lake
For 2006 Fall Term

Data Current As Of October 23, 2007 01:05:02

Total Headcount	7,381

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

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Student Total Headcount For Folsom Lake
For 2007 Spring Semester

Data Current As Of October 23, 2007 01:05:10

Total Headcount	7,392

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Tuesday, October 23, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

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Student Total Headcount For Sacramento City
For 2006 Summer Term

Data Current As Of October 23, 2007 01:05:27

Total Headcount	10,267

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

ıdent Demographics

Student Total Headcount For Sacramento City
For 2006 Fall Term

Data Current As Of October 23, 2007 01:05:33

Total Headcount	22,991

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

ıdent Demographics

Student Total Headcount For Sacramento City
For 2007 Spring Semester

Data Current As Of October 23, 2007 01:05:41

Total Headcount	22,197

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DISTRICT WIDE

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-2)

	06-07	
1. Number of enrollment fee accounts receivable requiring collection:		GA_MC_EFCW_AR_REQ_COLL
Summer	739	
Fall	3,367	
Winter/Intersession		
Spring	6,800	
Annual Data Available Only		
Total	10,906	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility		GA_MC_EFCW_REFUND_DUETO_WAIVER
Summer	867	
Fall	2,403	
Winter/Intersession		
Spring	825	
Annual Data Available Only		
Total	4,095	
	1066	
	1069	
	1073	
Per EFCW 1.8-1 (1) Total	181,477	
	6.01%	% AR requiring collection vs. total enrollment.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature: _____ Date: 10/24/2007

DISTRICT WIDE

Statistical Data

Enrollment Fee Workload Statistics (EFCW 1.8-3)

	06-07	
1. Number of enrollment fee waivers requested (BOGG etc.)		
Summer		
Fall		
Winter/Intersession		
Spring		
Annual data available only		
Total	48,451	GA_MC_EFCW_BOG_MAINT
	48,451	
2. Number of enrollment fee waivers approved (BOGG, etc.)		
Summer		
Fall		
Winter/Intersession		
Spring		
Annual data available only		
Total	47,193	
	47,193	
	97.40%	

SOURCE::
Line 2:: from for EFSW 1.8-1 Line 3

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature: _____ Date: 10/29/2007

DIS..ICT WIDE

Statistical Data($)

Enrollment Fee Revenues (EFCW1.8-4)

	06-07	
Enrollment Revenue on "Revenue By Guideline" report. GENFD 11 8874 REV.XXX 00000 R0000 0A31	$29,033,964.00	LR_DW_PY_Public
Accounts Receivable		
BOG Waivers	14,932,148.00	CCCCO - Students Exempt
1. Enrollment Fees Collected	18,480,969.00	GA_MC_EFCW_SF_CASH_ITEM_TYPES
2. Enrollment Fees Refunded	825,750.00	FROM 1.8-2 QUERY & PIVOT TABLES.
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	17,655,219.00	
4A. Total Enrollment Fees Waived (BOGG, etc.)	14,932,148.00	
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	298,643.00	
4C. 7% Enrollment Fees Waived (Line 4A x 7%)		
5 Number of credit units for which enrollment fees were waived.		
Summer		1066-26
Fall		1069-26
Winter/Intersession		1073-20
Spring		
TOTAL Credits Waived	622,173	
TOTAL x $0.91 per credit	$566,177	

BOG IN SEPARATE LINE	Y
CASH OR ACCRUAL	A
REFUNDS INCLUDED	N

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you Acertify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. @ This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date: 10/24/2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of October 23, 2007 01:12:52

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	491	137,549
BOGW - Part B based on income standards	12,307	3,818,904
BOGW - Part C based on financial need	5,498	2,020,025
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	696
Fee Waiver – Dependent of (children) deceased or disabled Veteran	148	60,291

Total Amount = $ 6,037,465

18,292 = 149

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

.dent Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of October 23, 2007 01:13:03

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	162	44,774
BOGW - Part B based on income standards	7,362	2,280,445
BOGW - Part C based on financial need	1,432	430,501
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	3	792
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	156
Fee Waiver – Dependent of (children) deceased or disabled Veteran	87	35,962

Total Amount = $ 2,792,630

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

.dent Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of October 23, 2007 01:13:11

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	45	14,319
BOGW - Part B based on income standards	2,214	608,902
BOGW - Part C based on financial need	844	220,918
Fee Waiver – Dependent of (children) deceased or disabled Veteran	35	10,443

Total Amount = $ 854,582

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California Home

Tuesday, October 23, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

dent Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of October 23, 2007 01:13:23

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	409	132,350
BOGW - Part B based on income standards	12,397	3,875,222
BOGW - Part C based on financial need	3,715	1,229,447
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	200
Fee Waiver – Dependent of (children) deceased or disabled Veteran	41	10,252

Total Amount = $ 5,247,471

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LOS RIOS COMMUNITY COLLEGE DISTRICT
CLAIMABLE TIME AND
PRODUCTIVE HOURLY RATES

Last Name	First Name	Position Title	CLAIM	Hours Fm	EFCW FORM 1.6A: ENROLLMENT POLICIES & PROCEDURES CODE 1A	WAIVER POLICIES & PROCEDURES CODE 1B	ENROLLMENT STAFF TRAINING CODE 2A	WAIVER STAFF TRAININGCODE 2B	RECORD RETENTION CODE 3	STATE REPORTING CODE 4	EFCW 308/95 (EFCW 2.4): ACTUAL TIME	Total EFCW Hours	ENTER 06-07 Salary	Current Fiscal Year Productive Hourly Rate
Andrews	Richard	Records & Admissions Supervisor	EFCW	EFCW								-	75,299	58.77
Backus	Kristine E.	IT Analyst II	EFCW	EFCW								-	106,694	75.85
Bates	Rukiya	Financial Aid Officer	EFCW	EFCW								-	56,041	46.15
Beckhorn	Roy	Financial Aid Supervisor	EFCW	EFCW								-	73,086	57.31
Blair	Laurel	Account Clerk III	EFCW	EFCW								-	46,302	39.73
Brutski	Marina	Financial Aid Clerk II	EFCW	EFCW								-	37,190	33.72
Clash	Kevin	IT Application System Supervisor	EFCW	EFCW								-	108,147	76.65
Fuller	Dorothy A	Financial Aid Clerk I	EFCW	EFCW		32.00			8.00			40.00	10.45	15.45
Haney	Brenda	Account Clerk III	EFCW	EFCW								-	45,247	39.03
Harmon	Joany	Business Services Supervisor	EFCW	EFCW								-	78,009	60.55
Heaton	Ruth	IT Analyst I	EFCW	EFCW								-	93,671	70.97
Heidt	Rob	Business Services Supervisor	EFCW	EFCW								-	85,470	65.47
Heidt	Rob	Business Services Supervisor	EFCW	EFCW2								-	85,470	65.47
Iwamasa	Debra K.	Financial Aid Officer	EFCW	EFCW								-	61,560	49.79
Karagadyan	Margaret	Financial Aid Clerk II	EFCW	EFCW				200.00	200.00			400.00	11.44	16.44
Kwong	Alice	Financial Aid Supervisor	EFCW	EFCW								-	79,022	61.22
LOR	GE	Interim Financial Aid Supervisor	EFCW	EFCW								-	63,924	51.35
Lucero Ruiz	Yolanda	Financial Aid Officer	EFCW	EFCW								-	60,316	48.97
Luong	Lana	Financial Aid Officer	EFCW	EFCW								-	37,467	33.90
Maga	Patricia	Financial Aid Supervisor	EFCW	EFCW								-	126,227	87.91
Maga	Patricia	Financial Aid Supervisor	EFCW	EFCW2								-	126,227	87.91
McDonald	Zhrinna	Financial Aid Supervisor	EFCW	EFCW			3.00	8.00	30.00			41.00	48,481	41.16
Meyer	Russ	Programmer	EFCW	EFCW								-	86,405	66.18
Oaklay	Nadine	Financial Aid Clerk I	EFCW	EFCW			300.00		300.00			600.00	7.75	7.75
Padash	Ali	Financial Aid Officer	EFCW	EFCW	1.00	3.00	2.00	1.00				7.00	56,580	46.51
Parish	Denise	Financial Aid Clerk I	EFCW	EFCW					280.00			280.00	11.44	16.44
Paulson	Jan	Director III, Systems & Programming	EFCW	EFCW					3.00	8.00		11.00	125,086	86.93
Ramirez	Cecilia S.	Financial Aid Clerk I	EFCW	EFCW				100.00				100.00	10.45	15.45
Rockwell	Marcia	Financial Aid Clerk I	EFCW	EFCW				160.00	160.00			320.00	10.45	15.45
Sayles	Kim	Grants and Contracts Supervisor	EFCW	EFCW								-	79,201	61.34
SHULER	QING	IT Analyst II	EFCW	EFCW								-	91,810	69.75
Skubenich	Elena	Financial Aid Clerk	EFCW	EFCW								-	39,988	35.56
Thomas	Carol	Financial Aid Supervisor	EFCW	EFCW	2.00	1.00	2.00		5.00	8.00		18.00	65,600	52.38
Thomas	Carol	Financial Aid Supervisor	EFCW	EFCW2								-	65,600	52.38
Viles	Gregory	Programmer II	EFCW	EFCW								-	83,082	63.99
Viles	Gregory	Programmer II	EFCW	EFCW								-	83,082	63.99
Williams	Susie	Associate VP, Communications & Research	EFCW	EFCW										
WURZER	CHRISTINE	Admissions & Records Supervisor	EFCW	EFCW								-	169,448	114.55
												-	79,022	61.31
		TOTALS CALCULATED LRCCD PER HR SCHEDULE TOTAL CLAIMABLE TIME			3.00	36.00	307.00	469.00	986.00	16.00	-	1,817.00		

Legal payments	WINTON ACT BASE YEAR ADJUSTMENT (CB CLAIM ONLY)	(11,500)
Class study	Legal payment for collective bargaining	
Consultants		
Schools Services of CA, Inc. (Vendor #	Work with Commission on State	
Community College League of Californ	CCC Online Collective Bargaining Database	
ExTen and Associates (Vendor #00000	Claim preparation & training	
Supplies		
Travel & Training		$ 23,019
District Board Agenda Items		
Minutes Per Agenda Item		
Blended Hourly Rate		
Standard-Time Reimbursement Option		
Indirect Cost Rate	Per FAM 29-C calcualtion	
Uniform Cost Allowance	Approved Federal ICR	
Number of Agendas		
Flat-Rate Reimbursement Option		
Offsets of Income Received		

GA-MC-RUR-QR066-RAV

Unit	Fund	Account	Dept	Program	Class	Project	Expended	Vendor	Name	Long Descr	Reference	Ref No
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	2,000.00	0000014103	XAP CORPORATION	BOG FEE WAIVER APPLICATION. E	0094201872	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	2,575.00	0000014103	XAP CORPORATION	CCC APPLY ONLINE APPLICATIONN	0094207531	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	2,575.00	0000014103	XAP CORPORATION	CCC APPLY ONLINE APPLICATIONN	0094224280	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	2,575.00	0000014103	XAP CORPORATION	CCC APPLY ONLINE APPLICATIONN	0094219090	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	2,575.00	0000014103	XAP CORPORATION	CCC APPLY ONLINE APPLICATIONN	0094203257	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	3,573.00	0000014103	XAP CORPORATION	ANNUAL MAINTENANCE FEE FOR CUS	0094219090	0
GENFD	11	5600	DS.IT.PRGM	67800	00000	044H	7,146.19	0000014103	XAP CORPORATION	ANNUAL MAINTENANCE FEE FOR CUS	0094206214	0
							23,019.19					

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-201872

56-382/412

Date Sep/21/2006

Pay Amount $2,000.00***

Pay ****TWO THOUSAND AND XX / 100 DOLLARS****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Sep/21/2006 GENFD GENERAL FUND Warrant No.201872

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001035742	60250	Aug/15/2006	00201581	2,000.00	0.00	2,000.00

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	**Date**	**Total Amount**	**Discounts Taken**	**Total Paid Amount**
201872	Sep/21/2006	$2,000.00	$0.00	$2,000.00

LRCCD
AUG 2 1 2006
ACCTG OPS

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

INVOICE ID: 60250
DATE: August 15,2006

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

Terms: Net 30

P.O./Contract #	Description	Amount
~~Addend 10/05/05~~	~~Jul06-Jun07 Operations~~ For the Los Rios Community College Disctrict BOG Fee Waiver Application	~~2,000.00~~
	Total	$2,000.00

Schedule 7
Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
XAP Corp. Summary

Purpose: To summarize the hardware/software costs for enrolling students.
Source: XAP Corp. invoices.
Findings:

Date	Invoice ID	Amount
8/30/2006	60328	$ 2,575.00
10/27/2006	60373	$ 7,146.19
11/22/2006	60447	$ 2,575.00
3/30/2007	70093	$ 2,575.00
3/30/2007	70094	$ 3,573.00
6/22/2007	70218	$ 2,575.00
	Total	$ 21,019.19

Conclusion: Fiondings go forward to EFCW-2.

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-203257

56-382/412

Date Oct/05/2006

Pay Amount $2,575.00***

Pay ****TWO THOUSAND FIVE HUNDRED SEVENTY-FIVE AND XX/100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Oct/05/2006 GENFD GENERAL FUND Warrant No.203257

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001036051	60328	Aug/30/2006	00202908	2,575.00	0.00	2,575.00

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	**Date**	**Total Amount**	**Discounts Taken**	**Total Paid Amount**
203257	Oct/05/2006	$2,575.00	$0.00	$2,575.00

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

202908

1036051

INVOICE ID: 60328
DATE: August 30,2006

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

LRCCD
SEP 05 2006
ACCTG OPS

P.O./Contract #	Description	Amount
	Jul-Sep 2006 Operations For the Los Rios CCD CCCApply Online Application Operations, Maintenance, Client Services and Student Support for the Period: · July 2006 - September 2006	2,575.00
	Total	$2,575.00

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-206214

56-382/412

Date Nov/02/2006

Pay Amount $7,146.19***

Pay ****SEVEN THOUSAND ONE HUNDRED FORTY-SIX AND 19 / 100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Nov/02/2006 GENFD GENERAL FUND Warrant No.206214

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001036050	60373 JUL-DEC 2006	Oct/27/2006	00205671	7,146.19	0.00	7,146.19

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Varrant Number	**Date**		**Total Amount**	**Discounts Taken**	**Total Paid Amount**
206214	Nov/02/2006		$7,146.19	$0.00	$7,146.19

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

205471

INVOICE ID: 60373
DATE: October 27,2006

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

Terms: Net 30

P.O./Contract #	Description	Amount
PO #0001036050	Jul-Sep 2006 Los Rios Community College District Custom Online Electronic Application Operations, Maintenance and Client Support for the four colleges: American River, Cosumnes River, Folsom Lake and Sacramento City	3,573.19
PO #0001036050	Oct-Dec 2006 Los Rios Community College District Custom Online Electronic Application Operations, Maintenance and Client Support for the four colleges: American River, Cosumnes River, Folsom Lake and Sacramento City	3,573.00
	Total	$7,146.19

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-207531

56-382/412

Date Nov/30/2006

Pay Amount $2,575.00***

Pay ****TWO THOUSAND FIVE HUNDRED SEVENTY-FIVE AND XX/100 DOLLAR****

VOID

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Nov/30/2006 GENFD GENERAL FUND Warrant No.207531

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001036051	60447	Nov/22/2006	00207524	2,575.00	0.00	2,575.00

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	**Date**	**Total Amount**	**Discounts Taken**	**Total Paid Amount**
207531	Nov/30/2006	$2,575.00	$0.00	$2,575.00

207524

1036051

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

INVOICE ID: 60447
DATE: November 22,2006

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

LRCCD
NOV 29 2006
ACCTG OPS

P.O./Contract #	Description	Amount
	Oct-Dec 2006 Operations For the Los Rios CCD CCCApply Online Application Operations, Maintenance, Client Services and Student Support for the Period: October 2006 - December 2006	2,575.00
	Total	$2,575.00

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-219090

56-382/412

Date Apr/26/2007

Pay Amount $6,148.00***

Pay ****SIX THOUSAND ONE HUNDRED FORTY-EIGHT AND XX/100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Apr/26/2007 GENFD GENERAL FUND Warrant No219090

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001036051	70093	Mar/30/2007	00217782	2,575.00	0.00	2,575.00
0001036050	70094	Mar/30/2007	00217783	3,573.00	0.00	3,573.00

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	**Date**	**Total Amount**	**Discounts Taken**	**Total Paid Amount**
219090	Apr/26/2007	$6,148.00	$0.00	$6,148.00

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

21782

INVOICE ID: 70093
DATE: March 30,2007

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

P.O./Contract #	Description	Amount
	Jan-Mar 2007 Operations For the Los Rios CCD CCCApply Online Application Operations, Maintenance, Client Services and Student Support for the Period: January 2007 - March 2007	2,575.00
	Total	$2,575.00

LRCCD
APR 2 8 2007
ACCTG OPS

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

217783

INVOICE ID: 70094
DATE: March 30,2007

Bill To:
Los Rios CCD
Attn: Accounts Payable

1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:
Los Rios CCD District Office
Receiving
1919 Spanos Court
Sacramento, CA 95825-3981

Terms: Net 30

P.O./Contract #	Description	Amount
PO #0001036050	Jan-Mar 2007 Los Rios Community College District Custom Online Electronic Application Operations, Maintenance and Client Support for the four colleges: American River, Cosumnes River, Folsom Lake and Sacramento City	3,573.00
	Total	$3,573.00

LRCCD
APR 23 2007
ACCTG OPS

LOS RIOS COMMUNITY COLLEGE
1919 Spanos Court
Sacramento, CA 95825-3981

GENFD - SCOE WARRANTS

0094-224280

56-382/412

Date Jul/12/2007

Pay Amount $2,575.00***

Pay ****TWO THOUSAND FIVE HUNDRED SEVENTY-FIVE AND XX/100 DOLLAR****

Void

To The Order Of
XAP CORPORATION
3534 HAYDEN AVENUE
CULVER CITY, CA 90232

Authorized Signature

* NON-NEGOTIABLE *

Check Date: Jul/12/2007 GENFD GENERAL FUND Warrant No.224280

Description	Invoice No.	Invoice Date	Voucher ID	Invoice Amount	Discount	Paid Amount
0001036051	70218	Jun/22/2007	00224073	2,575.00	0.00	2,575.00

File Copy

Vendor Number	Name		Total Discounts	
0000014103	XAP CORPORATION		$0.00	
Warrant Number	**Date**	**Total Amount**	**Discounts Taken**	**Total Paid Amount**
224280	Jul/12/2007	$2,575.00	$0.00	$2,575.00

Sr. fy 07

224073

XAP CORPORATION
3534 Hayden Avenue
Culver City, CA 90232
TEL: 310.842.9800

INVOICE ID: 70218
DATE: June 22,2007

Bill To:
Los Rios CCD
Attn: Accounts Payable
1919 Spanos Court
Sacramento, CA 95825-3981

Ship To:

P.O./Contract #	Description	Amount
	Apr-Jun 2007 Operations For the Los Rios CCD CCCApply Online Application Operations, Maintenance, Client Services and Student Support for the Period: April 2007 - June 2007	2,575.00
	Total	$2,575.00

LRCCD
JUN 27 2007
ACCTG OPS

Los Rios Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: -00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received							$ 18,390,756	$ 17,655,219
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ 367,815	$ 353,104
1.8-4 line 4A	Enrollment Fees Waived	$ 3,787,024	$ 4,048,108	$ 4,574,394	$ 4,883,429	$ 10,207,270	$ 13,921,630	$ 15,655,947.00	$ 14,932,148
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433	$ 313,119	$ 298,643
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 265,092	For 00-01 through 04-05 - unit fee						
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 24.00	$ 20.00
Total # of credits	Line 4A divided by unit fee		368,009	415,854	443,948	651,389	596,470	652,331	746,607
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788	$ 593,621	$ 679,412
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 75,740	$ 80,962	$ 91,488	$ 97,669	$ 204,145	$ 278,433	$ 313,119	$ 298,643
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 265,092							
1.8-4 5.	Credit Units Waived		$ 334,888	$ 378,427	$ 403,993	$ 592,764	$ 542,788	$ 593,621	$ 566 [illegible]
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 340,832**	**$ 415,850**	**$ 469,915**	**$ 501,662**	**$ 796,909**	**$ 821,221**	**$ 906,740**	**$ 864,820**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 03-04 Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 04-05 Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 05-06 summer and fall $26.00, spring $20.00. ($26.00+$26.00+20=Average of $24.00)
FY 06-07 Fees are $20.00
fy 06-07 Amount for credits waived given by client.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Los Rios
COUNTY: Sacramento

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$160,117,887	$145,105,529	$4,912,827	$150,018,356
ENROLL FEE ADMIN (2%)	291,730	268,391	23,339	291,730
APPRENTICE ALLOWANCE	1,769,040	1,614,104	154,936	1,769,040
BASIC SKILLS	909,271	0	909,271	909,271
S.F.A.A.	2,057,838	1,893,211	164,627	2,057,838
E.O.P.S.	4,257,347	3,916,760	340,587	4,257,347
C.A.R.E.	733,223	671,805	61,418	733,223
D.S.P.S.	4,368,029	4,018,586	349,443	4,368,029
STATE HOSPITALS	0	0	0	0
CALWORKS	1,642,164	1,477,292	164,872	1,642,164
MATRICULATION (CREDIT)	4,217,171	3,866,918	350,253	4,217,171
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	41,723	38,385	3,338	41,723
PART-TIME FAC. ALLO.	1,997,475	1,837,677	159,798	1,997,475
PART-TIME FAC. OFF. HRS	190,576	0	190,576	190,576
PART-TIME FAC. INS.	109,828	0	109,828	109,828
TELECOMMUNICATIONS	198,427	135,045	63,382	198,427
PLANT & INSTRUCTIONAL	551,055	506,970	44,085	551,055
SCHDL. MAINT. & REPAIR	551,105	507,016	44,089	551,105
TANF	502,469	462,272	40,197	502,469
ECON. DEVELOPMENT	1,579,500	1,123,500	203,280	1,326,780
NURSING EDUCATION	131,937	47,999	83,938	131,937
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	353,015	353,015	0	353,015
PRIOR YEAR CORRECTION	3,549,966	3,549,966	0	3,549,966
ONE TIME FUNDS				
TRANSITION PAYMENT	124,064	108,242	15,822	124,064
TRANS.& ARTIC. -REAPPR	20,000	20,000	0	20,000
GEN. PURPOSE -REAPPROP	978,281	978,281	0	978,281
BASIC SKILLS -REAPPROP	834,500	834,500	0	834,500
CAR. TECH. TRAILER BIL	1,742,202	1,742,202	0	1,742,202
GEN. PUR. TRAILER BILL	3,408,369	3,408,369	0	3,408,369
INST. MATERIAL TRAILER	2,056,687	2,056,687	0	2,056,687
SCHLD.MAINT. TRAILER B	2,056,687	2,056,687	0	2,056,687
FACULTY STAFF DEV	218,935	218,935	0	218,935
TOTAL	$201,560,501	$182,818,344	$8,389,906	$191,208,250

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc ule 5A
Los Rios Com...nity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 22,729.16	$ 686.31
2	Staff Training	(04)(B)(1)(b)	$ 9,694.53	$ 7,680.79
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 144,613.30	$ 14,569.29
4	Waiving student fees	(04)(B)(2)(b)	$ 444,612.29	$ 441,100.56
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 205.85	$ 1,114.48
6	EFCW - Fee Waiver Costs	Total	$ 621,855.13	$ 465,151.43
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 906,740.00	$ 864,820.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (284,884.87)	$ (399,668.57)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 621,855.13**	**$ 465,151.43**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

American River College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 04, 2008 09:08:39

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	493	138,573
BOGW - Part B based on income standards	12,316	3,821,260
BOGW - Part C based on financial need	5,501	2,020,641
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	696
Fee Waiver – Dependent of (children) deceased or disabled Veteran	149	60,693

Total Amount = $ 6,041,863

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cosumnes River College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 04, 2008 09:08:23

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	163	44,834
BOGW - Part B based on income standards	7,365	2,280,376
BOGW - Part C based on financial need	1,432	430,501
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	3	792
Fee Waiver – Dependent (surviving spouse and children) of deceased or disabled member of CA National Guard	1	156
Fee Waiver – Dependent of (children) deceased or disabled Veteran	87	35,962

Total Amount = $ 2,792,621

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Folsom Lake College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 04, 2008 09:07:13

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	45	14,319
BOGW - Part B based on income standards	2,214	608,902
BOGW - Part C based on financial need	846	221,986
Fee Waiver – Dependent of (children) deceased or disabled Veteran	35	10,443

Total Amount = $ 855,650

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sacramento City College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 04, 2008 09:07:54

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	409	132,350
BOGW - Part B based on income standards	12,411	3,879,135
BOGW - Part C based on financial need	3,717	1,229,765
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	200
Fee Waiver – Dependent of (children) deceased or disabled Veteran	41	10,252

Total Amount = $ 5,251,702

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Mt. San Jacinto Community College District CC33075

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Mt. San Jacinto Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

California State Controller
Division of Accounting and Reporting

JANUARY 5, 2011

BOARD OF TRUSTEES
MT SAN JACINTO COMM COLL DIST
RIVERSIDE COUNTY
1499 N STATE ST
SAN JACINTO CA 92383

DEAR CLAIMANT:

RE: ENROLMT FEE COL&WAIV:TITLE 5-C

WE HAVE REVIEWED YOUR 2004/2005 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED			165,936.00
ADJUSTMENT TO CLAIM:			
LATE CLAIM PENALTY	-	16,594.00	
TOTAL ADJUSTMENTS			- 16,594.00
AMOUNT DUE CLAIMANT			$ 149,342.00

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT DENNIS SPECIALE AT (916) 324-0254 OR IN WRITING AT THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875. DUE TO INSUFFICIENT APPROPRIATION, THE BALANCE DUE WILL BE FORTHCOMING WHEN ADDITIONAL FUNDS ARE MADE AVAILABLE.

RECEIVED
JAN 10 2011
BUSINESS SERVICES

SINCERELY,

Ginny Brummels

GINNY BRUMMELS, MANAGER

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC33075

(02) Claimant Name: Mt. San Jacinto Community College District

County of Location: Riverside

Street Address or P.O. Box: 1499 North State Street

City: San Jacinto | State: CA | Zip Code: 92583

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 165,936
Less: 10% Late Penalty		(14) $ 16,594
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 149,342
Due from State	(08)	(17) $ 149,342
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	19,655
(23) EFCW-1, (04)(A)(1)(b)(f)	21,038
(24) EFCW-1, (04)(A)(2)(a)(f)	96,259
(25) EFCW-1, (04)(B)(1)(a)(f)	21,159
(26) EFCW-1, (04)(B)(1)(b)(f)	7,997
(27) EFCW-1, (04)(B)(2)(a)(f)	39,451
(28) EFCW-1, (04)(B)(2)(b)(f)	52,687
(29) EFCW-1, (04)(B)(2)(c)(f)	19,446
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	77,345
(32) EFCW-1, (09)	48,536
(33) EFCW-1, (10)	140,567
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 2/16/07

Becky Elam — **Type or Print Name**

Vice President of Business — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Mt. San Jacinto Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 19,655.40	$ -	$ -	$ -	$ -	$ 19,655.40
b. Staff training (One time per employee)	$ 17,882.20	$ -	$ -	$ -	$ 3,156.00	$ 21,038.20
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 46,255.00	$ 10,853.07	$ -	$ 39,151.00	$ -	$ 96,259.07
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 21,159.33	$ -	$ -	$ -	$ -	$ 21,159.33
b. Staff training (One time per employee)	$ 5,893.48	$ -	$ -	$ -	$ 2,104.00	$ 7,997.48
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 39,451.00	$ -	$ -	$ -	$ -	$ 39,451.00
b. Waiving student fees	$ 39,637.40	$ -	$ -	$ 13,050.00	$ -	$ 52,687.40
c. Reporting BOG fee waiver data to CCC	$ 19,445.84	$ -	$ -	$ -	$ -	$ 19,445.84
05) Total Direct Costs	$ 209,379.65	$ 10,853.07	$ -	$ 52,201.00	$ 5,260.00	$ 277,693.72

ndirect Costs

06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.94%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 77,344.84
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 355,038.56

ost Reduction

09) Less: Enrollment Fee Revenue offset		$ 48,536.00
0) Less: Enrollment Fee Waiver offsets		$ 140,567.00
1) Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 165,935.56

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	(d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Montez, Carol	Accounting Supervisor	$38.86	54.0	$ 2,098.44				
Stevens, Cheryl	Head Cashier	$26.07	8.0	$ 208.56				
Venable, Julie	Accounting Specialist	$30.20	15.0	$ 453.00				
Nguyen, Kim	Senior Programmer/ Analyst	$33.31	8.0	$ 266.48				
Orlauski, Brian	Supervisor, Computer Applications	$34.31	182.0	$ 6,244.42				
Guardino, Susan	Dean of Information Technology	$69.46	20.0	$ 1,389.20				
Holman, Robert	Senior Programmer/ Analyst	$33.70	115.0	$ 3,875.50				
Loomis, Susan	Director, Enrollment Services	$31.80	161.0	$ 5,119.80				
(05) Total [X] Subtotal [ ]		Page 1 of 1		$ 19,655.40	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

(--) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Montez, Carol	Accounting Supervisor	$38.86	62.0	$ 2,409.32				
Stevens, Cheryl	Head Cashier	$26.07	144.0	$ 3,754.08				
Venable, Julie	Accounting Specialist	$30.20	40.0	$ 1,208.00				
Orlauski, Brian	Supervisor, Computer Applications	$34.31	40.0	$ 1,372.40				
Guardino, Susan	Dean of Information Technology	$69.46	40.0	$ 2,778.40				
Loomis, Susan	Director, Enrollment Services	$31.80	200.0	$ 6,360.00				
Prorated Costs of Registratio	Seminar Fees	$100.00	31.6					$ 3,156.00
(--) Total ☒ Subtotal ☐			Page 1 of 1	$ 17,882.20	$ -	$ -	$ -	$ 3,156.00

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Material Costs of de-registration procedures for unpaid fees Student Notices for Non-Pym Cost of Forms and Postage	$100.00	4.5		$ 450.84			
E-Commerce, etc. software for credit card collection of fees paid Software Costs for Enrollmen Collection of Fees	$100.00	391.5				$ 39,151.00	
Costs of mailing receipt for enrollment fees paid Notices for Registration Statn Cost of Forms and Postage	$100.00	20.2		$ 2,019.00			
Referencing student accounts and records Enrollment Office Staff Collection of Fees	$19.73	491.6	$ 9,699.27				
ulating total enrollment fee to be collected Enrollment Office Staff Collection of Fees	$19.73	334.8	$ 6,605.60				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collection of Fees	$19.73	1,179.8	$ 23,277.45				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collection of Fees	$19.73	315.1	$ 6,216.92				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collection of Fees	$19.73	23.1	$ 455.76				
Costs to issue 1098-T for enrollment fees paid Tax Notices for Students Cost of Forms and Postage	$100.00	83.8		$ 8,383.23			
Total ☒ Subtotal ☐		Page 1 of 1	$ 46,255.00	$ 10,853.07	$ -	$ 39,151.00	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Montez, Carol	Accounting Supervisor	$38.86	18.0	$ 699.48				
Stevens, Cheryl	Head Cashier	$26.07	2.0	$ 52.14				
Venable, Julie	Accounting Specialist	$30.20	5.0	$ 151.00				
Navarro, Lesia	Interm Director	$29.98	15.0	$ 449.70				
Muehring, Mary Ellen	Financial Aid Director	$52.78	15.0	$ 791.70				
Nguyen, Kim	Senior Programmer/ Analyst	$33.31	473.0	$ 15,755.63				
Ortauski, Brian	Supervisor, Computer Applications	$34.31	80.0	$ 2,744.80				
Williams, Shanae	Interm Director	$32.18	16.0	$ 514.88				
) Total ☒	Subtotal ☐		Page 1 of 1	$ 21,159.33	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Jacinto Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Montez, Carol	Accounting Supervisor	$38.86	10.0	$ 388.60				
Stevens, Cheryl	Head Cashier	$26.07	24.0	$ 625.68				
Venable, Julie	Accounting Specialist	$30.20	40.0	$ 1,208.00				
Navarro, Lesia	Interm Director	$29.98	20.0	$ 599.60				
Muehring, Mary Ellen	Financial Aid Director	$52.78	20.0	$ 1,055.60				
Orlauski, Brian	Supervisor, Computer Applications	$34.31	40.0	$ 1,372.40				
Williams, Shanae	Interm Director	$32.18	20.0	$ 643.60				
Prorated Costs of Registratio	Seminar Fees	$100.00	21.0					$ 2,104.00
Total ☒	Subtotal ☐	Page 1 of 1		$ 5,893.48	$ -	$ -	$ -	$ 2,104.00

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Montez, Carol	Accounting Supervisor	$38.86	176.0	$ 6,839.36				
Stevens, Cheryl	Head Cashier	$26.07	584.0	$ 15,224.88				
Venable, Julie	Accounting Specialist	$30.20	548.0	$ 16,549.60				
Navarro, Lesia	Interm Director	$29.98	6.0	$ 179.88				
Muehring, Mary Ellen	Financial Aid Director	$52.78	6.0	$ 316.68				
Rivero, Mayda	Clerical	$17.03	20.0	$ 340.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 39,451.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
E-Commerce, etc.software for credit card refund of fees due to waiver							
Software Costs for Enrollmen Waiving of Fees	$100.00	130.5				$ 13,050.00	
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waving Enrollment Fees	$21.50	494.3	$ 10,627.45				
Receiving waiver applications							
Financial Aid Office Staff Waving Enrollment Fees	$21.50	404.5	$ 8,696.75				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waving Enrollment Fees	$21.50	405.5	$ 8,718.25				
ring approved application information into district records; providing student award letter							
Financial Aid Office Staff Waving Enrollment Fees	$21.50	539.3	$ 11,594.95				
Total ☒ Subtotal ☐		Page 1 of 1	$ 39,637.40	$ -	$ -	$ 13,050.00	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2004-2005

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Montez, Carol	Accounting Supervisor	$38.86	64.0	$ 2,487.04				
Stevens, Cheryl	Head Cashier	$26.07	80.0	$ 2,085.60				
Venable, Julie	Accounting Specialist	$30.20	380.0	$ 11,476.00				
Navarro, Lesia	Interm Director	$29.98	6.0	$ 179.88				
Muehring, Mary Ellen	Financial Aid Director	$52.78	6.0	$ 316.68				
Nguyen, Kim	Senior Programmer/ Analyst	$33.31	80.0	$ 2,664.80				
Farr, Bernadette	Technical, Support Specialist	$29.48	8.0	$ 235.84				
Total ☒ Subtotal ☐			Page 1 of 1	$ 19,445.84	$ -	$ -	$ -	$ -

New 04/06

Mt. San Jacinto Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
1-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	491.60	Enrollment Office Staff	Collection of Fees	$19.73	$9,699.27	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	334.80	Enrollment Office Staff	Collection of Fees	$19.73	$6,605.60	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	1,179.80	Enrollment Office Staff	Collection of Fees	$19.73	$23,277.45	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	315.10	Enrollment Office Staff	Collection of Fees	$19.73	$6,216.92	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	23.10	Enrollment Office Staff	Collection of Fees	$19.73	$455.76	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	2,344.40	**Enrollment Office Staff Total**			$46,255.00		
04-05	8.00	Farr, Bernadette	Technical, Support Specialist	$29.48	$235.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	8.00	**Farr, Bernadette Total**			$235.84		
04-05	494.30	Financial Aid Office Staff	Waving Enrollment Fees	$21.50	$10,627.45	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	404.50	Financial Aid Office Staff	Waving Enrollment Fees	$21.50	$8,696.75	Receiving waiver applications	Waiving student fees
04-05	405.50	Financial Aid Office Staff	Waving Enrollment Fees	$21.50	$8,718.25	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	539.30	Financial Aid Office Staff	Waving Enrollment Fees	$21.50	$11,594.95	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,843.60	**Financial Aid Office Staff Total**			$39,637.40		
04-05	20.00	Guardino, Susan	Dean of Information Technology	$69.46	$1,389.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	40.00	Guardino, Susan	Dean of Information Technology	$69.46	$2,778.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	60.00	**Guardino, Susan Total**			$4,167.60		
04-05	115.00	Holman, Robert	Senior Programmer/ Analyst	$33.70	$3,875.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	115.00	**Holman, Robert Total**			$3,875.50		
04-05	161.00	Loomis, Susan	Director, Enrollment Services	$31.80	$5,119.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	200.00	Loomis, Susan	Director, Enrollment Services	$31.80	$6,360.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	361.00	**Loomis, Susan Total**			$11,479.80		
04-05	54.00	Montez, Carol	Accounting Supervisor	$38.86	$2,098.44	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	18.00	Montez, Carol	Accounting Supervisor	$38.86	$699.48	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	62.00	Montez, Carol	Accounting Supervisor	$38.86	$2,409.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	10.00	Montez, Carol	Accounting Supervisor	$38.86	$388.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	176.00	Montez, Carol	Accounting Supervisor	$38.86	$6,839.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	64.00	Montez, Carol	Accounting Supervisor	$38.86	$2,487.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	384.00	**Montez, Carol Total**			$14,922.24		
04-05	15.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$791.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	20.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$1,055.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	6.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$316.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	6.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$316.68	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Muehring, Mary Ellen Total**			$2,480.66		
04-05	15.00	Navarro, Lesia	Interm Director	$29.98	$449.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	20.00	Navarro, Lesia	Interm Director	$29.98	$599.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	6.00	Navarro, Lesia	Interm Director	$29.98	$179.88	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	6.00	Navarro, Lesia	Interm Director	$29.98	$179.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Navarro, Lesia Total**			$1,409.06		
04-05	8.00	Nguyen, Kim	Senior Programmer/ Analyst	$33.31	$266.48	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	473.00	Nguyen, Kim	Senior Programmer/ Analyst	$33.31	$15,755.63	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	80.00	Nguyen, Kim	Senior Programmer/ Analyst	$33.31	$2,664.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	561.00	**Nguyen, Kim Total**			$18,686.91		
04-05	20.19	Notices for Registration Statmnt & Receipt for Fee	Cost of Forms and Postage	$100.00	$2,019.00	Costs of mailing receipt for enrollment fees paid	Calculating and collecting enrollment fees
	20.19	**Notices for Registration Statmnt & Receipt for Fees Total**			$2,019.00		
04-05	182.00	Orlauski, Brian	Supervisor, Computer Applications	$34.31	$6,244.42	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	80.00	Orlauski, Brian	Supervisor, Computer Applications	$34.31	$2,744.80	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Orlauski, Brian	Supervisor, Computer Applications	$34.31	$1,372.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	40.00	Orlauski, Brian	Supervisor, Computer Applications	$34.31	$1,372.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	342.00	**Orlauski, Brian Total**			$11,734.02		
04-05	31.56	Prorated Costs of Registration	Seminar Fees	$100.00	$3,156.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	21.04	Prorated Costs of Registration	Seminar Fees	$100.00	$2,104.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	52.60	**Prorated Costs of Registration Total**			$5,260.00		
04-05	20.00	Rivero, Mayda	Clerical	$17.03	$340.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	20.00	**Rivero, Mayda Total**			$340.60		
04-05	391.51	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$39,151.00	E-Commerce, etc. software for credit card collection of fees paid	Calculating and collecting enrollment fees
	391.51	**Software Costs for Enrollment Fees Total**			$39,151.00		
04-05	130.50	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$13,050.00	E-Commerce, etc.software for credit card refund of fees due to waiver	Waiving student fees

Mt. San Jacinto Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
4-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	130.50	**Software Costs for Enrollment Waivers Total**			$13,050.00		
04-05	8.00	Stevens, Cheryl	Head Cashier	$26.07	$208.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	2.00	Stevens, Cheryl	Head Cashier	$26.07	$52.14	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	144.00	Stevens, Cheryl	Head Cashier	$26.07	$3,754.08	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	24.00	Stevens, Cheryl	Head Cashier	$26.07	$625.68	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	584.00	Stevens, Cheryl	Head Cashier	$26.07	$15,224.88	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	80.00	Stevens, Cheryl	Head Cashier	$26.07	$2,085.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	842.00	**Stevens, Cheryl Total**			$21,950.94		
04-05	4.51	Student Notices for Non-Pymt of Fees	Cost of Forms and Postage	$100.00	$450.84	Material Costs of de-registration procedures for unpaid fees	Calculating and collecting enrollment fees
	4.51	**Student Notices for Non-Pymt of Fees Total**			$450.84		
04-05	83.83	Tax Notices for Students	Cost of Forms and Postage	$100.00	$8,383.23	Costs to issue 1098-T for enrollment fees paid	Calculating and collecting enrollment fees
	83.83	**Tax Notices for Students Total**			$8,383.23		
04-05	15.00	Venable, Julie	Accounting Specialist	$30.20	$453.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	5.00	Venable, Julie	Accounting Specialist	$30.20	$151.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	40.00	Venable, Julie	Accounting Specialist	$30.20	$1,208.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	40.00	Venable, Julie	Accounting Specialist	$30.20	$1,208.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	548.00	Venable, Julie	Accounting Specialist	$30.20	$16,549.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	380.00	Venable, Julie	Accounting Specialist	$30.20	$11,476.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,028.00	**Venable, Julie Total**			$31,045.60		
04-05	16.00	Williams, Shanae	Interm Director	$32.18	$514.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	20.00	Williams, Shanae	Interm Director	$32.18	$643.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	36.00	**Williams, Shanae Total**			$1,158.48		
	8,722.14	**Grand Total**			$277,693.72		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$16,044,184		$16,044,184	$300,465	$15,743,719
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,553,330		2,553,330	76,080	2,477,250
Course and Curriculum Development	6020	28,427		28,427	8,902	19,525
Academic/Faculty Senate	6030	28,441		28,441		28,441
Other Instructional Administration & Instructional Governance	6090	39,934		39,934	4,469	35,465
Instructional Support Services	6100					
Learning Center	6110	654,291		654,291		654,291
Library	6120	579,432		579,432	110,740	468,692
Media	6130	25,528		25,528	4,689	20,839
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	815,923		815,923	13,772	802,151
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,363,561		1,363,561	15,764	1,347,797
Matriculation and Student Assessment	6320	651,858		651,858	69,167	582,691
Transfer Programs	6330	6,498		6,498	3,634	2,864
Career Guidance	6340	118,646		118,646	5,233	113,413
Other Student Counseling and Guidance	6390	206,490		206,490	54,308	152,182
Other Student Services	6400					
Disabled Students Programs & Services	6420	334,199		334,199	9,417	324,782
Subtotal		$23,450,742	$0	$23,450,742	$676,640	$22,774,102

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$995,565	$453,744	$541,821	$10,163	$531,658
Health Services	6440					
Student Personnel Admin.	6450	333,975		333,975	88,174	245,801
Financial Aid Administration	6460	767,118		767,118	64,927	702,191
Job Placement Services	6470	7,547		7,547		7,547
Veterans Services	6480					
Miscellaneous Student Services	6490	24,107		24,107		24,107
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	969,721		969,721	969,721	0
Custodial Services	6530	337,640		337,640	337,640	0
Grounds Maintenance and Repairs	6550	208,703		208,703	208,703	0
Utilities	6570	1,152,324		1,152,324	1,152,324	0
Other	6590	31,695		31,695	31,695	0
Planning, Policy Making, and Coordination	6600	799,713		799,713	799,713	0
General Inst. Support Services	6700					
Community Relations	6710	314,157		314,157	314,157	0
Fiscal Operations	6720	1,297,778		1,297,778	1,297,778	0
Human Resources Management	6730	762,364		762,364	762,364	0
Noninstructional Staff Benefits & Incentives	6740	82,592		82,592	82,592	0
Staff Development	6750	25,662		25,662	25,662	0
Staff Diversity	6760	4,998		4,998	4,998	0
Logistical Services	6770	1,191,176		1,191,176	1,191,176	0
Management Information Systems	6780	1,203,187		1,203,187	1,203,187	0
Subtotal		$33,960,764	$453,744	$33,507,020	$9,221,614	$24,285,406

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: Mt. San Jacinto

(02) Period of Claim: 2004-2005

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	42,640		42,640	42,640	0
Community Services and Economic Development	6800					
Community Recreation	6810	64,295		64,295		64,295
Community Service Classes	6820	348,958		348,958		348,958
Community Use of Facilities	6830					
Economic Development	6840	217,929		217,929	6,040	211,889
Other Community Services & Economic Development	6890	40,016		40,016		40,016
Ancillary Services	6900					
Bookstores	6910	61,577		61,577		61,577
Child Development Center	6920	527,845		527,845	5,641	522,204
Farm Operations	6930					
Food Services	6940	18,968		18,968		18,968
Parking	6950	26,013		26,013	233	25,780
Student and Co-curricular Activities	6960	684,782		684,782	2,659	682,123
Student Housing	6970					
Other	6990	179,693		179,693		179,693
Auxiliary Operations	7000					
Contract Education	7010	115,274		115,274	2,220	113,054
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	528,778		528,778	528,778	0
(05) Total		$36,817,532	$453,744	$36,363,788	$9,809,825	$26,553,963
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.94%		

(07) Notes

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	2,331					2,331
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,064,695	23,337	52,093	4,277		1,144,402
Business and Management	0500	823,957	19,818	12,600	31,859		888,234
Communications	0600		865				865
Computer and Information Science	0700	780,949	17,910	33,694	120,212		952,765
Education	0800	903,874	52,421	2,162	35,808		994,265
Engineering and Related Industrial Tech.	0900	174,246	11,095	28,144	15,005		228,490
Fine and Applied Arts	1000	1,477,790	123,387	50,285	4,542		1,656,004
Foreign Language	1100	347,628	1,597	1,658			350,883
Health	1200	1,336,229	126,178	24,260	16,458		1,503,125
Consumer Education and Home Economics	1300	470,974	23,619	13,438	3,427		511,458
Law	1400	22,678					22,678
Humanities (Letters)	1500	2,257,453	11,970	2,890	1,321		2,273,634
Library Science	1600						
Mathematics	1700	1,583,271	15,459	630			1,599,360
Military Studies	1800						
Physical Sciences	1900	786,968	1,058	22,562	3,741		814,329
Psychology	2000	262,692	2,127	133			264,952
Public Affairs and Services	2100	207,752	2,036	701			210,489
Social Sciences	2200	1,293,583	15,328	8,643			1,317,554
Commercial Services	3000						
Interdisciplinary Studies	4900	873,912	229,787	114,164	63,815		1,281,678
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	26,688					26,688
Subtotal - Instructional Activities	**599**	14,697,670	677,992	368,057	300,465		16,044,184

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,028,086	449,164	76,080		2,553,330
Course and Curriculum Development	6020		14,482	5,043	8,902		28,427
Academic/Faculty Senate	6030		25,098	3,343			28,441
Other Instruct. Admin. & Instruct. Governance	6090		29,585	5,880	4,469		39,934
Subtotal - Instructional Administration	**6000**		2,097,251	463,430	89,451		2,650,132
Instructional Support Services (6100)							
Learning Center	6110	384,842	261,733	7,716			654,291
Library	6120		440,148	28,544	110,740		579,432
Media	6130		16,708	4,131	4,689		25,528
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	384,842	718,589	40,391	115,429		1,259,251
Admissions and Records	**6200**		782,115	20,036	13,772		815,923
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,329,332	18,465	15,764		1,363,561
Matriculation and Student Assessment	6320		455,415	127,276	69,167		651,858
Transfer Programs	6330			2,864	3,634		6,498
Career Guidance	6340		97,106	16,307	5,233		118,646
Other Student Counseling and Guidance	6390		94,473	57,709	54,308		206,490
Subtotal - Student Counseling and Guidance	**6300**		1,976,326	222,621	148,106		2,347,053

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIF NIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		308,481	16,301	9,417		334,199
Extended Opportunity Prgms. & Services (EOPS)	6430		464,651	67,007	10,163	453,744	995,565
Health Services	6440						
Student Personnel Administration	6450		207,108	38,693	88,174		333,975
Financial Aid Administration	6460		667,234	34,957	64,927		767,118
Job Placement Services	6470		7,547				7,547
Veterans Services	6480						
Miscellaneous Student Services	6490		11,420	12,687			24,107
Subtotal - Other Student Services	**6400**		1,666,441	169,645	172,681	453,744	2,462,511
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		814,032	149,286	6,403		969,721
Custodial Services	6530		272,508	64,180	952		337,640
Grounds Maintenance and Repairs	6550		182,784	25,919			208,703
Utilities	6570			1,152,324			1,152,324
Other Operation and Maintenance of Plant	6590			31,695			31,695
Subtotal - Operation and Maintenance of Plant	**6500**		1,269,324	1,423,404	7,355		2,700,083
Planning, Policymaking, and Coordination	**6600**		494,476	301,069	4,168		799,713

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALI[illegible]NIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		195,882	111,909	6,366		314,157
Fiscal Operations	6720		1,103,787	191,957	2,034		1,297,778
Human Resources Management	6730		663,124	92,979	6,261		762,364
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		82,592				82,592
Staff Development	6750		18,742	6,920			25,662
Staff Diversity	6760			3,737	1,261		4,998
Logistical Services	6770		616,947	543,841	30,388		1,191,176
Management Information Systems	6780		790,277	284,099	128,811		1,203,187
Other General Institutional Support Services	6790		42,640				42,640
Subtotal - General Institutional Support Services	**6700**		3,513,991	1,235,442	175,121		4,924,554
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		55,106	9,189			64,295
Community Service Classes	6820	35	247,073	101,850			348,958
Community Use Facilities	6830						
Economic Development	6840		182,780	29,109	6,040		217,929
Other Community Svcs. & Economic Development	6890		15,430	24,586			40,016
Subtotal - Community Services	**6800**	35	500,389	164,734	6,040		671,198

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910		61,577				61,577
Child Development Centers	6920		346,758	175,446	5,641		527,845
Farm Operations	6930						
Food Services	6940		18,968				18,968
Parking	6950		2,910	22,870	233		26,013
Student and Co-curricular Activities	6960		567,066	115,057	2,659		684,782
Student Housing	6970						
Other Ancillary Services	6990		131,383	48,310			179,693
Subtotal - Ancillary Services	**6900**		1,128,662	361,683	8,533		1,498,878
Auxiliary Operations (7000)							
Contract Education	7010	34,916	41,052	37,086	2,220		115,274
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	34,916	41,052	37,086	2,220		115,274
Physical Property and Related Acquisitions (7100)	**7100**		6,472	29,941	492,365		528,778
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290			47,761			47,761
Subtotal - Long-Term Debt and Other Financing	**7200**			47,761			47,761
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					2,847,666	2,847,666
Student Aid	7320					29,161	29,161
Other Outgo	7330					700	700
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,877,527	2,877,527
TOTAL EXPENDITURES and OTHER OUTGO	**391**	15,117,463	14,873,080	4,885,300	1,535,706	3,331,271	39,742,820

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *04-05*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	29,496
Avg. time p/account	1.0
Total Time (in minutes)	29496
Per Hour	60
Hours Worked **(**Activity 11)**	**491.6**
***EFC 2**	11,817
Avg. time p/student	1.7
Total Time (in minutes)	20089
Per Hour	60
Hours Worked **(**Activity 12)**	**334.8**
***EFC 1**	29,496
Avg. time p/question	2.4
Total Time (in minutes)	70790
Per Hour	60
Hours Worked **(**Activity 13)**	**1179.8**
***EFC 2**	11,817
Avg. time p/file	1.6
Total Time (in minutes)	18907
Per Hour	60
Hours Worked **(**Activity 14)**	**315.1**
***EFC 4**	867
Avg. time p/account	1.6
Total Time (in minutes)	1387
Per Hour	60
Hours Worked **(**Activity 15)**	**23.1**
***EFC 5 (Not provided, no sub.)**	
Avg. time p/student	2.0
Total Time (in minutes)	
Per Hour	60
Hours Worked **(** 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *04-05*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,741
Avg. time p/question	4.4
Total Time (in minutes)	29660
Per Hour	60
Hours Worked (****Activity 21**)	**494.3**
***EFW 6**	6,741
Avg. time p/application	3.6
Total Time (in minutes)	24268
Per Hour	60
Hours Worked (****Activity 22**)	**404.5**
***EFW 6**	6,741
Avg. time p/evaluation	3.6
Total Time (in minutes)	24268
Per Hour	60
Hours Worked (****Activity 23**)	**404.5**
***EFW 8 (Not provided, no sub.)**	
Avg. time p/application	3.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
***EFW 7**	6,741
Avg. time p/application	4.8
Total Time (in minutes)	32357
Per Hour	60
Hours Worked (****Activity 25**)	**539.3**
***EFW 8 (Not provided, no sub.)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Acevedo, Lilia	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Bennett, Selma	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Bravo, Esmeralda	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Carrillo, Lisa	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Ching-Lee, Cynthia	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Davis, Jared	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Dawson, Terry	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Dawson, Toni	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Deaver, Darrin	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Denz, Alice	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Dibbell, Alice	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Dillard, Mary Lou	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
DiMemmo, Kristie	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Edghill, Hal	Enrollment Service Clerk TVC	3.0	2.0	4.0	3.0		
Emmeneger, Terry	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Ficus, Priscilla	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Flores, Maranatha	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Garcia, Ermelinda	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Garcia, Carla	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Gardner, Janine	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Grosse, Iris	Enrollment Service Clerk Full Time	3.0	2.0	4.0	3.0		
Guillian, Maribell	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Hefley, Chris	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Heitritter, Josie	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Hernandez, Maria	Cashier	0.5	1.5	0.5	0.5	1.5	2.0
Hop, Pamela	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Horn, Shellee	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Jackson, Fran	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Jessen-Vellor, Christine	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Jimenez, Lupe	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Kroencke, Rebecca	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Lonzano, Jose	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Lybrand, Margaret	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Maples, Mary	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Martinez, Sandra	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Masonis, Sherrell	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
McKinnis,Kim	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Mendoza, Heather	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Miller, Wanda	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Mozga, Chris	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Montez, Danna	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Naish, Cheri	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Ochoa, Melissa	Cashier	0.5	1.5	0.5	0.5	1.5	2.0

Schedule 2
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Owen, Tracie	Cashier	0.5	1.5	0.5	0.5	1.5	1.0
Padilla, Jackie	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Parral, Jennifer	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Richter, Karen	Cashier	0.5	1.5	0.5	0.5	1.5	2.0
Rodriguez, Raul	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Saenz, Esy	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Sanchez, Rosalie	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Sharp Brian	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Shearer, Rae Ann	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Simpson-Underwood, Vicki	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Singleton, Carol	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Small, Charlotte	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Starr, Yvette	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Stevens, Cheryl	Cashier	0.5	1.5	0.5	0.5	1.5	15.0
Storrie, Reoberta	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Vaughn, Samantha	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Velkoff, Jackie	Administrative Associate	3.0	2.0	4.0	3.0	3.0	
Ward, Karen	Cashier	0.5	1.5	0.5	0.5	1.5	1.0
Wilkes, Onishia	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Witt, Dawn	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Average		**1.0**	**1.7**	**2.4**	**1.6**	**1.6**	**2.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 2
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Average PHR's

Purpose: To calculate an average PHR for each year listed.
Source: PHR's from District. Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Years							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acevedo, Lilia	Enrollment Service Clerk Full Time				7.79	19.41	19.41		
Bennett, Selma	Enrollment Service Clerk Full Time						14.06		
Bravo, Esmeralda	Enrollment Service Clerk Part Time			6.88	7.13	7.13	19.67	20.87	
Carrillo, Lisa	Cashier	12.49	14.63	15.49	15.88	15.88	15.88		
Ching-Lee, Cynthia	Enrollment Service Clerk Part Time	7.63	7.63	7.28	8.80	8.80	8.80	9.91	
Davis, Jared	Enrollment Service Clerk Part Time							16.33	
Dawson, Terry	Enrollment Service Clerk Temp. & Sub.				13.69	13.69			
Dawson, Toni	Enrollment Service Clerk Temp. & Sub.					13.69			
Deaver, Darrin	Enrollment Service Clerk Temp. & Sub.					13.69			
Denz, Alice	Cashier	12.49							
Dibbell, Alice	Enrollment Service Clerk Temp. & Sub.				13.69				
Dillard, Mary Lou	Enrollment Service Clerk Part Time					14.56	14.06	16.33	
Edghill, Hal	Enrollment Service Clerk TVC			15.13	20.00	21.22	22.51	22.51	
Emmeneger, Terry	Enrollment Service Clerk Temp. & Sub.			12.18	13.69				
Ficus, Priscilla	Enrollment Service Clerk Temp. & Sub.	12.97	12.13	11.59	12.76	14.56			
Flores, Maranatha	Enrollment Service Clerk Temp. & Sub.						14.06		
rcia, Carla	Enrollment Service Clerk Temp. & Sub.					13.69			
Garcia, Ermelinda	Enrollment Service Clerk Full Time		6.88	6.88	14.03	17.02	19.09	19.67	
Gardner, Janine	Enrollment Service Clerk Temp. & Sub.		11.19						
Grosse, Iris	Enrollment Service Clerk Full Time		15.33	15.33	18.85	19.09	19.85	20.26	
Guillian, Maribell	Enrollment Service Clerk Temp. & Sub.						15.89		
Hefley, Chris	Enrollment Service Clerk Full Time	12.97							
Heitritter, Josie	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69	13.69	15.89	21.99	
Hernandez, (Saenz) Maria	Cashier		19.09	19.09	19.09	19.09	19.67	21.11	22.51
Hop, Pamela	Cashier							16.81	22.51
Horn, Shellee	Cashier	12.49							
Jackson, Fran	Enrollment Service Clerk Full Time	12.97							
Jessen-Vellor, Christine	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69				
Jimenez, Lupe	Enrollment Service Clerk Full Time	12.97	16.01	16.26	18.93	19.66			
Kroencke, Rebecca	Enrollment Service Clerk Temp. & Sub.	11.00							
Lonzano, Jose	Enrollment Service Clerk Temp. & Sub.					14.56			
Lybrand, Margaret	Cashier			15.49					
Maples, Mary	Enrollment Service Clerk Full Time			14.32	14.32	18.54	19.09	19.67	
Martinez, Sandra	Enrollment Service Clerk Temp. & Sub.		11.15	12.18					
Masonis, Sherrell	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69	14.56	14.06		
McKinnis,Kim	Cashier						19.88	16.81	
Mendoza, Heather	Enrollment Service Clerk Full Time	18.07	18.07	18.07	21.85				
Miller, Wanda	Cashier	12.49							
Mozga, Chris	Enrollment Service Clerk Part Time						14.06	16.33	
Montez, Danna	Cashier	12.49							
Naish, Cheri	Enrollment Service Clerk Temp. & Sub.							21.99	
Ochoa, Melissa	Cashier				15.88	18.54	19.88		
Owen, Tracie	Cashier			19.09	19.09	19.09	20.26	21.75	21.75

Schedule 2
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Average PHR's

Staff	Title	Years							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Padilla, Jackie	Enrollment Service Clerk Part Time					14.56	14.06	16.33	
Parral, Jennifer	Enrollment Service Clerk Temp. & Sub.					13.69			
Richter, Karen	Cashier						26.39	21.11	21.11
Rodriguez, Raul	Enrollment Service Clerk Temp. & Sub.							21.99	
Saenz, Esy	Cashier	12.49	14.63	15.49					
Sanchez, Rosalie	Enrollment Service Clerk Part Time					14.56			
Sharp Brian	Cashier				15.88	18.54	19.88		
Shearer, Rae Ann	Enrollment Service Clerk Full Time		12.13	11.59					
Simpson-Underwood, Vicki	Enrollment Service Clerk Temp. & Sub.			12.18	13.69				
Singleton, Carol	Enrollment Service Clerk Temp. & Sub.				13.69				
Small, Charlotte	Enrollment Service Clerk Temp. & Sub.			12.18					
Starr, Yvette	Enrollment Service Clerk Full Time				12.76				
Stevens, Cheryl	Cashier				22.22	23.57	24.28	26.07	26.07
Storrie, Reoberta	Enrollment Service Clerk Temp. & Sub.				13.69				
Vaughn, Samantha	Cashier	12.49							
Velkoff, Jackie	Administrative Associate	16.05	16.54	19.41	19.99	21.21	25.90	26.68	
Ward, Karen	Cashier	12.49	14.63	15.49					
Wilkes, Onishia	Enrollment Service Clerk Temp. & Sub.					13.69			
Witt, Dawn	Enrollment Service Clerk Temp. & Sub.	11.00							
Average		**12.43**	**13.15**	**13.67**	**15.13**	**16.07**	**18.19**	**19.73**	**22.79**

Conclusion: Findings go forward to EFCW -2

Schedule 3
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Acevedo, Lilia	Financial Aid Tech II	5	3	3	3	5	3
Altree, Tara	Student Loan Cordinator	2	6	3	3	2	3
Camper, Janyt	Financial Aid Tech II	4	5	3	4	5	4
Cowser, Andrea	Financial Aid Tech II	5	3	3	3	5	3
Cowen, Theresa	Financial Aid Tech II	5	3	3	3	5	3
DeLeon, Robin	Clerical Assistant	5	3	3	3	5	3
Devor, Fay	Clerical Assistant	5	3	3	3	5	3
Furr, Burnadette	Technicial Support	3	3	3	3	3	3
Gauthier, Fay	Clerical Assistant	5	3	3	3	5	3
Gonzalez, Cathy	Financial Aid Tech II	5	3	3	3	5	3
Hancock, Sheri	Financial Aid Director	5	3	3	3	5	3
Higuera, Araceli	Clerical Assistant II	6	4	15	6	5	15
Higuera-Mena, Francisa	Financial Aid Tech II	5	3	3	3	5	3
Jimenez, Rosetta	Financial Aid Tech	5	5	5	5	5	5
Jones, Marie	Financial Aid Tech II	5	3	3	3	5	3
LaCasse, Melissa	Clerical Assistant	2	7	3	7	10	7
Medlock, Phil	Financial Aid Tech II	5	3	3	3	5	3
Muehring, Mary Ellen	Financial Aid Director	5	3	3	3	5	3
Navarro, Lesia	Financial Aid Supervisor	5	3	5	2	5	2
Orlauski, Rebecca	Financial Aid Tech	3	1	5	5	5	5
Parker, Robert	Financial Aid Tech II	3	3	2	2	2	2
Peikert, Shannon	Clerical Assistant	5	3	3	3	5	3
Piper, Edlina	Clerical Assistant II	5	3	4	6	4	6
Plascencia, Grace	Financial Aid Supervisor	5	3	3	3	5	3
Plascensia, Michele	Financial Aid Clerk II	3	5	3	3	5	2
Rivero, Mayda	Clerical Assistant II	2	7	2	10	3	2
Rosas, Cathy	Clerical Assistant	5	3	3	3	5	3
Rubin, Shelly M.	Financial Aid Tech II	5	3	7	2	5	3
Salazar-Mendoza, Sarah	Clerical Assistant	5	3	3	3	5	3
Silva, Toni	Financial Aid Tech II	2	5	2	4	6	4
Smith, Delores	Financial Aid Tech II	5	3	3	3	5	3
Velasquez, Karla	Clerical Assistant	5	3	3	3	5	3
Williams, Shanae	Financial Aid Supervisor	5	5	5	5	5	5
Average		**4.4**	**3.6**	**3.6**	**3.6**	**4.8**	**3.7**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default)**

EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Average PHR's

Purpose: To calculate an average PHR for each year listed.
Source: PHR's from District. Initial year claim 98-99 through 05-06.
Findings:

		Years						
Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acevedo, Lilia	Financial Aid Tech II					19.41		
Altree, Tara	Student Loan Cordinator					19.99	21.09	22.90
Camper, Janyt	Financial Aid Tech II					16.06	17.03	16.96
Cowser, Andrea	Financial Aid Tech II	15.10						
Cowen, Theresa	Financial Aid Tech II	15.10	16.54					
DeLeon, Robin	Clerical Assistant		12.36	12.36				
Devor, Fay	Clerical Assistant		12.36	12.36				
Furr, Burnadette	Technicial Support					28.62	29.48	31.65
Gauthier, Fay	Clerical Assistant			12.36	12.36			
Gonzalez, Cathy	Financial Aid Tech II	15.10	16.54					
Hancock, Sheri	Financial Aid Director	40.19	41.98					
Higuera, Araceli	Clerical Assistant II	15.10	16.54		16.27	16.06	17.03	16.96
Higuera-Mena, Francisa	Financial Aid Tech II		16.54	16.45				
Jimenez, Rosetta	Financial Aid Tech						17.03	16.96
Jones, Marie	Financial Aid Tech II		16.54	16.45	16.27			
LaCasse, Melissa	Clerical Assistant						12.74	12.37
Medlock, Phil	Financial Aid Tech II	15.10						
Muehring, Mary Ellen	Financial Aid Director		38.42	44.98	44.98	47.73	52.78	52.78
Navarro, Lesia	Financial Aid Supervisor	16.54	20.76	28.26	28.26	29.10	29.98	32.18
Orlauski, Rebecca	Financial Aid Tech						17.03	16.96
Parker, Robert	Financial Aid Tech II				16.27	16.06	17.03	
Peikert, Shannon	Clerical Assistant				12.36			
Piper, Edlina	Clerical Assistant II			16.45	16.27	16.06	17.03	16.96
Plascencia, Grace	Financial Aid Supervisor	21.51						
Plascensia, Michele	Financial Aid Clerk II	15.10	16.54	16.45	16.27	16.06	17.03	16.96
Rivero, Mayda	Clerical Assistant II				16.27	16.06	17.03	16.96
Rosas, Cathy	Clerical Assistant			12.36				
Rubin, Shelly M.	Financial Aid Tech II				16.27	16.06	17.03	16.96
Salazar-Mendoza, Sarah	Clerical Assistant			12.36	12.36			
Silva, Toni	Financial Aid Tech II	15.10	16.54	16.45	16.27	16.06	17.03	16.96
Smith, Delores	Financial Aid Tech II						17.03	
Velasquez, Karla	Clerical Assistant	12.36	12.36					
Williams, Shanae	Financial Aid Supervisor			28.43	29.10	29.98	32.18	37.62
Average		**17.85**	**19.54**	**18.90**	**19.26**	**21.67**	**21.50**	**22.81**

Conclusion: Findings go forward to EFCW-2

Schedule 4
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-05
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. Initial year claim 98-99 through 05-06. (back-up in 05-06 only)
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	22,351	24,359	27,410	29,081	30,634	28,267	29,496
EFC 2	1.8-1	2.	Paid Enrollment fees	11,099	14,625	14,671	12,660	13,127	13,164	11,817
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	3,846	9,734	12,739	16,421	17,507	15,103	17,679
EFC 4	1.8-2	1.	Delinquencies collections	-		617	580	1,099	1,813	867
EFC 5	1.8-2	2.	Refunds	-						
EFW 6	1.8-3	1.	Waivers Requested	X	3,326	4,577	5,395	5,967	5,783	6,741
EFW 7	1.8-3	2.	Waivers Approved	X	3,326	4,577	5,395	5,967	5,783	6,741
EFW 8	1.8-3 (1-2)		Waivers Denied	X	Not reported					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Wednesday, May 2, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2004 Summer Term

Data Current As Of May 02, 2012 02:38:02

Total Headcount	3,883

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California Home Wednesday, May 2, 2012

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2004 Fall Term

Data Current As Of May 02, 2012 02:38:09

Total Headcount	12,832

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California Home Wednesday, May 2, 2012

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2005 Spring Semester

Data Current As Of May 02, 2012 02:38:24

Total Headcount	12,781

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Mt. San Jacinto Co[illegible]ity College District
308/95 Enrollment Fee Collection a[illegible] Waivers: Salary Information/PHRs
F/Ys: 1998-99 to 2005-06

			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	ES Clerk-permanent	Position Average	19,299	18,039	17,242	18,988	21,665	20,923	24,299	26,274	$12.97	$12.13	$11.59	$12.76	$14.56	$14.06	$16.33	$17.66
ES	ES Clerk-permanent	Acevedo, Lilia				XX	XX	XX										
ES	ES Clerk-permanent	Bennett, Selma					XX	XX										
ES	ES Clerk-permanent	Bravo, Esmeralda			XX	XX	XX											
ES	ES Clerk-permanent	Bravo, Esmeralda			XX	XX		XX	XX	XX								
ES	ES Clerk-permanent	Ching-Lee, Cynthia	XX	XX	XX	XX	XX	XX	XX									
ES	ES Clerk-permanent	Davis, Jared							XX									
ES	ES Clerk-permanent	Dillard, Mary Lou					XX	XX	XX									
ES	ES Clerk-permanent	Fiscus, Priscilla	XX	XX														
ES	ES Clerk-permanent	Flores, Maranatha						XX	XX									
ES	ES Clerk-permanent	Garcia, Ermalinda			XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Grosse, Iris		XX	XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Hefley, Chris	XX	XX														
ES	ES Clerk-permanent	Jackson, Fran																
ES	ES Clerk-permanent	Jiminez, Lupe	XX	XX	XX	XX	XX											
ES	ES Clerk-permanent	Lozano, Jose		XX	XX													
ES	ES Clerk-permanent	Mapes, Mary		XX	XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Masonis, Sherrell					XX	XX										
ES	ES Clerk-permanent	Mendoza, Heather			XX	XX	XX											
ES	ES Clerk-permanent	Mozga, Chris						XX	XX									
ES	ES Clerk-permanent	Padilla, Jackie					XX	XX	XX									
ES	ES Clerk-permanent	Sanchez, Rosalie					XX											
ES	ES Clerk-permanent	Shearer, Rae Ann	XX	XX														
ES	ES Clerk-permanent	Starr, Yvette			XX	XX												
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	ES Clerk-temp/sub	Hourly Rate	11.00	11.15	12.18	13.69	13.69	15.89	21.99		11.00	11.15	12.18	13.69	13.69	15.89	21.99	
ES	ES Clerk-temp/sub	Dawson, Terry				XX	XX											
ES	ES Clerk-temp/sub	Dawson, Toni					XX											
ES	ES Clerk-temp/sub	Deaver, Darrin					XX											
ES	ES Clerk-temp/sub	Dibbell, Alice				XX												
ES	ES Clerk-temp/sub	Emmeneger, Terry			XX	XX												
ES	ES Clerk-temp/sub	Garcia, Carla					XX											
ES	ES Clerk-temp/sub	Gardner, Janine		XX														
ES	ES Clerk-temp/sub	Guillian, Maribell						XX										
ES	ES Clerk-temp/sub	Heitritter, Josie	XX	XX	XX	XX	XX	XX	XX									
ES	ES Clerk-temp/sub	Jessen-Vellor, Christine	XX	XX	XX	XX												
ES	ES Clerk-temp/sub	Kroencke, Rebecca	XX															
ES	ES Clerk-temp/sub	Masonis, Sherrell	XX	XX	XX	XX												
ES	ES Clerk-temp/sub	Martinez, Sandra			XX	XX												
ES	ES Clerk-temp/sub	Naish, Cheri							XX									
ES	ES Clerk-temp/sub	Parral, Jennifer					XX											
ES	ES Clerk-temp/sub	Rodriguez, Raul							XX									
ES	ES Clerk-temp/sub	Sharp, Brian						XX										
ES	ES Clerk-temp/sub	Simpson-Underwood, Vicki				XX	XX											
ES	ES Clerk-temp/sub	Singleton, Carol					XX											
ES	ES Clerk-temp/sub	Small, Charlotte			XX													
ES	ES Clerk-temp/sub	Storrie, Reoberta				XX												
ES	ES Clerk-temp/sub	Wilkes, Onishia					XX											
ES	ES Clerk-temp/sub	Witt, Dawn	XX															
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	Acevedo, Lilia	ES Clerk			11,593	28,877	28,877						$7.79	$19.41	$19.41			

ES	Bradley, Ramona	ES Clerk						8,799	12,008							$5.91	$8.07	
ES	Bravo, Esmealda	ES Clerk			10,239	10,611		29,257	31,039	33,322			$6.88	$7.13		$19.67	$20.87	$22.40
ES	Ching-Lee, Cynthia	ES Clerk		11,343	10,833	13,098	13,098	13,098	14,743	15,828		$7.63	$7.28	$8.80	$8.80	$8.80	$9.91	$10.64
ES	Edghill, Hal	ES Clerk			22,512	29,749	31,561	33,483	33,483	37,025			$15.13	$20.00	$21.22	$22.51	$22.51	$24.89
ES	Garcia, Ermalinda	ES Clerk			10,239	20,868	25,323	28,405	29,257	31,409			$6.88	$14.03	$17.02	$19.09	$19.67	$21.11
ES	Gonzales, Elida	Dean of Admissions	75,054	78,395	78,395	106,410	109,603	109,603	109,603		$50.45	$52.70	$52.70	$71.53	$73.68	$73.68	$73.68	
ES	Gross, Iris	ES Clerk		22,803	22,803	28,036	28,405	29,527	30,135	32,352		$15.33	$15.33	$18.85	$19.09	$19.85	$20.26	$21.75
ES	Jiminez, Lupe	ES Clerk		23,818	24,192	28,161	29,251	33,917	33,917	35,352		$16.01	$16.26	$18.93	$19.66	$22.80	$22.80	$23.76
ES	Loomis, Susan	Director, Enrollment Svc						42,033	47,308	74,007						$28.26	$31.80	$49.75
ES	Mapes, Mary	ES Clerk		8,746	21,300	21,300	27,578	28,405	29,257	29,257		$5.88	$14.32	$14.32	$18.54	$19.09	$19.67	$19.67
ES	Mendoza, Heather	ES Clerk			26,880	32,502	32,502						$18.07	$21.85	$21.85			
ES	Velkoff, Jackie	Administrative Assoc.	23,882	24,599	28,877	29,744	31,555	38,533	39,689		$16.05	$16.54	$19.41	$19.99	$21.21	$25.90	$26.68	
ES	Jones, Marie	ES Clerk			22,804	25,337	31,555	32,502					$15.33	$17.03	$21.21	$21.85		
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
FA	FA Tech II	Position Average	16,726	22,462	24,599	24,477	24,209	23,889	25,337	25,232	$11.24	$15.10	$16.54	$16.45	$16.27	$16.06	$17.03	$16.96
FA	FA Tech II	Camper, Janyt							XX	XX								
FA	FA Tech II	Cowen, Theresa	XX	XX	XX													
FA	FA Tech II	Cowser, Andrea																
FA	FA Tech II	Gonzalez, Cathy	XX	XX	XX													
FA	FA Tech II	Higuera, Araceli						XX	XX	XX								
FA	FA Tech II	Higuera-Mena, Francisca	XX	XX	XX	XX	XX	XX	XX									
FA	FA Tech II	Jiminez, Rosetta							XX	XX								
FA	FA Tech II	Jones, Marie	XX	XX	XX	XX	XX	XX										
FA	FA Tech II	Medlock, Phil																
FA	FA Tech II	Orlauski, Rebecca								XX								
FA	FA Tech II	Parker, Albert						XX	XX									
FA	FA Tech II	Piper, Edelina																
FA	FA Tech II	Plascencia, Michele							XX	XX								
FA	FA Tech II	Rivero, Mayda							XX	XX								
FA	FA Tech II	Rubin, Shelly								XX								
FA	FA Tech II	Silva, Toni	XX	XX	XX	XX	XX	XX	XX	XX								
FA	FA Tech II	Smith, Delores							XX									
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
FA	FA Clerical Asst	Avg by position			18,394	18,394	18,394	19,514	18,954	18,395			$12.36	$12.36	$12.36	$13.12	$12.74	$12.37
FA	FA Clerical Asst	LaCasse, Melissa							XX	XX								
FA	FA Clerical Asst	Salazar-Mendoza, Sarah																
FA	FA Clerical Asst	Pelkert, Shannon																
FA	FA Clerical Asst	Rosas, Cathy							XX									
FA	FA Clerical Asst	Gauthier, Fay						XX	XX									
FA	FA Clerical Asst	DeLeon, Robin																
FA	FA Clerical Asst	Devor, Fay																
FA	FA Clerical Asst	Velasquez, Karla																
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
FA	FA Tech Support	Avg by position				36,728	35,512	42,577	43,855	47,081				$24.69	$23.87	$28.62	$29.48	$31.65
FA	Sawyer, Timothy	FA Tech Support				36,728	36,728							$24.69	$24.69			
FA	Furr, Bernadette	FA Tech Support					34,296	42,577	43,855	47,081					$23.05	$28.62	$29.48	$31.65
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
FA	Altree, Tara	Student Loan Coord						29,744	31,370	34,072						$19.99	$21.09	$22.90
FA	Hancock, Sherri	Director of FA	59,787	62,449							$40.19	$41.98						
FA	Muehring, Mary E	Director of FA			57,150	66,915	66,915	71,004	78,514	78,514			$38.42	$44.98	$44.98	$47.73	$52.78	$52.78
FA	Navarro, Lesia	FA Supervisor	23,883	24,599	30,881	42,033	42,033	43,294	44,592	47,873	$16.05	$16.54	$20.76	$28.26	$28.26	$29.10	$29.98	$32.18
FA	Placencia, Grace	FA Supervisor	32,000								$21.51							
FA	William, Shanae	FA Supervisor				42,294	43,294	44,592	47,873	55,968				$28.43	$29.10	$29.98	$32.18	$37.62

Mt. San Jacinto Co[illegible]ity College District
308/95 Enrollment Fee Collection and Waivers: Salary Information/PHRs
F/Ys: 1998-99 to 2005-06

			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
IT	Callin, Dennis	Computer Programmer	31,807	31,807							$21.38	$21.38						
IT	Guarino, Susan	Dean of IT	75,395	78,395	95,489	98,354	100,321	100,321	103,331	110,933	$50.68	$52.70	$64.19	$66.12	$67.44	$67.44	$69.46	$74.57
IT	Peterson, Gregory	Sr. Programmer	39,741	40,970	42,199						$26.71	$27.54	$28.37					
IT	Nguyen, Kim	Sr. Programmer			36,401	45,334	45,334	48,104	49,547	54,788			$24.47	$30.47	$30.47	$32.34	$33.31	$36.83
IT	Holman, Robert	Sr. Programmer					20,439	46,703	50,139	50,139					$13.74	$31.39	$33.70	$33.70
IT	Orlauski, Brian	Supervisor, IT		22,512	30,881	33,223	39,612	48,095	51,034	83,506		$15.13	$20.76	$22.33	$26.63	$32.33	$34.31	$56.13
IT	Ehrhardt, Don	Supervisor, IT			59,690	59,690	73,318	75,518	75,518				$40.12	$40.12	$49.29	$50.76	$50.76	
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS		Average - Hourly Rate	12.49	14.63	15.49	15.88					12.49	14.63	15.49	15.88				
BS	Carrillo, Lisa	Cashier	XX	XX	XX	XX												
BS	Denz, Alice	Cashier	XX															
BS	Hernandez, Maria	Cashier				XX												
BS	Horn, Shellee	Cashier	XX															
BS	Lybrand, Margaret	Cashier			XX													
BS	Miller, Wanda	Cashier	XX															
BS	Montez, Danna	Cashier	XX															
BS	Ochoa, Melissa	Cashier	XX	XX	XX	XX												
BS	Owen, Karen	Cashier			XX													
BS	Owen, Tracie	Cashier			XX	XX												
BS	Richter, Karen	Cashier																
BS	Saenz, Esy	Cashier	XX	XX	XX													
BS	Saenz, Maria	Cashier		XX														
BS	Sharp, Brian	Cashier				XX												
BS	Stevens, Cheryl	Cashier	XX	XX	XX	XX												
BS	Vaughn, Samantha	Cashier	XX	XX														
BS	Ward, Karen	Cashier	XX	XX														
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS		Average - Permanent					27,581	29,572	25,007	33,487					$18.54	$19.88	$16.81	$22.51
BS	Hernandez, Maria	Cashier					XX	XX	XX	XX								
BS	Owen, Tracie	Cashier					XX	XX	XX	XX								
BS	Ochoa, Melissa	Cashier					XX	XX										
BS	Sharp, Brian	Cashier					XX	XX	XX									
BS	Richter, Karen	Cashier						XX	XX	XX								
BS	Hop, Pamela	Cashier							XX	XX								
BS	McKinnis, Kim	Cashier						XX										
BS	Carrillo, Lisa	Cashier					XX											
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS	Hernandez, Maria	Cashier					28,405	29,257	31,409	31,409					$19.09	$19.67	$21.11	$21.11
BS	Montez, Carol	Supervisor, Bus Svcs	37,979	38,515	38,515	47,299	69,653	55,455	57,801	57,801	$25.53	$25.89	$25.89	$31.80	$46.82	$37.28	$38.86	$38.86
BS	Oberg, Barbara	Admin Asst. Bus Svcs	38,618	41,548	41,548	49,538	64,895	66,840	68,847	73,912	$25.96	$27.93	$27.93	$33.30	$43.62	$44.93	$46.28	$49.69
BS	Owen, Tracie	Cashier					28,405	30,135	32,352	32,352					$19.09	$20.26	$21.75	$21.75
BS	Richter, Karen	Cashier					38,405	39,257	31,409	31,409					$25.82	$26.39	$21.11	$21.11
BS	Stevens, Cheryl	Head Cashier				33,049	35,068	36,120	38,777	38,777				$22.22	$23.57	$24.28	$26.07	$26.07
BS	Venable, Julie	Accountant	27,687	30,763	31,686	38,312	37,197	43,611	44,920	46,820	$18.61	$20.68	$21.30	$25.75	$25.00	$29.32	$30.20	$31.47

Schedule 5
Mt. San Jacento Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office (back-up in 05-06 only)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 1,197,272	$ 1,263,250	$ 1,334,230	$ 1,416,041	$ 3,561,982	$ 3,137,636
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 23,945	$ 25,265	$ 26,685	$ 28,321	$ 71,240	$ 62,753
1.8-4 line 4A	Enrollment Fees Waived	$ 616,271	$ 682,088	$ 828,190	$ 918,126	$ 1,489,638	$ 2,538,056
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 43,139	For 00-01 through 04-05 unit fee				
1.8-4 line 5	Summer		1,487	10,053	11,609	674	3,479
	Fall		29,777	31,991	35,931	41,179	47,579
	Winter/Interssion						
	Spring		30,744	33,246	35,926	41,167	47,630
	Total # of credits		62,008	75,290	83,466	83,020	98,688
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 43,139					
1.8-4 5	Credit Units Waived		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 55,464**	**$ 70,069**	**$ 85,078**	**$ 94,317**	**$ 105,341**	**$ 140,567**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Mt. San Jacinto
COUNTY: Riverside

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$14,596,993	$13,356,902	$-55,224	$13,301,678
ENROLL FEE ADMIN (2%)	48,536	41,741	6,795	48,536
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,181,415	1,016,016	165,399	1,181,415
S.F.A.A.	417,739	338,186	79,553	417,739
E.O.P.S.	574,390	492,597	81,793	574,390
C.A.R.E.	169,927	144,322	25,605	169,927
D.S.P.S.	490,100	419,425	70,675	490,100
STATE HOSPITALS	0	0	0	0
CALWORKS	263,424	226,544	36,880	263,424
MATRICULATION (CREDIT)	362,541	307,485	55,056	362,541
MATRIC. (NONCREDIT)	48,277	41,519	6,758	48,277
FAC.& STAFF DIVERSITY	13,024	9,257	3,767	13,024
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	327,277	281,459	45,818	327,277
BLOCK GRANT (ONE-TIME)	172,599	148,435	24,164	172,599
ECON. DEVELOPMENT	63,937	0	53,707	53,707
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	61,777	53,129	8,648	61,777
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	352,918	137,638	158,813	296,451
PLANT & INSTRUCTIONAL	193,597	166,494	27,103	193,597
PRIOR YEAR CORRECTION	-88,272	-98,805	10,533	-88,272
TOTAL	$19,372,102	$17,167,568	$831,514	$17,999,082

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sche[illegible] 5A
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
	EFCW-1 B. 1. a.		$ 42,164.37	$ 12,279.77	$ 9,103.01	$ 19,254.04	$ 20,833.21	$ 21,159.33
	EFCW-1 B. 1. b.		$ 12,374.32	$ 6,449.36	$ 5,754.28	$ 8,656.52	$ 11,220.16	$ 7,997.48
	EFCW-1 B. 2. a.		$ 26,029.40	$ 23,745.28	$ 30,655.82	$ 32,255.32	$ 42,834.02	$ 39,451.00
	EFCW-1 B. 2. b.		$ 22,801.23	$ 45,340.53	$ 42,006.94	$ 90,991.06	$ 46,711.77	$ 52,687.40
	EFCW-1 B. 2. c.		$ 16,055.84	$ 11,793.80	$ 16,659.86	$ 18,226.96	$ 18,747.06	$ 19,445.84
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 119,425.16	$ 99,608.74	$ 104,179.91	$ 169,383.90	$ 140,346.22	$ 140,741.05
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 55,464.00	$ 70,069.00	$ 85,078.00	$ 94,317.00	$ 105,341.00	$ 140,567.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 63,961.16	$ 29,539.74	$ 19,101.91	$ 75,066.90	$ 35,005.22	$ 174.05
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 55,464.00**	**$ 70,069.00**	**$ 85,078.00**	**$ 94,317.00**	**$ 105,341.00**	**$ 140,567.00**

California Home Wednesday, May 2, 2012

Student Financial Aid Awards

Mt. San Jacinto College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 02, 2012 02:42:04

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	373	131,869
BOGW - Part B based on income standards	4,714	1,723,245
BOGW - Part C based on financial need	1,653	667,452

Total Amount = $ 2,522,566

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Mt. San Jacinto Community College District CC33075

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Mt. San Jacinto Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

Claimant Identification Number: CC33075

(02) Claimant Name: Mt. San Jacinto Community College District

County of Location: Riverside

Street Address or P.O. Box: 1499 North State Street

City: San Jacinto | State: CA | Zip Code: 92583

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 169,055
Less: 10% Late Penalty		(14) $ 16,905
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 152,149
Due from State	(08)	(17) $ 152,149
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	13,971
(23) EFCW-1, (04)(A)(1)(b)(f)	13,620
(24) EFCW-1, (04)(A)(2)(a)(f)	117,812
(25) EFCW-1, (04)(B)(1)(a)(f)	12,656
(26) EFCW-1, (04)(B)(1)(b)(f)	7,520
(27) EFCW-1, (04)(B)(2)(a)(f)	35,378
(28) EFCW-1, (04)(B)(2)(b)(f)	56,736
(29) EFCW-1, (04)(B)(2)(c)(f)	21,084
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	69,787
(32) EFCW-1, (09)	46,135
(33) EFCW-1, (10)	133,373
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the *Parameters and Guidelines* are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**: 7/4/07

Becky Elam
Type or Print Name

Vice President of Business
Title

(38) Name of Contact Person for Claim: Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant:

Mt. San Jacinto Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 13,970.66	$ -	$ -	$ -	$ -	$ 13,970.66
b. Staff training (One time per employee)	$ 12,128.80	$ -	$ -	$ -	$ 1,491.00	$ 13,619.80
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 61,972.84	$ 14,822.22	$ -	$ 41,017.00	$ -	$ 117,812.06
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 12,655.67	$ -	$ -	$ -	$ -	$ 12,655.67
b. Staff training (One time per employee)	$ 6,525.68	$ -	$ -	$ -	$ 994.00	$ 7,519.68
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 35,377.76	$ -	$ -	$ -	$ -	$ 35,377.76
b. Waiving student fees	$ 41,420.69	$ -	$ -	$ 15,315.00	$ -	$ 56,735.69
c. Reporting BOG fee waiver data to CCC	$ 21,084.40	$ -	$ -	$ -	$ -	$ 21,084.40
Total Direct Costs	$ 205,136.50	$ 14,822.22	$ -	$ 56,332.00	$ 2,485.00	$ 278,775.72

Indirect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.02%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 69,787.44
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 348,563.16
Reduction		
Less: Enrollment Fee Revenue offset		$ 46,135.00
Less: Enrollment Fee Waiver offsets		$ 133,373.20
Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 169,054.96

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Guarino, Susan	Dean of Information Technology	$74.57	20.0	$ 1,491.40				
Montez, Carol	Accounting Supervisor	$38.86	36.0	$ 1,398.96				
Stevens, Cheryl	Head Cashier	$26.07	8.0	$ 208.56				
Venable, Julie	Accounting Specialist	$31.47	15.0	$ 472.05				
Holman, Robert	Senior Programmer/ Analyst	$33.70	75.0	$ 2,527.50				
Nguyen, Kim	Senior Programmer/ Analyst	$36.83	8.0	$ 294.64				
Oriauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	135.0	$ 7,577.55				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 13,970.66	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Guarino, Susan	Dean of Information Technology	$74.57	40.0	$ 2,982.80				
Montez, Carol	Accounting Supervisor	$38.86	62.0	$ 2,409.32				
Stevens, Cheryl	Head Cashier	$26.07	124.0	$ 3,232.68				
Venable, Julie	Accounting Specialist	$31.47	40.0	$ 1,258.80				
Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	40.0	$ 2,245.20				
Prorated Costs of Registratio	Seminar Fees	$100.00	14.9					$ 1,491.00

(05) Total ☒ Subtotal ☐ Page 1 of 1

$ 12,128.80	$ -	$ -	$ -	$ 1,491.00

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Material Costs of de-registration procedures for unpaid fees Student Notices for Non-Pym Cost of Forms and Postage	$100.00	73.9		$ 7,392.06			
E-Commerce, etc. software for credit card collection of fees paid Software Costs for Enrollmen Collection of Fees	$100.00	385.5				$ 38,552.00	
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$22.79	491.7	$ 11,205.84				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Enrollment Fees	$22.79	351.6	$ 8,012.96				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$22.79	1,180.1	$ 26,894.48				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$22.79	330.9	$ 7,541.21				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Enrollment Fees	$22.79	365.0	$ 8,318.35				
Costs to issue 1098-T for enrollment fees paid Tax Notices for Students Cost of Forms and Postage	$100.00	74.3		$ 7,430.16			
Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees Software Costs for Enrollmen Collection of Fees	$100.00	24.7				$ 2,465.00	
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 61,972.84	$ 14,822.22	$ -	$ 41,017.00	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Montez, Carol	Accounting Supervisor	$38.86	12.0	$ 466.32				
Stevens, Cheryl	Head Cashier	$26.07	2.0	$ 52.14				
Venable, Julie	Accounting Specialist	$31.47	5.0	$ 157.35				
Higuera, Araceli	Clerical Assistant II	$16.96	16.0	$ 271.36				
Muehring, Mary Ellen	Financial Aid Director	$52.78	15.0	$ 791.70				
Navarro, Lesia	Interm Director	$32.18	15.0	$ 482.70				
Nguyen, Kim	Senior Programmer/ Analyst	$36.83	206.0	$ 7,586.98				
Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	40.0	$ 2,245.20				
Williams, Shanae	Interm Director	$37.62	16.0	$ 601.92				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 12,655.67	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Montez, Carol	Accounting Supervisor	$38.86	10.0	$ 388.60				
Stevens, Cheryl	Head Cashier	$26.07	24.0	$ 625.68				
Venable, Julie	Accounting Specialist	$31.47	40.0	$ 1,258.80				
Higuera, Araceli	Clerical Assistant II	$16.96	40.0	$ 678.40				
Muehring, Mary Ellen	Financial Aid Director	$52.78	20.0	$ 1,055.60				
Navarro, Lesia	Interm Director	$32.18	20.0	$ 643.60				
Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	20.0	$ 1,122.60				
Williams, Shanae	Interm Director	$37.62	20.0	$ 752.40				
Prorated Costs of Registration	Seminar Fees	$100.00	9.9					$ 994.00
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 6,525.68	$ -	$ -	$ -	$ 994.00

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Montez, Carol	Accounting Supervisor	$38.86	96.0	$ 3,730.56				
Stevens, Cheryl	Head Cashier	$26.07	544.0	$ 14,182.08				
Venable, Julie	Accounting Specialist	$31.47	528.0	$ 16,616.16				
Muehring, Mary Ellen	Financial Aid Director	$52.78	6.0	$ 316.68				
Navarro, Lesia	interm Director	$32.18	6.0	$ 193.08				
Rivero, Mayda	Clerical	$16.96	20.0	$ 339.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 35,377.76	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
E-Commerce, etc.software for credit card refund of fees due to waiver							
Software Costs for Enrollmen Waiving of Fees	$100.00	128.5				$ 12,850.00	
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waving Enrollment Fees	$22.81	487.2	$ 11,113.03				
Receiving waiver applications							
Financial Aid Office Staff Waving Enrollment Fees	$22.81	398.6	$ 9,092.07				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waving Enrollment Fees	$22.81	398.6	$ 9,092.07				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waving Enrollment Fees	$22.81	531.5	$ 12,123.52				
Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees							
Software Costs for Enrollmen Waiving of Fees	$100.00	24.7				$ 2,465.00	
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 41,420.69	$ -	$ -	$ 15,315.00	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Montez, Carol	Accounting Supervisor	$38.86	64.0	$ 2,487.04				
Stevens, Cheryl	Head Cashier	$26.07	80.0	$ 2,085.60				
Venable, Julie	Accounting Specialist	$31.47	360.0	$ 11,329.20				
Furr, Berndette	Technica Support Specialist	$31.65	8.0	$ 253.20				
Muehring, Mary Ellen	Financial Aid Director	$52.78	6.0	$ 316.68				
Navarro, Lesia	Interm Director	$32.18	6.0	$ 193.08				
Nguyen, Kim	Senior Programmer/ Analyst	$36.83	120.0	$ 4,419.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 21,084.40	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

...5-2006

... / Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	491.70	Enrollment Office Staff	Collecting Enrollment Fees	$22.79	$11,205.84	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	351.60	Enrollment Office Staff	Collecting Enrollment Fees	$22.79	$8,012.96	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	1,180.10	Enrollment Office Staff	Collecting Enrollment Fees	$22.79	$26,894.48	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	330.90	Enrollment Office Staff	Collecting Enrollment Fees	$22.79	$7,541.21	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	365.00	Enrollment Office Staff	Collecting Enrollment Fees	$22.79	$8,318.35	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	2,719.30	**Enrollment Office Staff Total**			$61,972.84		
05-06	487.20	Financial Aid Office Staff	Waving Enrollment Fees	$22.81	$11,113.03	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	398.60	Financial Aid Office Staff	Waving Enrollment Fees	$22.81	$9,092.07	Receiving waiver applications	Waiving student fees
05-06	398.60	Financial Aid Office Staff	Waving Enrollment Fees	$22.81	$9,092.07	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	531.50	Financial Aid Office Staff	Waving Enrollment Fees	$22.81	$12,123.52	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,815.90	**Financial Aid Office Staff Total**			$41,420.69		
05-06	8.00	Furr, Berndette	Technica Support Specialist	$31.65	$253.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	8.00	**Furr, Berndette Total**			$253.20		
05-06	20.00	Guarino, Susan	Dean of Information Technology	$74.57	$1,491.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Guarino, Susan	Dean of Information Technology	$74.57	$2,982.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	60.00	**Guarino, Susan Total**			$4,474.20		
05-06	16.00	Higuera, Araceli	Clerical Assistant II	$16.96	$271.36	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	40.00	Higuera, Araceli	Clerical Assistant II	$16.96	$678.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	56.00	**Higuera, Araceli Total**			$949.76		
05-06	75.00	Holman, Robert	Senior Programmer/ Analyst	$33.70	$2,527.50	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	75.00	**Holman, Robert Total**			$2,527.50		
05-06	36.00	Montez, Carol	Accounting Supervisor	$38.86	$1,398.96	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	12.00	Montez, Carol	Accounting Supervisor	$38.86	$466.32	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	62.00	Montez, Carol	Accounting Supervisor	$38.86	$2,409.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	10.00	Montez, Carol	Accounting Supervisor	$38.86	$388.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	96.00	Montez, Carol	Accounting Supervisor	$38.86	$3,730.56	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	64.00	Montez, Carol	Accounting Supervisor	$38.86	$2,487.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	280.00	**Montez, Carol Total**			$10,880.80		
05-06	15.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$791.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	20.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$1,055.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	6.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$316.68	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	6.00	Muehring, Mary Ellen	Financial Aid Director	$52.78	$316.68	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Muehring, Mary Ellen Total**			$2,480.66		
05-06	15.00	Navarro, Lesia	Interm Director	$32.18	$482.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	20.00	Navarro, Lesia	Interm Director	$32.18	$643.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	6.00	Navarro, Lesia	Interm Director	$32.18	$193.08	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	6.00	Navarro, Lesia	Interm Director	$32.18	$193.08	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Navarro, Lesia Total**			$1,512.46		
05-06	8.00	Nguyen, Kim	Senior Programmer/ Analyst	$36.83	$294.64	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	206.00	Nguyen, Kim	Senior Programmer/ Analyst	$36.83	$7,586.98	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	120.00	Nguyen, Kim	Senior Programmer/ Analyst	$36.83	$4,419.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	334.00	**Nguyen, Kim Total**			$12,301.22		
05-06	135.00	Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	$7,577.55	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	40.00	Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	$2,245.20	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	40.00	Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	$2,245.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	20.00	Orlauski, Brian	Sr. Prog./Supervisor Comp. Applications	$56.13	$1,122.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	235.00	**Orlauski, Brian Total**			$13,190.55		
05-06	14.91	Prorated Costs of Registration	Seminar Fees	$100.00	$1,491.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	9.94	Prorated Costs of Registration	Seminar Fees	$100.00	$994.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	24.85	**Prorated Costs of Registration Total**			$2,485.00		

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	20.00	Rivero, Mayda	Clerical	$16.96	$339.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	20.00	**Rivero, Mayda Total**			$339.20		
05-06	24.65	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$2,465.00	Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees	Calculating and collecting enrollment fees
05-06	385.52	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$38,552.00	E-Commerce, etc. software for credit card collection of fees paid	Calculating and collecting enrollment fees
	410.17	**Software Costs for Enrollment Fees Total**			$41,017.00		
05-06	24.65	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$2,465.00	Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees	Waiving student fees
05-06	128.50	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$12,850.00	E-Commerce, etc.software for credit card refund of fees due to waiver	Waiving student fees
	153.15	**Software Costs for Enrollment Waivers Total**			$15,315.00		
05-06	8.00	Stevens, Cheryl	Head Cashier	$26.07	$208.56	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	2.00	Stevens, Cheryl	Head Cashier	$26.07	$52.14	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	124.00	Stevens, Cheryl	Head Cashier	$26.07	$3,232.68	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	24.00	Stevens, Cheryl	Head Cashier	$26.07	$625.68	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	544.00	Stevens, Cheryl	Head Cashier	$26.07	$14,182.08	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
05-06	80.00	Stevens, Cheryl	Head Cashier	$26.07	$2,085.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	782.00	**Stevens, Cheryl Total**			$20,386.74		
05-06	73.92	Student Notices for Non-Pymt of Fees	Cost of Forms and Postage	$100.00	$7,392.06	Material Costs of de-registration procedures for unpaid fees	Calculating and collecting enrollment fees
	73.92	**Student Notices for Non-Pymt of Fees Total**			$7,392.06		
05-06	74.30	Tax Notices for Students	Cost of Forms and Postage	$100.00	$7,430.16	Costs to issue 1098-T for enrollment fees paid	Calculating and collecting enrollment fees
	74.30	**Tax Notices for Students Total**			$7,430.16		
05-06	15.00	Venable, Julie	Accounting Specialist	$31.47	$472.05	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	5.00	Venable, Julie	Accounting Specialist	$31.47	$157.35	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	40.00	Venable, Julie	Accounting Specialist	$31.47	$1,258.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	40.00	Venable, Julie	Accounting Specialist	$31.47	$1,258.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	528.00	Venable, Julie	Accounting Specialist	$31.47	$16,616.16	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
05-06	360.00	Venable, Julie	Accounting Specialist	$31.47	$11,329.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	988.00	**Venable, Julie Total**			$31,092.36		
05-06	16.00	Williams, Shanae	Interm Director	$37.62	$601.92	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	20.00	Williams, Shanae	Interm Director	$37.62	$752.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	36.00	**Williams, Shanae Total**			$1,354.32		
	8,239.59	**Grand Total**			$278,775.72		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$17,772,311		$17,772,311	$404,974	$17,367,337
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,623,241		2,623,241	28,469	2,594,772
Course and Curriculum Development	6020	72,872		72,872	5,683	67,189
Academic/Faculty Senate	6030	30,136		30,136		30,136
Other Instructional Administration & Instructional Governance	6090	79,046		79,046		79,046
Instructional Support Services	6100					
Learning Center	6110	736,342		736,342		736,342
Library	6120	650,103		650,103	128,258	521,845
Media	6130	8,358		8,358	1,535	6,823
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	848,681		848,681	3,861	844,820
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,418,224		1,418,224	2,756	1,415,468
Matriculation and Student Assessment	6320	751,855		751,855	30,186	721,669
Transfer Programs	6330	5,001		5,001	1,768	3,233
Career Guidance	6340	34,744		34,744	546	34,198
Other Student Counseling and Guidance	6390	230,839		230,839		230,839
Other Student Services	6400					
Disabled Students Programs & Services	6420	335,886		335,886	47,450	288,436
Subtotal		$25,597,639	$0	$25,597,639	$655,486	$24,942,153

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$908,900	$392,663	$516,237	$17,783	$498,454
Health Services	6440	356,999		356,999	61,775	295,224
Student Personnel Admin.	6450	1,071,630		1,071,630	63,366	1,008,264
Financial Aid Administration	6460					
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	19,036		19,036		19,036
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	947,910		947,910	947,910	0
Custodial Services	6530	349,709		349,709	349,709	0
Grounds Maintenance and Repairs	6550	215,781		215,781	215,781	0
Utilities	6570	1,156,045		1,156,045	1,156,045	0
Other	6590	412		412	412	0
Planning, Policy Making, and Coordination	6600	722,357		722,357	722,357	0
General Inst. Support Services	6700					
Community Relations	6710	346,706		346,706	346,706	0
Fiscal Operations	6720	1,383,289		1,383,289	1,383,289	0
Human Resources Management	6730	800,139		800,139	800,139	0
Noninstructional Staff Benefits & Incentives	6740	187,494		187,494	187,494	0
Staff Development	6750	3,185		3,185	3,185	0
Staff Diversity	6760	12,428		12,428	12,428	0
Logistical Services	6770	1,381,526		1,381,526	1,381,526	0
Management Information Systems	6780	1,273,230		1,273,230	1,273,230	0
Subtotal		$36,734,415	$392,663	$36,341,752	$9,578,621	$26,763,131

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	-22,457		-22,457	-22,457	0
Community Services and Economic Development	6800					
Community Recreation	6810	68,761		68,761		68,761
Community Service Classes	6820	367,521		367,521		367,521
Community Use of Facilities	6830					
Economic Development	6840	228,705		228,705	1,832	226,873
Other Community Services & Economic Development	6890	10,075		10,075		10,075
Ancillary Services	6900					
Bookstores	6910	38,529		38,529		38,529
Child Development Center	6920	669,418		669,418		669,418
Farm Operations	6930					
Food Services	6940	22,465		22,465		22,465
Parking	6950	10,394		10,394		10,394
Student and Co-curricular Activities	6960	740,266		740,266	6,583	733,683
Student Housing	6970					
Other	6990	190,819		190,819		190,819
Auxiliary Operations	7000					
Contract Education	7010	247,181	1,844	245,337	1,423	243,914
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	418,220		418,220	418,220	0
(05) Total		$39,724,312	$394,507	$39,329,805	$9,984,222	$29,345,583
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.02%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100		1,097	167			1,264
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,110,428	20,664	56,271	6,955		1,194,318
Business and Management	0500	823,213	12,867	24,476	26,833		887,389
Communications	0600						
Computer and Information Science	0700	732,678	11,600	42,605	121,272		908,155
Education	0800	769,929	44,486	5,534			819,949
Engineering and Related Industrial Tech.	0900	203,241	14,095	23,087	16,823		257,246
Fine and Applied Arts	1000	1,635,143	106,532	50,088	10,905		1,802,668
Foreign Language	1100	412,052	5,638	1,354			419,044
Health	1200	1,404,187	193,428	14,286	12,703		1,624,604
Consumer Education and Home Economics	1300	458,308	22,309	20,812	8,165		509,594
Law	1400	22,397		72			22,469
Humanities (Letters)	1500	2,570,107	15,526	4,398			2,590,031
Library Science	1600						
Mathematics	1700	1,756,658	10,330	3,296			1,770,284
Military Studies	1800						
Physical Sciences	1900	792,902	2,941	31,250			827,093
Psychology	2000	323,312	2,450	1,708			327,470
Public Affairs and Services	2100	233,243	10,354	1,424	2,513		247,534
Social Sciences	2200	1,501,726	17,990	8,564	2,613		1,530,893
Commercial Services	3000						
Interdisciplinary Studies	4900	1,265,936	380,569	150,476	196,192		1,993,173
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	39,133					39,133
Subtotal - Instructional Activities	**599**	16,054,593	872,876	439,868	404,974		17,772,311

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,099,324	495,448	28,469		2,623,241
Course and Curriculum Development	6020		62,990	4,199	5,683		72,872
Academic/Faculty Senate	6030		26,813	3,323			30,136
Other Instruct. Admin. & Instruct. Governance	6090		71,743	7,303			79,046
Subtotal - Instructional Administration	**6000**		2,260,870	510,273	34,152		2,805,295
Instructional Support Services (6100)							
Learning Center	6110	397,096	335,753	3,493			736,342
Library	6120		483,691	38,154	128,258		650,103
Media	6130			6,823	1,535		8,358
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	397,096	819,444	48,470	129,793		1,394,803
Admissions and Records	**6200**		815,888	28,932	3,861		848,681
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,399,697	15,771	2,756		1,418,224
Matriculation and Student Assessment	6320		551,155	170,514	30,186		751,855
Transfer Programs	6330		595	2,638	1,768		5,001
Career Guidance	6340		14,278	19,920	546		34,744
Other Student Counseling and Guidance	6390		144,487	86,352			230,839
Subtotal - Student Counseling and Guidance	**6300**		2,110,212	295,195	35,256		2,440,663

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		245,081	43,355	47,450		335,886
Extended Opportunity Prgms. & Services (EOPS)	6430		459,898	38,556	17,783	392,663	908,900
Health Services	6440		214,655	80,569	61,775		356,999
Student Personnel Administration	6450		845,552	162,712	63,366		1,071,630
Financial Aid Administration	6460						
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		931	18,105			19,036
Subtotal - Other Student Services	**6400**		1,766,117	343,297	190,374	392,663	2,692,451
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		702,790	240,153	4,967		947,910
Custodial Services	6530		294,300	55,409			349,709
Grounds Maintenance and Repairs	6550		157,966	57,815			215,781
Utilities	6570			1,156,045			1,156,045
Other Operation and Maintenance of Plant	6590			412			412
Subtotal - Operation and Maintenance of Plant	**6500**		1,155,056	1,509,834	4,967		2,669,857
Planning, Policymaking, and Coordination	**6600**		549,850	170,364	2,143		722,357

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]ncial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen[illegible]ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		218,664	128,042			346,706
Fiscal Operations	6720		1,106,778	257,071	19,440		1,383,289
Human Resources Management	6730		697,622	95,581	6,936		800,139
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		187,494				187,494
Staff Development	6750			3,185			3,185
Staff Diversity	6760		77	7,858	4,493		12,428
Logistical Services	6770		682,353	630,848	68,325		1,381,526
Management Information Systems	6780		891,214	256,028	125,988		1,273,230
Other General Institutional Support Services	6790		(22,457)				(22,457)
Subtotal - General Institutional Support Services	**6700**		3,761,745	1,378,613	225,182		5,365,540
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		57,340	11,421			68,761
Community Service Classes	6820		221,549	145,972			367,521
Community Use Facilities	6830						
Economic Development	6840		208,279	18,594	1,832		228,705
Other Community Svcs. & Economic Development	6890		8,690	1,385			10,075
Subtotal - Community Services	**6800**		495,858	177,372	1,832		675,062

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		38,459	70			38,529
Child Development Centers	6920		524,916	144,502			669,418
Farm Operations	6930						
Food Services	6940		22,465				22,465
Parking	6950			10,394			10,394
Student and Co-curricular Activities	6960		558,942	174,741	6,583		740,266
Student Housing	6970						
Other Ancillary Services	6990		120,352	70,467			190,819
Subtotal - Ancillary Services	**6900**		1,265,134	400,174	6,583		1,671,891
Auxiliary Operations (7000)							
Contract Education	7010	102,730	75,240	65,944	1,423	1,844	247,181
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	102,730	75,240	65,944	1,423	1,844	247,181
Physical Property and Related Acquisitions (7100)	**7100**		173,174	34,273	210,773		418,220
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290			119,417			119,417
Subtotal - Long-Term Debt and Other Financing	**7200**			119,417			119,417
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					1,220,000	1,220,000
Other Outgo	7330					68,631	68,631
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,288,631	1,288,631
TOTAL EXPENDITURES and OTHER OUTGO	**391**	16,554,419	16,121,464	5,522,026	1,251,313	1,683,138	41,132,360

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *05-06*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	29,502
Avg. time p/account	1.0
Total Time (in minutes)	29502
Per Hour	60
Hours Worked (****Activity 11**)	**491.7**
***EFC 2**	12,408
Avg. time p/student	1.7
Total Time (in minutes)	21094
Per Hour	60
Hours Worked (****Activity 12**)	**351.6**
***EFC 1**	29,502
Avg. time p/question	2.4
Total Time (in minutes)	70805
Per Hour	60
Hours Worked (****Activity 13**)	**1180.1**
***EFC 2**	12,408
Avg. time p/file	1.6
Total Time (in minutes)	19853
Per Hour	60
Hours Worked (****Activity 14**)	**330.9**
***EFC 4**	13,689
Avg. time p/account	1.6
Total Time (in minutes)	21902
Per Hour	60
Hours Worked (****Activity 15**)	**365.0**
***EFC 5 (Not provided, no sub.)**	
Avg. time p/student	2.0
Total Time (in minutes)	
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *05-06*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,644
Avg. time p/question	4.4
Total Time (in minutes)	29234
Per Hour	60
Hours Worked (****Activity 21**)	**487.2**
***EFW 6**	6,644
Avg. time p/application	3.6
Total Time (in minutes)	23918
Per Hour	60
Hours Worked (****Activity 22**)	**398.6**
***EFW 6**	6,644
Avg. time p/evaluation	3.6
Total Time (in minutes)	23918
Per Hour	60
Hours Worked (****Activity 23**)	**398.6**
***EFW 8 (Not provided, no sub.)**	
Avg. time p/application	3.6
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
*EFW 7	6,644
Avg. time p/application	4.8
Total Time (in minutes)	31891
Per Hour	60
Hours Worked (****Activity 25**)	**531.5**
***EFW 8 (Not provided, no sub.)**	
Avg. time p/application	3.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
		11	12	13	14	15	16
Acevedo, Lilia	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Bennett, Selma	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Bravo, Esmeralda	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Carrillo, Lisa	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Ching-Lee, Cynthia	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Davis, Jared	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Dawson, Terry	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Dawson, Toni	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Deaver, Darrin	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Denz, Alice	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Dibbell, Alice	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Dillard, Mary Lou	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
DiMemmo, Kristie	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Edghill, Hal	Enrollment Service Clerk TVC	3.0	2.0	4.0	3.0		
Emmeneger, Terry	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Ficus, Priscilla	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Flores, Maranatha	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Garcia, Ermelinda	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Garcia, Carla	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Gardner, Janine	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Grosse, Iris	Enrollment Service Clerk Full Time	3.0	2.0	4.0	3.0		
Guillian, Maribell	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Hefley, Chris	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Heitritter, Josie	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Hernandez, Maria	Cashier	0.5	1.5	0.5	0.5	1.5	2.0
Hop, Pamela	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Horn, Shellee	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Jackson, Fran	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Jessen-Vellor, Christine	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Jimenez, Lupe	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Kroencke, Rebecca	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Lonzano, Jose	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Lybrand, Margaret	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Maples, Mary	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Martinez, Sandra	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Masonis, Sherrell	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
McKinnis,Kim	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Mendoza, Heather	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Miller, Wanda	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Mozga, Chris	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Montez, Danna	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Naish, Cheri	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Ochoa, Melissa	Cashier	0.5	1.5	0.5	0.5	1.5	2.0

Schedule 2
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Owen, Tracie	Cashier	0.5	1.5	0.5	0.5	1.5	1.0
Padilla, Jackie	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Parral, Jennifer	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Richter, Karen	Cashier	0.5	1.5	0.5	0.5	1.5	2.0
Rodriguez, Raul	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Saenz, Esy	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Sanchez, Rosalie	Enrollment Service Clerk Part Time	1.0	2.0	3.0	2.0		
Sharp Brian	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Shearer, Rae Ann	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Simpson-Underwood, Vicki	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Singleton, Carol	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Small, Charlotte	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Starr, Yvette	Enrollment Service Clerk Full Time	1.0	2.0	3.0	2.0		
Stevens, Cheryl	Cashier	0.5	1.5	0.5	0.5	1.5	15.0
Storrie, Reoberta	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Vaughn, Samantha	Cashier	0.5	0.5	0.5	0.5	1.5	1.0
Velkoff, Jackie	Administrative Associate	3.0	2.0	4.0	3.0	3.0	
Ward, Karen	Cashier	0.5	1.5	0.5	0.5	1.5	1.0
Wilkes, Onishia	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Witt, Dawn	Enrollment Service Clerk Temp. & Sub.	1.0	2.0	3.0	2.0		
Average		**1.0**	**1.7**	**2.4**	**1.6**	**1.6**	**2.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 2
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Purpose: To calculate an average PHR for each year listed.
Source: PHR's from District. Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Years							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acevedo, Lilia	Enrollment Service Clerk Full Time				7.79	19.41	19.41		
Bennett, Selma	Enrollment Service Clerk Full Time						14.06		
Bravo, Esmeralda	Enrollment Service Clerk Part Time			6.88	7.13	7.13	19.67	20.87	
Carrillo, Lisa	Cashier	12.49	14.63	15.49	15.88	15.88	15.88		
Ching-Lee, Cynthia	Enrollment Service Clerk Part Time	7.63	7.63	7.28	8.80	8.80	8.80	9.91	
Davis, Jared	Enrollment Service Clerk Part Time							16.33	
Dawson, Terry	Enrollment Service Clerk Temp. & Sub.				13.69	13.69			
Dawson, Toni	Enrollment Service Clerk Temp. & Sub.					13.69			
Deaver, Darrin	Enrollment Service Clerk Temp. & Sub.					13.69			
Denz, Alice	Cashier	12.49							
Dibbell, Alice	Enrollment Service Clerk Temp. & Sub.				13.69				
Dillard, Mary Lou	Enrollment Service Clerk Part Time					14.56	14.06	16.33	
Edghill, Hal	Enrollment Service Clerk TVC			15.13	20.00	21.22	22.51	22.51	
Emmeneger, Terry	Enrollment Service Clerk Temp. & Sub.			12.18	13.69				
Ficus, Priscilla	Enrollment Service Clerk Temp. & Sub.	12.97	12.13	11.59	12.76	14.56			
Flores, Maranatha	Enrollment Service Clerk Temp. & Sub.						14.06		
[illegible]ia, Carla	Enrollment Service Clerk Temp. & Sub.					13.69			
[illegible]ia, Ermelinda	Enrollment Service Clerk Full Time		6.88	6.88	14.03	17.02	19.09	19.67	
Gardner, Janine	Enrollment Service Clerk Temp. & Sub.		11.19						
Grosse, Iris	Enrollment Service Clerk Full Time		15.33	15.33	18.85	19.09	19.85	20.26	
Guillian, Maribell	Enrollment Service Clerk Temp. & Sub.						15.89		
Hefley, Chris	Enrollment Service Clerk Full Time	12.97							
Heitritter, Josie	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69	13.69	15.89	21.99	
Hernandez, (Saenz) Maria	Cashier		19.09	19.09	19.09	19.09	19.67	21.11	22.51
Hop, Pamela	Cashier							16.81	22.51
Horn, Shellee	Cashier	12.49							
Jackson, Fran	Enrollment Service Clerk Full Time	12.97							
Jessen-Vellor, Christine	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69				
Jimenez, Lupe	Enrollment Service Clerk Full Time	12.97	16.01	16.26	18.93	19.66			
Kroencke, Rebecca	Enrollment Service Clerk Temp. & Sub.	11.00							
Lonzano, Jose	Enrollment Service Clerk Temp. & Sub.					14.56			
Lybrand, Margaret	Cashier			15.49					
Maples, Mary	Enrollment Service Clerk Full Time			14.32	14.32	18.54	19.09	19.67	
Martinez, Sandra	Enrollment Service Clerk Temp. & Sub.		11.15	12.18					
Masonis, Sherrell	Enrollment Service Clerk Temp. & Sub.	11.00	11.15	12.18	13.69	14.56	14.06		
McKinnis,Kim	Cashier						19.88	16.81	
Mendoza, Heather	Enrollment Service Clerk Full Time	18.07	18.07	18.07	21.85				
Miller, Wanda	Cashier	12.49							
Mozga, Chris	Enrollment Service Clerk Part Time						14.06	16.33	
Montez, Danna	Cashier	12.49							
Naish, Cheri	Enrollment Service Clerk Temp. & Sub.							21.99	
Ochoa, Melissa	Cashier				15.88	18.54	19.88		
Owen, Tracie	Cashier			19.09	19.09	19.09	20.26	21.75	21.75

Schedule 2
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Staff	Title	Years							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Padilla, Jackie	Enrollment Service Clerk Part Time					14.56	14.06	16.33	
Parral, Jennifer	Enrollment Service Clerk Temp. & Sub.					13.69			
Richter, Karen	Cashier						26.39	21.11	21.11
Rodriguez, Raul	Enrollment Service Clerk Temp. & Sub.							21.99	
Saenz, Esy	Cashier	12.49	14.63	15.49					
Sanchez, Rosalie	Enrollment Service Clerk Part Time					14.56			
Sharp Brian	Cashier				15.88	18.54	19.88		
Shearer, Rae Ann	Enrollment Service Clerk Full Time		12.13	11.59					
Simpson-Underwood, Vicki	Enrollment Service Clerk Temp. & Sub.			12.18	13.69				
Singleton, Carol	Enrollment Service Clerk Temp. & Sub.				13.69				
Small, Charlotte	Enrollment Service Clerk Temp. & Sub.			12.18					
Starr, Yvette	Enrollment Service Clerk Full Time				12.76				
Stevens, Cheryl	Cashier				22.22	23.57	24.28	26.07	26.07
Storrie, Reoberta	Enrollment Service Clerk Temp. & Sub.				13.69				
Vaughn, Samantha	Cashier	12.49							
Velkoff, Jackie	Administrative Associate	16.05	16.54	19.41	19.99	21.21	25.90	26.68	
Ward, Karen	Cashier	12.49	14.63	15.49					
Wilkes, Onishia	Enrollment Service Clerk Temp. & Sub.					13.69			
Witt, Dawn	Enrollment Service Clerk Temp. & Sub.	11.00							
Average		12.43	13.15	13.67	15.13	16.07	18.19	19.73	22.79

Conclusion: Findings go forward to EFCW -2

Schedule 3
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Acevedo, Lilia	Financial Aid Tech II	5	3	3	3	5	3
Altree, Tara	Student Loan Cordinator	2	6	3	3	2	3
Camper, Janyt	Financial Aid Tech II	4	5	3	4	5	4
Cowser, Andrea	Financial Aid Tech II	5	3	3	3	5	3
Cowen, Theresa	Financial Aid Tech II	5	3	3	3	5	3
DeLeon, Robin	Clerical Assistant	5	3	3	3	5	3
Devor, Fay	Clerical Assistant	5	3	3	3	5	3
Furr, Burnadette	Technicial Support	3	3	3	3	3	3
Gauthier, Fay	Clerical Assistant	5	3	3	3	5	3
Gonzalez, Cathy	Financial Aid Tech II	5	3	3	3	5	3
Hancock, Sheri	Financial Aid Director	5	3	3	3	5	3
Higuera, Araceli	Clerical Assistant II	6	4	15	6	5	15
Higuera-Mena, Francisa	Financial Aid Tech II	5	3	3	3	5	3
Jimenez, Rosetta	Financial Aid Tech	5	5	5	5	5	5
Jones, Marie	Financial Aid Tech II	5	3	3	3	5	3
LaCasse, Melissa	Clerical Assistant	2	7	3	7	10	7
Medlock, Phil	Financial Aid Tech II	5	3	3	3	5	3
Muehring, Mary Ellen	Financial Aid Director	5	3	3	3	5	3
Navarro, Lesia	Financial Aid Supervisor	5	3	5	2	5	2
Orlauski, Rebecca	Financial Aid Tech	3	1	5	5	5	5
Parker, Robert	Financial Aid Tech II	3	3	2	2	2	2
Pelkert, Shannon	Clerical Assistant	5	3	3	3	5	3
Piper, Edlina	Clerical Assistant II	5	3	4	6	4	6
Plascencia, Grace	Financial Aid Supervisor	5	3	3	3	5	3
Plascensia, Michele	Financial Aid Clerk II	3	5	3	3	5	2
Rivero, Mayda	Clerical Assistant II	2	7	2	10	3	2
Rosas, Cathy	Clerical Assistant	5	3	3	3	5	3
Rubin, Shelly M.	Financial Aid Tech II	5	3	7	2	5	3
Salazar-Mendoza, Sarah	Clerical Assistant	5	3	3	3	5	3
Silva, Toni	Financial Aid Tech II	2	5	2	4	6	4
Smith, Delores	Financial Aid Tech II	5	3	3	3	5	3
Velasquez, Karla	Clerical Assistant	5	3	3	3	5	3
Williams, Shanae	Financial Aid Supervisor	5	5	5	5	5	5
Average		**4.4**	**3.6**	**3.6**	**3.6**	**4.8**	**3.7**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR's

Purpose: To calculate an average PHR for each year listed.
Source: PHR's from distict
Findings:

Staff	Title	Years						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Acevedo, Lilia	Financial Aid Tech II					19.41		
Altree, Tara	Student Loan Cordinator					19.99	21.09	22.90
Camper, Janyt	Financial Aid Tech II					16.06	17.03	16.96
Cowser, Andrea	Financial Aid Tech II	15.10						
Cowen, Theresa	Financial Aid Tech II	15.10	16.54					
DeLeon, Robin	Clerical Assistant		12.36	12.36				
Devor, Fay	Clerical Assistant		12.36	12.36				
Furr, Burnadette	Technicial Support					28.62	29.48	31.65
Gauthier, Fay	Clerical Assistant			12.36	12.36			
Gonzalez, Cathy	Financial Aid Tech II	15.10	16.54					
Hancock, Sheri	Financial Aid Director	40.19	41.98					
Higuera, Araceli	Clerical Assistant II	15.10	16.54		16.27	16.06	17.03	16.96
Higuera-Mena, Francisa	Financial Aid Tech II		16.54	16.45				
Jimenez, Rosetta	Financial Aid Tech						17.03	16.96
Jones, Marie	Financial Aid Tech II		16.54	16.45	16.27			
LaCasse, Melissa	Clerical Assistant						12.74	12.37
Medlock, Phil	Financial Aid Tech II	15.10						
Muehring, Mary Ellen	Financial Aid Director		38.42	44.98	44.98	47.73	52.78	52.78
Navarro, Lesia	Financial Aid Supervisor	16.54	20.76	28.26	28.26	29.10	29.98	32.18
Orlauski, Rebecca	Financial Aid Tech						17.03	16.96
Parker, Robert	Financial Aid Tech II				16.27	16.06	17.03	
Peikert, Shannon	Clerical Assistant				12.36			
Piper, Edlina	Clerical Assistant II			16.45	16.27	16.06	17.03	16.96
Plascencia, Grace	Financial Aid Supervisor	21.51						
Plascensia, Michele	Financial Aid Clerk II	15.10	16.54	16.45	16.27	16.06	17.03	16.96
Rivero, Mayda	Clerical Assistant II				16.27	16.06	17.03	16.96
Rosas, Cathy	Clerical Assistant			12.36				
Rubin, Shelly M.	Financial Aid Tech II				16.27	16.06	17.03	16.96
Salazar-Mendoza, Sarah	Clerical Assistant			12.36	12.36			
Silva, Toni	Financial Aid Tech II	15.10	16.54	16.45	16.27	16.06	17.03	16.96
Smith, Delores	Financial Aid Tech II						17.03	
Velasquez, Karla	Clerical Assistant	12.36	12.36					
Williams, Shanae	Financial Aid Supervisor			28.43	29.10	29.98	32.18	37.62
Average		**17.85**	**19.54**	**18.90**	**19.26**	**21.67**	**21.50**	**22.81**

Conclusion: Findings go forward to EFCW-2

Schedule 4
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-06
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. Initial year claim 98-99 through 05-06. (back-up in 05-06 only)
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	22,351	24,359	27,410	29,081	30,634	28,267	29,496	29,502
EFC 2	1.8-1	2.	Paid Enrollment fees	11,099	14,625	14,671	12,660	13,127	13,164	11,817	12,408
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	3,846	9,734	12,739	16,421	17,507	15,103	17,679	17,094
EFC 4	1.8-2	1.	Delinquencies collections	---		617	580	1,099	1,813	867	13,689
EFC 5	1.8-2	2.	Refunds	---							
EFW 6	1.8-3	1.	Waivers Requested	X	3,326	4,577	5,395	5,967	5,783	6,741	6,644
EFW 7	1.8-3	2.	Waivers Approved	X	3,326	4,577	5,395	5,967	5,783	6,741	6,644
EFW 8	1.8-3	(1-2)	Waivers Denied	X	Not reported						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2005 Summer Term

Data Current As Of May 02, 2012 02:38:34

Total Headcount	4,100

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2005 Fall Term

Data Current As Of May 02, 2012 02:38:40

Total Headcount	12,807

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2006 Spring Semester

Data Current As Of May 02, 2012 02:38:53

Total Headcount	12,595

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Mt. San Jacinto Fiscal Year: 2005-2006

Susan Guarino — Employee Name
Dean of Information Technology — Exact Position Title

IT/SJC — Department/Location
951-487-3080 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Direct Costs
05-06	(1A) 1B 2A 2B 3 4	1098T Tax Forms purchased	1831
05-06	(1A) 1B 2A 2B 3 4	Software used for fee collection	40089
05-06	1A (1B) 2A 2B 3 4	Software used to calculate waivers and credit student accounts, report, etc	10966
05-06	(1A) 1B 2A 2B 3 4	Hardware used for fee collection	2465
05-06	1A (1B) 2A 2B 3 4	Hardware used for waiver processing	2465
05-06	1A 1B (2A) 2B 3 4	Direct Training	1423
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4	Total is $ 59,239	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature S Guarino Date 9-5-08

S Guarino 9-5-08

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			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	ES Clerk-permanent	Position Average	19,299	18,039	17,242	18,988	21,665	20,923	24,299	26,274	$12.97	$12.13	$11.59	$12.76	$14.56	$14.06	$16.33	$17.66
ES	ES Clerk-permanent	Acevedo, Lilia				XX	XX	XX										
ES	ES Clerk-permanent	Bennett, Selma					XX	XX										
ES	ES Clerk-permanent	Bravo, Esmeralda			XX	XX	XX											
ES	ES Clerk-permanent	Bravo, Esmeralda			XX	XX		XX	XX	XX								
ES	ES Clerk-permanent	Ching-Lee, Cynthia	XX	XX	XX	XX	XX	XX	XX									
ES	ES Clerk-permanent	Davis, Jared							XX									
ES	ES Clerk-permanent	Dillard, Mary Lou					XX	XX	XX									
ES	ES Clerk-permanent	Fiscus, Priscilla	XX	XX														
ES	ES Clerk-permanent	Flores, Maranatha						XX	XX									
ES	ES Clerk-permanent	Garcia, Ermalinda			XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Grosse, Iris		XX	XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Hefley, Chris	XX	XX														
ES	ES Clerk-permanent	Jackson, Fran																
ES	ES Clerk-permanent	Jiminez, Lupe	XX	XX	XX	XX	XX											
ES	ES Clerk-permanent	Lozano, Jose		XX	XX													
ES	ES Clerk-permanent	Mapes, Mary		XX	XX	XX	XX	XX	XX	XX								
ES	ES Clerk-permanent	Masonis, Sherrell					XX	XX										
ES	ES Clerk-permanent	Mendoza, Heather			XX	XX	XX											
ES	ES Clerk-permanent	Mozga, Chris						XX	XX									
ES	ES Clerk-permanent	Padilla, Jackie					XX	XX	XX									
ES	ES Clerk-permanent	Sanchez, Rosalie					XX											
ES	ES Clerk-permanent	Shearer, Rae Ann	XX	XX														
ES	ES Clerk-permanent	Starr, Yvette			XX	XX												
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	ES Clerk-temp/sub	Hourly Rate	11.00	11.15	12.18	13.69	13.69	15.89	21.99		11.00	11.15	12.18	13.69	13.69	15.89	21.99	
ES	ES Clerk-temp/sub	Dawson, Terry				XX	XX											
ES	ES Clerk-temp/sub	Dawson, Toni					XX											
ES	ES Clerk-temp/sub	Deaver, Darrin					XX											
ES	ES Clerk-temp/sub	Dibbell, Alice				XX												
ES	ES Clerk-temp/sub	Emmeneger, Terry			XX	XX												
ES	ES Clerk-temp/sub	Garcia, Carla					XX											
ES	ES Clerk-temp/sub	Gardner, Janine		XX														
ES	ES Clerk-temp/sub	Guillian, Maribell						XX										
ES	ES Clerk-temp/sub	Heitritter, Josie	XX	XX	XX	XX	XX	XX	XX									
ES	ES Clerk-temp/sub	Jessen-Vellor, Christine	XX	XX	XX	XX												
ES	ES Clerk-temp/sub	Kroencke, Rebecca	XX															
ES	ES Clerk-temp/sub	Masonis, Sherrell	XX	XX	XX	XX												
ES	ES Clerk-temp/sub	Martinez, Sandra			XX	XX												
ES	ES Clerk-temp/sub	Naish, Cheri							XX									
ES	ES Clerk-temp/sub	Parral, Jennifer					XX											
ES	ES Clerk-temp/sub	Rodriguez, Raul							XX									
ES	ES Clerk-temp/sub	Sharp, Brian						XX										
ES	ES Clerk-temp/sub	Simpson-Underwood, Vicki				XX	XX											
ES	ES Clerk-temp/sub	Singleton, Carol					XX											
ES	ES Clerk-temp/sub	Small, Charlotte			XX													
ES	ES Clerk-temp/sub	Storrie, Reoberta				XX												
ES	ES Clerk-temp/sub	Wilkes, Onishia					XX											
ES	ES Clerk-temp/sub	Witt, Dawn	XX															
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
ES	Acevedo, Lilia	ES Clerk			11,593	28,877	28,877						$7.79	$19.41	$19.41			

Print Date: 06/12/07
(Salary x 1.21) / 1,800 hrs.

Prepared by: K Nguyen S Guarino
Revised by SixTen and Associates 6-12-07

ES	Bradley, Ramona	ES Clerk						8,799	12,008							$5.91	$8.07		
ES	Bravo, Esmealda	ES Clerk			10,239	10,611		29,257	31,039	33,322			$6.88	$7.13		$19.67	$20.87	$22.40	
ES	Ching-Lee, Cynthia	ES Clerk		11,343	10,833	13,098	13,098	13,098	14,743	15,828		$7.63	$7.28	$8.80	$8.80	$8.80	$9.91	$10.64	
ES	Edghill, Hal	ES Clerk			22,512	29,749	31,561	33,483	33,483	37,025			$15.13	$20.00	$21.22	$22.51	$22.51	$24.89	
ES	Garcia, Ermalinda	ES Clerk			10,239	20,868	25,323	28,405	29,257	31,409			$6.88	$14.03	$17.02	$19.09	$19.67	$21.11	
ES	Gonzales, Elida	Dean of Admissions	75,054	78,395	78,395	106,410	109,603	109,603	109,603		$50.45	$52.70	$52.70	$71.53	$73.68	$73.68	$73.68		
ES	Gross, Iris	ES Clerk		22,803	22,803	28,036	28,405	29,527	30,135	32,352		$15.33	$15.33	$18.85	$19.09	$19.85	$20.26	$21.75	
ES	Jiminez, Lupe	ES Clerk		23,818	24,192	28,161	29,251	33,917	33,917	35,352		$16.01	$16.26	$18.93	$19.66	$22.80	$22.80	$23.76	
ES	Loomis, Susan	Director, Enrollment Svc						42,033	47,308	74,007						$28.26	$31.80	$49.75	
ES	Mapes, Mary	ES Clerk		8,746	21,300	21,300	27,578	28,405	29,257	29,257		$5.88	$14.32	$14.32	$18.54	$19.09	$19.67	$19.67	
ES	Mendoza, Heather	ES Clerk			26,880	32,502	32,502						$18.07	$21.85	$21.85				
ES	Velkoff, Jackie	Administrative Assoc.	23,882	24,599	28,877	29,744	31,555	38,533	39,689		$16.05	$16.54	$19.41	$19.99	$21.21	$25.90	$26.68		
ES	Jones, Marie	ES Clerk			22,804	25,337	31,555	32,502					$15.33	$17.03	$21.21	$21.85			
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	
FA	FA Tech II	Position Average	16,726	22,462	24,599	24,477	24,209	23,889	25,337	25,232	$11.24	$15.10	$16.54	$16.45	$16.27	$16.06	$17.03	$16.96	
FA	FA Tech II	Camper, Janyt							XX	XX									
FA	FA Tech II	Cowen, Theresa	XX	XX	XX														
FA	FA Tech II	Cowser, Andrea																	
FA	FA Tech II	Gonzalez, Cathy	XX	XX	XX														
FA	FA Tech II	Higuera, Araceli						XX	XX	XX									
FA	FA Tech II	Higuera-Mena, Francisca	XX	XX	XX	XX	XX	XX	XX										
FA	FA Tech II	Jiminez, Rosetta							XX	XX									
FA	FA Tech II	Jones, Marie	XX	XX	XX	XX	XX	XX											
FA	FA Tech II	Medlock, Phil																	
FA	FA Tech II	Orlauski, Rebecca								XX									
FA	FA Tech II	Parker, Albert						XX	XX										
FA	FA Tech II	Piper, Edelina																	
FA	FA Tech II	Plascencia, Michele							XX	XX									
FA	FA Tech II	Rivero, Mayda							XX	XX									
FA	FA Tech II	Rubin, Shelly								XX									
FA	FA Tech II	Silva, Toni	XX	XX	XX	XX	XX	XX	XX	XX									
FA	FA Tech II	Smith, Delores							XX										
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	
FA	FA Clerical Asst	Avg by position			18,394	18,394	18,394	19,514	18,954	18,395			$12.36	$12.36	$12.36	$13.12	$12.74	$12.37	
FA	FA Clerical Asst	LaCasse, Melissa							XX	XX									
FA	FA Clerical Asst	Salazar-Mendoza, Sarah																	
FA	FA Clerical Asst	Peikert, Shannon																	
FA	FA Clerical Asst	Rosas, Cathy							XX										
FA	FA Clerical Asst	Gauthier, Fay						XX	XX										
FA	FA Clerical Asst	DeLeon, Robin																	
FA	FA Clerical Asst	Devor, Fay																	
FA	FA Clerical Asst	Velasquez, Karla																	
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	
FA	FA Tech Support	Avg by position				36,728	35,512	42,577	43,855	47,081				$24.69	$23.87	$28.62	$29.48	$31.65	
FA	Sawyer, Timothy	FA Tech Support				36,728	36,728							$24.69	$24.69				
FA	Furr, Bernadette	FA Tech Support					34,296	42,577	43,855	47,081					$23.05	$28.62	$29.48	$31.65	
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	
FA	Alltree, Tara	Student Loan Coord						29,744	31,370	34,072						$19.99	$21.09	$22.90	
FA	Hancock, Sherri	Director of FA	59,787	62,449							$40.19	$41.98							
FA	Muehring, Mary E	Director of FA			57,150	66,915	66,915	71,004	78,514	78,514			$38.42	$44.98	$44.98	$47.73	$52.78	$52.78	
FA	Navarro, Lesia	FA Supervisor	23,883	24,599	30,881	42,033	42,033	43,294	44,592	47,873	$16.05	$16.54	$20.76	$28.26	$28.26	$29.10	$29.98	$32.18	
FA	Placencia, Grace	FA Supervisor	32,000								$21.51								
FA	William, Shanae	FA Supervisor				42,294	43,294	44,592	47,873	55,968				$28.43	$29.10	$29.98	$32.18	$37.62	

			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
IT	Callin, Dennis	Computer Programmer	31,807	31,807							$21.38	$21.38						
IT	Guarino, Susan	Dean of IT	75,395	78,395	95,489	98,354	100,321	100,321	103,331	110,933	$50.68	$52.70	$64.19	$66.12	$67.44	$67.44	$69.46	$74.57
IT	Peterson, Gregory	Sr. Programmer	39,741	40,970	42,199						$26.71	$27.54	$28.37					
IT	Nguyen, Kim	Sr. Programmer			36,401	45,334	45,334	48,104	49,547	54,788			$24.47	$30.47	$30.47	$32.34	$33.31	$36.83
IT	Holman, Robert	Sr. Programmer					20,439	46,703	50,139	50,139					$13.74	$31.39	$33.70	$33.70
IT	Orlauski, Brian	Supervisor, IT		22,512	30,881	33,223	39,612	48,095	51,034	83,506		$15.13	$20.76	$22.33	$26.63	$32.33	$34.31	$56.13
IT	Ehrhardt, Don	Supervisor, IT			59,690	59,690	73,318	75,518	75,518				$40.12	$40.12	$49.29	$50.76	$50.76	
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS		Average - Hourly Rate	12.49	14.63	15.49	15.88					12.49	14.63	15.49	15.88				
BS	Carrillo, Lisa	Cashier	XX	XX	XX	XX												
BS	Denz, Alice	Cashier	XX															
BS	Hernandez, Maria	Cashier				XX												
BS	Horn, Shellee	Cashier	XX															
BS	Lybrand, Margaret	Cashier			XX													
BS	Miller, Wanda	Cashier	XX															
BS	Montez, Danna	Cashier	XX															
BS	Ochoa, Melissa	Cashier	XX	XX	XX	XX												
BS	Owen, Karen	Cashier			XX													
BS	Owen, Tracie	Cashier			XX	XX												
BS	Richter, Karen	Cashier																
BS	Saenz, Esy	Cashier	XX	XX	XX													
BS	Saenz, Maria	Cashier		XX														
BS	Sharp, Brian	Cashier				XX												
BS	Stevens, Cheryl	Cashier	XX	XX	XX	XX												
BS	Vaughn, Samantha	Cashier	XX	XX														
BS	Ward, Karen	Cashier	XX	XX														
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS		Average - Permanent					27,581	29,572	25,007	33,487					$18.54	$19.88	$16.81	$22.51
BS	Hernandez, Maria	Cashier					XX	XX	XX	XX								
BS	Owen, Tracie	Cashier					XX	XX	XX	XX								
BS	Ochoa, Melissa	Cashier					XX	XX										
BS	Sharp, Brian	Cashier					XX	XX	XX									
BS	Richter, Karen	Cashier						XX	XX	XX								
BS	Hop, Pamela	Cashier							XX	XX								
BS	McKinnis, Kim	Cashier						XX										
BS	Carrillo, Lisa	Cashier					XX											
			98-99	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**	**98-99**	**99-00**	**00-01**	**01-02**	**02-03**	**03-04**	**04-05**	**05-06**
BS	Hernandez, Maria	Cashier					28,405	29,257	31,409	31,409					$19.09	$19.67	$21.11	$21.11
BS	Montez, Carol	Supervisor, Bus Svcs	37,979	38,515	38,515	47,299	69,653	55,455	57,801	57,801	$25.53	$25.89	$25.89	$31.80	$46.82	$37.28	$38.86	$38.86
BS	Oberg, Barbara	Admin Asst. Bus Svcs	38,618	41,548	41,548	49,538	64,895	66,840	68,847	73,912	$25.96	$27.93	$27.93	$33.30	$43.62	$44.93	$46.28	$49.69
BS	Owen, Tracie	Cashier					28,405	30,135	32,352	32,352					$19.09	$20.26	$21.75	$21.75
BS	Richter, Karen	Cashier					38,405	39,257	31,409	31,409					$25.82	$26.39	$21.11	$21.11
BS	Stevens, Cheryl	Head Cashier				33,049	35,068	36,120	38,777	38,777				$22.22	$23.57	$24.28	$26.07	$26.07
BS	Venable, Julie	Accountant	27,687	30,763	31,686	38,312	37,197	43,611	44,920	46,820	$18.61	$20.68	$21.30	$25.75	$25.00	$29.32	$30.20	$31.47

Print Date: 06/12/07
(Salary x 1.21) / 1,800 hrs.

Prepared by: K Nguyen S Guarino
Revised by SixTen and Associates 6-12-07

Mt. San Jacento Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 19 0 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office Initial year claim 98-99 through 05-06. (back-up in 05-06 only)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 1,197,272	$ 1,263,250	$ 1,334,230	$ 1,416,041	$ 3,561,982	$ 3,137,636	$ 3,318,293
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 23,945	$ 25,265	$ 26,685	$ 28,321	$ 71,240	$ 62,753	$ 66,366
1.8-4 line 4A	Enrollment Fees Waived	$ 616,271	$ 682,088	$ 828,190	$ 918,126	$ 1,489,638	$ 2,538,056	$ 2,568,206
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761	$ 51,364
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 43,139	For 00-01 through 05-06 unit fee					
1.8-4 line 5	Summer		1,487	10,053	11,609	674	3,479	1,819
	Fall		29,777	31,991	35,931	41,179	47,579	48,437
	Winter/Interssion							
	Spring		30,744	33,246	35,926	41,167	47,630	48,521
	Total # of credits		62,008	75,290	83,466	83,020	98,688	98,777
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806	$ 89,887
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761	$ 51,364
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 43,139						
1.8-4 5	Credit Units Waived		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806	$ 89,887
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 55,464**	**$ 70,069**	**$ 85,078**	**$ 94,317**	**$ 105,341**	**$ 140,567**	**$ 141,251**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Mt. San Jacinto
COUNTY: Riverside

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$13,930,991	$11,693,059	$1,126,192	$12,819,251
EQUALIZATION	190,575	175,329	15,246	190,575
ENROLL FEE ADMIN (2%)	46,135	42,445	3,690	46,135
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	198,245	182,387	15,858	198,245
S.F.A.A.	378,952	347,562	31,390	378,952
E.O.P.S.	647,035	591,017	56,018	647,035
C.A.R.E.	184,113	167,511	16,602	184,113
D.S.P.S.	526,581	484,453	42,128	526,581
STATE HOSPITALS	0	0	0	0
CALWORKS	293,424	242,350	51,074	293,424
MATRICULATION (CREDIT)	411,448	374,393	37,055	411,448
MATRIC. (NONCREDIT)	43,500	40,020	3,480	43,500
FAC.& STAFF DIVERSITY	14,517	12,273	2,244	14,517
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	327,277	301,094	26,183	327,277
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	205,039	188,635	16,404	205,039
ECON. DEVELOPMENT	0	0	0	0
TANF	61,777	56,834	4,943	61,777
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	37,625	31,605	0	31,605
VTEA TITLE I C	265,268	199,690	23,135	222,825
NURSING CARE	179,487	0	179,487	179,487
PRIOR YEAR CORRECTION	-618,001	-618,001	0	-618,001
TOTAL	$17,376,320	$14,546,418	$1,669,699	$16,216,117

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc[illegible]ule 5A
Mt. San Jacinto C[illegible]unity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 42,164.37	$ 12,279.77	$ 9,103.01	$ 19,254.04	$ 20,833.21	$ 21,159.33	$ 12,655.67
	EFCW-1 B. 1. b.		$ 12,374.32	$ 6,449.36	$ 5,754.28	$ 8,656.52	$ 11,220.16	$ 7,997.48	$ 7,519.68
	EFCW-1 B. 2. a.		$ 26,029.40	$ 23,745.28	$ 30,655.82	$ 32,255.32	$ 42,834.02	$ 39,451.00	$ 35,377.76
	EFCW-1 B. 2. b.		$ 22,801.23	$ 45,340.53	$ 42,006.94	$ 90,991.06	$ 46,711.77	$ 52,687.40	$ 56,735.69
	EFCW-1 B. 2. c.		$ 16,055.84	$ 11,793.80	$ 16,659.86	$ 18,226.96	$ 18,747.06	$ 19,445.84	$ 21,084.40
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 119,425.16	$ 99,608.74	$ 104,179.91	$ 169,383.90	$ 140,346.22	$ 140,741.05	$ 133,373.20
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 55,464.00	$ 70,069.00	$ 85,078.00	$ 94,317.00	$ 105,341.00	$ 140,567.00	$ 141,251.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 63,961.16	$ 29,539.74	$ 19,101.91	$ 75,066.90	$ 35,005.22	$ 174.05	$ (7,877.80)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 55,464.00**	**$ 70,069.00**	**$ 85,078.00**	**$ 94,317.00**	**$ 105,341.00**	**$ 140,567.00**	**$ 133,373.20**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mt. San Jacinto College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 02, 2012 02:42:13

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	451	174,616
BOGW - Part B based on income standards	4,369	1,641,616
BOGW - Part C based on financial need	1,824	733,330

Total Amount = $ 2,549,562

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

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E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 9, 2009

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8857

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Mt. San Jacinto Community College District CC33075

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Mt. San Jacinto Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC33075

(02) Claimant Name: Mt. San Jacinto Community College District

County of Location: Riverside

Street Address or P.O. Box: 1499 N. State Street

City: San Jacinto | State: CA | Zip Code: 92583-2399

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐

Fiscal Year of cost	(06)	(12) 2006-2007	(30) EFCW-1, (06)	39
Total Claimed Amount	(07)	(13) $ 488,639	(31) EFCW-1, (07)	154,643
Less : **10% Late Penalty, not to exceed $10,000**		(14) $ 10,000	(32) EFCW-1, (09)	52,864
Less : **Prior Claim Payment Received**		(15) $ -	(33) EFCW-1, (10)	164,666
Net Claimed Amount		(16) $ 478,639	(34)	
Due from State	(08)	(17) $ 478,639	(35)	
Due to State		(18)	(36)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	76,453
(23) EFCW-1, (04)(A)(1)(b)(f)	28,483
(24) EFCW-1, (04)(A)(2)(a)(f)	163,424
(25) EFCW-1, (04)(B)(1)(a)(f)	41,910
(26) EFCW-1, (04)(B)(1)(b)(f)	15,326
(27) EFCW-1, (04)(B)(2)(a)(f)	40,946
(28) EFCW-1, (04)(B)(2)(b)(f)	139,458
(29) EFCW-1, (04)(B)(2)(c)(f)	45,527

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**: 12-17-08

George Kozitza
Type or Print Name

Vice President, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

rogram
267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

Claimant

an Jacinto Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2006-2007

Leave Blank

ct Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ 76,453.49	$ -	$ -	$ -	$ -	$ 76,453.49
Staff training (One time per employee)	$ 28,483.04	$ -	$ -	$ -	$ -	$ 28,483.04
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 67,267.96	$ 96,155.99	$ -	$ -	$ -	$ 163,423.95
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Preparing district policies & procedures for § IV.B.	$ 41,910.03	$ -	$ -	$ -	$ -	$ 41,910.03
Staff training (One time per employee)	$ 15,325.83	$ -	$ -	$ -	$ -	$ 15,325.83
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ 40,945.64	$ -	$ -	$ -	$ -	$ 40,945.64
Waiving student fees	$ 83,783.85	$ 55,674.00	$ -	$ -	$ -	$ 139,457.85
Reporting BOG fee waiver data to CCC	$ 45,526.56	$ -	$ -	$ -	$ -	$ 45,526.56
tal Direct Costs	$ 399,696.40	$ 151,829.99	$ -	$ -	$ -	$ 551,526.39

t Costs		
direct Cost Rate	[From OMB A-21, FAM-29C, or 7%]	38.69%
tal Indirect Costs	[Line (06) x line (05)(a)]	$ 154,642.54
tal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 706,168.93
eduction		
s: Enrollment Fee Revenue offset		$ 52,864.00
s: Enrollment Fee Waiver offsets		$ 164,666.00
al Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 488,638.93

06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Armour, Robin	Director, Enrollment Services	$48.90	152.0	$ 7,432.80				
Holman, Robert	Senior Programmer Analyst	$55.58	496.0	$ 27,567.68				
Loomis, Susan	Director, Enrollment Services	$58.39	167.0	$ 9,751.13				
Montez, Carol	Accounting Supervisor	$42.99	36.0	$ 1,547.64				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	454.0	$ 29,909.52				
Stevens, Cheryl	Head Cashier	$30.59	8.0	$ 244.72				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 76,453.49	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Armour, Robin	Director, Enrollment Services	$48.90	137.0	$ 6,699.30				
Holman, Robert	Senior Programmer Analyst	$55.58	18.0	$ 1,000.44				
K. Stratton	Training	$900.00	1.0	$ 900.00				
Loomis, Susan	Director, Enrollment Services	$58.39	146.4	$ 8,548.88				
Montez, Carol	Accounting Supervisor	$42.99	78.0	$ 3,353.22				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	35.0	$ 2,305.80				
Stevens, Cheryl	Head Cashier	$30.59	140.0	$ 4,282.60				
Venable, Julie	Accounting Specialist	$34.82	40.0	$ 1,392.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 28,483.04	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection Enrollment Office Staff — Collecting Enrollment Fees	$22.14	1,326.6	$ 29,370.92				
Calculating total enrollment fee to be collected Enrollment Office Staff — Collecting Enrollment Fees	$22.14	631.4	$ 13,979.20				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff — Collecting Enrollment Fees	$22.14	17.8	$ 394.09				
Costs to issue 1098-T for enrollment fees paid Tax Notices for Students — Cost of Forms and Postage	$100.00	82.1		$ 8,207.99			
Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees Software Costs for Enrollme Collection of Fees	$100.00	879.5		$ 87,948.00			
Referencing student accounts and records Enrollment Office Staff — Collecting Enrollment Fees	$22.14	497.5	$ 11,014.65				
Updating written and computer records for enrollment fee information Enrollment Office Staff — Collecting Enrollment Fees	$22.14	565.0	$ 12,509.10				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 67,267.96	$ 96,155.99	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Furr, Bernadette	FA Tech support Specialist	$36.06	54.0	$ 1,947.24				
Montez, Carol	Accounting Supervisor	$42.99	12.0	$ 515.88				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	15.0	$ 704.70				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	86.0	$ 3,248.22				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	153.0	$ 10,079.64				
Stevens, Cheryl	Head Cashier	$30.59	2.0	$ 61.18				
Stratton, Katherine	Senior Programmer Analyst	$47.95	461.0	$ 22,104.95				
Williams, Shanae	Supervisor, Financial Aid	$37.77	86.0	$ 3,248.22				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 41,910.03	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Furr, Bernadette	FA Tech support Specialist	$36.06	66.0	$ 2,379.96				
Montez, Carol	Accounting Supervisor	$42.99	10.0	$ 429.90				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	20.0	$ 939.60				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	69.0	$ 2,606.13				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	53.0	$ 3,491.64				
Stevens, Cheryl	Head Cashier	$30.59	24.0	$ 734.16				
Stratton, Katherine	Senior Programmer Analyst	$47.95	25.0	$ 1,198.75				
Venable, Julie	Accounting Specialist	$34.82	40.0	$ 1,392.80				
Williams, Shanae	Supervisor, Financial Aid	$37.77	57.0	$ 2,152.89				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 15,325.83	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Montez, Carol	Accounting Supervisor	$42.99	96.0	$ 4,127.04				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	6.0	$ 281.88				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
Stevens, Cheryl	Head Cashier	$30.59	544.0	$ 16,640.96				
Venable, Julie	Accounting Specialist	$34.82	528.0	$ 18,384.96				
Williams, Shanae	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				

(05) Total ☒ Subtotal ☐

$ 40,945.64	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waiving Enrollment Fees	$22.64	1,002.0	$ 22,685.28				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waiving Enrollment Fees	$22.64	1,102.2	$ 24,953.81				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waiving Enrollment Fees	$22.64	668.0	$ 15,123.52				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Waiving Enrollment Fees	$22.64	7.8	$ 176.59				
Notifying students of additional documentation requirements and how to obtain information Financial Aid Office Staff Waiving Enrollment Fees	$22.64	7.8	$ 176.59				
Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees Software Costs for Enrollme Waiving of Fees	$100.00	556.7		$ 55,674.00			
Receiving waiver applications Financial Aid Office Staff Waiving Enrollment Fees	$22.64	912.9	$ 20,668.06				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 83,783.85	$ 55,674.00	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Mt. San Jacinto Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Holman, Robert	Senior Programmer Analyst	$55.58	80.0	$ 4,446.40				
Montez, Carol	Accounting Supervisor	$42.99	64.0	$ 2,751.36				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	6.0	$ 281.88				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
Nguyen, Kim	Senior Programmer Analyst	$57.25	100.0	$ 5,725.00				
Rivero, Mayda	FA Clerical Assistant	$19.59	808.0	$ 15,828.72				
Stevens, Cheryl	Head Cashier	$30.59	80.0	$ 2,447.20				
Venable, Julie	Accounting Specialist	$34.82	360.0	$ 12,535.20				
Williams, Shanae	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 45,526.56	$ -	$ -	$ -	$ -

New 04/06

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	152.00	Armour, Robin	Director, Enrollment Services	$48.90	$7,432.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	137.00	Armour, Robin	Director, Enrollment Services	$48.90	$6,699.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	289.00	**Armour, Robin Total**			$14,132.10		
06-07	497.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$11,014.65	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	631.40	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$13,979.20	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	1,326.60	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$29,370.92	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	565.00	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$12,509.10	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	17.80	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$394.09	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	3,038.30	**Enrollment Office Staff Total**			$67,267.96		
06-07	1,002.00	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$22,685.28	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	912.90	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$20,668.06	Receiving waiver applications	Waiving student fees
06-07	668.00	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$15,123.52	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,102.20	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$24,953.81	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	7.80	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$176.59	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	7.80	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$176.59	In case of denied applications, reviewing and evaluating information if denial is appealed by stude	Waiving student fees
	3,700.70	**Financial Aid Office Staff Total**			$83,783.85		
06-07	54.00	Furr, Bernadette	FA Tech support Specialist	$36.06	$1,947.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	66.00	Furr, Bernadette	FA Tech support Specialist	$36.06	$2,379.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	120.00	**Furr, Bernadette Total**			$4,327.20		
06-07	496.00	Holman, Robert	Senior Programmer Analyst	$55.58	$27,567.68	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	18.00	Holman, Robert	Senior Programmer Analyst	$55.58	$1,000.44	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	80.00	Holman, Robert	Senior Programmer Analyst	$55.58	$4,446.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	594.00	**Holman, Robert Total**			$33,014.52		
1/11/2007	1.00	K. Stratton	Training	$900.00	$900.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1.00	**K. Stratton Total**			$900.00		
06-07	167.00	Loomis, Susan	Director, Enrollment Services	$58.39	$9,751.13	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	131.00	Loomis, Susan	Director, Enrollment Services	$58.39	$7,649.09	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	15.41	Loomis, Susan	Director, Enrollment Services	$58.39	$899.79	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	313.41	**Loomis, Susan Total**			$18,300.01		
06-07	36.00	Montez, Carol	Accounting Supervisor	$42.99	$1,547.64	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	12.00	Montez, Carol	Accounting Supervisor	$42.99	$515.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	78.00	Montez, Carol	Accounting Supervisor	$42.99	$3,353.22	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	10.00	Montez, Carol	Accounting Supervisor	$42.99	$429.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	96.00	Montez, Carol	Accounting Supervisor	$42.99	$4,127.04	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
06-07	64.00	Montez, Carol	Accounting Supervisor	$42.99	$2,751.36	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	296.00	**Montez, Carol Total**			$12,725.04		
06-07	15.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$704.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	20.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$939.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$281.88	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
06-07	6.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$281.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Muehring, Mary Ellen Total**			$2,208.06		
06-07	86.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$3,248.22	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	69.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$2,606.13	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	20.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$755.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
06-07	20.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$755.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	195.00	**Navarro, Lesia Total**			$7,365.15		
06-07	100.00	Nguyen, Kim	Senior Programmer Analyst	$57.25	$5,725.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Nguyen, Kim Total**			$5,725.00		
06-07	454.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$29,909.52	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	153.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$10,079.64	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$2,305.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	53.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$3,491.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	695.00	**Orlauski, Brian Total**			$45,786.60		
06-07	808.00	Rivero, Mayda	FA Clerical Assistant	$19.59	$15,828.72	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	808.00	**Rivero, Mayda Total**			$15,828.72		
06-07	442.38	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$44,238.00	Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees	Calculating and collecting enrollment fees
06-07	437.10	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$43,710.00	Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees	Calculating and collecting enrollment fees
	879.48	**Software Costs for Enrollment Fees Total**			$87,948.00		
06-07	119.64	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$11,964.00	Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees	Waiving student fees
06-07	437.10	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$43,710.00	Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees	Waiving student fees
	556.74	**Software Costs for Enrollment Waivers Total**			$55,674.00		
06-07	8.00	Stevens, Cheryl	Head Cashier	$30.59	$244.72	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
06-07	2.00	Stevens, Cheryl	Head Cashier	$30.59	$61.18	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
06-07	140.00	Stevens, Cheryl	Head Cashier	$30.59	$4,282.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	24.00	Stevens, Cheryl	Head Cashier	$30.59	$734.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	544.00	Stevens, Cheryl	Head Cashier	$30.59	$16,640.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	80.00	Stevens, Cheryl	Head Cashier	$30.59	$2,447.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	798.00	**Stevens, Cheryl Total**			$24,410.82		
06-07	461.00	Stratton, Katherine	Senior Programmer Analyst	$47.95	$22,104.95	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	25.00	Stratton, Katherine	Senior Programmer Analyst	$47.95	$1,198.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	486.00	**Stratton, Katherine Total**			$23,303.70		
06-07	82.08	Tax Notices for Students	Cost of Forms and Postage	$100.00	$8,207.99	Costs to issue 1098-T for enrollment fees paid	Calculating and collecting enrollment fees
	82.08	**Tax Notices for Students Total**			$8,207.99		
06-07	40.00	Venable, Julie	Accounting Specialist	$34.82	$1,392.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	40.00	Venable, Julie	Accounting Specialist	$34.82	$1,392.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	528.00	Venable, Julie	Accounting Specialist	$34.82	$18,384.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	360.00	Venable, Julie	Accounting Specialist	$34.82	$12,535.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	968.00	**Venable, Julie Total**			$33,705.76		
06-07	86.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$3,248.22	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	57.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$2,152.89	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	20.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$755.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	20.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$755.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	183.00	**Williams, Shanae Total**			$6,911.91		
	14,150.71	**Grand Total**			$551,526.39		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$20,760,203		$20,760,203	$897,827	$19,862,376
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,690,145		2,690,145	61,822	2,628,323
Course and Curriculum Development	6020	96,602		96,602	26,497	70,105
Academic/Faculty Senate	6030	33,858		33,858		33,858
Other Instructional Administration & Instructional Governance	6090	56,906		56,906		56,906
Instructional Support Services	6100					
Learning Center	6110	836,151		836,151		836,151
Library	6120	777,384		777,384	87,049	690,335
Media	6130	5,104		5,104	1,310	3,794
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	844,790		844,790	8,996	835,794
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,674,643		1,674,643	6,054	1,668,589
Matriculation and Student Assessment	6320	676,561		676,561	15,469	661,092
Transfer Programs	6330					
Career Guidance	6340	49,485		49,485		49,485
Other Student Counseling and Guidance	6390	248,269		248,269	10,137	238,132
Other Student Services	6400					
Disabled Students Programs & Services	6420	334,118		334,118	25,570	308,548
Subtotal		$29,084,219	$0	$29,084,219	$1,140,731	$27,943,488

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$987,999	$484,955	$503,044		$503,044
Health Services	6440					
Student Personnel Admin.	6450	229,716		229,716	1,308	228,408
Financial Aid Administration	6460	944,580		944,580	10,219	934,361
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	8,046		8,046		8,046
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,158,497		1,158,497	1,158,497	0
Custodial Services	6530	396,254		396,254	396,254	0
Grounds Maintenance and Repairs	6550	238,355		238,355	238,355	0
Utilities	6570	1,278,494		1,278,494	1,278,494	0
Other	6590					
Planning, Policy Making, and Coordination	6600	1,323,199		1,323,199	1,323,199	0
General Inst. Support Services	6700					
Community Relations	6710	404,226		404,226	404,226	0
Fiscal Operations	6720	1,694,292		1,694,292	1,694,292	0
Human Resources Management	6730	879,389		879,389	879,389	0
Noninstructional Staff Benefits & Incentives	6740	444,813		444,813	444,813	0
Staff Development	6750	4,351		4,351	4,351	0
Staff Diversity	6760	14,561		14,561	14,561	0
Logistical Services	6770	1,604,826		1,604,826	1,604,826	0
Management Information Systems	6780	1,468,571		1,468,571	1,468,571	0
Subtotal		$42,164,388	$484,955	$41,679,433	$12,062,086	$29,617,347

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810	76,315		76,315		76,315
Community Service Classes	6820	259,088		259,088		259,088
Community Use of Facilities	6830					
Economic Development	6840	224,426		224,426	631	223,795
Other Community Services & Economic Development	6890	14,242		14,242		14,242
Ancillary Services	6900					
Bookstores	6910	17,984		17,984		17,984
Child Development Center	6920	719,480		719,480	4,192	715,288
Farm Operations	6930					
Food Services	6940	17,144		17,144		17,144
Parking	6950	62,194		62,194	23,974	38,220
Student and Co-curricular Activities	6960	899,598		899,598	21,175	878,423
Student Housing	6970					
Other	6990	221,624		221,624		221,624
Auxiliary Operations	7000					
Contract Education	7010	132,760		132,760	4,849	127,911
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	342,671		342,671	342,671	0
(05) Total		$45,151,914	$484,955	$44,666,959	$12,459,578	$32,207,381
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				38.69%		
(07) Notes						

CCD	Method	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07	07-08
lan Ha..ock Joint CCD	FAM-29C	37.59	37.07	35.76	36.14	32.00	32.46	31.81	32.71	30.33	
erritos CCD	FAM-29C	39.30	40.33	32.78	31.58	29.26	28.16	34.11	30.68	29.17	
itrus CCD	FAM-29C	51.75	44.86	44.70	45.74	41.72	45.53	40.58	40.60	41.95	
ontra Costa CCD	*FED rate*	*34.00*	*34.00*	*34.00*	*34.00*	*32.80*	*32.80*	*32.80*	*32.80*	*32.80*	*31.70*
Camino CCD	FAM-29C	39.18	41.40	37.55	36.24	30.38	29.10	35.22	35.02	32.00	
othill-De Anza CCD	FAM-29C	28.67	30.09	31.67	35.50	32.28	31.11	29.66	28.90	29.69	
avilan CCD	FAM-29C	35.68	34.23	36.55	35.86	32.88	36.29	33.96	36.92	36.45	
lendale CCD	*FED rate*					*45.00*	*45.00*	*45.00*	*45.00*	*45.00*	
lendale CCD	FAM-29C	39.13	38.41	38.15	34.20						
rn CCD	FAM-29C	66.87	55.25	51.24	49.63	48.94	39.43	42.89	39.91	37.49	
s Rios CCD	*FED rate*								*30.00*	*30.00*	
s Rios CCD	FAM-29C	33.73	33.68	34.00	32.79	31.09	30.88	31.96	*32.61*		
ng Beach CCD	FAM-29C		36.80	37.27	38.71	35.01	33.40	32.33	33.86	32.70	
onterey Peninsula CCD	FAM-29C					34.91	38.94	43.85	32.29	34.62	
rth Orange County CCD	*FED rate*	*38.00*	*38.00*	*38.00*	*38.00*	*39.00*	*39.00*	*39.00*	*39.00*	*29.50*	
lomar CCD	FAM-29C	32.61	32.87	35.16	35.41	33.72	29.56	27.57	25.48	26.35	
sadena Area CCD	*FED rate*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*32.80*	*32.80*	*32.80*	
ncho Santiago CCD	*FED rate*							*30.00*	*30.00*	*30.00*	
	FAM-29C										
dwoods CCD	FAM-29C	42.74	39.44	41.42	41.43	38.92	38.64	37.90	37.45	39.60	
San Jacinto CCD	FAM-29C	47.02	50.15	42.92	42.47	40.14	38.81	36.94	34.02	38.69	
n Bernardino CCD	FAM-29C	51.36	45.57	51.88	46.95	49.18	44.42	45.62	47.74	45.3	
n Mateo CCD	*FED rate*		*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	
nta Monica CCD	FAM-29C	43.56	45.96	41.72	42.07	39.82	34.07	36.91	34.25	35.53	
rra Joint CCD	FAM-29C	45.92	42.04	41.34	36.18	36.79	38.41	40.90	35.70	38.49	
te Center CCD	*FED rate*							*36.50*	*36.50*	*36.50*	
te Center CCD	FAM-29C	38.96	38.26	34.59	36.70	34.62	31.33	32.25			
or Valley CCD	FAM-29C	57.90	58.96	58.45	61.28	55.20	53.91	45.61	46.57	41.33	
st Valley-Mission CCD	FAM-29C	40.47	44.02	42.99	44.15	33.37	34.89	35.80	37.57	38.86	
st Kern CCD	FAM-29C	33.92	37.65	37.64	39.73	37.46	31.79	38.32	34.32	34.87	
emite CCD	FAM-29C	33.05	32.67	30.93	30.98	26.87	26.35	34.88	36.38	32.23	

R taken from previously filed claims

Schedule 1A
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	33,166
Avg. time p/account	0.9
Total Time (in minutes)	29849
Per Hour	60
Hours Worked (****Activity 11**)	**497.5**
***EFC 2**	19,940
Avg. time p/student	1.9
Total Time (in minutes)	37886
Per Hour	60
Hours Worked (****Activity 12**)	**631.4**
***EFC 1**	33,166
Avg. time p/question	2.4
Total Time (in minutes)	79598
Per Hour	60
Hours Worked (****Activity 13**)	**1326.6**
***EFC 2**	19,940
Avg. time p/file	1.7
Total Time (in minutes)	33898
Per Hour	60
Hours Worked (****Activity 14**)	**565.0**
***EFC 4**	710
Avg. time p/account	1.5
Total Time (in minutes)	1065
Per Hour	60
Hours Worked (****Activity 15**)	**17.8**
***EFC 5 (Not provided, no sub.)**	
Avg. time p/student	5.3
Total Time (in minutes)	
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	13,360
Avg. time p/question	4.5
Total Time (in minutes)	60120
Per Hour	60
Hours Worked (****Activity 21**)	**1002.0**
***EFW 6**	13,360
Avg. time p/application	4.1
Total Time (in minutes)	54776
Per Hour	60
Hours Worked (****Activity 22**)	**912.9**
***EFW 6**	13,360
Avg. time p/evaluation	3.0
Total Time (in minutes)	40080
Per Hour	60
Hours Worked (****Activity 23**)	**668.0**
***EFW 8**	134
Avg. time p/application	3.5
Total Time (in minutes)	469
Per Hour	60
Hours Worked (****Activity 24**)	**7.8**
***EFW 7**	13,226
Avg. time p/application	5
Total Time (in minutes)	66130
Per Hour	60
Hours Worked (****Activity 25**)	**1102.2**
***EFW 8**	134
Avg. time p/application	3.5
Total Time (in minutes)	469
Per Hour	60
Hours Worked (****Activity 26**)	**7.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		1	2	1	2	4	5	
		**Activity Codes						
Staff	Title	11	12	13	14	15	16	PHR
Karen Richter	Cashier	0.5	1.5	0.5	0.5	1.5	2.0	26.29
Tracie Owen	Cashier	0.5	1.5	0.5	0.5	1.5	2.0	26.29
Maria Hernandez	Cashier	0.5	1.5	0.5	0.5	1.5	2.0	24.78
Cheryl Stevens	Head Cashier	0.5	1.5	0.5	0.5	1.5	15.0	30.59
Christopher L. Mozga	ES Clerk	1.0	2.0	3.0	2.0			9.07
Esmeralda A. Bravo	ES Clerk	1.0	2.0	3.0	2.0			26.29
Cynthia, Ching-Lee	ES Clerk	1.0	2.0	3.0	2.0			15.77
Mary Lou Dillard	ES Clerk	1.0	2.0	3.0	2.0			28.00
Ermelinda Garcia	ES Clerk	1.0	2.0	3.0	2.0			30.59
Iris S. Grosse	ES Clerk	1.0	2.0	3.0	2.0			28.36
Lupe R. Jimenez	ES Clerk	1.0	2.0	3.0	2.0			26.29
Meredith M. Qualls	ES Clerk	1.0	2.0	3.0	2.0			21.37
Margaret Orchard	ES Clerk	1.0	2.0	3.0	2.0			26.88
Lydia E. Magana	ES Clerk	1.0	2.0	3.0	2.0			10.15
Jeannie Huerta	ES Clerk	1.0	2.0	3.0	2.0			10.76
Vanessa Rodriguez	ES Clerk	1.0	2.0	3.0	2.0			20.75
Janet L. Rosenberry	ES Clerk	1.0	2.0	3.0	2.0			17.61
Karla M. Ortega	ES Clerk	1.0	2.0	3.0	2.0			18.75
Average		**0.9**	**1.9**	**2.4**	**1.7**	**1.5**	**5.3**	**22.14**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes).

Schedule 3
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (back-up in 05-06 only)
Findings:

		*EFW Workload Multiplier						
		6			8	7	8	
		**Activity Codes						
Staff	Title	21	22	23	24	25	26	PHR
Araceli Higuera	FA Clerical Assistant	5	3	3	3	5	3	26.10
Melissa Lacasse	FA Clerical Assistant	5	3	3	3	5	3	19.03
Edelina Pieper	FA Clerical Assistant	5	3	3	3	5	3	8.70
Michele Plascencia	FA Clerical Assistant	5	3	3	3	5	3	9.31
Mayda Rivero	FA Clerical Assistant	5	3	3	3	5	3	19.59
Tara Altree	FA Tech	4	5	3	4	5	4	28.52
Rosetta Jimenez	FA Tech	4	5	3	4	5	4	26.88
Robert Parker	FA Tech	4	5	3	4	5	4	27.69
Antoinette Silva	FA Tech	4	5	3	4	5	4	30.25
Rebecca Orlauski	FA Tech	4	5	3	4	5	4	26.10
Janyt Camper	FA Tech	4	5	3	4	5	4	26.88
Average		**4.5**	**4.1**	**3.0**	**3.5**	**5.0**	**3.5**	**22.64**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Mt San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	22,351	24,359	27,410	29,081	30,634	28,267	29,496	29,502	33,166
EFC 2	1.8-1	2.	Paid Enrollment fees	11,099	14,625	14,671	12,660	13,127	13,164	11,817	12,408	19,940
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	3,846	9,734	12,739	16,421	17,507	15,103	17,679	17,094	13,226
EFC 4	1.8-2	1.	Delinquencies collections	-		617	580	1,099	1,813	867	13,689	710
EFC 5	1.8-2	2.	Refunds	-								N/A
EFW 6	1.8-3	1.	Waivers Requested	X	3,326	4,577	5,395	5,967	5,783	6,741	6,644	13,360
EFW 7	1.8-3	2.	Waivers Approved	X	3,326	4,577	5,395	5,967	5,783	6,741	6,644	13,226
EFW 8	1.8-3	(1-2)	Waivers Denied	X	Not reported							134

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Wednesday, May 2, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2006 Summer Term

Data Current As Of May 02, 2012 02:39:02

Total Headcount	5,141

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California Home

Wednesday, May 2, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2006 Fall Term

Data Current As Of May 02, 2012 02:39:09

Total Headcount	13,781

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California Home Wednesday, May 2, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mt. San Jacinto
For 2007 Spring Semester

Data Current As Of May 02, 2012 02:39:22

Total Headcount	14,244

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: _Mt. San Jacinto College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer	1796	1871	2220
Fall	5059	5631	5467
Winter/Intersession			
Spring	5171	5724	6031
Total	12026	13226	13718

This information is not tracked for MSJC. Only student BOGW approvals are entered into our system. The FA Director (L. Navarro) estimates 99% of BOGW applications are approved.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Mt. San Jacento Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office (back-up in 05-06 only)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 1,197,272	$ 1,263,250	$ 1,334,230	$ 1,416,041	$ 3,561,982	$ 3,137,636	$ 3,318,293	$ 3,349,855
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 23,945	$ 25,265	$ 26,685	$ 28,321	$ 71,240	$ 62,753	$ 66,366	$ 66,997
1.8-4 line 4A	Enrollment Fees Waived	$ 616,271	$ 682,088	$ 828,190	$ 918,126	$ 1,489,638	$ 2,538,056	$ 2,568,206	$ 2,513,987
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761	$ 51,364	$ 50,280
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 43,139	For 00-01 through 05-06 unit fee						
1.8-4 line 5	Summer		1,487	10,053	11,609	674	3,479	1,819	16,341
	Fall		29,777	31,991	35,931	41,179	47,579	48,437	54,051
	Winter/Interssion								
	Spring		30,744	33,246	35,926	41,167	47,630	48,521	55,307
	Total # of credits		62,008	75,290	83,466	83,020	98,688	98,777	125,699
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806	$ 89,887	$ 114,386
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 12,325	$ 13,642	$ 16,564	$ 18,363	$ 29,793	$ 50,761	$ 51,364	$ 50,280
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 43,139							
1.8-4 5	Credit Units Waived		$ 56,427	$ 68,514	$ 75,954	$ 75,548	$ 89,806	$ 89,887	$ 114,386
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 55,464**	**$ 70,069**	**$ 85,078**	**$ 94,317**	**$ 105,341**	**$ 140,567**	**$ 141,251**	**$ 164,666**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Mt. San Jacinto
COUNTY: Riverside

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$22,683,548	$19,588,451	$1,664,319	$21,252,770
ENROLL FEE ADMIN (2%)	52,864	48,635	4,229	52,864
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	140,944	0	140,944	140,944
S.F.A.A.	393,777	362,275	31,502	393,777
E.O.P.S.	662,081	609,114	52,967	662,081
C.A.R.E.	183,215	168,557	14,658	183,215
D.S.P.S.	590,456	543,219	47,237	590,456
STATE HOSPITALS	0	0	0	0
CALWORKS	349,508	284,748	64,760	349,508
MATRICULATION (CREDIT)	601,605	547,036	54,569	601,605
MATRIC. (NONCREDIT)	63,399	58,327	5,072	63,399
FAC.& STAFF DIVERSITY	13,427	12,353	1,074	13,427
PART-TIME FAC. ALLO.	327,277	301,095	26,182	327,277
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	100,000	92,000	8,000	100,000
SCHDL. MAINT. & REPAIR	100,000	92,000	8,000	100,000
TANF	65,403	60,170	5,233	65,403
ECON. DEVELOPMENT	0	0	0	0
NURSING EDUCATION	326,247	113,326	212,921	326,247
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	23,909	23,909	0	23,909
PRIOR YEAR CORRECTION	-1,842,211	-1,842,211	0	-1,842,211
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	176,073	176,073	0	176,073
BASIC SKILLS -REAPPROP	234,300	234,300	0	234,300
CAR. TECH. TRAILER BIL	313,565	313,565	0	313,565
GEN. PUR. TRAILER BILL	613,446	613,446	0	613,446
INST. MATERIAL TRAILER	370,167	370,167	0	370,167
SCHLD.MAINT. TRAILER B	370,167	370,167	0	370,167
FACULTY STAFF DEV	39,405	39,405	0	39,405
TOTAL	$27,004,530	$23,218,889	$2,354,863	$25,573,752

Schedule 5A
Mt. San Jacinto Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 to 2006-2007
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Ref	Source	Item	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 12,655.67	$ 41,910.03
	EFCW-1 B. 1. b.		$ 7,519.68	$ 15,325.83
	EFCW-1 B. 2. a.		$ 35,377.76	$ 40,945.64
	EFCW-1 B. 2. b.		$ 56,735.69	$ 139,457.85
	EFCW-1 B. 2. c.		$ 21,084.40	$ 45,526.56
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 133,373.20	$ 283,165.91
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 141,251.00	$ 164,666.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (7,877.80)	$ 118,499.91
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 133,373.20**	**$ 164,666.00**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mt. San Jacinto College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of May 02, 2012 02:42:20

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	478	162,340
BOGW - Part B based on income standards	4,976	1,633,145
BOGW - Part C based on financial need	1,935	675,229

Total Amount = $ 2,470,714

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SixTen and Associates
Mandate Reimbursement Services

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Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 30, 2009

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 9007

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Mt. San Jacinto Community College District CC33075

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Mt. San Jacinto Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

California State Controller
Division of Accounting and Reporting

MARCH 23, 2009

BOARD OF TRUSTEES
MT SAN JACINTO COMM COLL DIST
RIVERSIDE COUNTY
1499 N STATE ST
SAN JACINTO CA 92383

DEAR CLAIMANT:

RE: ENROLLMENT FEE COLLECTION

WE HAVE REVIEWED YOUR 2006/2007 FISCAL YEAR REIMBURSEMENT CLAIM FOR THE MANDATED COST PROGRAM REFERENCED ABOVE. THE RESULTS OF OUR REVIEW ARE AS FOLLOWS:

AMOUNT CLAIMED			491,477.00
ADJUSTMENT TO CLAIM:			
LATE CLAIM PENALTY	-	10,000.00	
TOTAL ADJUSTMENTS			- 10,000.00
AMOUNT DUE CLAIMANT			$ 481,477.00

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT DENNIS SPECIALE AT (916) 324-0254 OR IN WRITING AT THE STATE CONTROLLER'S OFFICE, DIVISION OF ACCOUNTING AND REPORTING, P.O. BOX 942850, SACRAMENTO, CA 94250-5875. DUE TO INSUFFICIENT APPROPRIATION, THE BALANCE DUE WILL BE FORTHCOMING WHEN ADDITIONAL FUNDS ARE MADE AVAILABLE.

SINCERELY,

Ginny Brummels

GINNY BRUMMELS, MANAGER

LOCAL REIMBURSEMENT SECTION
P.O. BOX 942850 SACRAMENTO, CA 94250-5875

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC33075

(02) Claimant Name: Mt. San Jacinto Community College District

County of Location: Riverside

Street Address or P.O. Box: 1499 N. State Street

City: San Jacinto | State: CA | Zip Code: 92583-2399

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 491,477
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 481,477
Due from State	(08)	(17) $ 481,477
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	76,453
(23) EFCW-1, (04)(A)(1)(b)(f)	28,483
(24) EFCW-1, (04)(A)(2)(a)(f)	163,424
(25) EFCW-1, (04)(B)(1)(a)(f)	41,910
(26) EFCW-1, (04)(B)(1)(b)(f)	15,326
(27) EFCW-1, (04)(B)(2)(a)(f)	40,946
(28) EFCW-1, (04)(B)(2)(b)(f)	139,458
(29) EFCW-1, (04)(B)(2)(c)(f)	45,527
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	157,480
(32) EFCW-1, (09)	52,864
(33) EFCW-1, (10)	164,666
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) George Kozitza — **Date** 1/28/09

George Kozitza
Type or Print Name

Vice President, Business Services
Title

(38) Name of Contact Person for Claim: Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

Claim

San Jacinto Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year 2006-2007

) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ 76,453.49	$ -	$ -	$ -	$ -	$ 76,453.49
Staff training (One time per employee)	$ 28,483.04	$ -	$ -	$ -	$ -	$ 28,483.04
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 67,267.96	$ 96,155.99	$ -	$ -	$ -	$ 163,423.95
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Prep[illegible] district policies & procedures for [illegible]	$ 41,910.03	$ -	$ -	$ -	$ -	$ 41,910.03
Staff training (One time per employee)	$ 15,325.83	$ -	$ -	$ -	$ -	$ 15,325.83
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ 40,945.64	$ -	$ -	$ -	$ -	$ 40,945.64
Waiving student fees	$ 83,783.85	$ 55,674.00	$ -	$ -	$ -	$ 139,457.85
Reporting BOG fee waiver data to CCC	$ 45,526.56	$ -	$ -	$ -	$ -	$ 45,526.56
otal Direct Costs	$ 399,696.40	$ 151,829.99	$ -	$ -	$ -	$ 551,526.39

t Costs		
direct Cost Rate	[From OMB A-21, FAM-29C, or 7%]	39.40%
otal Indirect Costs	[Line (06) x line (05)(a)]	$ 157,480.38
otal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 709,006.77
eduction		
s: Enrollment Fee Revenue offset		$ 52,864.00
s: Enrollment Fee Waiver offsets		$ 164,666.00
al [illegible]ed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 491,476.77

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Armour, Robin	Director, Enrollment Services	$48.90	152.0	$ 7,432.80				
Holman, Robert	Senior Programmer Analyst	$55.58	496.0	$ 27,567.68				
Loomis, Susan	Director, Enrollment Services	$58.39	167.0	$ 9,751.13				
Montez, Carol	Accounting Supervisor	$42.99	36.0	$ 1,547.64				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	454.0	$ 29,909.52				
Stevens, Cheryl	Head Cashier	$30.59	8.0	$ 244.72				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 76,453.49	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Armour, Robin	Director, Enrollment Services	$48.90	137.0	$ 6,699.30				
Holman, Robert	Senior Programmer Analyst	$55.58	18.0	$ 1,000.44				
K. Stratton	Training	$900.00	1.0	$ 900.00				
Loomis, Susan	Director, Enrollment Services	$58.39	146.4	$ 8,548.88				
Montez, Carol	Accounting Supervisor	$42.99	78.0	$ 3,353.22				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	35.0	$ 2,305.80				
Stevens, Cheryl	Head Cashier	$30.59	140.0	$ 4,282.60				
Venable, Julie	Accounting Specialist	$34.82	40.0	$ 1,392.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 28,483.04	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection Enrollment Office Staff — Collecting Enrollment Fees	$22.14	1,326.6	$ 29,370.92				
Calculating total enrollment fee to be collected Enrollment Office Staff — Collecting Enrollment Fees	$22.14	631.4	$ 13,979.20				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff — Collecting Enrollment Fees	$22.14	17.8	$ 394.09				
Costs to issue 1098-T for enrollment fees paid Tax Notices for Students — Cost of Forms and Postage	$100.00	82.1		$ 8,207.99			
Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees Software Costs for Enrollmer Collection of Fees	$100.00	879.5		$ 87,948.00			
Referencing student accounts and records Enrollment Office Staff — Collecting Enrollment Fees	$22.14	497.5	$ 11,014.65				
Updating written and computer records for enrollment fee information Enrollment Office Staff — Collecting Enrollment Fees	$22.14	565.0	$ 12,509.10				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 67,267.96	$ 96,155.99	$ -	$ -	$ -

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Furr, Bernadette	FA Tech support Specialist	$36.06	54.0	$ 1,947.24				
Montez, Carol	Accounting Supervisor	$42.99	12.0	$ 515.88				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	15.0	$ 704.70				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	86.0	$ 3,248.22				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	153.0	$ 10,079.64				
Stevens, Cheryl	Head Cashier	$30.59	2.0	$ 61.18				
Stratton, Katherine	Senior Programmer Analyst	$47.95	461.0	$ 22,104.95				
Williams, Shanae	Supervisor, Financial Aid	$37.77	86.0	$ 3,248.22				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 41,910.03	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Furr, Bernadette	FA Tech support Specialist	$36.06	66.0	$ 2,379.96				
Montez, Carol	Accounting Supervisor	$42.99	10.0	$ 429.90				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	20.0	$ 939.60				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	69.0	$ 2,606.13				
Orlauski, Brian	Supervisor, Computer Applications	$65.88	53.0	$ 3,491.64				
Stevens, Cheryl	Head Cashier	$30.59	24.0	$ 734.16				
Stratton, Katherine	Senior Programmer Analyst	$47.95	25.0	$ 1,198.75				
Venable, Julie	Accounting Specialist	$34.82	40.0	$ 1,392.80				
Williams, Shanae	Supervisor, Financial Aid	$37.77	57.0	$ 2,152.89				
(05) Total ☒ Subtotal ☐				$ 15,325.83	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Montez, Carol	Accounting Supervisor	$42.99	96.0	$ 4,127.04				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	6.0	$ 281.88				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
Stevens, Cheryl	Head Cashier	$30.59	544.0	$ 16,640.96				
Venable, Julie	Accounting Specialist	$34.82	528.0	$ 18,384.96				
Williams, Shanae	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 40,945.64	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waiving Enrollment Fees	$22.64	1,002.0	$ 22,685.28				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waiving Enrollment Fees	$22.64	1,102.2	$ 24,953.81				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waiving Enrollment Fees	$22.64	668.0	$ 15,123.52				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Waiving Enrollment Fees	$22.64	7.8	$ 176.59				
Notifying students of additional documentation requirements and how to obtain information Financial Aid Office Staff Waiving Enrollment Fees	$22.64	7.8	$ 176.59				
Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees Software Costs for Enrollmei Waiving of Fees	$100.00	556.7		$ 55,674.00			
Receiving waiver applications Financial Aid Office Staff Waiving Enrollment Fees	$22.64	912.9	$ 20,668.06				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 83,783.85	$ 55,674.00	$ -	$ -	$ -

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mt. San Jacinto Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Holman, Robert	Senior Programmer Analyst	$55.58	80.0	$ 4,446.40				
Montez, Carol	Accounting Supervisor	$42.99	64.0	$ 2,751.36				
Muehring, Mary Ellen	Director, Financial Aid	$46.98	6.0	$ 281.88				
Navarro, Lesia	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				
Nguyen, Kim	Senior Programmer Analyst	$57.25	100.0	$ 5,725.00				
Rivero, Mayda	FA Clerical Assistant	$19.59	808.0	$ 15,828.72				
Stevens, Cheryl	Head Cashier	$30.59	80.0	$ 2,447.20				
Venable, Julie	Accounting Specialist	$34.82	360.0	$ 12,535.20				
Williams, Shanae	Supervisor, Financial Aid	$37.77	20.0	$ 755.40				

(05) Total ☒ Subtotal ☐

$ 45,526.56	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
ort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	152.00	Armour, Robin	Director, Enrollment Services	$48.90	$7,432.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	137.00	Armour, Robin	Director, Enrollment Services	$48.90	$6,699.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	289.00	**Armour, Robin Total**			$14,132.10		
06-07	497.50	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$11,014.65	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	631.40	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$13,979.20	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	1,326.60	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$29,370.92	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	565.00	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$12,509.10	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	17.80	Enrollment Office Staff	Collecting Enrollment Fees	$22.14	$394.09	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	3,038.30	**Enrollment Office Staff Total**			$67,267.96		
06-07	1,002.00	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$22,685.28	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	912.90	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$20,668.06	Receiving waiver applications	Waiving student fees
06-07	668.00	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$15,123.52	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,102.20	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$24,953.81	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	7.80	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$176.59	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	7.80	Financial Aid Office Staff	Waiving Enrollment Fees	$22.64	$176.59	In case of denied applications, reviewing and evaluating information if denial is appealed by stude	Waiving student fees
	3,700.70	**Financial Aid Office Staff Total**			$83,783.85		
06-07	54.00	Furr, Bernadette	FA Tech support Specialist	$36.06	$1,947.24	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	66.00	Furr, Bernadette	FA Tech support Specialist	$36.06	$2,379.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	120.00	**Furr, Bernadette Total**			$4,327.20		
06-07	496.00	Holman, Robert	Senior Programmer Analyst	$55.58	$27,567.68	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	18.00	Holman, Robert	Senior Programmer Analyst	$55.58	$1,000.44	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	80.00	Holman, Robert	Senior Programmer Analyst	$55.58	$4,446.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	594.00	**Holman, Robert Total**			$33,014.52		
1/11/2007	1.00	K. Stratton	Training	$900.00	$900.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	1.00	**K. Stratton Total**			$900.00		
06-07	167.00	Loomis, Susan	Director, Enrollment Services	$58.39	$9,751.13	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	131.00	Loomis, Susan	Director, Enrollment Services	$58.39	$7,649.09	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	15.41	Loomis, Susan	Director, Enrollment Services	$58.39	$899.79	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	313.41	**Loomis, Susan Total**			$18,300.01		
06-07	36.00	Montez, Carol	Accounting Supervisor	$42.99	$1,547.64	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	12.00	Montez, Carol	Accounting Supervisor	$42.99	$515.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	78.00	Montez, Carol	Accounting Supervisor	$42.99	$3,353.22	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	10.00	Montez, Carol	Accounting Supervisor	$42.99	$429.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	96.00	Montez, Carol	Accounting Supervisor	$42.99	$4,127.04	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	64.00	Montez, Carol	Accounting Supervisor	$42.99	$2,751.36	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	296.00	**Montez, Carol Total**			$12,725.04		
06-07	15.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$704.70	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	20.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$939.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	6.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$281.88	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	6.00	Muehring, Mary Ellen	Director, Financial Aid	$46.98	$281.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	47.00	**Muehring, Mary Ellen Total**			$2,208.06		
06-07	86.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$3,248.22	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	69.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$2,606.13	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	20.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$755.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	20.00	Navarro, Lesia	Supervisor, Financial Aid	$37.77	$755.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	195.00	**Navarro, Lesia Total**			$7,365.15		
06-07	100.00	Nguyen, Kim	Senior Programmer Analyst	$57.25	$5,725.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Nguyen, Kim Total**			$5,725.00		
06-07	454.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$29,909.52	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	153.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$10,079.64	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
ort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	35.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$2,305.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	53.00	Orlauski, Brian	Supervisor, Computer Applications	$65.88	$3,491.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	695.00	**Orlauski, Brian Total**			$45,786.60		
06-07	808.00	Rivero, Mayda	FA Clerical Assistant	$19.59	$15,828.72	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	808.00	**Rivero, Mayda Total**			$15,828.72		
06-07	442.38	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$44,238.00	Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees	Calculating and collecting enrollment fees
06-07	437.10	Software Costs for Enrollment Fees	Collection of Fees	$100.00	$43,710.00	Prorated Costs of HP9000 OS upgrade/support for Collection of Enrollment Fees	Calculating and collecting enrollment fees
	879.48	**Software Costs for Enrollment Fees Total**			$87,948.00		
06-07	119.64	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$11,964.00	Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees	Waiving student fees
06-07	437.10	Software Costs for Enrollment Waivers	Waiving of Fees	$100.00	$43,710.00	Prorated Costs of HP9000 OS upgrade/support for Waiving of Enrollment Fees	Waiving student fees
	556.74	**Software Costs for Enrollment Waivers Total**			$55,674.00		
06-07	8.00	Stevens, Cheryl	Head Cashier	$30.59	$244.72	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.
06-07	2.00	Stevens, Cheryl	Head Cashier	$30.59	$61.18	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.b.
06-07	140.00	Stevens, Cheryl	Head Cashier	$30.59	$4,282.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	24.00	Stevens, Cheryl	Head Cashier	$30.59	$734.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	544.00	Stevens, Cheryl	Head Cashier	$30.59	$16,640.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
06-07	80.00	Stevens, Cheryl	Head Cashier	$30.59	$2,447.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	798.00	**Stevens, Cheryl Total**			$24,410.82		
06-07	461.00	Stratton, Katherine	Senior Programmer Analyst	$47.95	$22,104.95	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	25.00	Stratton, Katherine	Senior Programmer Analyst	$47.95	$1,198.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	486.00	**Stratton, Katherine Total**			$23,303.70		
06-07	82.08	Tax Notices for Students	Cost of Forms and Postage	$100.00	$8,207.99	Costs to issue 1098-T for enrollment fees paid	Calculating and collecting enrollment fees
	82.08	**Tax Notices for Students Total**			$8,207.99		
06-07	40.00	Venable, Julie	Accounting Specialist	$34.82	$1,392.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	40.00	Venable, Julie	Accounting Specialist	$34.82	$1,392.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	528.00	Venable, Julie	Accounting Specialist	$34.82	$18,384.96	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
06-07	360.00	Venable, Julie	Accounting Specialist	$34.82	$12,535.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	968.00	**Venable, Julie Total**			$33,705.76		
06-07	86.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$3,248.22	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	57.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$2,152.89	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	20.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$755.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
06-07	20.00	Williams, Shanae	Supervisor, Financial Aid	$37.77	$755.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	183.00	**Williams, Shanae Total**			$6,911.91		
	14,150.71	**Grand Total**			$551,526.39		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$24,595,028		$24,595,028	$643,677	$23,951,351
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	3,139,155		3,139,155	129,153	3,010,002
Course and Curriculum Development	6020	2,399		2,399		2,399
Academic/Faculty Senate	6030	31,345		31,345		31,345
Other Instructional Administration & Instructional Governance	6090	77,361		77,361		77,361
Instructional Support Services	6100					
Learning Center	6110	1,104,097		1,104,097	3,724	1,100,373
Library	6120	974,982		974,982	118,170	856,812
Media	6130	9,304		9,304	1,602	7,702
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	997,958		997,958	16,723	981,235
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,864,379		1,864,379	12,556	1,851,823
Matriculation and Student Assessment	6320	991,624		991,624	16,262	975,362
Transfer Programs	6330	4,999		4,999		4,999
Career Guidance	6340	94,202		94,202	8,144	86,058
Other Student Counseling and Guidance	6390	229,196		229,196	4,811	224,385
Other Student Services	6400					
Disabled Students Programs & Services	6420	386,656		386,656	37,780	348,876
Subtotal		$34,502,685	$0	$34,502,685	$992,602	$33,510,083

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$992,994	$395,484	$597,510	$1,220	$596,290
Health Services	6440					
Student Personnel Admin.	6450	341,084		341,084	9,281	331,803
Financial Aid Administration	6460	1,046,393		1,046,393	9,282	1,037,111
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,361,248		1,361,248	1,361,248	0
Custodial Services	6530	501,090		501,090	501,090	0
Grounds Maintenance and Repairs	6550	198,537		198,537	198,537	0
Utilities	6570	1,415,954		1,415,954	1,415,954	0
Other	6590					
Planning, Policy Making, and Coordination	6600	1,147,494		1,147,494	1,147,494	0
General Inst. Support Services	6700					
Community Relations	6710	343,033		343,033	343,033	0
Fiscal Operations	6720	1,657,316		1,657,316	1,657,316	0
Human Resources Management	6730	968,968		968,968	968,968	0
Noninstructional Staff Benefits & Incentives	6740	559,520		559,520	559,520	0
Staff Development	6750	5,400		5,400	5,400	0
Staff Diversity	6760	31,462		31,462	31,462	0
Logistical Services	6770	1,885,347		1,885,347	1,885,347	0
Management Information Systems	6780	2,413,216		2,413,216	2,413,216	0
Subtotal		$49,371,741	$395,484	$48,976,257	$13,500,970	$35,475,287

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Mt. San Jacinto Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	7,581		7,581	7,581	0
Community Services and Economic Development	6800					
Community Recreation	6810	68,176		68,176	209	67,967
Community Service Classes	6820	324,224		324,224	14	324,210
Community Use of Facilities	6830					
Economic Development	6840	247,636		247,636		247,636
Other Community Services & Economic Development	6890	17,861		17,861		17,861
Ancillary Services	6900					
Bookstores	6910	19,773		19,773	35	19,738
Child Development Center	6920	985,578		985,578	9,637	975,941
Farm Operations	6930					
Food Services	6940	8,974		8,974		8,974
Parking	6950	30,116		30,116	2,446	27,670
Student and Co-curricular Activities	6960	1,045,390		1,045,390	21,125	1,024,265
Student Housing	6970					
Other	6990	237,772		237,772		237,772
Auxiliary Operations	7000					
Contract Education	7010	60,878		60,878	669	60,209
Other Auxiliary Operations	7090					
Depreciation or Use Allowance - Building					1,062,456	
Depreciation or Use Allowance - Equipment					559,601	
(05) Total		$52,425,700	$395,484	$52,030,216	$15,164,743	$38,487,530
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				39.40%		
(07) Notes						

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5[illegible] Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 28, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4785

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
North Orange County Community College District CC30105

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for North Orange County Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC30105

(02) Claimant Name	North Orange County Community College District
County of Location	Orange
Street Address or P.O. Box	1830 W. Romneya Drive
City / State / Zip Code	Anaheim / CA / 92801-1819

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 1,068,800	(13) $ 971,676
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 971,676
Due from State	(08) $ 1,068,800	(17) $ 971,676
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	57
(23) EFCW-1, (04)(A)(1)(b)(f)	3,186
(24) EFCW-1, (04)(A)(2)(a)(f)	685,308
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	333
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	331,117
(29) EFCW-1, (04)(B)(2)(c)(f)	2,997
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	398,969
(32) EFCW-1, (09)	115,845
(33) EFCW-1, (10)	334,447
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 7/27/06

Claudette Dain — Type or Print Name

District Director, Fiscal Affairs — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

North Orange County Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 56.90	$ -	$ -	$ -	$ -	$ 56.90
b. Staff training (One time per employee)	$ 3,186.40	$ -	$ -	$ -	$ -	$ 3,186.40
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 685,308.35	$ -	$ -	$ -	$ -	$ 685,308.35
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. ring district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 332.96	$ -	$ -	$ -	$ -	$ 332.96
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 331,116.92	$ -	$ -	$ -	$ -	$ 331,116.92
c. Reporting BOG fee waiver data to CCC	$ 2,996.64	$ -	$ -	$ -	$ -	$ 2,996.64
) Total Direct Costs	$ 1,022,998.17	$ -	$ -	$ -	$ -	$ 1,022,998.17

Direct Costs		
) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	39.00%
) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 398,969.29
) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,421,967.46
st Reduction		
) Less: Enrollment Fee Revenue offset		$ 115,845.00
) Less: Enrollment Fee Waiver offsets		$ 334,446.52
To imed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 971,675.94

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Harter, Renie Bursar	$56.90	1.0	$ 56.90				
(05) Total [X] Subtotal [ ]	Page 1 of 1		$ 56.90	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection Harter, Renie Bursar	$56.90	56.0	$ 3,186.40				
(05) Total ☒ Subtotal ☐ Page 1 of 1			$ 3,186.40	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records							
Various staff I Collecting fees	$24.29	7,092.3	$ 172,271.97				
Calculating total enrollment fee to be collected							
Various staff I Collecting fees	$24.29	5,597.1	$ 135,953.56				
Answering student's questions regarding enrollment fee collection							
Various staff I Collecting fees	$24.29	7,617.6	$ 185,031.50				
Updating written and computer records for enrollment fee information							
Various staff I Collecting fees	$24.29	7,486.3	$ 181,842.23				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Various staff I Collecting fees	$24.29	36.9	$ 896.30				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Various staff I Collecting fees	$24.29	383.4	$ 9,312.79				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 685,308.35	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Larson, Nancy Coordinator	$41.62	8.0	$ 332.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 332.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various staff II — Waiving enrollment fees	$24.17	2,058.7	$ 49,758.78				
Receiving waiver applications							
Various staff II — Waiving enrollment fees	$24.17	3,088.1	$ 74,639.38				
Evaluating waiver applications and verifying application documents							
Various staff II — Waiving enrollment fees	$24.17	3,713.1	$ 89,745.63				
Notifying students of additional documentation requirements and how to obtain information							
Various staff II — Waiving enrollment fees	$24.17	206.6	$ 4,993.52				
Entering approved application information into district records; providing student award letter							
Various staff II — Waiving enrollment fees	$24.17	4,334.6	$ 104,767.28				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various staff II — Waiving enrollment fees	$24.17	298.4	$ 7,212.33				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 331,116.92	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Larson, Nancy Coordinator	$41.62	72.0	$ 2,996.64				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,996.64	$ -	$ -	$ -	$ -

North Orange County Community College District
308/95 ENROLLMF EE COLLECTIONS/WAIVERS
04-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1.00	Harter, Renie	Bursar	$56.90	$56.90	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
04-05	56.00	Harter, Renie	Bursar	$56.90	$3,186.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	57.00	**Harter, Renie Total**			$3,243.30		
04-05	8.00	Larson, Nancy	Coordinator	$41.62	$332.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	72.00	Larson, Nancy	Coordinator	$41.62	$2,996.64	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	80.00	**Larson, Nancy Total**			$3,329.60		
04-05	7,092.30	Various staff I	Collecting fees	$24.29	$172,271.97	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	5,597.10	Various staff I	Collecting fees	$24.29	$135,953.56	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	7,617.60	Various staff I	Collecting fees	$24.29	$185,031.50	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	7,486.30	Various staff I	Collecting fees	$24.29	$181,842.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	36.90	Various staff I	Collecting fees	$24.29	$896.30	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	383.40	Various staff I	Collecting fees	$24.29	$9,312.79	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	28,213.60	**Various staff I Total**			$685,308.35		
04-05	2,058.70	Various staff II	Waiving enrollment fees	$24.17	$49,758.78	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	3,088.10	Various staff II	Waiving enrollment fees	$24.17	$74,639.38	Receiving waiver applications	Waiving student fees
04-05	3,713.10	Various staff II	Waiving enrollment fees	$24.17	$89,745.63	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	206.60	Various staff II	Waiving enrollment fees	$24.17	$4,993.52	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	4,334.60	Various staff II	Waiving enrollment fees	$24.17	$104,767.28	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	298.40	Various staff II	Waiving enrollment fees	$24.17	$7,212.33	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	13,699.50	**Various staff II Total**			$331,116.92		
	42,050.10	**Grand Total**			$1,022,998.17		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: August 8, 2002

INSTITUTION:
North Orange County Community College District
1000 North Lemon Street

FILING REF.: The preceding Agreement was dated June 9, 1998

Fullerton CA 92634

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/02	06/30/06	39.0	On-Campus	All Programs
PROV.	07/01/06	06/30/07	39.0	On-Campus	All Programs

*BASE:
Direct salaries and wages including vacation, holiday, sick pay and other paid absences but excluding all other fringe benefits.

U70205

Schedule 1A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	78,803
Avg. time p/account	5.4
Total Time (in minutes)	425536
Per Hour	60
Hours Worked **(** Activity 11)**	**7092.3**
***EFC 2**	64,582
Avg. time p/student	5.2
Total Time (in minutes)	335826
Per Hour	60
Hours Worked **(** Activity 12)**	**5597.1**
***EFC 1**	78,803
Avg. time p/question	5.8
Total Time (in minutes)	457057
Per Hour	60
Hours Worked **(** Activity 13)**	**7617.6**
***EFC 1**	78,803
Avg. time p/file	5.7
Total Time (in minutes)	449177
Per Hour	60
Hours Worked **(** Activity 14)**	**7486.3**
***EFC 4**	402
Avg. time p/account	5.5
Total Time (in minutes)	2211
Per Hour	60
Hours Worked **(** Activity 15)**	**36.9**
***EFC 5**	4,260
Avg. time p/student	5.4
Total Time (in minutes)	23004
Per Hour	60
Hours Worked **(** Activity 16)**	**383.4**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	22,058
Avg. time p/question	5.6
Total Time (in minutes)	123525
Per Hour	60
Hours Worked **(** Activity 21)**	**2058.7**
***EFW 6**	22,058
Avg. time p/application	8.4
Total Time (in minutes)	185287
Per Hour	60
Hours Worked **(** Activity 22)**	**3088.1**
***EFW 6**	22,058
Avg. time p/evaluation	10.1
Total Time (in minutes)	222786
Per Hour	60
Hours Worked **(** Activity 23)**	**3713.1**
***EFW 8**	1,252
Avg. time p/application	9.9
Total Time (in minutes)	12395
Per Hour	60
Hours Worked **(** Activity 24)**	**206.6**
***EFW 7**	20,806
Avg. time p/application	12.5
Total Time (in minutes)	260075
Per Hour	60
Hours Worked **(** Activity 25)**	**4334.6**
***EFW 8**	1,252
Avg. time p/application	14.3
Total Time (in minutes)	17904
Per Hour	60
Hours Worked **(** Activity 26)**	**298.4**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 and Schedule 2A.
Findings:

		*EFC Workload Multiplier					
		1	2	1	4	5	
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Adams, Jessica	CC-FADept.-Clerical Assistant I	5.0					
Aguirre, Maria	FC-FADept.-Financial Technician/VA	10.0	10.0	15.0	10.0		
Alcaraz, Jose	FC-FADept.-Financial Aid Technician	1.0	5.0	5.0	3.0		
Allen-Courtney, Akilah	CC-A&R-Records Lead Specialist	15.0	5.0	5.0	38.0		
Almaraz, Arturo	CC-A&R-Clerical Assistant - 40%	3.0	3.0	1.0	2.0		
Alton, Meg	CC-A&R-Technician	1.0	2.0	2.0	1.0		
Aure, R. Allan	FC-A&R-Technician	7.0	3.0	5.0	2.0	5.0	3.0
Bassler, Jennifer	FC-A&R-Hourly Support Staff	5.0	5.0	8.0	5.0	10.0	9.0
Beard, Claudia	FC-Bursar's Office-Account Clerk II			8.0		6.0	5.0
Bustos, Raymond	FC-FADept.-VA Coordinator	4.0	4.0	3.0	4.0		
Calderon-Teneza, Roselle	CC-FADept.-Financial Aid Technician	15.0	15.0	10.0	10.0		
Carter, Patricia	CC-Bursar's Office-Account Technician	4.0	3.0	2.0	2.0	3.0	4.0
Chang, David	CC-A&R-Evaluator	2.0	2.0	2.0	2.0		
Clark, Antionese	CC-A&R-Admissions Lead Specialist	2.0	3.0	4.0	4.0		
Cobb, Keith	CC-FADept.-Director, Financial Aid	12.0		6.0	15.0		12.0
Cruz, Carrie	FC-FADept.-Clerical Assistant	5.0	1.0	5.0	5.0		
Dean, Brian	CC-A&R-Technician	5.0	5.0	5.0	5.0		
Dillon, Andrew	FC-A&R-Hourly Support Staff	3.0	2.0	5.0	2.0	3.0	2.0
Do, Field	FC-A&R-Evaluator	4.0	4.0	3.0	3.0	2.0	2.0
Ealy, Sara	FC-A&R-Hourly Office Clerk	2.0	2.0	1.0	1.0	1.0	2.0
Edwards, Arnette	CC-FADept.-Financial Aid Specialist	15.0	15.0	15.0	15.0		
Felix, Ana	FC-A&R-Specialist	5.0	5.0	5.0	3.0	5.0	5.0
Filippi, Geovani	CC-A&R-Hourly Student	1.0	1.0	6.0	2.0		
Fitzgerald, Colleen	FC-A&R-Technician	5.0	5.0	5.0	3.0	5.0	5.0
Fond, Regina	CC-A&R-Registrar	5.0	1.0	20.0	1.0		
Foster, Patricia	FC-A&R-Office Coordinator	3.0	3.0	5.0	2.0	1.0	1.0
Funaoka, Lisa	FC-A&R-Technician	2.0	5.0	4.0	3.0	5.0	3.0
Giles, Emice	CC-A&R-Evaluator	10.0	10.0	10.0	10.0		
Guzman, Elizabeth	FC-A&R-Technician	5.0	5.0	6.0	5.0	5.0	7.0
Ha, Jackie	CC-FADept.-FAS	15.0	15.0	10.0	10.0		
Harter, Renie	CC-Bursar's Office-Manager, Campus Accounting	2.0	4.0		3.0	8.0	5.0
Henry, Kevin	CC-Bursar's Office-Cashier/Registration Clerk	1.0	4.0	2.0	3.0	2.0	1.0
Kanaan, Jihad (Jay)	CC-Bursar's Office-Account Technician	5.0	7.0	4.0	4.0	20.0	9.0
Lam, Tina	FC-FADept.-Financial Aid Technician	7.5	10.0	5.0	10.0		
Larson, Nancy	FC-FADept.-Coordinator	5.0	10.0	10.0	15.0		
Ledezma, Stephen	FC-A&R-Hourly	1.0	2.0	1.0	3.0	1.0	1.0
Leopold, Maureen	CC-Bursar's Office-Accounting Specialist	4.0	7.0	4.0	3.0	10.0	10.0
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk	5.0	4.0	4.0	3.0	5.0	3.0
Maertens, Tina	CC-A&R-Clerical Assistant 1	2.5	3.0	3.0	3.0		
Mahoney, Leslie	FC-Bursar's Office-Account Clerk II	1.0		1.0		3.0	2.0
Martinez, Debres	FC-A&R-Technician	6.0	5.0	5.0	5.0	5.0	7.0
Martinez, Monica	FC-A&R-Hourly Clerk (Transcripts)	2.0	2.0	5.0	2.0	1.0	
Meinert, Sarah	CC-Bursar's Office-Hourly Registration	6.0	8.0	10.0	9.0	8.0	10.0
Menchaca, Jesus	FC-A&R-Hourly Clerk	4.0	2.0	3.0	2.0	2.0	3.0
Miller, John	FC-Bursar's Office-Accounting Technician			1.0		5.0	7.0
Montenegro, Christy	CC-A&R-Technician	2.0	4.0	7.5	3.5		
Morales, Lisa	CC-Bursar's Office-Account Technician	6.0	7.0	5.0	5.0	30.0	8.0
Mosley, Amelia	CC-A&R-Clerical Assistant	4.0	5.0	4.0	4.0		
Negrete, Rena	FC-A&R-Technician	6.0	5.0	3.0	5.0	5.0	3.0
Neri, Auria	CC-A&R-Hourly Student	1.0	3.0	4.0	3.0		
Nguyen, Tuan Dustin	CC-A&R-Admissions Lead Specialist	10.0	5.0	5.0	30.0		
Oropeza, Elaine	FC-FADept.-Financial Aid Technician	10.0	10.0	15.0	10.0		
Patakas, John	FC-A&R-Technician	5.0	4.0	3.0	4.0	2.0	2.0
Patterson, Kandi	FC-A&R-Evaluator	5.0	5.0	5.0	5.0	5.0	5.0

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Staff	Title	**Activity Codes					
		11	12	13	14	15	16
Quan, Linh	FC-Bursar's Office-Accounting Specialist	3.0		3.0			5.0
Ramos, Amanda	CC-A&R-Clerical Assistant I	3.0	4.5	2.0	3.0		
Reyes, Elizabeth	CC-A&R-Hourly Student	2.0	2.0	1.0	2.0		
Reza, Alan	CC-FADept.-Financial Aid Technician	30.0	15.0	30.0	15.0		25.0
Rodriguez, Daisy	CC-Bursar's Office-Hourly Registration	5.0	8.0	8.0	5.0	8.0	10.0
Salcedo, Daniel	FC-FADept.-Clerical Assistant I	2.0	3.0	2.0	3.0		
Sandoval, Rebeca	CC-FADept.-Financial Aid	13.5	5.0	15.0	7.0	3.0	7.0
Schwiebert, Laurie	FC-FADept.-Administrative Asst. I	5.0	1.0	1.0	2.0		
Shrack, Amy	FC-A&R-Administrative Asst. II	2.0	4.0	3.0	1.0	4.0	3.0
Smith, Audrey	FC-A&R-Specialist	2.0	1.0	3.0	1.0	5.0	4.0
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	3.0	7.5	4.0	4.5	1.0	4.0
Taylor, Toniesha	CC-A&R-Evaluator	2.0	5.0	7.5	2.0		
Tran, Kimberly	CC-FADept.-Financial Aid Technician	20.0	15.0	15.0	15.0		
Truong, Duong	CC-A&R-Clerical Assistant	1.0	2.0	3.0	2.0		
Truong, Phuc	CC-A&R-Hourly Student	3.0	3.0	2.0	3.0		
Tushia, Nicol	FC-A&R-Evaluator	2.0	2.0	5.0	1.0	3.0	2.0
Villegas, Fatima	FC-FADept.-Clerical Assistant	1.0	5.0	5.0	5.0		
Average		**5.4**	**5.2**	**5.8**	**5.7**	**5.5**	**5.4**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 to 2004-2005
EFC Multipliers

Purpose: To determine most common multiplier used by client.
Source: EFCW 1.7-2's.
Findings:

Staff	Title	Activity Code					
		11	12	13	14	15	16
Allen-Courtney, Akilah	CC-A&R-Records Lead Specialist	1	1	1	1		
Almaraz, Arturo	CC-A&R-Clerical Assistant - 40%	1	1	1	1		
Alton, Meg	CC-A&R-Technician	1	1	1	1		
Beard, Claudia	FC-Bursar's Office-Account Clerk II			1		4	5
Carter, Patricia	CC-Bursar's Office-Account Technician	1	1		1		
Chang, David	CC-A&R-Evaluator	1	1	1	1		
Clark, Antionese	CC-A&R-Admissions Lead Specialist	1	1	1	1		
Dean, Brian	CC-A&R-Technician	1	1	1	1		
Do, Field	FC-A&R-Evaluator	4	4	3	3	2	2
Filippi, Geovani	CC-A&R-Hourly Student	1	1	1	1		
Fond, Regina	CC-A&R-Registrar	1	1	1	1		
Giles, Ernice	CC-A&R-Evaluator	1	1	1	1		
Harter, Renie	CC-Bursar's Office-Manager, Campus Accounting	1	1		1	4	5
Henry, Kevin	CC-Bursar's Office-Cashier/Registration Clerk	1	1		1	4	5
Kanaan, Jihad (Jay)	CC-Bursar's Office-Account Technician	1	1		1	4	5
Leopold, Maureen	CC-Bursar's Office-Accounting Specialist	1	1		1	4	5
Maertens, Tina	CC-A&R-Clerical Assistant 1	1	1	1	1		
Mahoney, Leslie	FC-Bursar's Office-Account Clerk II	1		1		4	5
Meinert, Sarah	CC-Bursar's Office-Hourly Registration	1	1		1	4	5
Miller, John	FC-Bursar's Office-Accounting Technician			1		4	5
Montenegro, Christy	CC-A&R-Technician	1	1	1	1		
Morales, Lisa	CC-Bursar's Office-Account Technician	1	1		1	4	5
Mosley, Amelia	CC-A&R-Clerical Assistant	1	1	1	1		
Neri, Auria	CC-A&R-Hourly Student	1	1	1	1		
Nguyen, Tuan Dustin	CC-A&R-Admissions Lead Specialist	1	1	1	1		
Quan, Linh	FC-Bursar's Office-Accounting Specialist	1		1			5
Ramos, Amanda	CC-A&R-Clerical Assistant I	1	1	1	1		
Reyes, Elizabeth	CC-A&R-Hourly Student	1	1	1	1		
Rodriguez, Daisy	CC-Bursar's Office-Hourly Registration	1	1		1	4	5
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	2	4	3	3	5	5
Taylor, Toniesha	CC-A&R-Evaluator	1	1	1	1		
Truong, Duong	CC-A&R-Clerical Assistant	1	1	1	1		
Truong, Phuc	CC-A&R-Hourly Student	1	1	1	1		
Multiplier used the most per Activity Code as provided by client		1	1	1	1	4	5
SixTen default multipliers		1	2	1	1	4	5

OK to use multipliers provided by client except for Code 12 - need to use default EFC 2.

Conclusion: Findings go forward to schedule 2.

Schedule 2B
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
PHR-Average
Various Staff - Collecting enrollment fees

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Adams, Jessica	CC-FADept.-Clerical Assistant I					$7.50	$14.75	$14.30	$14.30
Aguirre, Maria	FC-FADept.-Financial Technician/VA								
Alcaraz, Jose	FC-FADept.-Financial Aid Technician	$21.09	$22.93	$26.87	$26.27	$30.27	$30.08	$31.35	$33.67
Allen-Courtney, Akilah	CC-A&R-Records Lead Specialist	$27.54	$28.67	$31.33	$32.29	$34.90	$34.44	$35.32	$36.49
Almaraz, Arturo	CC-A&R-Clerical Assistant - 40%				$7.75	$8.25	$13.49	$14.96	$16.48
Alton, Meg	CC-A&R-Technician							$12.99	$22.17
Aure, R. Allan	FC-A&R-Technician	$9.21	$10.02	$12.48	$22.69	$26.77	$30.70		$27.79
Bassler, Jennifer	FC-A&R-Hourly Support Staff				$7.75	$9.00		$9.00	$10.00
Beard, Claudia	FC-Bursar's Office-Account Clerk II		$21.05	$22.20	$23.27	$26.84	$27.96	$30.31	$30.92
Bustos, Raymond	FC-FADept.-VA Coordinator	$25.68	$26.31	$29.32	$29.28	$33.26	$33.98	$35.36	$36.09
Calderon-Teneza, Roselle	CC-FADept.-Financial Aid Technician	$17.15	$19.85	$21.98	$22.31	$26.81	$27.04	$28.27	$30.37
Carter, Patricia	CC-Bursar's Office-Account Technician		$17.38	$21.70	$24.04		$24.76	$27.66	$28.75
Chang, David	CC-A&R-Evaluator								
Clark, Antionese	CC-A&R-Admissions Lead Specialist							$21.02	$25.90
Cobb, Keith	CC-FADept.-Director, Financial Aid	$20.41	$22.00	$25.97	$26.34	$30.42	$30.34	$36.81	$52.62
Cruz, Carrie	FC-FADept.-Clerical Assistant		$6.75	$8.25	$16.66	$20.79	$21.21	$23.01	$25.34
Dean, Brian	CC-A&R-Technician				$7.50	$13.49	$13.49	$17.86	$22.63
Dillon, Andrew	FC-A&R-Hourly Support Staff							$7.75	$8.25
Do, Field	FC-A&R-Evaluator								
Ealy, Sara	FC-A&R-Hourly Office Clerk							$7.75	$9.00
Edwards, Arnette	CC-FADept.-Financial Aid Specialist	$7.50	$7.50	$17.71	$22.10	$26.24	$28.01	$31.43	$31.39
Felix, Ana	FC-A&R-Specialist	$27.84	$30.62	$34.74	$34.02	$37.23	$36.82	$38.71	$40.95
Filippi, Geovani	CC-A&R-Hourly Student						$8.25	$8.25	$10.50
Fitzgerald, Colleen	FC-A&R-Technician							$9.00	$12.25
Ford, Regina	CC-A&R-Registrar	$37.54	$37.39	$37.73	$38.84	$55.40	$40.08	$41.80	$50.86
Foster, Patricia	FC-A&R-Office Coordinator	$20.90	$31.99	$40.46	$42.32	$45.94	$44.91	$47.84	$46.44
Funaoka, Lisa	FC-A&R-Technician					$8.25	$10.00	$21.88	$22.89
Giles, Ernice	CC-A&R-Evaluator							$22.54	$24.76
Guzman, Elizabeth	FC-A&R-Technician	$18.31	$19.82	$23.15	$24.96	$27.37	$27.50	$28.18	$28.03
Ha, Jackie	CC-FADept.-FAS	$25.45	$27.25	$29.09	$28.78	$32.44	$32.15	$36.05	$36.26
Harter, Renie	CC-Bursar's Office-Manager, Campus Accounting	$46.05	$47.40	$50.02	$51.98	$53.00	$54.49	$56.90	$61.61
Henry, Kevin	CC-Bursar's Office-Cashier/Registration Clerk							$7.50	$7.75
Kanaan, Jihad (Jay)	CC-Bursar's Office-Account Technician	$25.15	$26.23	$28.22	$27.63	$33.36	$31.50	$32.50	$32.63
Lam, Tina	FC-FADept.-Financial Aid Technician						$23.59	$24.40	$26.38
Larson, Nancy	FC-FADept.-Coordinator	$30.59	$31.40	$31.65	$34.68	$39.62	$38.30	$41.62	$41.27
Ledezma, Stephen	FC-A&R-Hourly					$7.75	$8.25	$9.00	$10.00
Leopold, Maureen	CC-Bursar's Office-Accounting Specialist	$38.85	$36.62	$37.96	$35.77	$39.57	$40.32	$38.95	$38.88
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk							$7.75	$8.25
Maertens, Tina	CC-A&R-Clerical Assistant 1				$10.00	$10.00	$10.00	$13.49	$17.16
Mahoney, Leslie	FC-Bursar's Office-Account Clerk II			$20.12	$21.79	$24.35	$24.66	$27.04	$29.03
Martinez, Debres	FC-A&R-Technician								
Martinez, Monica	FC-A&R-Hourly Clerk (Transcripts)						$7.75	$8.25	$9.00
Meinert, Sarah	CC-Bursar's Office-Hourly Registration	$6.00	$8.25	$9.25	$12.25	$13.50			
Menchaca, Jesus	FC-A&R-Hourly Clerk								$7.75
Miller, John	FC-Bursar's Office-Accounting Technician							$28.69	$28.75
Montenegro, Christy	CC-A&R-Technician			$10.51	$20.19	$23.20	$23.72	$25.47	$25.88
Morales, Lisa	CC-Bursar's Office-Account Technician	$21.94	$23.59	$26.20	$27.39	$30.15	$29.84	$30.80	$31.05
Mosley, Amelia	CC-A&R-Clerical Assistant			$7.50	$10.00	$10.00	$10.00	$13.49	$15.13
Negrete, Rena	FC-A&R-Technician	$7.50	$8.25	$21.11	$25.80	$23.73	$24.15	$27.13	$27.26
Neri, Auria	CC-A&R-Hourly Student								$8.25
Nguyen, Tuan Dustin	CC-A&R-Admissions Lead Specialist	$20.28	$21.90	$25.61	$29.21	$31.52	$31.29	$32.28	$32.37
Oropeza, Elaine	FC-FADept.-Financial Aid Technician	$25.21	$25.84	$27.31	$28.44	$32.20	$31.90	$33.13	$34.71
Patakas, John	FC-A&R-Technician								$22.17
Patterson, Kandi	FC-A&R-Evaluator								
Quan, Linh	FC-Bursar's Office-Accounting Specialist					$24.33	$26.74	$27.31	$26.59
Ramos, Amanda	CC-A&R-Clerical Assistant I				$7.50	$8.25	$8.25	$13.49	$15.13
Reyes, Elizabeth	CC-A&R-Hourly Student								$8.25
Reza, Alan	CC-FADept.-Financial Aid Technician	$6.75		$7.75	$7.75	$13.79	$21.47	$25.83	$26.96
Rodriguez, Daisy	CC-Bursar's Office-Hourly Registration					$7.50	$9.00	$11.25	$13.50
Salcedo, Daniel	FC-FADept.-Clerical Assistant I							$23.08	$23.92
Sandoval, Rebeca	CC-FADept.-Financial Aid	$23.12	$23.68	$26.46	$26.72	$30.22	$29.73	$31.52	$34.77
Schwiebert, Laurie	FC-FADept.-Administrative Asst. I	$14.42	$14.86	$15.95	$16.94	$23.57	$26.10	$26.89	$29.53
Shrack, Amy	FC-A&R-Administrative Asst. II	$6.00	$15.76	$17.97	$16.37	$14.07	$13.83	$28.51	$30.45
Smith, Audrey	FC-A&R-Specialist	$20.70	$22.41	$27.95	$32.05	$32.58	$30.91	$32.35	$32.29
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk							$7.75	$8.25
Taylor, Toniesha	CC-A&R-Evaluator								$23.56
Tran, Kimberly	CC-FADept.-Financial Aid Technician						$17.83	$25.33	$27.44
Truong, Duong	CC-A&R-Clerical Assistant				$7.75	$8.25	$8.25	$13.49	$15.13
Truong, Phuc	CC-A&R-Hourly Student								$8.25
Tushla, Nicol	FC-A&R-Evaluator	$8.25	$21.17	$23.91	$25.95	$27.78	$28.47	$31.01	$30.92
Villegas, Fatima	FC-FADept.-Clerical Assistant					$7.50	$9.00	$13.50	$13.50
Average		**$20.72**	**$22.65**	**$24.19**	**$23.42**	**$24.34**	**$24.45**	**$24.29**	**$24.90**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Adams, Jessica	CC-Clerical Assistant I	2.0					
Aguirre, Maria	FC-Financial Aid Technician	10.0	15.0	15.0	15.0	20.0	30.0
Alcaraz, Jose	FC-Financial Aid Technician	2.0	1.0	1.0	5.0	5.0	15.0
Aure, R. Allan	FC-A&R-Technician	2.0					
Bassler, Jennifer	FC-A&R-Hourly Staff Support	5.0					
Bustos, Raymond	FC-VA Coordinator	4.0	5.0	3.0	5.0	5.0	4.0
Calderon-Teneza, Roselle	CC-Financial Aid Technician	5.0	10.0	15.0	15.0	20.0	20.0
Caro, Barbara	FC-A&R-Admissions Technician	3.0					
Cobb, Keith	CC-Director, Financial Aid	15.0	15.0	15.0			15.0
Cruz, Carrie	FC-Clerical Assistant	5.0	1.0	3.0	2.0	5.0	2.0
Dillon, Andrew	FC-A&R-Hourly Staff Support	1.0	2.0	3.0	1.0	2.0	
Do, Field	FC-A&R-Evaluator	2.0					
Ealy, Sara	FC-A&R-Hourly Office Clerk	2.0					
Edwards, Arnette	CC-Financial Aid Specialist	15.0	15.0	15.0	15.0	20.0	20.0
Felix, Ana	FC-A&R-Specialist	5.0					
Fitzgerald, Colleen	FC-A&R-Technician	3.0					
Foster, Patricia	FC-A&R-Office Coordinator	2.0					
Funaoka, Lisa	FC-A&R-Technician	1.0					
Guzman, Elizabeth	FC-A&R-Technician	5.0					
Ha, Jackie	CC-FAS	10.0	10.0	10.0	10.0	10.0	10.0
Lam, Tina	FC-Financial Aid Technician	5.0	5.0	5.0	5.0	10.0	20.0
Ledezma, Stephen	FC-A&R-Hourly	1.0					
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk	3.0					
Martinez, Debres	FC-A&R-Technician	5.0					
Martinez, Monica	FC-A&R-Hourly Transcript Clerk	1.0					
Menchaca, Jesus	FC-A&R-Hourly Clerk	3.0					
Negrete, Rena	FC-A&R-Technician	3.0					
Oropeza, Elaine	FC-Financial Aid Technician	10.0	15.0	15.0	15.0	20.0	30.0
Patakas, John	FC-A&R-Technician	4.0					
Patterson, Kandi	FC-A&R-Evaluator	5.0					
Reza, Alan	CC-Financial Aid Technician	30.0	15.0	25.0	30.0	30.0	15.0
Salcedo, Daniel	FC-Clerical Assistant I	3.0	5.0	5.0	5.0	5.0	5.0
Sandoval, Rebeca	CC-Financial Aid	15.0	13.0	17.5	20.0	22.5	17.5
Schwiebert, Laurie	FC-Administrative Asst. I	1.0	1.0	2.0	1.0	4.0	5.0
Shrack, Amy	FC-A&R-Administrative Asst. II	3.0					
Smith, Audrey	FC-A&R-Specialist	4.0					
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	5.0					
Tran, Kimberly	CC-Financial Aid Technician	15.0	10.0	15.0	10.0	15.0	10.0
Tushia, Nicol	FC-A&R-Evaluator	2.0					
Villegas, Fatima	FC-Clerical Assistant	5.0	5.0	7.0	5.0	7.0	10.0
Average		**5.6**	**8.4**	**10.1**	**9.9**	**12.5**	**14.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
PHR-Average
Various Staff - Waiving enrollment fees

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Adams, Jessica	CC-Clerical Assistant I					$7.50	$14.75	$14.30	$14.30
Aguirre, Maria	FC-Financial Aid Technician								
Alcaraz, Jose	FC-Financial Aid Technician	$21.09	$22.93	$26.87	$26.27	$30.27	$30.08	$31.35	$33.67
Aure, R. Allan	FC-A&R-Technician	$9.21	$10.02	$12.48	$22.69	$26.77	$30.70		$27.79
Bassler, Jennifer	FC-A&R-Hourly Staff Support				$7.75	$9.00		$9.00	$10.00
Bustos, Raymond	FC-VA Coordinator	$25.68	$26.31	$29.32	$29.28	$33.26	$33.98	$35.36	$36.09
Calderon-Teneza, Roselle	CC-Financial Aid Technician	$17.15	$19.85	$21.98	$22.31	$26.81	$27.04	$28.27	$30.37
Caro, Barbara	FC-A&R-Admissions Technician	$26.28	$27.98	$30.57	$30.56	$33.51	$33.02	$35.50	$34.71
Cobb, Keith	CC-Director, Financial Aid	$20.41	$22.00	$25.97	$26.34	$30.42	$30.34	$36.81	$52.62
Cruz, Carrie	FC-Clerical Assistant		$6.75	$8.25	$16.66	$20.79	$21.21	$23.01	$25.34
Dillon, Andrew	FC-A&R-Hourly Staff Support							$7.75	$8.25
Do, Field	FC-A&R-Evaluator								
Ealy, Sara	FC-A&R-Hourly Office Clerk							$7.75	$9.00
Edwards, Arnette	CC-Financial Aid Specialist	$7.50	$7.50	$17.71	$22.10	$26.24	$28.01	$31.43	$31.39
Felix, Ana	FC-A&R-Specialist	$27.84	$30.62	$34.74	$34.02	$37.23	$36.82	$38.71	$40.95
Fitzgerald, Colleen	FC-A&R-Technician							$9.00	$12.25
Foster, Patricia	FC-A&R-Office Coordinator	$20.90	$31.99	$40.46	$42.32	$45.94	$44.91	$47.84	$46.44
Funaoka, Lisa	FC-A&R-Technician					$8.25	$10.00	$21.88	$22.89
Guzman, Elizabeth	FC-A&R-Technician	$18.31	$19.82	$23.15	$24.96	$27.37	$27.50	$28.18	$28.03
Ha, Jackie	CC-FAS	$25.45	$27.25	$29.09	$28.78	$32.44	$32.15	$36.05	$36.26
Lam, Tina	FC-Financial Aid Technician						$23.59	$24.40	$26.38
Ledezma, Stephen	FC-A&R-Hourly					$7.75	$8.25	$9.00	$10.00
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk							$7.75	$8.25
Martinez, Debres	FC-A&R-Technician								
Martinez, Monica	FC-A&R-Hourly Transcript Clerk						$7.75	$8.25	$9.00
Menchaca, Jesus	FC-A&R-Hourly Clerk								$7.75
Negrete, Rena	FC-A&R-Technician	$7.50	$8.25	$21.11	$25.80	$23.73	$24.15	$27.13	$27.26
Oropeza, Elaine	FC-Financial Aid Technician	$25.21	$25.84	$27.31	$28.44	$32.20	$31.90	$33.13	$34.71
Patakas, John	FC-A&R-Technician								$22.17
Patterson, Kandi	FC-A&R-Evaluator								
Reza, Alan	CC-Financial Aid Technician	$6.75		$7.75	$7.75	$13.79	$21.47	$25.83	$26.96
Salcedo, Daniel	FC-Clerical Assistant I							$23.08	$23.92
Sandoval, Rebeca	CC-Financial Aid	$23.12	$23.68	$26.46	$26.72	$30.22	$29.73	$31.52	$34.77
Schwiebert, Laurie	FC-Administrative Asst. I	$14.42	$14.86	$15.95	$16.94	$23.57	$26.10	$26.89	$29.53
Shrack, Amy	FC-A&R-Administrative Asst. II	$6.00	$15.76	$17.97	$16.37	$14.07	$13.83	$28.51	$30.45
Smith, Audrey	FC-A&R-Specialist	$20.70	$22.41	$27.95	$32.05	$32.58	$30.91	$32.35	$32.29
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk							$7.75	$8.25
Tran, Kimberly	CC-Financial Aid Technician						$17.83	$25.33	$27.44
Tushla, Nicol	FC-A&R-Evaluator	$13.40	$18.74	$23.91	$25.95	$27.78	$28.47	$31.01	$30.92
Villegas, Fatima	FC-Clerical Assistant					$7.50	$9.00	$13.50	$13.50
Average		**$17.73**	**$20.13**	**$23.45**	**$24.48**	**$24.36**	**$24.94**	**$24.17**	**$25.11**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

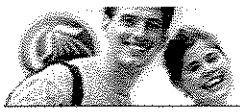
Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and excel spreadsheet from client.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1. Enrolled Students	81,052	80,935	88,893	88,897	83,317	76,868	78,803
EFC 2	1.8-1	2. Paid Enrollment fees	71,116	71,133	78,391	78,141	71,431	64,723	64,582
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	9,936	9,802	10,502	10,756	11,886	12,145	14,221
EFC 4	1.8-2	1. Delinquencies collections	Client not able to provide. Pre-Banner Term.			47	262	377	402
EFC 5	1.8-2	2. Refunds	Client not able to provide. Pre-Banner Term.			3,599	4,298	4,402	4,260
EFW 6	1.8-3	1. Waivers Requested	X	9,802	10,502	18,832	17,683	20,762	22,058
EFW 7	1.8-3	2. Waivers Approved	X -	9,802	10,502	18,014	16,785	18,539	20,806
EFW 8	1.8-3 (1-2)	Waivers Denied	X	0	0	818	898	2,223	1,252

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Monday, June 25, 2012



Student Demographics By Academic Year

Student Headcount
For Cypress For 2004-2005
Data Current As Of June 25, 2012 11:52:51

Download The Result In Comma Delimited Format

Headcount
19,604

Back to Top of Page

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California Home Monday, June 25, 2012

Student Demographics By Academic Year

Student Headcount
For Fullerton For 2004-2005
Data Current As Of June 25, 2012 11:53:06

Download The Result In Comma Delimited Format

Headcount
28,837

Back to Top of Page

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.98

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: North Orange County CCD

Renie Harter — Employee Name

Bursar — Exact Position Title

Cypress (714) 484-7314 — College/Department/Location, Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:			3	1	1	1		
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:			56	56	56	56		
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 7-19-06

If you have any questions, please contact RENIE HARTER, at 714-484-7316

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

Original Fax

JUL 20 2006

District: North Orange County CCD

Nancy Larson — Employee Name

Coordinator — Exact Position Title

Fullerton / FAD — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	8	8	8	8	8	8	8	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	72	72	72	72	72	72	72	
TOTALS:	80	80	80	80	80	80	80	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 7/20/06

If you have any questions, please contact _____, at _____

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January 2006

05/06 MRP → How long did it take you to fill out this form? 15 min
-SCA

EFCW 1.7-2

RECEIVED
MAR 14 2006
NOCCCD
BUSINESS OFFICE

Employee AVERAGE Time Record for Mandated Costs (I really didn't understand)
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid-Cypress
Department/Location

Jessica Adams
Employee Name

Clerical Asst I
Exact Position Title

x47089
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	varies on question					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jessica Adams Date 3/8/06

If you have any questions, please contact _____, at _____

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05/06 revised → How long did it take you to fill out this form? 10 min

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Maria G. Aguirre
Employee Name

Financial Technician/Veterans Asst.
Exact Position Title

714 992.7000 ext 25277
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria G. Aguirre Date 3-23-06

If you have any questions, please contact _____, at _____

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copy - original - 04/05 numbers - 3pp

05/06 MEP Fill out "1" form? ___1/4___

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: NOCCCD

Department/Location: FC/FAO

Employee Name: Jose Alcaraz

Exact Position Title: Financial Aid Technician

Telephone #: 27052

Work year length(circle): 12mo/11mo/10mo/hrly

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes

Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3/23/06

If you have any questions, please contact Jose Alcaraz, at 27052

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Akilah Allen-Courtney
Employee Name

Records Lead Specialist
Exact Position Title

(714)484-7433
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	38	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Akilah Allen Date 3/22/06

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Arturo Almaraz
Employee Name

XX Clerical Assistant-40%
Exact Position Title

XX 484-7410
Telephone #

X (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
XX (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Meg Alton
Employee Name

XX Admissions and Records Technician
Exact Position Title

XX (714)484-7349 XX (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes.
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Meg E. Alton XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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fill out "3 form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ALAN AURE
Employee Name

FULLERTON COLLEGE A&R
Department/Location

TECHNICIAN
Exact Position Title

714.992.7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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Fill out '13 form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records/Fullerton
Department/Location

Jennifer Bassler
Employee Name

Hourly Support Staff - ~~1270~~
Exact Position Title

714-992-7000 ext 28907
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jennifer Bassler Date 10 MAR, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC-Bursar's Office
Department/Location

Claudia Beard
Employee Name

Account Clerk II
Exact Position Title

(714) 992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40%

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Claudia Beard Date 4-17-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Raymund Bustos
Employee Name

LA Coordinator
Exact Position Title

992 7055
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.		4				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.		4				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT		3				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.		4				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raymund M Bustos Date 3-23-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FINANCIAL AID OFFICE – Cypress college – SMS — Department/Location

ROSELLE CALDERON-TENEZA — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

(714) 484-7114 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar - Cypress
Department/Location

Patricia Carter
Employee Name

Acct tec
Exact Position Title

714 484 7314
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓			4 perday	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓		3 perday		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					5 perday
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓	2 perday			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓ 4 perday	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4				4 perday	✓

40% of calculated

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A. Carter Date 2-24-06

If you have any questions, please contact Patricia A. Carter, at 714 484 7314

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist. — District

Admissions&Records/Cypress College — Department/Location

XX DAVID CHANG — Employee Name

XX EVALUATOR — Exact Position Title

XX 484-7434 XX (12mo)/11mo/10mo/hrly — Telephone # / Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 XX 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	~~2~~	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature _____ XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Antionese Clark
Employee Name

Admissions Lead Specialist
Exact Position Title

(714)484-7409
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California ~~to be true~~ and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/22/2006

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid - Cypress College - Fiscal — Department/Location

Keith Cobb — Employee Name

Director of Financial Aid — Exact Position Title

714) 484-7116 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Keith Cobb — Date 03/10/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Carrie Cruz
Employee Name

Clerical Assistant
Exact Position Title

992-8101
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-23-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Brian Dean
Employee Name

XX A+R Technician
Exact Position Title

XX 484-7347
Telephone #

XX (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 XX 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature _____ XX Date 3-22-06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

ACCCD
District

Foothill College ASB
Department/Location

Andrew Dalton
Employee Name

Hourly Support Staff
Exact Position Title

N/A
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date May 16, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD
District

A&R/FC
Department/Location

Todd Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4 min.				X	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min.				X	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.			X		
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min.			X		
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min.		X			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min.		X			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records Fullerton Co.
Department/Location

SARA EALY
Employee Name

Office Clerk - Hourly
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid CC
Department/Location

Arnette Edwards
Employee Name

Financial Aid Specialist
Exact Position Title

714 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/09/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

ANA FELIX
Employee Name

ADMISSIONS/RECORDS SPECIALIST
Exact Position Title

992-7576
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Geovanni Filippi
Employee Name

XX Student Hourly
Exact Position Title

XX 484-7410 XX
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30 sec. + 1 min used each	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 min	X	used each	BC changed to 0		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-10 min used each	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 min	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature [signature] XX Date 3.22.06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Colleen Fitzgerald
Employee Name

Admissions & Records Tech
Exact Position Title

714 992 5204 63
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Colleen Fitzgerald Date 3-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Regina Ford
Employee Name

XX Registrar
Exact Position Title

XX 484-7433 XX (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	20	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature _____ XX Date _____

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions/Records - FC
Department/Location

Patricia Foster
Employee Name

Office Coordinator
Exact Position Title

992-7575
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia J Foster Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions
Department/Location

LISA FUNAKOLA
Employee Name

Admissions + Records Technician
Exact Position Title

(714) 992-7569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/20/04

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Ernice Giles
Employee Name

XX Evaluator
Exact Position Title

XX (714) 484-7431 XX (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature Ernice Giles XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICIAN
Exact Position Title

(714) 992-7578
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth A. Guzman Date 3/16/06

If you have any questions, please contact _____, at _____

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Ha, Jacqueline

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FAO / CC
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

(714) 484-7118
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15'					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15'					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10'					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10'					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jackie Ha Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NO CCCD
District

BURSAR'S OFFICE - CYPRESS COLLEGE
Department/Location

RENIE HARTER
Employee Name

MANAGER CAMPUS ACCOUNTING
Exact Position Title

484-7316
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renie Harter Date 3-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCD — District

Bursars Office - express — Department/Location

Kevin Henry — Employee Name

Cashier/Registration Clerk — Exact Position Title

(714) 679-3263 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min.	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min.	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min.					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-10-06

If you have any questions, please contact _____, at _____

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IT TOOK 10 MINUTES TO COMPLETE THIS FORM.

Kanaan, Jihad

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EFCW 1.7-2

n

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

CC - BUSINESS
Department/Location

JAY KANAAN
Employee Name

ACCT TECH
Exact Position Title

(714)484-7317
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-24-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Tina Lam
Employee Name

Financial Aid Technician
Exact Position Title

(714) 992-9947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5-10 mins	need to add BOG questions 7.5				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/22/06

If you have any questions, please contact Tina Lam, at (714) 992-9947

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Nancy Larson
Employee Name

Coordinator
Exact Position Title

992-7059
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding. all

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/24/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admission & Records/Fullerton College
Department/Location

Stephen Ledezma
Employee Name

Clerk
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	1min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

CC Bursar — Department/Location

Maureen Leopold — Employee Name

Accounting Specialist — Exact Position Title

47318 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10min					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maureen Leopold Date 2/29/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records Fullerton College
Department/Location

Elizabeth Loviano
Employee Name

OFFICE CLERK - HOURLY
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Loviano Date 3-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Tina Mackens
Employee Name

XX Clerical Assistant I
Exact Position Title

XX 714-484-7344 XX (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3 per student	X	BPB	changed to		2.5
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tina Mack XX Date 3/27/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

N.O.C.C.C.D
District

Bursar - Fullerton College
Department/Location

Leslie Mahoney
Employee Name

Account Clerk II
Exact Position Title

714-992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min					✓

40070

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Leslie Mahoney Date 04-17-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

nOCCCD
District

A&R Fullerton College
Department/Location

Debbie Martinez
Employee Name

A&R Technician
Exact Position Title

714)992-7577
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Debbie Martinez Date 2-16-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Monica Martinez
Employee Name

Clerk (Transcripts) - Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 ~~99-00~~ 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica Martinez Date 3/15/06

If you have any questions, please contact _____, at _____

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- SMA

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE – CC
Department/Location

SARAH MEINERT
Employee Name

HOURLY – REGISTRATION
Exact Position Title

484-7317
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: (98-99) 99-00 00-01 (01-02) (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	9min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10min					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SMeinert Date 3.3.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Jesus Menchaca
Employee Name

HOURLY CLERK
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/18/09

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

CC. BURSAR'S OFFICE
Department/Location

JOHN MILLER
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

714-992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 MIN.	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 MIN.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 MIN.					✓

40%

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Miller Date 4/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX CHRISTY MONTENEGRO
Employee Name

XX Admissions & Records tech.
Exact Position Title

XX 714.484.7348
Telephone #

XX (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1-3 min.	X		BPB changed to 2		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-5 min	X		BPB changed to 4		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1-15 min	X		BPB changed to 7.5		
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	X		BPB changed to 3.5		
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature _____ XX Date 03/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Cypress
Department/Location

Lisa Morales
Employee Name

Acct. Tech
Exact Position Title

714.484-7314 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	30				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-24-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Amelia Mosley
Employee Name

XX Clerical Assistant
Exact Position Title

XX ext.48265
Telephone #

XX 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
XX (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3-5	X		B10 changed to 4		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3-5	X			B10 changed to 4	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3-5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature Amelia M. Mosley XX Date 03-23-06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Rena Negrete
Employee Name

A & R Tech
Exact Position Title

992-7789
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rena Negrete Date 3/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Auria Neri
Employee Name

XX Student Hourly
Exact Position Title

XX 714)484-7410XX
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: XX 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3min	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

X Employee Signature [signature] XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Tuan Dustin Nguyen
Employee Name

Admissions Lead Specialist
Exact Position Title

(714)484-7429
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 mins	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 mins	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	30 mins	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tuan Nguyen Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Elaine Oropeza
Employee Name

Financial Aid Technician
Exact Position Title

714-992-7054
Telephone #

~~12mo~~/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Oropeza Date 3-23-06

If you have any questions, please contact _____, at _____

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Fill out "3 form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD
District

STUDENT SERVICES / ADMISSIONS & Records
Department/Location

JOHN MICHAEL PATAKAS
Employee Name

Technician
Exact Position Title

(714)992-7000 x25199
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-16-2006

If you have any questions, please contact _____, at _____

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fill out "B form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College / A+R
Department/Location

Kandi Patterson
Employee Name

Evaluator
Exact Position Title

(714) 992-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kandi Patterson Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

SC-BURSAR'S OFFICE / STUDENT SERVICES 2000 BLDG
Department/Location

LINH QUAN
Employee Name

ACCOUNTING SPECIALIST
Exact Position Title

714.992.7555
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40 90

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh Quan Date 4-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Amanda Ramos
Employee Name

XX Clerical Assistant I
Exact Position Title

XX 484-7410 XX (12mo) / 11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.5	~~X~~		~~eee~~ changed to 4.5		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3·27·06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Elizabeth Reyes
Employee Name

XX Student Hourly.
Exact Position Title

XX 484-7410 XX 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.0	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.0	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.0	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.0	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Reyes XX Date 3-22-06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid / CE
Department/Location

Alan Reza
Employee Name

Financial Aid Technician
Exact Position Title

(714) 484-7114
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	25					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alan Reza Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar's Office Cypress College
Department/Location

Daisy C. Rodriguez
Employee Name

Registration
Exact Position Title

484-7317
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min.	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8 min.	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8 min.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min.					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-10-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Daniel Salcedo
Employee Name

Clerical Assistant I
Exact Position Title

714-992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. P. Salcedo Date 3/23/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cypress College - 5448

District: ______

Department/Location: Fin. Aid

Employee Name: Rebeca Sandoval

Exact Position Title: C. C

Telephone #: X 47119

Work year length (circle): 12mo/11mo/10mo/hrly

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12-15	used 15		OBB changed to 13.5		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rebeca Sandoval Date: 3/9/06

If you have any questions, please contact ______, at ______

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Laurie Schwiebert
Employee Name

Administrative Assistant I
Exact Position Title

992-7050
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurie L Schwiebert Date 3/23/06

If you have any questions, please contact _____, at _____

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"Fill out "13 form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

AMY SHRACK
Employee Name

ADMINISTRATIVE ASSISTANT II
Exact Position Title

714-992-7598
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amy Shrack Date 3/20/06

If you have any questions, please contact _____, at _____

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Fill out "3 form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS - FULLERTON
Department/Location

AUDREY SMITH
Employee Name

SPECIALIST
Exact Position Title

992-7583
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Audrey Smith Date 3/17/06

If you have any questions, please contact _____, at _____

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Fill out 13 form?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Carolyn Sosoaty
Employee Name

OFFICE CLERK - Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5-10 (used 5)				✓	EFB changed to 7.5
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 4			✓		
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4/5 (used 4)			✓		EFB changed to 4.5
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date March 15, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Toniesha Taylor
Employee Name

XX Evaluator
Exact Position Title

XX 484-7429 XX (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4-6 used chart	X				B/B changed to 5
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5-10 used chart	X				B/B changed to 7.5
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature _____ XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Fin-Aid / CC — Department/Location

Kimberly Tran — Employee Name

Financial Aid Tech. — Exact Position Title

X48121 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Tran Date 3/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Duon Truong
Employee Name

XX Clerical Assistant
Exact Position Title

XX 4847410
Telephone #

XX (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Phuc Truong
Employee Name

XX Student Hourly
Exact Position Title

XX 484-7410 XX 12mo/11mo/10mo(hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/27/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County Community College
District

Admissions + Records
Department/Location

Nicol Tushla
Employee Name

Evaluator
Exact Position Title

714-992-7573
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-16-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Fatima Villegas
Employee Name

Clerical Assistant
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5+					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Fatima Villegas Date 3/23/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid - Cypress
Department/Location

Jessica Adams
Employee Name

Clerical Asst I
Exact Position Title

x 47089
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jessica Adams Date 3/8/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Maria G. Aguirre
Employee Name

Financial Aid Tech/Veteran Asst.
Exact Position Title

714 992-7000 ext 2527
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria G. Aguirre Date 3-22-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FCMAT — Department/Location

Jose Alcaraz — Employee Name

Financial Aid Technician — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/2

If you have any questions, please contact Jose Alcaraz, at 27052

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Aure, R. Allan

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FULLERTON COLLEGE A&R
Department/Location

ALAN AURE
Employee Name

TECHNICIAN
Exact Position Title

714.992.7591
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00) 00-01 (01-02) (02-03) 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records/Fullerton
Department/Location

Jennifer Bassler
Employee Name

Hourly Support Staff
Exact Position Title

714-992-7000 ext. 29907
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jennifer Bassler Date 16 Mar, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC/FAO — Department/Location

Raymond Bustos — Employee Name

VA Coordinator — Exact Position Title

392 7055 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raymond Bustos Date 3-23-06

you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FINANCIAL AID OFFICE – Cypress College - Sara
Department/Location

ROSELLE CALDERON-TENEZA
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

(714) 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions Office
Department/Location

Barbara Cero
Employee Name

Admissions Technician
Exact Position Title

992-7570
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Cero Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid / Cypress — Department/Location

Keith Cobb — Employee Name

Director of F.A. — Exact Position Title

714) 484-7116 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Keith Cobb — Date 03/10/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC/FAO — Department/Location

Carrie Cruz — Employee Name

Clerical Assistant — Exact Position Title

992-8101 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A&R
Department/Location

Andrea D. Dillon
Employee Name

Hourly Support Staff
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature A D Dillon Date 3-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Adm / FC
Department/Location

Field Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Field Do Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records Fullerton CO
Department/Location

Sara Ealy
Employee Name

Office Clerk - Hourly
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Sara Ealy Date 3/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid CC
Department/Location

Arnette Edwards
Employee Name

Financial Aid Specialist
Exact Position Title

714 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

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Employee Signature _____ Date 03/09/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NO CCCD
District

ADMISSIONS & RECORDS
Department/Location

ANA
Employee Name

ADMISSIONS/RECORDS SPECIAL
Exact Position Title

992-7576
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Colleen Fitzgerald
Employee Name

Admissions & Records Tech
Exact Position Title

7145220463
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Colleen Fitzgerald Date 3-16-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions/Records - FC
Department/Location

Patricia Foster
Employee Name

Office Coordinator
Exact Position Title

992-7575
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia J Foster Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions
Department/Location

LISA FUNAOKA
Employee Name

Admissions and Records Technician
Exact Position Title

714/992-7569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/20/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICI,
Exact Position Title

(714) 992-7578 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
✓ **Code 21** Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Guzman Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FAO - CC - TE II
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

714) 484-7118
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10'				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10'				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10'				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10'				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10'				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10'				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jackie Ha Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Tina Lam
Employee Name

Financial Aid Technician
Exact Position Title

(714) 992-9947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5mins				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5- mins				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5mins				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10mm				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/22/06

If you have any questions, please contact Tina Lam, at (714) 992-9947

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Ledezma, Steven

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admission & Record / Fullerton College
Department/Location

Steven Ledezma
Employee Name

Analyst
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records Fullerton College
Department/Location

Elizabeth Luviano
Employee Name

Office Clerk - Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature Elizabeth Luviano Date 3-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A & R Fullerton College
Department/Location

Debora Martinez
Employee Name

Technician
Exact Position Title

714 992-7577
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Debora Martinez Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Monica Martinez
Employee Name

Transcript Clerk - Hourly
Exact Position Title

(714) 992-7511
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Monica Martinez Date 03/16/06

If you have any questions, please contact _____, at _____

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Menchaca, Jesus

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Jesus Menchaca
Employee Name

Hourly Clerk
Exact Position Title

992 - 7891
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 08/18/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Admissions & Records — Department/Location

Renee Negrete — Employee Name

A & R Tech — Exact Position Title

992-7789 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for ~~which~~ you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renee Negrete Date 3/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

EC/FAO — Department/Location

Elaine Oropeza — Employee Name

Financial Aid Technician — Exact Position Title

714-992-7054 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Oropeza Date 3-3-06

you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

STUDENT SERVICES/ADMISSIONS & Records
Department/Location

JOHN MICHAEL PATAKAS
Employee Name

TECHNICIAN
Exact Position Title

(714) 992-7000 x25196
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-16-2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College / A+R
Department/Location

Kandi Patterson
Employee Name

Evaluator
Exact Position Title

(714) 992-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kandi Patterson Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid Dept - Cypress College-SSA — Department/Location

Alan Reza — Employee Name

Financial Aid Tech — Exact Position Title

(714) 484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

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Employee Signature Alan Reza — Date 3/9/06

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Daniel Salcedo
Employee Name

Clerical Assistant 1
Exact Position Title

714-992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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Employee Signature D-P-Salcedo Date 3/23/06

you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD — District

J.N. AID - Cypress College $$$ — Department/Location

Rebeca SANDOVAL — Employee Name

C C — Exact Position Title

X4719 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	12-14		BPG changed to 13		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15-20	under $$$	BPG changed to 17.5		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15-25		BPG changed to 20		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20-25		BPG changed to 22.5		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15-20		BPG changed to 17.5		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rebeca Sandoval Date 3/9/06

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Laurie Schwiebert
Employee Name

Administrative Assistant I
Exact Position Title

992-7050
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

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Employee Signature Laurie L Schwiebert Date 3/23/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

AMY SHRACK
Employee Name

ADMINISTRATIVE ASSISTANT II
Exact Position Title

714-992-7598
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A					

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Employee Signature [signature] Date 3/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS - FULLERT
Department/Location

AUDREY SMITH
Employee Name

SPECIALIST
Exact Position Title

992-7583
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Audrey Smith Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Carolyn SoCoaty
Employee Name

OFFICE CLERK - HOURLY
Exact Position Title

(714) 992-7591
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

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Employee Signature _____ Date March 15, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Fin-Aid / CC — Department/Location

Kimberly Tran — Employee Name

Financial Aid Tech — Exact Position Title

x48121 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Kimberly Tran Date 3/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County Community College
District

Admissions & Records
Department/Location

Nicol Tichla
Employee Name

Evaluator
Exact Position Title

714-990-7573
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature N Null Date 5-16-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Fatima Villegas
Employee Name

Clerical Assistant
Exact Position Title

992-1050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5+				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5+				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Fatima Villegas Date 3/23/06

you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. See attached for data.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								
Fall								
~~Winter/ Intersession~~ e N/A								1
Spring								
Total								
2. Number of students who paid enrollment fees:								
Summer								
Fall								
~~Winter/ Intersession~~ e N/A								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
~~Winter/ Intersession~~ e N/A								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 7/10/06

Kashu Vyas
Employee Name: (print)

Accounting Specialist (& Mandate Coordinator)
Position or Title

If you have any questions, please contact Kashu Vyas, at 714-808-4725

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308/95 Enrollment Fee Collection and Waivers

NOCCCD Confidential

1. Total Number of Students Enrolled in College

SixTen Form: EFCW 1.8-1, #1.

Source: Headcount from CCCO website

Term	Yr.	Cypress	Fullerton	
Fall	1998	13,813	19,181	
Spring	1999	14,012	18,812	
Summer	1999	5,499	9,735	
Totals 1998-99		**33,324**	**47,728**	98-99 Total = 81,052 - SCFA
Fall	1999	14,335	19,061	
Spring	2000	15,007	19,454	
Summer	2000	5,266	7,812	
Totals 1999-00		**34,608**	**46,327**	99-00 Total = 80,935 - SCFA
Fall	2000	14,988	20,287	
Spring	2001	15,416	21,058	
Summer	2001	5,367	11,777	
Totals 2000-01		**35,771**	**53,122**	00-01 Total = 88,893 - SCFA
Fall	2001	15,337	21,239	
Spring	2002	16,266	21,592	
Summer	2002	5,401	9,062	
Totals 2001-02		**37,004**	**51,893**	01-02 Total = 88,897 - SCFA
Fall	2002	14,009	21,364	
Spring	2003	13,876	20,982	
Summer	2003	4,579	8,507	
Totals 2002-03		**32,464**	**50,853**	02-03 Total = 83,317 - SCFA
Fall	2003	12,979	19,235	
Spring	2004	12,665	18,710	
Summer	2004	4,915	8,364	
Totals 2003-04		**30,559**	**46,309**	03-04 Total = 76,868 - SCFA
Fall	2004	13,423	19,895	
Spring	2005	13,077	18,847	
Summer	2005	4,942	8,619	
Totals 2004-05		**31,442**	**47,361**	04-05 Total = 78,803 - verified - see cccco report directly below - SCFA

2. Total Number of Students Who Paid Enrollment Fees

SixTen Form: EFCW 1.8-1, #2. NOTE: Only have annual totals } verified client calculated #1 - #3 correctly - SCFA

Source: Calculated as #1 - #3

Term	Yr.	Cypress	Fullerton	
1998-99		28,658	42,458	98-99 Total = 71,116 - SCFA
1999-00		29,831	41,302	99-00 Total = 71,133 - SCFA
2000-01		30,869	47,522	00-01 Total = 78,391 - SCFA
2001-02		31,853	46,288	01-02 Total = 78,141 - SCFA
2002-03		26,864	44,567	02-03 Total = 71,431 - SCFA
2003-04		24,741	39,982	03-04 Total = 64,723 - SCFA
2004-05		24,858	39,724	04-05 Total = 64,582 - SCFA

Copy - original in 04-05 resources

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2004 Fall Term

Data Current As Of July 12, 2006 10:21:20

Total Headcount	13,423

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Spring Semester

Data Current As Of July 12, 2006 10:23:48

Total Headcount	13,077

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Summer Term

Data Current As Of July 12, 2006 11:24:01

Total Headcount	4,942

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2004 Fall Term

Data Current As Of July 12, 2006 10:35:00

Total Headcount	19,895

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2005 Spring Semester

Data Current As Of July 12, 2006 10:35:37

Total Headcount	18,847

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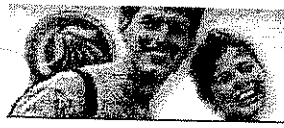

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2005 Summer Term

Data Current As Of July 12, 2006 11:24:24

Total Headcount	8,619

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. See attached for data.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K Vyas Date 7/18/06

Kashmira Vyas Accounting Specialist
Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised JANUARY 2006

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3. Total Number of Students Waived from Enrollment Fees

SixTen Form: EFCW 1.8-1, #3. NOTE: Only have annual totals

Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton
1998-99	4,666	5,270
1999-00	4,777	5,025
2000-01	4,902	5,600
2001-02	5,151	5,605
2002-03	5,600	6,286
2003-04	5,818	6,327
2004-05	6,584	7,637

Verified these #'s are same as BOGG waivers per CCCCO website - SSA

See following 2 pages - SSA

98-99 - Total - 9,936 - SSA
99-00 - Total - 9,802 - SSA
00-01 - Total - 10,502 - SSA
01-02 - Total - 10,756 - SSA
02-03 - Total - 11,886 - SSA
03-04 - Total - 12,145 - SSA
04-05 - Total - 14,221 - SSA

4. Total Number of Students with Enrollment Fee A/R

SixTen Form: EFCW 1.8-2, #1. NOTE: Only have annual totals

Source: Banner a/o 7/6/06

Academic Year	Cypress	Fullerton		
Fall 1998			Pre-Banner Term	
Spring 1999			Pre-Banner Term	98-99
Summer 1999			Pre-Banner Term	
Fall 1999			Pre-Banner Term	
Spring 2000			Pre-Banner Term	
Summer 2000			Pre-Banner Term	99-00
Fall 2000			Pre-Banner Term	
Spring 2001			Pre-Banner Term	
Summer 2001			Pre-Banner Term	00-01
Fall 2001	3	4		
Spring 2002	7	6		
Summer 2002	22	5	Total 47 - SSA	01-02
Fall 2002	163	8		
Spring 2003	34	11		
Summer 2003	38	8	Total 262 - SSA	02-03
Fall 2003	200	64		
Spring 2004	18	12		
Summer 2004	70	13	Total 377 - SSA	03-04
Fall 2004	168	72		
Spring 2005	66	57		
Summer 2005	5	34	Total 402 - SSA	04-05

Broke Down into FY's the way client did on Page 1 of 6 for 1. Total Number of Students Enrolled in College - SSA

Copy - original in 04-05 workpapers

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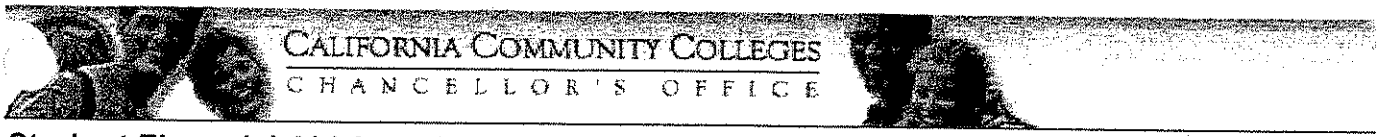
Wednes



Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:20:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	160	65,157
BOGW - Part B based on income standards	3,862	1,527,347
BOGW - Part C based on financial need	2,672	1,259,421

Total Unduplicated Count = 6,584
Total Amount = $ 2,851,925

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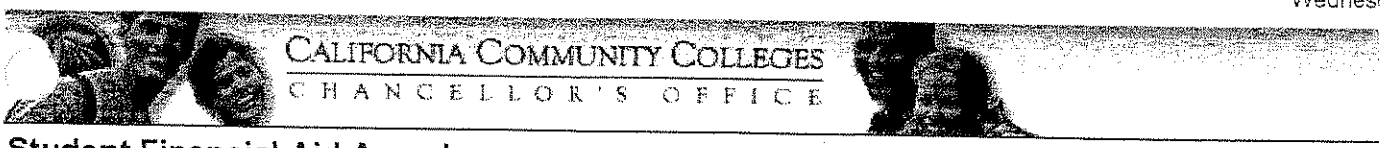
Wednes



Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:21:42

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	139	51,010
BOGW - Part B based on income standards	3,911	1,564,779
BOGW - Part C based on financial need	3,681	1,891,893

Total Unduplicated Count = 7,637
Total Amount = $ 3,507,682

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5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility

CCCTen Form: EFCW 1.8-2, #2. NOTE: Only have District Totals
Source: Banner

Term	Cypress & Fullerton Combined	
Fall 1998	-	Pre-Banner Term
Spring 1999	-	Pre-Banner Term
Summer 1999	-	Pre-Banner Term
Fall 1999	-	Pre-Banner Term
Spring 2000	-	Pre-Banner Term
Summer 2000	-	Pre-Banner Term
Fall 2000	-	Pre-Banner Term
Spring 2001	-	Pre-Banner Term
Summer 2001	-	Pre-Banner Term
Fall 2001	1,694	
Spring 2002	1,407	Total = 3,599 - SAAS
Summer 2002	498	
Fall 2002	2,282	
Spring 2003	1,591	Total = 4,298 - SAAS
Summer 2003	425	
Fall 2003	2,301	
Spring 2004	1,528	Total = 4,402 - SAAS
Summer 2004	573	
Fall 2004	2,331	
Spring 2005	1,452	Total = 4,260 - SAAS
Summer 2005	477	

98-99
99-00
00-01
01-02
02-03
03-04
04-05

- Broke Down into FYs the way client did on Pg. 1 of 6 for 1- Total Number of Students Enrolled in College - SAAS

Copy - original in

5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility

Ten Form: EFCW 1.8-2, #2. NOTE: Only have annual totals

Source: Not able to Calculate from Available Data - refunds not identified in this manner. Therefore, the information provided here is from Banner and is for all refunds.

Term	Cypress	Fullerton	
Fall 1998	-	-	Pre-Banner Term
Spring 1999	-	-	Pre-Banner Term
Summer 1999	-	-	Pre-Banner Term
Fall 1999	-	-	Pre-Banner Term
Spring 2000	-	-	Pre-Banner Term
Summer 2000	-	-	Pre-Banner Term
Fall 2000	-	-	Pre-Banner Term
Spring 2001	-	-	Pre-Banner Term
Summer 2001	-	-	Pre-Banner Term
Fall 2001	26	6,748	
Spring 2002	18	6,043	
Summer 2002	4	2,425	
Fall 2002	25	7,304	
Spring 2003	2	7,524	
Summer 2003	1	2,307	
Fall 2003	8	6,851	
Spring 2004	7	6,233	
Summer 2004	64	2,204	
Fall 2004	2,658	4,318	
Spring 2005	2,304	4,042	
Summer 2005	880	1,470	

** Refund #'s are overstated - see page 6 of 6 - SSMS

98-99 99-00 00-01 01-02 02-03 03-04 04-05

- Broke down into FY's the way Client did on Page 1 of 6 for 1. Total Number of Students Enrolled in College - SSMS

Not used - Revised #'s emailed to KO on 7-13-06 - SSMS - see above pg

6. Total Number of Enrollment Fee Waivers Requested

SixTen Form: EFCW 1.8-3, #1. NOTE: Only have annual totals

Source: Banner

Academic Year		Cypress	Fullerton	
1998-99	*	4,666	5,270	*: Pre-banner Year, so used same number as #3
1999-00	*	4,777	5,025	*: Pre-banner Year, so used same number as #3
2000-01	*	4,902	5,600	*: Pre-banner Year, so used same number as #3
2001-02		8,993	9,839	- Total 01-02 - 18,832 - SSMS
2002-03		8,205	9,478	- Total 02-03 - 17,683 - SSMS
2003-04		10,475	10,287	- Total 03-04 - 20,762 - SSMS
2004-05		10,259	11,799	- Total 04-05 - 22,058 - SSMS

verified these #'s are same as BOGG waivers per cccco website. - SSMS

- See Comparison Sch. Client's #'s higher by 6,585

7. Total Number of Enrollment Fee Waivers Granted

SixTen Form: EFCW 1.8-3, #2. NOTE: Only have annual totals

Source: Banner

Academic Year		Cypress	Fullerton	
1998-99	*	4,666	5,270	*: Pre-banner Year, so used same number as #3
1999-00	*	4,777	5,025	*: Pre-banner Year, so used same number as #3
2000-01	*	4,902	5,600	*: Pre-banner Year, so used same number as #3
2001-02		8,507	9,507	Total 01-02 - 18,014 - SSMS
2002-03		7,851	8,934	Total 02-03 - 16,785 - SSMS
03-04		9,132	9,407	Total 03-04 - 18,539 - SSMS
2004-05		9,764	11,042	Total 04-05 - 20,806 - SSMS

copy - I want this for waivers Granted/Approved not for Requested See Comparison Sheet directly below - SSMS

copy - original in 04-05 resources

8. Total Number of Enrollment Fee Waivers Denied

Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
1998-99	-	-
1999-00	-	-
2000-01	-	-
2001-02	486	332
2002-03	354	544
2003-04	1,343	880
2004-05	495	757

9. Total Enrollment Fees Collected each Year

SixTen Form: EFCW 1.8-4, #1.

Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year ($4,939,864 actual district total per 9/15/00 report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
2001-02	1,866,642	3,260,641	
2002-03	1,798,244	3,317,202	
2003-04	2,655,240	4,923,768	
2004-05	3,877,667	6,847,842	

10. Total Enrollment Fees Refunded each Year

SixTen Form: EFCW 1.8-4, #2.

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded. **

Academic Year	Cypress	Fullerton	
1998-99			Pre-Banner Year
1999-00			Pre-Banner Year
2000-01			Pre-Banner Year
2001-02	3,129	913,539	
2002-03	67	1,052,867	
2003-04	5,225	1,437,645	
2004-05	737,447	1,303,313	

Copy - original in

11. Total Enrollment Fee Revenue net each Year

SixTen Form: EFCW 1.8-4, #3.

Source: Banner. Total Enrollment Fees Earned

Calculated as: Net Enrollment Fees minus BOGG'd Fees

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment.

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year (estimated as of 1/15/00 per report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
2001-02	1,867,865	3,261,011	01-02 Total = 5,128,876 - SMA
2002-03	1,808,900	3,318,040	02-03 Total = 5,126,940 - SMA
2003-04	2,671,780	4,927,140	03-04 Total = 7,598,920 - SMA
2004-05	3,898,271	6,859,515	04-05 Total = 10,757,786 - SMA

12. Total Enrollment Fees Waived each Year

SixTen Form: EFCW 1.8-4, #4A

Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton	
1998-99	1,674,457	1,692,268	98-99 Total 3,366,725 - SMA
1999-00	1,547,873	1,562,372	99-00 Total 3,110,245 - SMA
2000-01	1,519,558	1,657,432	00-01 Total 3,176,990 - SMA
01-02	915,185	1,006,870	01-02 Total 1,922,055 - SMA
2002-03	1,157,612	1,346,653	02-03 Total 2,504,265 - SMA
2003-04	1,809,595	2,010,439	03-04 Total 3,820,034 - SMA
2004-05	2,851,925	3,507,682	04-05 Total 6,359,607 - SMA

See following pgs. Verified same as CCCO report - SMA

copy - original in 04-05 notebook

5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility

SixTen Form: EFCW 1.8-2, #2. NOTE: Only have District Totals

Source: Banner

Term	Cypress & Fullerton Combined	
Fall 1998	-	Pre-Banner Term
Spring 1999	-	Pre-Banner Term
Summer 1999	-	Pre-Banner Term
Fall 1999	-	Pre-Banner Term
Spring 2000	-	Pre-Banner Term
Summer 2000	-	Pre-Banner Term
Fall 2000	-	Pre-Banner Term
Spring 2001	-	Pre-Banner Term
Summer 2001	-	Pre-Banner Term
Fall 2001	1,694	
Spring 2002	1,407	Total = 3,599
Summer 2002	498	
Fall 2002	2,282	
Spring 2003	1,591	Total = 4,298
Summer 2003	425	
Fall 2003	2,301	
Spring 2004	1,528	Total = 4,402
Summer 2004	573	
Fall 2004	2,331	
Spring 2005	1,452	Total = 4,260
Summer 2005	477	

- Broke Down into FYs the way client did on pg. 1 of 6 for 1- Total Number of Students Enrolled in College - Fall

98-99

99-00

00-01

01-02

02-03

03-04

04-05

Copy - original in other resources

5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility

SixTen Form: EFCW 1.8-2, #2. NOTE: Only have annual totals

Source: Not able to Calculate from Available Data - refunds not identified in this manner. Therefore, the information provided here is from Banner and is for all refunds.

Term	Cypress	Fullerton	
Fall 1998	-	-	Pre-Banner Term
Spring 1999	-	-	Pre-Banner Term
Summer 1999	-	-	Pre-Banner Term
Fall 1999	-	-	Pre-Banner Term
Spring 2000	-	-	Pre-Banner Term
Summer 2000	-	-	Pre-Banner Term
Fall 2000	-	-	Pre-Banner Term
Spring 2001	-	-	Pre-Banner Term
Summer 2001	-	-	Pre-Banner Term
Fall 2001	26	6,748	
Spring 2002	18	6,043	
Summer 2002	4	2,425	
Fall 2002	25	7,304	
Spring 2003	2	7,524	
Summer 2003	1	2,307	
Fall 2003	8	6,851	
Spring 2004	7	6,233	
Summer 2004	64	2,204	
Fall 2004	2,658	4,318	
Spring 2005	2,304	4,042	
Summer 2005	880	1,470	

6. Total Number of Enrollment Fee Waivers Requested

SixTen Form: EFCW 1.8-3, #1. NOTE: Only have annual totals

Source: Banner

Academic Year	Cypress	Fullerton	
1998-99	4,666	5,270	*: Pre-banner Year, so used same number as #3
1999-00	4,777	5,025	*: Pre-banner Year, so used same number as #3
2000-01	4,902	5,600	*: Pre-banner Year, so used same number as #3
2001-02	8,993	9,839	
2002-03	8,205	9,478	
2003-04	10,475	10,287	
2004-05	10,259	11,799	

7. Total Number of Enrollment Fee Waivers Granted

SixTen Form: EFCW 1.8-3, #2. NOTE: Only have annual totals

Source: Banner

Academic Year	Cypress	Fullerton	
1998-99	4,666	5,270	*: Pre-banner Year, so used same number as #3
1999-00	4,777	5,025	*: Pre-banner Year, so used same number as #3
2000-01	4,902	5,600	*: Pre-banner Year, so used same number as #3
2001-02	8,507	9,507	
2002-03	7,851	8,934	
2003-04	9,132	9,407	
2004-05	9,764	11,042	

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. See attached for data.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 7/18/06

Keshmira Vyas — Accounting Specialist

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Client used CCCCO website data for these #'s. Other clients' data that was provided was usually lower than this #. P/Sergio - at this late date go w/ the data supplied by client

This is the w/ client has broken-out - date

This is the w/ CCCCO website has FY date broken out

1. EFCW 1.8-1 - Ques. #1 - Number of students enrolled each fiscal year. (Not FTE's)

Period	98-99		99-00		00-01		01-02		02-03		03-04		04-05	
		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO
Summer													Fall 04	Summer 04
Fall													Spring 05	Fall 04
Spring													Summer 05	Spring 05
Totals	0	0	0	0	0	0	0	0	0	0	0	0	0	0

2. EFCW 1.8-3 - Ques. # 2 - Number of enrollment fee waivers approved (BOGG, etc.)

	99-00		00-01		01-02		02-03		03-04		04-05	
		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO
Totals	9,802	9,802	10,502	10,502	18,014	10,756	16,785	11,886	18,539	12,145	20,806	14,221
Difference	0		0		7,258		4,899		6,394		6,585	
	Client used CCCO #'s		Client used CCCO #'s		Clients #'s higher		Clients #'s higher		Clients #'s higher		Clients #'s higher	

↑ Normally we ask client - why higher? - But at this late date Sergio said to go w/ clients #'s

3. EFCW 1.8-4 - Ques. # 4A - Total Enrollment Fees Waived (BOGG, etc.)

	99-00		00-01		01-02		02-03		03-04		04-05	
		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO		CCCCO
Totals	$3,110,245	$3,110,245	$3,176,990	$3,176,990	$1,922,055	$1,922,055	$2,504,265	$2,504,265	$3,820,034	$3,820,034	$6,359,607	$6,359,607
Difference	0		0		0		0		0		0	
	Client used CCCO #'s		Client used CCCO #'s		Client used CCCO #'s		Client used CCCO #'s		Client used CCCO #'s		Client used CCCO #'s	

These #'s good client used CCCO website #'s + we have usually gone w/ CCCCO #'s over client #'s

8. Total Number of Enrollment Fee Waivers Denied

Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
1998-99	-	-
1999-00	-	-
2000-01	-	-
2001-02	486	332 Total 01-02 = 818 - Sch. 4
2002-03	354	544 Total 02-03 = 898 - Sch. 4
2003-04	1,343	880 Total 03-04 = 2,223 - Sch. 4
2004-05	495	757 Total 04-05 = 1,252 - Sch. 4

} = Sch. 4 EFW 8

9. Total Enrollment Fees Collected each Year

SixTen Form: EFCW 1.8-4, #1.

Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year ($4,939,864 actual district total per 9/15/00 report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
2001-02	1,866,642	3,260,641	
2002-03	1,798,244	3,317,202	
2003-04	2,655,240	4,923,768	
2004-05	3,877,667	6,847,842	

10. Total Enrollment Fees Refunded each Year

SixTen Form: EFCW 1.8-4, #2.

**

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded.

Academic Year	Cypress	Fullerton	
1998-99			Pre-Banner Year
1999-00			Pre-Banner Year
2000-01			Pre-Banner Year
2001-02	3,129	913,539	
2002-03	67	1,052,867	
2003-04	5,225	1,437,645	
2004-05	737,447	1,303,313	

Copy - original in 04-05 resource

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. See attached for data

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
9 1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
10 2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
11 3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
12 4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
1 4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
2 4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
3 5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K Vyas Date 7/18/06

Kashmira Vyas 7/18/06

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised January 2006

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided. See attached for data

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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8. Total Number of Enrollment Fee Waivers Denied

Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
1998-99	-	-
1999-00	-	-
2000-01	-	-
2001-02	486	332
2002-03	354	544
2003-04	1,343	880
2004-05	495	757

9. Total Enrollment Fees Collected each Year

SixTen Form: EFCW 1.8-4, #1.

Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year ($4,939,864 actual district total per 9/15/00 report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
2001-02	1,866,642	3,260,641	
2002-03	1,798,244	3,317,202	
2003-04	2,655,240	4,923,768	
2004-05	3,877,667	6,847,842	

10. Total Enrollment Fees Refunded each Year

SixTen Form: EFCW 1.8-4, #2.

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded. **

Academic Year	Cypress	Fullerton	
1998-99			Pre-Banner Year
1999-00			Pre-Banner Year
2000-01			Pre-Banner Year
2001-02	3,129	913,539	
2002-03	67	1,052,867	
2003-04	5,225	1,437,645	
2004-05	737,447	1,303,313	

copy - original on

11. Total Enrollment Fee Revenue net each Year

SixTen Form: EFCW 1.8-4, #3.

Source: Banner. Total Enrollment Fees Earned

Calculated as: Net Enrollment Fees minus BOGG'd Fees

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment.

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year (estimated as of 1/15/00 per report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
2001-02	1,867,865	3,261,011	01-02 Total = 5,128,876 - SMA
2002-03	1,808,900	3,318,040	02-03 Total = 5,126,940 - SMA
2003-04	2,671,780	4,927,140	03-04 Total = 7,598,920 - SMA
2004-05	3,898,271	6,859,515	04-05 Total = 10,757,786 - SMA

12. Total Enrollment Fees Waived each Year

SixTen Form: EFCW 1.8-4, #4A

Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton	
1998-99	1,674,457	1,692,268	98-99 Total 3,366,725 - SMA
1999-00	1,547,873	1,562,372	99-00 Total 3,110,245 - SMA
2000-01	1,519,558	1,657,432	00-01 Total 3,176,990 - SMA
01-02	915,185	1,006,870	01-02 Total 1,922,055 - SMA
2002-03	1,157,612	1,346,653	02-03 Total 2,504,265 - SMA
2003-04	1,809,595	2,010,439	03-04 Total 3,820,034 - SMA
2004-05	2,851,925	3,507,682	04-05 Total 6,359,607 - SMA

- same as CCCCO report Dan following 2 pages - SMA

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:20:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	160	65,157
BOGW - Part B based on income standards	3,862	1,527,347
BOGW - Part C based on financial need	2,672	1,259,421

Total Unduplicated Count = 6,584
Total Amount = $ 2,851,925

Back to Top of Page

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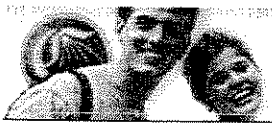

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:21:42

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	139	51,010
BOGW - Part B based on income standards	3,911	1,564,779
BOGW - Part C based on financial need	3,681	1,891,893

Total Unduplicated Count = 7,637
Total Amount = $ 3,507,682

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13. Number of Credit Units for which Enrollment Fees were Waived

SixTen Form: EFCW 1.8-4, #5
Source: Banner

Academic Year	Cypress	Fullerton	
Fall 1998			Not Applicable for this Term per SixTen Form
Spring 1999			Not Applicable for this Term per SixTen Form
Summer 1999			Not Applicable for this Term per SixTen Form
Fall 1999			Not Applicable for this Term per SixTen Form
Spring 2000			Not Applicable for this Term per SixTen Form
Summer 2000			Not Applicable for this Term per SixTen Form
Fall 2000	-	-	Pre-Banner Term (annual amount calculated below)
Spring 2001	-	-	Pre-Banner Term (annual amount calculated below)
Summer 2001	-	-	Pre-Banner Term (annual amount calculated below)
2000/01 Year	138,142	150,676	For this year, Annual amount calculated as Annual amount from #12 above / $11.00 per unit for this year.
Fall 2001	42,259	47,916	
Spring 2002	45,262	53,214	
Summer 2002	6,949	9,003	
Fall 2002	45,508	53,153	
Spring 2003	43,929	51,657	
Summer 2003	5,533	7,955	
Fall 2003	45,883	49,332	
Spring 2004	45,390	50,992	
Summer 2004	7,140	9,946	
Fall 2004	49,772	60,610	
Spring 2005	49,619	61,306	
Summer 2005	7,011	11,023	

99 00 01 01 02 03 04 05

00-01 Total 288,818 - sum

01-02 Total = 204,603 - sum

02-03 Total = 207,735 - sum

03-04 Total = 208,683 - sum

04-05 Total = 239,341 - sum

** The refund numbers are overstated with regards to waivers. We were unable to separately identify enrollment refunds. All refunds are lumped together when being paid out.

*** We are unable to separately identify the gross enrollment fees that were collected, prior to any subsequent refunds. The enrollment fee amounts are net of any reversals due to changes in enrollment levels (e.g., dropped classes).

Copy - original in

8. Total Number of Enrollment Fee Waivers Denied

Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
1998-99	-	-
1999-00	-	-
2000-01	-	-
2001-02	486	332 Total 01-02 = 818 - Sch. 4
2002-03	354	544 Total 02-03 = 898 - Sch. 4
2003-04	1,343	880 Total 03-04 = 2,223 - Sch. 4
2004-05	495	757 Total 04-05 = 1,252 - Sch. 4

} = Sch. 4 EFW 8

9. Total Enrollment Fees Collected each Year

SixTen Form: EFCW 1.8-4, #1.

Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton	
1998-99	-	-	Pre-Banner Year ($5,239,898 actual district total per 9/15/99 report submitted to CCCO)
1999-00	-	-	Pre-Banner Year ($4,939,864 actual district total per 9/15/00 report submitted to CCCO)
2000-01	-	-	Pre-Banner Year ($5,057,532 actual district total per 9/15/01 report submitted to CCCO)
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2002-03	1,798,244	3,317,202	
2003-04	2,655,240	4,923,768	
2004-05	3,877,667	6,847,842	

10. Total Enrollment Fees Refunded each Year

SixTen Form: EFCW 1.8-4, #2.

**

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded.

Academic Year	Cypress	Fullerton	
1998-99			Pre-Banner Year
1999-00			Pre-Banner Year
2000-01			Pre-Banner Year
2001-02	3,129	913,539	
2002-03	67	1,052,867	
2003-04	5,225	1,437,645	
2004-05	737,447	1,303,313	

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13. Number of Credit Units for which Enrollment Fees were Waived

SixTen Form: EFCW 1.8-4, #5

urce: Banner

Academic Year	Cypress	Fullerton	
Fall 1998			Not Applicable for this Term per SixTen Form
Spring 1999			Not Applicable for this Term per SixTen Form
Summer 1999			Not Applicable for this Term per SixTen Form
Fall 1999			Not Applicable for this Term per SixTen Form
Spring 2000			Not Applicable for this Term per SixTen Form
Summer 2000			Not Applicable for this Term per SixTen Form
Fall 2000	-	-	Pre-Banner Term (annual amount calculated below)
Spring 2001	-	-	Pre-Banner Term (annual amount calculated below)
Summer 2001	-	-	Pre-Banner Term (annual amount calculated below)
2000/01 Year	138,142	150,676	For this year, Annual amount calculated as Annual amount from #12 above / $11.00 per unit for this year.
Fall 2001	42,259	47,916	
Spring 2002	45,262	53,214	01-02 Total = 204,603 - ***
Summer 2002	6,949	9,003	
Fall 2002	45,508	53,153	
Spring 2003	43,929	51,657	02-03 Total = 207,735 - ***
Summer 2003	5,533	7,955	
Fall 2003	45,883	49,332	
Spring 2004	45,390	50,992	03-04 Total = 208,683 - ***
Summer 2004	7,140	9,946	
Fall 2004	49,772	60,610	
Spring 2005	49,619	61,306	04-05 Total = 239,341 - ***
Summer 2005	7,011	11,023	

00-01 Total 288,818 - ***

** The refund numbers are overstated with regards to waivers. We were unable to separately identify enrollment refunds. All refunds are lumped together when being paid out.

*** We are unable to separately identify the gross enrollment fees that were collected, prior to any subsequent refunds. The enrollment fee amounts are net of any reversals due to changes in enrollment levels (e.g., dropped classes).

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308/95 Enrollment Fee Collection and Waivers

NOCCCD Confidential

1. Total Number of Students Enrolled in College

SixTen Form: EFCW 1.8-1, #1.
Source: Headcount from CCCO website

Term	Yr	Cypress	Fullerton
Fall	1998	13,813	19,181
Spring	1999	14,012	18,812
Summer	1999	5,499	9,735
Totals 1998-99		**33,324**	**47,728**
Fall	1999	14,335	19,061
Spring	2000	15,007	19,454
Summer	2000	5,266	7,812
Totals 1999-00		**34,608**	**46,327**
Fall	2000	14,988	20,287
Spring	2001	15,416	21,058
Summer	2001	5,367	11,777
Totals 2000-01		**35,771**	**53,122**
Fall	2001	15,337	21,239
Spring	2002	16,266	21,592
Summer	2002	5,401	9,062
Totals 2001-02		**37,004**	**51,893**
Fall	2002	14,009	21,364
Spring	2003	13,876	20,982
Summer	2003	4,579	8,507
Totals 2002-03		**32,464**	**50,853**
Fall	2003	12,979	19,235
Spring	2004	12,665	18,710
Summer	2004	4,915	8,364
Totals 2003-04		**30,559**	**46,309**
Fall	2004	13,423	19,895
Spring	2005	13,077	18,847
Summer	2005	4,942	8,619
Totals 2004-05		**31,442**	**47,361**

98-99 Total = 81,052 - SRA

99-00 Total = 80,935 - SRA

00-01 Total = 88,893 - SRA

01-02 Total = 88,897 - SRA

02-03 Total = 83,317 - SRA

03-04 Total = 76,868 - SRA

04-05 Total = 78,803

2. Total Number of Students Who Paid Enrollment Fees

SixTen Form: EFCW 1.8-1, #2. NOTE: Only have annual totals
Source: Calculated as #1 - #3

Term	Yr	Cypress	Fullerton
1998-99		28,658	42,458
1999-00		29,831	41,302
2000-01		30,869	47,522
2001-02		31,853	46,288
2002-03		26,864	44,567
2003-04		24,741	39,982
2004-05		24,858	39,724

verified client calculated #1 - #3 correctly - SRA

98-99 Total = 71,116 - SRA
99-00 Total = 71,133 - SRA
00-01 Total = 78,393 - SRA
01-02 Total = 78,141 - SRA
02-03 Total = 71,431 - SRA
03-04 Total = 64,723 - SRA
04-05 Total = 64,582 - SRA

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Summer Term

Data Current As Of July 12, 2006 11:24:01

Total Headcount	4,942

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Student Demographics

Student Total Headcount For Cypress
For 2004 Spring Semester

Data Current As Of July 12, 2006 10:20:47

Total Headcount	12,665

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Student Demographics

Student Total Headcount For Fullerton
For 2004 Summer Term

Data Current As Of July 12, 2006 10:34:37

Total Headcount	8,364

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Student Demographics

Student Total Headcount For Fullerton
For 2004 Spring Semester

Data Current As Of July 12, 2006 10:34:12

Total Headcount	18,710

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Cypress
For 2004 Summer Term

Data Current As Of July 12, 2006 10:20:59

Total Headcount	4,915

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Cypress
For 2004 Fall Term

Data Current As Of July 12, 2006 10:21:20

Total Headcount	13,423

04-05

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Fullerton
For 2004 Fall Term

Data Current As Of July 12, 2006 10:35:00

Total Headcount	19,895

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Student Demographics

Student Total Headcount For Cypress
For 2005 Spring Semester

Data Current As Of July 12, 2006 10:23:48

Total Headcount	13,077

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Fullerton
For 2005 Spring Semester

Data Current As Of July 12, 2006 10:35:37

Total Headcount	18,847

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Student Demographics

Student Total Headcount For Fullerton
For 2005 Summer Term

Data Current As Of July 12, 2006 11:24:24

Total Headcount	8,619

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3. Total Number of Students Waived from Enrollment Fees

SixTen Form: EFCW 1.8-1, #3. NOTE: Only have annual totals

Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton
1998-99	4,666	5,270
1999-00	4,777	5,025
2000-01	4,902	5,600
2001-02	5,151	5,605
2002-03	5,600	6,286
2003-04	5,818	6,327
2004-05	6,584	7,637

Verified these #'s are same as BOGG waivers per CCCO website -SAA

Get Colleague CCCCO reports

98-99 - Total - 9,936 - SAA
99-00 - Total - 9,802 - SAA
00-01 - Total - 10,502 - SAA
01-02 - Total - 10,756 - SAA
02-03 - Total - 11,886 - SAA
03-04 - Total - 12,145 - SAA
04-05 - Total - 14,221 - SAA

4. Total Number of Students with Enrollment Fee A/R

SixTen Form: EFCW 1.8-2, #1. NOTE: Only have annual totals

Source: Banner a/o 7/6/06

Academic Year	Cypress	Fullerton	
Fall 1998			Pre-Banner Term
Spring 1999			Pre-Banner Term 98-99
Summer 1999			Pre-Banner Term
Fall 1999			Pre-Banner Term
Spring 2000			Pre-Banner Term
Summer 2000			Pre-Banner Term 99-00
Fall 2000			Pre-Banner Term
Spring 2001			Pre-Banner Term
Summer 2001			Pre-Banner Term 00-01
Fall 2001	3	4	
Spring 2002	7	6	
Summer 2002	22	5	Total 47 - SAA 01-02
Fall 2002	163	8	
Spring 2003	34	11	
Summer 2003	38	8	Total 262 - SAA 02-03
Fall 2003	200	64	
Spring 2004	18	12	
Summer 2004	70	13	Total 377 - SAA 03-04
Fall 2004	168	72	
Spring 2005	66	57	
Summer 2005	5	34	Total 402 - SAA 04-05

Broke down into FY's the way client did on Page 1 of 6 for 1- Total Number of Students Enrolled in Colls - SAA

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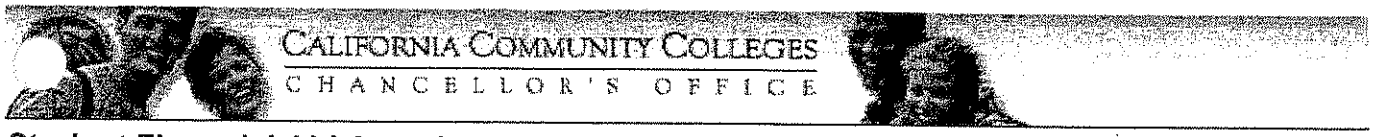

Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:20:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	160	65,157
BOGW - Part B based on income standards	3,862	1,527,347
BOGW - Part C based on financial need	2,672	1,259,421

Total Unduplicated Count = 6,584
Total Amount = $ 2,851,925

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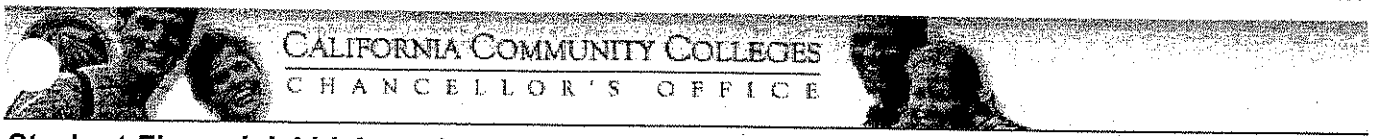

Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:21:42

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	139	51,010
BOGW - Part B based on income standards	3,911	1,564,779
BOGW - Part C based on financial need	3,681	1,891,893

Total Unduplicated Count = 7,637
Total Amount = $ 3,507,682

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Si[illegible]n and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 04-05 and the missing rates for 03-04.

SCHOOL DISTRICT NAME: North Orange County CCD

		Fiscal Years:	
Name	**Title**	**03-04**	**04-05**
	AVERAGE ACCOUNTING TECH	$ 39.67	
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 37.28	
	AVERAGE COUNSELOR	$ 64.94	
	AVERAGE DIVISION DEAN	$ 71.11	
	AVERAGE DIRECTOR	$ 60.86	
	AVERAGE INSTRUCTOR	$ 50.69	
	AVERAGE MANAGER	$ 57.00	
	AVERAGE OFFICE MANAGER	$ 40.55	
ALIBRANDI, LUCINDA	INSTRUCTOR	$ 58.83	$ 61.24
ALONZO, ROSE	ACCOUNTING TECHNICIAN	$ 38.69	
AYON, VIOLET	EXECUTIVE ADMINISTRATIVE AIDE	$ 54.76	$ 62.17
BARROW, LINDA	HR SPECIALIST	$ 46.03	$ 47.46
BEELER, RON	DIST. DIRECTOR-FACILITIES	$ 66.26	$ 75.42
BEERS, SUSAN	DIVISION DEAN	$ 73.73	$ 77.49
BENNETT, BARBARA	INSTRUCTOR	$ 50.43	$ 51.53
BETTENDORF, PAM	OFFICE MANAGER	$ 42.08	$ 42.55
BLACKLEY, TERRY	DIVISION DEAN	$ 72.59	$ 71.19
BOYD-DAILEY, NANCY	SECRETARY SENIOR	$ 39.49	$ 41.04

07/01/04

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05
BOYD-DAILEY, NANCY	HR SPECIALIST		$ 42.83
BRANDES, RAEANE	ACCOUNTING TECH	$ 41.93	$ 43.23
BRAULT, LORI	DIRECTOR, HEALTH SERVICES	$ 55.00	$ 57.87
BROWN, ALLEN	DIVISION DEAN	$ 60.02	
BROWN, KALETA	DIVISION DEAN		$ 63.54
BURCHFIELD, JERRY	INSTRUCTOR	$ 51.97	$ 56.30
BURNS, MICHAEL	DIVISION DEAN	$ 72.09	$ 75.88
BYRNES, NANCY	VP EDUC SUPPORT/PLAN	$ 75.98	$ 79.81
CANT, KAREN	DIRECTOR BUDGET/FINANCE	$ 65.17	$ 74.53
CARRITHERS, JOE	INSTRUCTOR	$ 49.34	$ 52.60
CHAMBERS, TERRY	BENEFITS SPEC	$ 34.70	$ 35.71
CLIFFORD, SUSAN	DEAN ACADEMIC SERVICES		$ 71.52
COTTER, SANDRA	EXECUTIVE ASSISTANT	$ 44.17	$ 49.84
COURCHAINE, JEFFERY	INSTRUCTOR	$ 50.14	$ 52.11
CRAIG, DALE	INSTRUCTOR	$ 49.11	$ 52.48
CUSACC, JOHNIE	INSTRUCTOR	$ 48.83	
DeMARKEY, NINA	DIVISION DEAN		$ 55.48
DONLEY, STEVEN	MANAGER	$ 71.64	
DONLEY, STEVEN	DIVISION DEAN		$ 76.97
DONOVAN, LEXI	MANAGER CAMPUS ACCOUNTING	$ 50.54	$ 58.03
DOOLY, GEORGE	COUNSELOR	$ 61.40	$ 63.80
DUNCAN, STEVE	DIST DIR HR		$ 80.25
EISENHUT, LINDA	COORDINATOR BENEFITS	$ 44.77	

01/01/05

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05	
EISENHUT, LINDA	DIST MGR BENEFITS		$ 50.62	
FISHMAN, DARLENE	DIRECTOR NURSING	$ 61.00	$ 64.07	
FLEEMAN, RODNEY	VC FINANCE/FACILITIES	$ 95.89	$ 91.36	
FLORES-CHURCH, ADRIANNA	MANAGER	$ 38.49		
FLORES-CHURCH, ADRIANNA	ADMIN SUPP MGR HR		$ 43.56	
FOY, TAMI	DIST MGR INST RSRCS	$ 44.78		
FRANKS, JOE	INSTRUCTOR	$ 53.74	$ 55.94	
GABEL, ANN-MARIE	ACCOUNTING MGR	$ 57.05	$ 60.24	07/01/04
GABEL, ANN-MARIE	DIR FISCAL AFFAIRS		$ 64.09	12/15/05
GISKA, MARY LOU	DIRECTOR CYPRESS COLLEGE	$ 42.90	$ 48.03	
GOMBER, LISA	ADMIN ASSISTANT	$ 42.91	$ 44.24	
GUYTON, JEAN	MANAGER APPLICATION SUPPORT	$ 67.40	$ 76.41	
HANNON, ANDREA	DIV DEAN HEALTH SERVICES	$ 72.09	$ 75.88	
HARTER, RENIE	MANAGER CAMPUS ACCOUNTING	$ 55.54	$ 62.99	
HATCHETT, DONNA	DISTRICT DIRECTOR PUBLIC AFFAIRS	$ 71.04	$ 80.88	
HEBSON, CHRIS	COMPUTING ANALYST		$ 53.54	07/01/04
HEBSON, CHRIS	IT SPEC SYS ANALYST		$ 55.66	06/01/05
HENDERSON, WILFORD	SAFETY SPECIALIST	$ 42.89	$ 47.21	
HENRY, DIANE	DIVISION DEAN	$ 72.09	$ 75.88	
HERRERA, ALEX	INSTRUCTOR	$ 45.91	$ 49.37	
HITCHCOCK, REGINA	COMPUTER LAB ASSISTANT	$ 31.03	$ 33.57	
HITCHMAN, LEEANN	INSTRUCTOR	$ 44.64		
HORSLEY, JEFF	VICE CHANCELLOR HR	$ 98.29	$ 104.35	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05	
HUNTER, JEROME	CHANCELLOR	$ 126.46	$ 122.34	
JAY, PAULA	ADMIN ASSISTANT	$ 38.47	$ 39.70	
KASLER, MIKE	EXECUTIVE VICE PRESIDENT	$ 78.86	$ 84.84	
LATIEF, LINA	ACCOUNTING TECH	$ 37.93	$ 39.23	07/01/04
LATIEF, LINA	ACCOUNTING SPEC		$ 40.89	03/01/05
LEE, PAT	PAYROLL MANAGER	$ 50.15		
LEE, PAT	DIST MGR PAYROLL		$ 56.84	
LEWIS, MARGORIE	PRESIDENT- CYPRESS COLLEGE	$ 101.11	$ 106.83	
LEYSON, ELIZABETH	DIVISION DEAN	$ 72.95	$ 77.43	7/01/04
LEYSON, ELIZABETH	INTERIM EXEC VP		$ 82.82	11/10/04
LUSCH, ROD	SKILLED MAINTAINANCE MECH	$ 43.51	$ 44.95	
McALPIN, KENNETH	MGR/ MAINTENANCE & OPS		$ 44.49	
McCLOUD, EDWARD	INSTRUCTOR	$ 48.83	$ 54.85	
McGUIRE, GARY	PROVOST	$ 96.85	$ 101.50	
MELELLA, LAURA	INSTRUCTOR		$ 53.85	
MIRANDA, ALBERT	DIRECTOR/ FACILITIES		$ 69.45	
MIRANDA, BOB	DIRECTOR FINANCIAL AIDE	$ 60.95	$ 65.35	
MONTANO, DIANE	MANAGER CHILD CARE	$ 42.23	$ 48.19	
MOORE, MIKE	INSTRUCTOR	$ 57.01	$ 59.33	
MOORE, SALLY	INSTRUCTOR	$ 53.60	$ 57.14	
NADELL, ROBERT	DEAN COUNSELING/STUDENT DEV	$ 71.24	$ 75.75	
NELSON, JANICE	BUS OFFICE SPEC	$ 40.14	$ 42.24	
NICCOLAI, NILO	DIRECTOR ACAD. COMP TECHNL	$ 71.64	$ 75.29	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05	
NOVISOFF, ANNA	ADMIN ASSISTANT	$ 39.01	$ 43.19	
O'CONNOR, ADAM	DIRECTOR BUDGET/FINANCE	$ 69.74	$ 79.51	
PALMER, SANDRA	EXEC ASSISTANT	$ 45.13	$ 46.67	
PARISI, TOM	DEAN INSTRUCTION ADULT ED	$ 72.95	$ 76.75	
PEREZ, JENNIFER	ADMIN ASSISTANT	$ 36.00		
PEREZ, JENNIFER	PUBLIC INFO OFFICER		$ 40.70	
PEREZ, RICK	COUNSELOR/STUDENT DEV DEAN	$ 71.13	$ 74.79	
PFEIFFER, JODY	SECRETARY	$ 29.27	$ 18.49	
PHILLIPS, JIM	INSTRUCTOR	$ 58.54	$ 60.82	
PORTOLAN, JANET	VP EDUC SUPPORT/PLAN	$ 75.05	$ 78.84	
POSNER, MARC	ADMIN ASSISTANT	$ 38.55		
POSNER, MARC	PUBLIC INFO OFFICER		$ 43.59	
RAMIREZ, JORGE	DEAN STUDENT SERVICES	$ 64.22	$ 67.48	
RAMIREZ, RICHARD	DEAN STUDENT SUPPORT SERVICES	$ 72.58	$ 75.93	07/01/04
RAMIREZ, RICHARD	INTERIM VP STUDENT SERVICES		$ 78.85	04/01/05
RAUBOLT, JACK	DISTRICT DIRECTOR INFO SERVICES	$ 71.76	$ 81.73	
REHA, DELORES	INSTRUCTOR		$ 57.88	
RODGERS, CAROLANNE	INSTRUCTOR	$ 62.56	$ 66.23	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05	
SANBORN, JACKIE	DIVISION OFFICE MANAGER	$ 46.35	$ 48.75	
SCHULTZ, GREG	COORDINATOR ADMINISTRATIVE SVCS	$ 49.94	$ 56.78	07/01/04
SCHULTZ, GREG	INTERIM DIR FISCAL AFFAIRS		$ 60.29	04/01/05
SIMPSON, BOB	DIVISION DEAN	$ 73.73	$ 77.49	
SMEAD, RICHARD	INSTRUCTOR	$ 47.80	$ 49.74	
SMITH, FRANK	DIRECTOR ACAD. COMP TECHNL	$ 61.29	$ 64.64	
SMITH, SHIRLEY	DIRECTOR PUBLIC SAFETY	$ 39.29	$ 44.49	
SOTO, ABEL	ADMISSIONS & RECORDS TECH	$ 40.32	$ 41.57	
SPENCER, NORA	INSTRUCTOR	$ 44.32	$ 47.48	
ST JOHN, PAUL	INSTRUCTOR	$ 36.30	$ 52.44	
TAYLOR, CHRIS	IT SPEC SYS APPLICATION	$ 50.25	$ 51.88	
TERRY, CHRISTINE	DEAN OF INSTRUCTION	$ 70.78	$ 74.43	
TESAR, DAN	DIVISION DEAN	$ 71.64	$ 75.34	
THOMAS, CONNIE	EXEC ASSISTANT	$ 49.82	$ 51.48	
TYRRELL, DONALD	COUNSELOR	$ 62.30	$ 64.85	
VYSKOCIL, CINDY	DIRECTOR CAMPUS DIVERSITY	$ 57.83	$ 60.74	
WALLACE, TOM	MANAGER TECHNICAL SUPPORT	$ 66.68	$ 75.95	
WASSENAAR, DAVE	DEAN, ADMISSIONS/RECORDS		$ 76.79	
WHITEHURST, DOROTHY	DISTRICT DIRECTOR PURCHASING	$ 63.04	$ 71.74	
WICKS, LORRAINE	COORDINATOR SENIOR PROGRAM	$ 60.34	$ 63.42	
WILLIAMS, FRED	DISTRICT DIRECTOR FISCAL AFFAIRS	$ 70.45	$ 95.39	
WILSON, MARCUS	INSTRUCTOR	$ 53.67	$ 57.05	
ZANDY, BEN	INSTRUCTOR	$ 56.33	$ 58.55	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 03-04	04-05	
SANBORN, JACKIE	DIVISION OFFICE MANAGER	$ 46.35	$ 48.75	
SCHULTZ, GREG	COORDINATOR ADMINISTRATIVE SVCS	$ 49.94	$ 56.78	07/01/04
SCHULTZ, GREG	INTERIM DIR FISCAL AFFAIRS		$ 60.29	04/01/05
SIMPSON, BOB	DIVISION DEAN	$ 73.73	$ 77.49	
SMEAD, RICHARD	INSTRUCTOR	$ 47.80	$ 49.74	
SMITH, FRANK	DIRECTOR ACAD. COMP TECHNL	$ 61.29	$ 64.64	
SMITH, SHIRLEY	DIRECTOR PUBLIC SAFETY	$ 39.29	$ 44.49	
SOTO, ABEL	ADMISSIONS & RECORDS TECH	$ 40.32	$ 41.57	
SPENCER, NORA	INSTRUCTOR	$ 44.32	$ 47.48	
ST JOHN, PAUL	INSTRUCTOR	$ 36.30	$ 52.44	
TAYLOR, CHRIS	IT SPEC SYS APPLICATION	$ 50.25	$ 51.88	
TERRY, CHRISTINE	DEAN OF INSTRUCTION	$ 70.78	$ 74.43	
TESAR, DAN	DIVISION DEAN	$ 71.64	$ 75.34	
THOMAS, CONNIE	EXEC ASSISTANT	$ 49.82	$ 51.48	
TYRRELL, DONALD	COUNSELOR	$ 62.30	$ 64.85	
VYSKOCIL, CINDY	DIRECTOR CAMPUS DIVERSITY	$ 57.83	$ 60.74	
WALLACE, TOM	MANAGER TECHNICAL SUPPORT	$ 66.68	$ 75.95	
WASSENAAR, DAVE	DEAN, ADMISSIONS/RECORDS		$ 76.79	
WHITEHURST, DOROTHY	DISTRICT DIRECTOR PURCHASING	$ 63.04	$ 71.74	
WICKS, LORRAINE	COORDINATOR SENIOR PROGRAM	$ 60.34	$ 63.42	
WILLIAMS, FRED	DISTRICT DIRECTOR FISCAL AFFAIRS	$ 70.45	$ 95.39	
WILSON, MARCUS	INSTRUCTOR	$ 53.67	$ 57.05	
ZANDY, BEN	INSTRUCTOR	$ 56.33	$ 58.55	

PRODUCTIVE HOURLY RATE COMPUTATION
2004-2005
NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT

EMPLOYEE NAME	JOB TITLE	CE/ CL	ANNUAL SALARY		TOTAL BENEFITS	ANNUAL COMPENSATION	ANNUAL HOURS	HOURLY RATE	
ALIBRANDI, LUCINDA	INSTRUCTOR	CE	88,637.00		21,588.91	110,225.91	1800	61.24	
AYON, VIOLET	EXEC. ADM. AIDE TO CHANCELLOR	CL	83,360.00		28,551.93	111,911.93	1800	62.17	
BARROW, LINDA	HUMAN RESOURCES SPECIALIST	CONFIDENT	60,591.84		24,837.03	85,428.87	1800	47.46	
BEELER, RON	DIST DIR FACILITIES CONTROL	CL	106,616.00	*	29,147.12	135,763.12	1800	75.42	
BEERS, SUSAN	DEAN PHYSICAL EDUCATION	CE	115,106.00		24,375.14	139,481.14	1800	77.49	
BENNETT, BARBARA	INSTRUCTOR	CE	74,671.00		18,090.40	92,761.40	1800	51.53	
BETTENDORF, PAM	ADMINISTRATIVE ASSISTANT	CL	55,888.08		20,710.16	76,598.24	1800	42.55	
BLACKLEY, TERRY	DEAN FINE ARTS	CE	105,447.00		22,699.85	128,146.85	1800	71.19	
BOYD-DAILEY, NANCY	HUMAN RESOURCES SPECIALIST	CONFIDENT	49,503.96		24,370.10	73,874.06	1800	41.04	7/1/2004
BOYD-DAILEY, NANCY	HUMAN RESOURCES SPECIALIST	CONFIDENT	52,023.96		25,069.45	77,093.41	1800	42.83	1/1/2005
BRANDES, RAEANE	ACCOUNTING SPECIALIST	CL	55,280.16		22,530.51	77,810.67	1800	43.23	
BRAULT, LORI	DIRECTOR HEALTH SERVICES	CE	88,124.12		16,043.55	104,167.67	1800	57.87	
BROWN, KALETA	DIV. DEAN FINE ARTS	CE	92,467.00		21,896.97	114,363.97	1800	63.54	
BURCHFIELD, JERRY	INSTRUCTOR	CE	83,414.00		17,931.68	101,345.68	1800	56.30	
BURNS, MICHAEL	DEAN TECH AND ENGINEERING	CE	112,506.00		24,078.74	136,584.74	1800	75.88	
BYRNES, NANCY	VP EDUC SUPPORT/PLAN	CE	120,099.00		23,550.18	143,649.18	1800	79.81	
CANT, KAREN	DIRECTOR BUDGET/FINANCE	CL	108,179.00	*	25,976.71	134,155.71	1800	74.53	
CARRITHERS, JOE	INSTRUCTOR	CE	77,708.00		16,967.82	94,675.82	1800	52.60	
CHAMBERS, TERRY	BENEFITS SPECIALIST	CL	44,736.00		19,539.91	64,275.91	1800	35.71	
CLIFFORD, SUSAN B.	DEAN ACADEMIC SERVICES	CE	107,247.00		21,483.86	128,730.86	1800	71.52	
COTTER, SANDRA	EXECUTIVE ASSISTANT	CONFIDENT	64,243.92		25,474.65	89,718.57	1800	49.84	
COURCHAINE, JEFFREY	INSTRUCTOR	CE	76,856.00		16,939.46	93,795.46	1800	52.11	
CRAIG, DALE	INSTRUCTOR	CE	74,671.00		19,794.28	94,465.28	1800	52.48	
DeMARKEY, NINA	DIV. DEAN SOCIAL SCIENCES	CL	82,203.00		17,663.07	99,866.07	1800	55.48	
DONLEY, STEVEN	DIV DEAN VOC/TECH ED/ECON DEV	CE	115,106.00		23,434.00	138,540.00	1800	76.97	
DONOVAN, LEXI	MANAGER CAMPUS ACCOUNTING	CL	79,385.00		25,072.76	104,457.76	1800	58.03	
DOOLEY, GEORGE	COUNSELOR	CE	96,816.00		18,019.36	114,835.36	1800	63.80	
DUNCAN, STEVE	DIST DIR HUMAN RESOURCES	CL	112,506.00		31,946.03	144,452.03	1800	80.25	
EISENHUT, LINDA	DIST MANAGER BENEFITS	CL	66,192.00		24,915.24	91,107.24	1800	50.62	
FISHMAN, DARLENE	DIRECTOR NURSING	CE	95,069.51		20,252.77	115,322.28	1800	64.07	
FLEEMAN, RODNEY	VC FINANCE AND FACILITIES	CE	141,371.00	**	23,070.31	164,441.31	1800	91.36	
FLORES-CHURCH, ADRIANNA	ADMIN SUPP MANAGER HR	CL	57,773.00		20,631.93	78,404.93	1800	43.56	

FRANKS, JOE	INSTRUCTOR	CE	81,230.00		19,459.28	100,689.28	1800	55.94	
GABEL, ANN-MARIE	ACCOUNTING MANAGER	CL	84,107.00		24,323.44	108,430.44	1800	60.24	7/1/2004
GABEL, ANN-MARIE	DIRECTOR FISCAL AFFAIRS	CL	89,848.00		25,514.82	115,362.82	1800	64.09	12/15/2005
GISKA, MARY LOU	DIRECTOR HEALTH SERVICES	CE	72,432.04		14,027.12	86,459.16	1800	48.03	
GOMBER, LISA	ADMINISTRATIVE ASSISTANT	CL	56,588.16		23,043.03	79,631.19	1800	44.24	
GUYTON, JEAN	MANAGER APPLICATION SUPPORT	CL	108,711.00	*	28,830.43	137,541.43	1800	76.41	
HANNON, ANDREA	DIV DEAN HEALTH SERVICES	CE	112,506.00		24,078.74	136,584.74	1800	75.88	
HARTER, RENIE	MANAGER CAMPUS ACCOUNTING	CL	84,645.00		28,744.61	113,389.61	1800	62.99	
HATCHETT, DONNA	DIST DIR PUBLIC AFFAIRS	CL	112,506.00	*	33,086.04	145,592.04	1800	80.88	
HEBSON, CHRIS	IT SPECIALIST SYS APPLICATION	CL	69,436.08		26,940.38	96,376.46	1800	53.54	7/1/2004
HEBSON, CHRIS	IT SPECIALIST SYS APPLICATION	CL	72,424.08		27,769.61	100,193.69	1800	55.66	6/1/2005
HENDERSON, WILFORD	SAFETY SPECIALIST	CL	61,162.20		23,809.54	84,971.74	1800	47.21	
HENRY, DIANE	DIVISION DEAN PHYSICAL ED	CE	112,506.00		24,078.74	136,584.74	1800	75.88	
HERRERA, ALEX	INSTRUCTOR	CE	72,486.00		16,377.91	88,863.91	1800	49.37	
HITCHCOCK, REGINA	COMPUTER LAB ASSISTANT	CL	41,550.12		18,869.67	60,419.79	1800	33.57	
HORSLEY, JEFFREY	VICE CHANCELLOR HR	CE	162,080.00	**	25,741.26	187,821.26	1800	104.35	
HUNTER, JEROME	CHANCELLOR	CE	185,846.00	**	34,362.07	220,208.07	1800	122.34	
JAY, PAULA	ADMINISTRATIVE ASSISTANT	CL	47,910.12		23,546.80	71,456.92	1800	39.70	
KASLER, MIKE	EXECUTIVE VICE PRESIDENT	CE	125,696.72	**	27,018.99	152,715.71	1800	84.84	
LATIEF, LINA	ACCOUNTING SPECIALIST	CL	47,198.04		23,423.16	70,621.20	1800	39.23	7/1/2004
LATIEF, LINA	ACCOUNTING SPECIALIST	CL	49,538.04		24,072.56	73,610.60	1800	40.89	3/1/2005
LEE, PAT	DISTRICT MANAGER PAYROLL	CL	75,414.00		26,902.97	102,316.97	1800	56.84	
LEWIS, MARGORIE	PRESIDENT CYPRESS COLLEGE	CE	162,080.00	**	30,213.80	192,293.80	1800	106.83	
LEYSON, ELIZABETH	DEAN HUMANITIES	CE	114,498.01		24,871.71	139,369.72	1800	77.43	7/1/2004
LEYSON, ELIZABETH	INTERIM EXEC VP	CE	123,096.75		25,976.65	149,073.40	1800	82.82	11/10/2004
LUDFORD, DEBORAH R.	DEAN BUSINESS & CIS	CE	108,179.00		22,543.88	130,722.88	1800	72.62	
LUSCH, ROD	SKILLED MAINTENANCE MECHANIC	CL	57,588.00		23,320.50	80,908.50	1800	44.95	
McALPIN, KENNETH	MANAGER MAINTENANCE & OPS	CL	59,659.00		20,416.78	80,075.78	1800	44.49	
MCCLOUD, EDWARD	INSTRUCTOR	CE	81,230.00		17,501.52	98,731.52	1800	54.85	
MCGUIRE, GARY	PROVOST	CE	154,845.00	**	27,851.24	182,696.24	1800	101.50	
MELELLA, LAURA	INSTRUCTOR	CE	76,856.00		20,075.06	96,931.06	1800	53.85	
MIRANDA, ALBERT	DIRECTOR PHYSICAL PLANT/FACILITIES	CL	97,094.00		27,911.00	125,005.00	1800	69.45	
MIRANDA, BOB	DIRECTOR FINANCIAL AIDE	CL	90,793.00	*	26,844.56	117,637.56	1800	65.35	
MONTANO, DIANE	MANAGER CHILD CARE	CL	64,992.00		21,754.12	86,746.12	1800	48.19	
MOORE, MIKE	INSTRUCTOR	CE	85,601.00		21,198.79	106,799.79	1800	59.33	
MOORE, SALLY	INSTRUCTOR	CE PAID CL	72,486.00		30,367.09	102,853.09	1800	57.14	
NADELL, ROBERT	DEAN COUNSELING/STUDENT DEV	CE	115,106.00		21,239.54	136,345.54	1800	75.75	
NELSON, JANICE	BUSINESS OFFICE SPECIALIST	CL	52,578.12		23,458.90	76,037.02	1800	42.24	
NICCOLAI, NILO	DIRECTOR ACAD. COMP TECHNL	CE	110,111.00		25,402.32	135,513.32	1800	75.29	
NOVISOFF, ANNA	ADMINISTRATIVE ASSISTANT	CL	55,087.00		22,651.37	77,738.37	1800	43.19	
O'CONNOR, ADAM	DIRECTOR BUDGET/FINANCE	CL	112,906.00	*	30,211.96	143,117.96	1800	79.51	
PALMER, SANDRA	EXECUTIVE ASSISTANT	CONFIDENT	59,772.00		24,233.61	84,005.61	1800	46.67	
PARISI, TOM	DEAN INSTRUCTION ADULT ED	CE	112,506.00		25,636.10	138,142.10	1800	76.75	
PEREZ, JENNIFER	PUBLIC INFORMATION OFFICER	CL	53,510.00		19,747.28	73,257.28	1800	40.70	

PEREZ, RICK	COUN/STDET DEV DEAN	CE	115,106.00		19,510.72	134,616.72	1800	74.79	
PFEIFFER, JODY	ADMINISTRATIVE ASSISTANT	CL	20,966.04		12,313.02	33,279.06	1800	18.49	
PHILLIPS, JIM	INSTRUCTOR	CE	90,824.00		18,653.22	109,477.22	1800	60.82	
PORTOLAN, JANET	VP EDUC SUPPORT/PLAN	CE	120,099.00		21,808.75	141,907.75	1800	78.84	
POSNER, MARC	PUBLIC INFORMATION OFFICER	CL	55,657.00		22,803.00	78,460.00	1800	43.59	
RAMIREZ, JORGE	DEAN STDT SERVICES	CE	100,017.00		21,450.96	121,467.96	1800	67.48	
RAMIREZ, RICHARD	DEAN STDT SUPP SVCS	CE PAID CL	115,106.00	*	21,569.99	136,675.99	1800	75.93	7/1/2004
RAMIREZ, RICHARD	INTERIM VP STUDENT SERVICES	CE PAID CL	120,099.00	*	21,829.63	141,928.63	1800	78.85	4/1/2005
RAUBOLT, JACK	DIST DIR INFO SERVICES	CL	116,603.00	*	30,519.31	147,122.31	1800	81.73	
REHA, DELORES	INSTRUCTOR	CE	85,601.00		18,588.61	104,189.61	1800	57.88	
RODGERS, CAROLANNE	INSTRUCTOR	CE PAID CL	87,787.00		31,426.11	119,213.11	1800	66.23	
SANBORN, JACKIE	ADMINISTRATIVE ASSISTANT	CL	61,738.20		26,015.89	87,754.09	1800	48.75	
SCHULTZ, GREG	COORDINATOR ADMINISTRATIVE SERV	CL	77,773.00		24,429.40	102,202.40	1800	56.78	7/1/2004
SCHULTZ, GREG	INTERIM DIRECTOR FISCAL AFFAIRS	CL	83,003.00		25,514.73	108,517.73	1800	60.29	4/1/2005
SIMPSON, BOB	DEAN MATH AND COMP SCIENCE	CE	115,106.00		24,375.14	139,481.14	1800	77.49	
SMEAD, RICHARD	INSTRUCTOR	CE	70,300.00		19,232.61	89,532.61	1800	49.74	
SMITH, FRANK	DIRECTOR ACAD. COMP TECHNL	CE	95,978.00		20,369.51	116,347.51	1800	64.64	
SMITH, SHIRLEY	DIRECTOR PUBLIC SAFETY	CL	59,659.00		20,416.78	80,075.78	1800	44.49	
SOTO, ABEL	ADMISSIONS AND RECORDS TECH	CL	52,820.16		21,997.33	74,817.49	1800	41.57	
SPENCER, NORA	INSTRUCTOR	CE	72,486.00		12,980.05	85,466.05	1800	47.48	
ST JOHN, PAUL	INSTRUCTOR	CE	74,671.00		19,720.30	94,391.30	1800	52.44	
TAYLOR, CHRIS	IT SPECIALIST SYS APPLICATION	CL	70,136.16		23,255.49	93,391.65	1800	51.88	
TERRY, CHRISTINE	DEAN INSTR/STUDENT SERVICES	CE	112,506.00		21,468.56	133,974.56	1800	74.43	
TESAR, DAN	DEAN SOCIAL SCIENCES	CE	112,506.00		23,099.90	135,605.90	1800	75.34	
THOMAS, CONNIE	EXECUTIVE ASSISTANT	CONFIDENT	64,215.84		28,452.94	92,668.78	1800	51.48	
TYRRELL, DONALD	COUNSELOR BUSINESS ED	CE	94,407.00		22,330.36	116,737.36	1800	64.85	
VYSKOCIL, CINDY	DIRECTOR EQUITY AND DIVERSITY	CE	89,765.00		19,571.14	109,336.14	1800	60.74	
WALLACE, TOM	MANAGER TECHNICAL SUPPORT	CL	107,511.00	*	29,196.24	136,707.24	1800	75.95	
WASSENAAR, DAVE	DEAN ADMISSION/RECORDS	CE	112,506.00		25,710.08	138,216.08	1800	76.79	
WHITEHURST, DOROTHY	DISTRICT DIRECTOR PURCHASING	CL	100,825.00	*	28,304.41	129,129.41	1800	71.74	
WICKS, LORRAINE	MANAGER SCE SENIORS PROGRAM	CE	91,193.00		22,971.36	114,164.36	1800	63.42	
WILLIAMS, FRED	DISTRICT DIRECTOR FISCAL AFFAIRS	CL	138,548.00	*/**	33,147.16	171,695.16	1800	95.39	
WILSON, MARCUS	INSTRUCTOR	CE	84,268.00		18,417.32	102,685.32	1800	57.05	
YOUNG, ELDON	DEAN, LANGUAGE ARTS/LIBRARY	CE	112,506.00		25,636.18	138,142.18	1800	76.75	
ZANDY, BEN	INSTRUCTOR	CE	87,787.00		17,596.60	105,383.60	1800	58.55	

**Includes car allowance
Retirement not calculated on allowance

* Social Security
Wage Base $87900 (1/1/04)
Wage Base $90000 (1/1/05)
Used average of $88950
If Annual Salary of employee covered by Social Security over $88950-Multiply 6.2% times excess and deducted this amount from total benefits

North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	Not provided by	$ 5,057,532	$ 5,128,876	$ 5,126,940	$ 7,598,920	$ 10,757,786
p/E.C. 76300 (c)	2% of Revenue Rec'd.	Client	$ 101,151	$ 102,578	$ 102,539	$ 151,978	$ 215,156
This data is for comparison with CCCCO 2% calculation ~~directly~~ below							
1.8-4 line 4A	Enrollment Fees Waived	$ 3,110,245	$ 3,176,990	$ 1,922,055	$ 2,504,265	$ 3,820,034	$ 6,359,607
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 217,717					
				For 00-01 through 04-05 - unit fee			
1.8-4 line 5	~~Summer~~ Fall			90,175	98,661	95,215	110,382
	~~Fall~~ Spring			98,476	95,586	96,382	110,925
	~~Winter/Interssion~~						
	~~Spring~~ Summer			15,952	13,488	17,086	18,034
	Total # of credits		288,818	204,603	207,735	208,683	239,341
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 217,717					
1.8-4 5	Credit Units Waived		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 279,922**	**$ 326,364**	**$ 224,630**	**$ 239,124**	**$ 266,303**	**$ 344,992**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: North Orange County
COUNTY: Orange

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$52,324,675	$50,726,580	$-3,045,119	$47,681,461
ENROLL FEE ADMIN (2%)	115,845	99,627	16,218	115,845
APPRENTICE ALLOWANCE	19,226	16,518	2,708	19,226
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	5,966,536	5,131,221	835,315	5,966,536
S.F.A.A.	1,006,374	875,801	130,573	1,006,374
E.O.P.S.	1,990,771	1,710,684	280,087	1,990,771
C.A.R.E.	271,923	233,853	38,070	271,923
D.S.P.S.	1,956,601	1,674,451	282,150	1,956,601
STATE HOSPITALS	0	0	0	0
CALWORKS	598,082	514,351	83,731	598,082
MATRICULATION (CREDIT)	1,053,628	897,520	156,108	1,053,628
MATRIC. (NONCREDIT)	1,123,191	965,944	157,247	1,123,191
FAC. & STAFF DIVERSITY	30,817	21,905	8,912	30,817
PART-TIME FACULTY INS.	8,996	0	8,996	8,996
PART-TIME FACULTY OFFIC	668,505	0	668,505	668,505
PART-TIME FACULTY ALLOC	1,561,487	1,342,879	218,608	1,561,487
BLOCK GRANT (ONE-TIME)	708,590	609,387	99,203	708,590
ECON. DEVELOPMENT	1,441,268	1,166,913	43,752	1,210,665
TELECOMMUNICATIONS	122,612	63,119	59,493	122,612
TANF	140,259	120,623	19,636	140,259
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	103,200	26,832	59,856	86,688
VTEA TITLE I C	802,258	156,440	517,457	673,897
PLANT & INSTRUCTIONAL	794,795	683,524	111,271	794,795
PRIOR YEAR CORRECTION	-1,072,035	-1,096,956	24,921	-1,072,035
TOTAL	$71,737,604	$65,941,216	$777,698	$66,718,914

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch 5A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

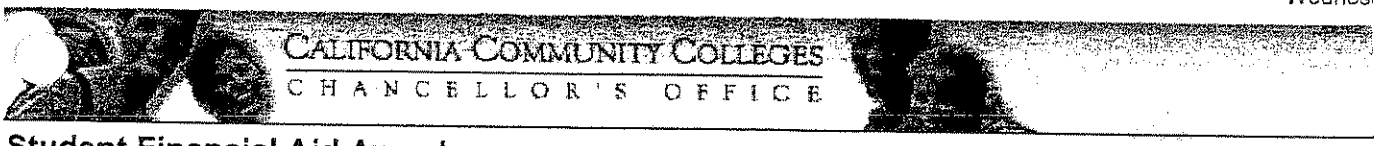
Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ -	$ -	$ -	$ -	$ -	$ -
2	Staff Training	(04)(B)(1)(b)	$ 251.20	$ 253.20	$ 277.44	$ 316.96	$ 306.40	$ 332.96
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ -	$ -	$ -	$ -	$ -	$ -
4	Waiving student fees	(04)(B)(2)(b)	$ 120,363.31	$ 150,225.40	$ 285,123.46	$ 267,027.01	$ 326,671.60	$ 331,116.92
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,260.80	$ 2,278.80	$ 2,496.96	$ 2,852.64	$ 2,757.60	$ 2,996.64
6	EFCW - Fee Waiver Costs	Total	$ 122,875.31	$ 152,757.40	$ 287,897.86	$ 270,196.61	$ 329,735.60	$ 334,446.52
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 279,922.00	$ 326,364.00	$ 224,630.00	$ 239,124.00	$ 266,303.00	$ 344,992.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (157,046.69)	$ (173,606.60)	$ 63,267.86	$ 31,072.61	$ 63,432.60	$ (10,545.48)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 122,875.31**	**$ 152,757.40**	**$ 224,630.00**	**$ 239,124.00**	**$ 266,303.00**	**$ 334,446.52**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Wednes



Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:20:07

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	160	65,157
BOGW - Part B based on income standards	3,862	1,527,347
BOGW - Part C based on financial need	2,672	1,259,421

Total Unduplicated Count = 6,584
Total Amount = $ 2,851,925

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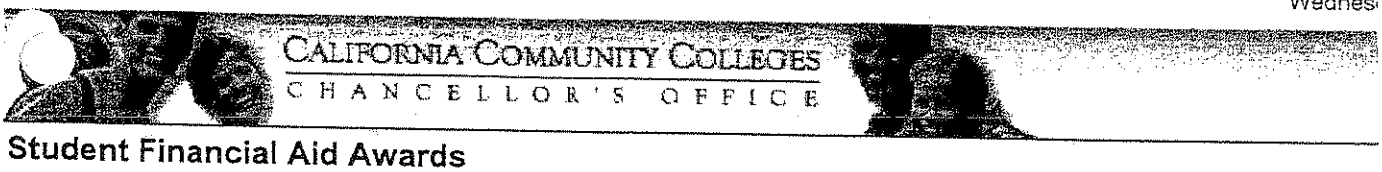
California Home

Wednes



Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 12, 2006 11:21:42

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	139	51,010
BOGW - Part B based on income standards	3,911	1,564,779
BOGW - Part C based on financial need	3,681	1,891,893

Total Unduplicated Count = 7,637
Total Amount = $ 3,507,682

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 16, 2007

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
North Orange County Community College District CC30105

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for North Orange County Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
1/84	Health Fee Elimination	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Dot Branwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC30105

(02) Claimant Name: North Orange County Community College District

County of Location: Orange

Street Address or P.O. Box: 1830 West Romneya Drive

City: Anaheim | State: CA | Zip Code: 92801-1819

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 1,481,200	(13) $ 1,346,634
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,346,634
Due from State	(08) $ 1,481,200	(17) $ 1,346,634
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	67
(23) EFCW-1, (04)(A)(1)(b)(f)	4,048
(24) EFCW-1, (04)(A)(2)(a)(f)	826,195
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	380
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	466,102
(29) EFCW-1, (04)(B)(2)(c)(f)	3,416
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	507,081
(32) EFCW-1, (09)	118,851
(33) EFCW-1, (10)	341,804
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) Date

Claudette Dain
Type or Print Name

1/10/07

District Director, Fiscal Affairs
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: North Orange County Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 67.46	$ -	$ -	$ -	$ -	$ 67.46
b. Staff training (One time per employee)	$ 4,047.60	$ -	$ -	$ -	$ -	$ 4,047.60
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 826,195.47	$ -	$ -	$ -	$ -	$ 826,195.47
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 379.52	$ -	$ -	$ -	$ -	$ 379.52
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 466,102.48	$ -	$ -	$ -	$ -	$ 466,102.48
c. Reporting BOG fee waiver data to CCC	$ 3,415.68	$ -	$ -	$ -	$ -	$ 3,415.68
05) Total Direct Costs	$ 1,300,208.21	$ -	$ -	$ -	$ -	$ 1,300,208.21

ndirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	39.00%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 507,081.20
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,807,289.41
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 118,851.00
10) Enrollment Fee Waiver offsets		$ 341,804.00
11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,346,634.41

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Orange County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Harter, Renie Bursar	$67.46	1.0	$ 67.46				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 67.46	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Orange County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Harter, Renie Bursar	$67.46	60.0	$ 4,047.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 4,047.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant
Orange County Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
Various Staff I	Collecting Enrollment Fees	$29.78	6,975.5	$ 207,730.39				
Calculating total enrollment fee to be collected								
Various Staff I	Collecting Enrollment Fees	$29.78	5,490.4	$ 163,504.11				
Answering student's questions regarding enrollment fee collection								
Various Staff I	Collecting Enrollment Fees	$29.78	7,492.2	$ 223,117.72				
ng written and computer records for enrollment fee information								
Various Staff I	Collecting Enrollment Fees	$29.78	7,363.0	$ 219,270.14				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies								
Various Staff I	Collecting Enrollment Fees	$29.78	38.8	$ 1,155.46				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
Various Staff I	Collecting Enrollment Fees	$29.78	383.4	$ 11,417.65				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 826,195.47	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Orange County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Larson, Nancy Coordinator	$47.44	8.0	$ 379.52				
(05) Total ☒ Subtotal ☐ Page 1 of 1			$ 379.52	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Orange County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Staff II — Waiving Enrollment Fees	$29.91	2,324.1	$ 69,513.83				
Receiving waiver applications							
Various Staff II — Waiving Enrollment Fees	$29.91	3,486.1	$ 104,269.25				
Evaluating waiver applications and verifying application documents							
Various Staff II — Waiving Enrollment Fees	$29.91	4,191.7	$ 125,373.75				
ing students of additional documentation requirements and how to obtain information							
Various Staff II — Waiving Enrollment Fees	$29.91	333.3	$ 9,969.00				
Entering approved application information into district records; providing student award letter							
Various Staff II — Waiving Enrollment Fees	$29.91	4,766.9	$ 142,577.98				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Staff II — Waiving Enrollment Fees	$29.91	481.4	$ 14,398.67				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 466,102.48	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Orange County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Larson, Nancy Coordinator	$47.44	72.0	$ 3,415.68				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 3,415.68	$ -	$ -	$ -	$ -

New 04/06

North Orange County Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1.00	Harter, Renie	Bursar	$67.46	$67.46	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures fo
05-06	60.00	Harter, Renie	Bursar	$67.46	$4,047.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	61.00	**Harter, Renie Total**			$4,115.06		
05-06	8.00	Larson, Nancy	Coordinator	$47.44	$379.52	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	72.00	Larson, Nancy	Coordinator	$47.44	$3,415.68	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	80.00	**Larson, Nancy Total**			$3,795.20		
05-06	6,975.50	Various Staff I	Collecting Enrollment Fees	$29.78	$207,730.39	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	5,490.40	Various Staff I	Collecting Enrollment Fees	$29.78	$163,504.11	Calculating total enrollment fee to be collected	Calculating and collecting enrollmen
05-06	7,492.20	Various Staff I	Collecting Enrollment Fees	$29.78	$223,117.72	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	7,363.00	Various Staff I	Collecting Enrollment Fees	$29.78	$219,270.14	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	38.80	Various Staff I	Collecting Enrollment Fees	$29.78	$1,155.46	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	383.40	Various Staff I	Collecting Enrollment Fees	$29.78	$11,417.65	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	27,743.30	**Various Staff I Total**			$826,195.47		
05-06	2,324.10	Various Staff II	Waiving Enrollment Fees	$29.91	$69,513.83	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	3,486.10	Various Staff II	Waiving Enrollment Fees	$29.91	$104,269.25	Receiving waiver applications	Waiving student fees
05-06	4,191.70	Various Staff II	Waiving Enrollment Fees	$29.91	$125,373.75	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	333.30	Various Staff II	Waiving Enrollment Fees	$29.91	$9,969.00	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	4,766.90	Various Staff II	Waiving Enrollment Fees	$29.91	$142,577.98	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	481.40	Various Staff II	Waiving Enrollment Fees	$29.91	$14,398.67	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	15,583.50	**Various Staff II Total**			$466,102.48		
	43,467.80	**Grand Total**			$1,300,208.21		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: August 8, 2002

INSTITUTION:
North Orange County Community College District
1000 North Lemon Street

FILING REF.: The preceding Agreement was dated June 9, 1998

Fullerton CA 92634

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/02	06/30/06	39.0	On-Campus	All Programs
PROV.	07/01/06	06/30/07	39.0	On-Campus	All Programs

*BASE:
Direct salaries and wages including vacation, holiday, sick pay and other paid absences but excluding all other fringe benefits.

U70205

Schedule 1A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	77,505
Avg. time p/account	5.4
Total Time (in minutes)	418527
Per Hour	60
Hours Worked **(** Activity 11)**	**6975.5**
***EFC 2**	63,351
Avg. time p/student	5.2
Total Time (in minutes)	329425
Per Hour	60
Hours Worked **(** Activity 12)**	**5490.4**
***EFC 1**	77,505
Avg. time p/question	5.8
Total Time (in minutes)	449529
Per Hour	60
Hours Worked **(** Activity 13)**	**7492.2**
***EFC 1**	77,505
Avg. time p/file	5.7
Total Time (in minutes)	441779
Per Hour	60
Hours Worked **(** Activity 14)**	**7363.0**
***EFC 4**	423
Avg. time p/account	5.5
Total Time (in minutes)	2327
Per Hour	60
Hours Worked **(** Activity 15)**	**38.8**
***EFC 5**	4,260
Avg. time p/student	5.4
Total Time (in minutes)	23004
Per Hour	60
Hours Worked **(** Activity 16)**	**383.4**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	24,901
Avg. time p/question	5.6
Total Time (in minutes)	139446
Per Hour	60
Hours Worked **(** Activity 21)**	**2324.1**
***EFW 6**	24,901
Avg. time p/application	8.4
Total Time (in minutes)	209168
Per Hour	60
Hours Worked **(** Activity 22)**	**3486.1**
***EFW 6**	24,901
Avg. time p/evaluation	10.1
Total Time (in minutes)	251500
Per Hour	60
Hours Worked **(** Activity 23)**	**4191.7**
***EFW 8**	2,020
Avg. time p/application	9.9
Total Time (in minutes)	19998
Per Hour	60
Hours Worked **(** Activity 24)**	**333.3**
***EFW 7**	22,881
Avg. time p/application	12.5
Total Time (in minutes)	286013
Per Hour	60
Hours Worked **(** Activity 25)**	**4766.9**
***EFW 8**	2,020
Avg. time p/application	14.3
Total Time (in minutes)	28886
Per Hour	60
Hours Worked **(** Activity 26)**	**481.4**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 and Schedule 2A.
Findings:

		*EFC Workload Multiplier					
		1	2	1	4	5	
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Adams, Jessica	CC-FADept.-Clerical Assistant I	5.0					
Aguirre, Maria	FC-FADept.-Financial Technician/VA	10.0	10.0	15.0	10.0		
Alcaraz, Jose	FC-FADept.-Financial Aid Technician	1.0	5.0	5.0	3.0		
Allen-Courtney, Akilah	CC-A&R-Records Lead Specialist	15.0	5.0	5.0	38.0		
Almaraz, Arturo	CC-A&R-Clerical Assistant - 40%	3.0	3.0	1.0	2.0		
Alton, Meg	CC-A&R-Technician	1.0	2.0	2.0	1.0		
Aure, R. Allan	FC-A&R-Technician	7.0	3.0	5.0	2.0	5.0	3.0
Bassler, Jennifer	FC-A&R-Hourly Support Staff	5.0	5.0	8.0	5.0	10.0	9.0
Beard, Claudia	FC-Bursar's Office-Account Clerk II			8.0		6.0	5.0
Bustos, Raymond	FC-FADept.-VA Coordinator	4.0	4.0	3.0	4.0		
Calderon-Teneza, Roselle	CC-FADept.-Financial Aid Technician	15.0	15.0	10.0	10.0		
Carter, Patricia	CC-Bursar's Office-Account Technician	4.0	3.0	2.0	2.0	3.0	4.0
Chang, David	CC-A&R-Evaluator	2.0	2.0	2.0	2.0		
Clark, Antionese	CC-A&R-Admissions Lead Specialist	2.0	3.0	4.0	4.0		
Cobb, Keith	CC-FADept.-Director, Financial Aid	12.0		6.0	15.0		12.0
Cruz, Carrie	FC-FADept.-Clerical Assistant	5.0	1.0	5.0	5.0		
Dean, Brian	CC-A&R-Technician	5.0	5.0	5.0	5.0		
Dillon, Andrew	FC-A&R-Hourly Support Staff	3.0	2.0	5.0	2.0	3.0	2.0
Do, Field	FC-A&R-Evaluator	4.0	4.0	3.0	3.0	2.0	2.0
Ealy, Sara	FC-A&R-Hourly Office Clerk	2.0	2.0	1.0	1.0	1.0	2.0
Edwards, Arnette	CC-FADept.-Financial Aid Specialist	15.0	15.0	15.0	15.0		
Felix, Ana	FC-A&R-Specialist	5.0	5.0	5.0	3.0	5.0	5.0
Filippi, Geovani	CC-A&R-Hourly Student	1.0	1.0	6.0	2.0		
Fitzgerald, Colleen	FC-A&R-Technician	5.0	5.0	5.0	3.0	5.0	5.0
Fond, Regina	CC-A&R-Registrar	5.0	1.0	20.0	1.0		
Foster, Patricia	FC-A&R-Office Coordinator	3.0	3.0	5.0	2.0	1.0	1.0
Funaoka, Lisa	FC-A&R-Technician	2.0	5.0	4.0	3.0	5.0	3.0
Giles, Ernice	CC-A&R-Evaluator	10.0	10.0	10.0	10.0		
Guzman, Elizabeth	FC-A&R-Technician	5.0	5.0	6.0	5.0	5.0	7.0
Ha, Jackie	CC-FADept.-FAS	15.0	15.0	10.0	10.0		
Harter, Renie	CC-Bursar's Office-Manager, Campus Accounting	2.0	4.0		3.0	8.0	5.0
Henry, Kevin	CC-Bursar's Office-Cashier/Registration Clerk	1.0	4.0	2.0	3.0	2.0	1.0
Kanaan, Jihad (Jay)	CC-Bursar's Office-Account Technician	5.0	7.0	4.0	4.0	20.0	9.0
Lam, Tina	FC-FADept.-Financial Aid Technician	7.5	10.0	5.0	10.0		
Larson, Nancy	FC-FADept.-Coordinator	5.0	10.0	10.0	15.0		
Ledezma, Stephen	FC-A&R-Hourly	1.0	2.0	1.0	3.0	1.0	1.0
Leopold, Maureen	CC-Bursar's Office-Accounting Specialist	4.0	7.0	4.0	3.0	10.0	10.0
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk	5.0	4.0	4.0	3.0	5.0	3.0
Maertens, Tina	CC-A&R-Clerical Assistant 1	2.5	3.0	3.0	3.0		
Mahoney, Leslie	FC-Bursar's Office-Account Clerk II	1.0		1.0		3.0	2.0
Martinez, Debres	FC-A&R-Technician	6.0	5.0	5.0	5.0	5.0	7.0
Martinez, Monica	FC-A&R-Hourly Clerk (Transcripts)	2.0	2.0	5.0	2.0	1.0	
Meinert, Sarah	CC-Bursar's Office-Hourly Registration	6.0	8.0	10.0	9.0	8.0	10.0
Menchaca, Jesus	FC-A&R-Hourly Clerk	4.0	2.0	3.0	2.0	2.0	3.0
Miller, John	FC-Bursar's Office-Accounting Technician			1.0		5.0	7.0
Montenegro, Christy	CC-A&R-Technician	2.0	4.0	7.5	3.5		
Morales, Lisa	CC-Bursar's Office-Account Technician	6.0	7.0	5.0	5.0	30.0	8.0
Mosley, Amelia	CC-A&R-Clerical Assistant	4.0	5.0	4.0	4.0		
Negrete, Rena	FC-A&R-Technician	6.0	5.0	3.0	5.0	5.0	3.0
Neri, Auria	CC-A&R-Hourly Student	1.0	3.0	4.0	3.0		
Nguyen, Tuan Dustin	CC-A&R-Admissions Lead Specialist	10.0	5.0	5.0	30.0		
Oropeza, Elaine	FC-FADept.-Financial Aid Technician	10.0	10.0	15.0	10.0		
Patakas, John	FC-A&R-Technician	5.0	4.0	3.0	4.0	2.0	2.0
Patterson, Kandi	FC-A&R-Evaluator	5.0	5.0	5.0	5.0	5.0	5.0

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-05
Time Study

Staff	Title	**Activity Codes					
		11	12	13	14	15	16
Quan, Linh	FC-Bursar's Office-Accounting Specialist	3.0		3.0			5.0
Ramos, Amanda	CC-A&R-Clerical Assistant I	3.0	4.5	2.0	3.0		
Reyes, Elizabeth	CC-A&R-Hourly Student	2.0	2.0	1.0	2.0		
Reza, Alan	CC-FADept.-Financial Aid Technician	30.0	15.0	30.0	15.0		25.0
Rodriguez, Daisy	CC-Bursar's Office-Hourly Registration	5.0	8.0	8.0	5.0	8.0	10.0
Salcedo, Daniel	FC-FADept.-Clerical Assistant I	2.0	3.0	2.0	3.0		
Sandoval, Rebeca	CC-FADept.-Financial Aid	13.5	5.0	15.0	7.0	3.0	7.0
Schwiebert, Laurie	FC-FADept.-Administrative Asst. I	5.0	1.0	1.0	2.0		
Shrack, Amy	FC-A&R-Administrative Asst. II	2.0	4.0	3.0	1.0	4.0	3.0
Smith, Audrey	FC-A&R-Specialist	2.0	1.0	3.0	1.0	5.0	4.0
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	3.0	7.5	4.0	4.5	1.0	4.0
Taylor, Toniesha	CC-A&R-Evaluator	2.0	5.0	7.5	2.0		
Tran, Kimberly	CC-FADept.-Financial Aid Technician	20.0	15.0	15.0	15.0		
Truong, Duong	CC-A&R-Clerical Assistant	1.0	2.0	3.0	2.0		
Truong, Phuc	CC-A&R-Hourly Student	3.0	3.0	2.0	3.0		
Tushla, Nicol	FC-A&R-Evaluator	2.0	2.0	5.0	1.0	3.0	2.0
Villegas, Fatima	FC-FADept.-Clerical Assistant	1.0	5.0	5.0	5.0		
Average		**5.4**	**5.2**	**5.8**	**5.7**	**5.5**	**5.4**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 to 2005-2006
EFC Multipliers

Purpose: To determine most common multiplier used by client.
Source: EFCW 1.7-2's.
Findings:

Staff	Title	Activity Code					
		11	12	13	14	15	16
Allen-Courtney, Akilah	CC-A&R-Records Lead Specialist	1	1	1	1		
Almaraz, Arturo	CC-A&R-Clerical Assistant - 40%	1	1	1	1		
Alton, Meg	CC-A&R-Technician	1	1	1	1		
Beard, Claudia	FC-Bursar's Office-Account Clerk II			1		4	5
Carter, Patricia	CC-Bursar's Office-Account Technician	1	1		1		
Chang, David	CC-A&R-Evaluator	1	1	1	1		
Clark, Antionese	CC-A&R-Admissions Lead Specialist	1	1	1	1		
Dean, Brian	CC-A&R-Technician	1	1	1	1		
Do, Field	FC-A&R-Evaluator	4	4	3	3	2	2
Filippi, Geovani	CC-A&R-Hourly Student	1	1	1	1		
Fond, Regina	CC-A&R-Registrar	1	1	1	1		
Giles, Ernice	CC-A&R-Evaluator	1	1	1	1		
Harter, Renie	CC-Bursar's Office-Manager, Campus Accounting	1	1		1	4	5
Henry, Kevin	CC-Bursar's Office-Cashier/Registration Clerk	1	1		1	4	5
Kanaan, Jihad (Jay)	CC-Bursar's Office-Account Technician	1	1		1	4	5
Leopold, Maureen	CC-Bursar's Office-Accounting Specialist	1	1		1	4	5
Maertens, Tina	CC-A&R-Clerical Assistant 1	1	1	1	1		
Mahoney, Leslie	FC-Bursar's Office-Account Clerk II	1		1		4	5
Meinert, Sarah	CC-Bursar's Office-Hourly Registration	1	1		1	4	5
Miller, John	FC-Bursar's Office-Accounting Technician			1		4	5
Montenegro, Christy	CC-A&R-Technician	1	1	1	1		
Morales, Lisa	CC-Bursar's Office-Account Technician	1	1		1	4	5
Mosley, Amelia	CC-A&R-Clerical Assistant	1	1	1	1		
Neri, Auria	CC-A&R-Hourly Student	1	1	1	1		
Nguyen, Tuan Dustin	CC-A&R-Admissions Lead Specialist	1	1	1	1		
Quan, Linh	FC-Bursar's Office-Accounting Specialist	1		1			5
Ramos, Amanda	CC-A&R-Clerical Assistant I	1	1	1	1		
Reyes, Elizabeth	CC-A&R-Hourly Student	1	1	1	1		
Rodriguez, Daisy	CC-Bursar's Office-Hourly Registration	1	1		1	4	5
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	2	4	3	3	5	5
Taylor, Toniesha	CC-A&R-Evaluator	1	1	1	1		
Truong, Duong	CC-A&R-Clerical Assistant	1	1	1	1		
Truong, Phuc	CC-A&R-Hourly Student	1	1	1	1		
Multiplier used the most per Activity Code as provided by client		**1**	**1**	**1**	**1**	**4**	**5**
SixTen default multipliers		**1**	**2**	**1**	**1**	**4**	**5**

OK to use multipliers provided by client except for Code 12 - need to use default EFC 2.

Conclusion: Findings go forward to schedule 2.

Schedule 3
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Adams, Jessica	CC-Clerical Assistant I	2.0					
Aguirre, Maria	FC-Financial Aid Technician	10.0	15.0	15.0	15.0	20.0	30.0
Alcaraz, Jose	FC-Financial Aid Technician	2.0	1.0	1.0	5.0	5.0	15.0
Aure, R. Allan	FC-A&R-Technician	2.0					
Bassler, Jennifer	FC-A&R-Hourly Staff Support	5.0					
Bustos, Raymond	FC-VA Coordinator	4.0	5.0	3.0	5.0	5.0	4.0
Calderon-Teneza, Roselle	CC-Financial Aid Technician	5.0	10.0	15.0	15.0	20.0	20.0
Caro, Barbara	FC-A&R-Admissions Technician	3.0					
Cobb, Keith	CC-Director, Financial Aid	15.0	15.0	15.0			15.0
Cruz, Carrie	FC-Clerical Assistant	5.0	1.0	3.0	2.0	5.0	2.0
Dillon, Andrew	FC-A&R-Hourly Staff Support	1.0	2.0	3.0	1.0	2.0	
Do, Field	FC-A&R-Evaluator	2.0					
Ealy, Sara	FC-A&R-Hourly Office Clerk	2.0					
Edwards, Arnette	CC-Financial Aid Specialist	15.0	15.0	15.0	15.0	20.0	20.0
Felix, Ana	FC-A&R-Specialist	5.0					
Fitzgerald, Colleen	FC-A&R-Technician	3.0					
Foster, Patricia	FC-A&R-Office Coordinator	2.0					
Funaoka, Lisa	FC-A&R-Technician	1.0					
Guzman, Elizabeth	FC-A&R-Technician	5.0					
Ha, Jackie	CC-FAS	10.0	10.0	10.0	10.0	10.0	10.0
Lam, Tina	FC-Financial Aid Technician	5.0	5.0	5.0	5.0	10.0	20.0
Ledezma, Stephen	FC-A&R-Hourly	1.0					
Luviano, Elizabeth	FC-A&R-Hourly Office Clerk	3.0					
Martinez, Debres	FC-A&R-Technician	5.0					
Martinez, Monica	FC-A&R-Hourly Transcript Clerk	1.0					
Menchaca, Jesus	FC-A&R-Hourly Clerk	3.0					
Negrete, Rena	FC-A&R-Technician	3.0					
Oropeza, Elaine	FC-Financial Aid Technician	10.0	15.0	15.0	15.0	20.0	30.0
Patakas, John	FC-A&R-Technician	4.0					
Patterson, Kandi	FC-A&R-Evaluator	5.0					
Reza, Alan	CC-Financial Aid Technician	30.0	15.0	25.0	30.0	30.0	15.0
Salcedo, Daniel	FC-Clerical Assistant I	3.0	5.0	5.0	5.0	5.0	5.0
Sandoval, Rebeca	CC-Financial Aid	15.0	13.0	17.5	20.0	22.5	17.5
Schwiebert, Laurie	FC-Administrative Asst. I	1.0	1.0	2.0	1.0	4.0	5.0
Shrack, Amy	FC-A&R-Administrative Asst. II	3.0					
Smith, Audrey	FC-A&R-Specialist	4.0					
Sosoatu, Carolyn	FC-A&R-Hourly Office Clerk	5.0					
Tran, Kimberly	CC-Financial Aid Technician	15.0	10.0	15.0	10.0	15.0	10.0
Tushla, Nicol	FC-A&R-Evaluator	2.0					
Villegas, Fatima	FC-Clerical Assistant	5.0	5.0	7.0	5.0	7.0	10.0
Average		**5.6**	**8.4**	**10.1**	**9.9**	**12.5**	**14.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and excel spreadsheet from client.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	81,052	80,935	88,893	88,897	83,317	76,868	78,803	77,505
EFC 2	1.8-1	2.	Paid Enrollment fees	71,116	71,133	78,391	78,141	71,431	64,723	64,582	63,351
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	9,936	9,802	10,502	10,756	11,886	12,145	14,221	14,154
EFC 4	1.8-2	1.	Delinquencies collections	Client not able to provide. Pre-Banner Term.			47	262	377	402	423
EFC 5	1.8-2	2.	Refunds	Client not able to provide. Pre-Banner Term.			3,599	4,298	4,402	4,260	4,260
EFW 6	1.8-3	1.	Waivers Requested	X	9,802	10,502	18,832	17,683	20,762	22,058	24,901
EFW 7	1.8-3	2.	Waivers Approved	X -	9,802	10,502	18,014	16,785	18,539	20,806	22,881
EFW 8	1.8-3 (1-2)		Waivers Denied	X	0	0	818	898	2,223	1,252	2,020

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 6
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Student Headcount Summary

Purpose: To calculate student headcount.
Source: California Community Colleges Chancellor's Office website.
Findings:

College	Term	Headcount
Cypress	Fall	13,057
	Spring	12,400
	Summer	4,946
Fullerton	Fall	19,748
	Spring	18,734
	Summer	8,620
		77,505

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Fall Term

Data Current As Of November 16, 2006 11:21:06

Total Headcount	13,057

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2006 Spring Semester

Data Current As Of November 16, 2006 11:21:31

Total Headcount	12,400

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Summer Term

Data Current As Of November 16, 2006 11:20:49

Total Headcount	4,946

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton For 2005 Fall Term

Data Current As Of November 16, 2006 11:19:19

Total Headcount	19,748

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2006 Spring Semester

Data Current As Of November 16, 2006 11:20:24

Total Headcount	18,734

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2005 Summer Term

Data Current As Of November 16, 2006 11:19:04

Total Headcount	8,620

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: North Orange County CCD

Renie Harter — Employee Name

Bursar — Exact Position Title

Cypress — College/Department/Location

714-484-7316 — Telephone #

(12mo) 11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								1
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								60
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								61

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renie Harter — Date 10-9-06

If you have any questions, please contact Kashu Vyas, at 714-808-4725

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: North Orange County CCD

Nancy Larson — Coordinator
Employee Name — Exact Position Title

Fullerton / FAD — 714-992-7057 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								72
TOTALS:								80

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/9/07

If you have any questions, please contact Kashmir Vyas at 714-806-4725

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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DS/RO info - Sara? How long did it take you to fill out this form? 15 min

EFCW 1.7-2

RECEIVED
MAR 14 2006
NOCCCD
BUSINESS OFFICE

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

(I really didn't understand)

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid Cypress
Department/Location

Jessica Adams
Employee Name

Clerical Asst I
Exact Position Title

x47089
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	varies on question					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jessica Adams Date 3/8/06

If you have any questions, please contact _____, at _____

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Copy: original in 04-05 resources

Sept fill out 3 form's 10 min

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Maria G. Aguirre
Employee Name

Financial Technician/Veterans Asst.
Exact Position Title

714 992.7000 ext 25277
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria G. Aguirre Date 3.23.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Jose Alcaraz
Employee Name

Financial Aid Technician
Exact Position Title

27052
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer: STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/23/06

If you have any questions, please contact Jose Alcaraz, at 27052

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Akilah Allen-Courtney
Employee Name

Records Lead Specialist
Exact Position Title

(714)484-7433
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	38	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Akilah Allen Date 3/22/06

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Arturo Almaraz
Employee Name

XX Clerical Assistant-40%
Exact Position Title

XX 484-7410 - X (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02)
XX (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Meg Alton
Employee Name

XX Admissions and Records Technician
Exact Position Title

XX (714) 484-7349 XX (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Meg E. Alton XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714) 484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FULLERTON COLLEGE A&R
Department/Location

ALAN AURE
Employee Name

TECHNICIAN
Exact Position Title

714.992.7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records / Fullerton
Department/Location

Jennifer Bassler
Employee Name

Hourly Support Staff - ~~PO~~
Exact Position Title

714-992-7000 ext 28907
Telephone #

~~12mo~~/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jennifer Bassler Date 10 MAR, 2006

If you have any questions, please contact _____, at _____

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- [illegible] fill out this form ? [illegible] minutes

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC-Bursar's Office
Department/Location

Claudia Beard
Employee Name

Account Clerk II
Exact Position Title

(714) 992-2555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40%

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Claudia Beard Date 4-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Raymond Bustos
Employee Name

LA Coordinator
Exact Position Title

992 7055
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.		4				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.		4				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT		3				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.		4				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raymond M Bustos Date 3-23-06

If you have any questions, please contact _____, at _____

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05/06 mcat - SMR

How many ... fill out this form? 15

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FINANCIAL AID OFFICE - Cypress college - SMR — Department/Location

ROSELLE CALDERON-TENEZA — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

(714)484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/9/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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map - see 10 minutes to fill out form.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar - Cypress
Department/Location

Patricia Carter
Employee Name

Acct Tec
Exact Position Title

7144847314
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓			4 perday	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓		3 perday		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					5 perday (40% of calendar)
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓	2 perday			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				4 perday ✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4				4 perday ✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A. Carter Date 2-24-06

If you have any questions, please contact Patricia A. Carter, at 714 484 7314

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX DAVID CHANG
Employee Name

XX EVALUATOR
Exact Position Title

XX 484-7434 XX (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 ~~04-05~~ 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Antionese Clark
Employee Name

Admissions Lead Specialist
Exact Position Title

(714)484-7409
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/22/2006

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid — Department/Location

Keith Cobb — Employee Name

Director of Financial Aid — Exact Position Title

714)484-7116 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Keith Cobb Date 03/10/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Carrie Cruz
Employee Name

Clerical Assistant
Exact Position Title

992-8101
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-23-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Brian Dean
Employee Name

XX A+R Technician
Exact Position Title

XX 484-7347 XX (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3-22-06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

[illegible] CCD
District

Fullerton College A&R
Department/Location

[illegible]
Employee Name

Hourly Support staff
Exact Position Title

N/A
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date Mar 16, 2006

If you have any questions, please contact _____, at _____

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Fill out 13 form?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R/FC
Department/Location

Todd Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4 min.				X	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min.				X	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min.			X		
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min.			X		
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min.		X			
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min.		X			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/02

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records Fullerton Co.
Department/Location

SARA EALY
Employee Name

Office Clerk - Hourly
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 3/15/06

If you have any questions, please contact _____, at _____

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05/06 MCP → How many of them fill out this form? 9

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOLCCd
District

Financial-Aid CC
Department/Location

Arnette Edwards
Employee Name

Financial Aid Specialist
Exact Position Title

714 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/09/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

ANA FELIX
Employee Name

ADMISSIONS/RECORDS SPECIALIST
Exact Position Title

992-7576
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~95-96~~ ~~96-97~~ ~~97-98~~ ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Geovanni Filippi
Employee Name

XX Student Hourly
Exact Position Title

XX 484-7410 XX 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30 sec. + 1 min	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-10 min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 min	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3.22.06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Colleen Fitzgerald
Employee Name

Admissions & Records Tech
Exact Position Title

714 992 5204 63
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

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Employee Signature Colleen Fitzgerald Date 3-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Regina Ford
Employee Name

XX Registrar
Exact Position Title

XX 484-7433 XX (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	20	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ XX Date _____

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions/Records - FC
Department/Location

Patricia Foster
Employee Name

Office Coordinator
Exact Position Title

992-7575
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Foster Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions
Department/Location

LISA FUNAOKA
Employee Name

Admissions + Records Technician
Exact Position Title

(714) 992-7569
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/20/04

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Ernie Giles
Employee Name

XX Evaluator
Exact Position Title

XX (714) 484-7431 XX
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ernie Giles XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714) 484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICIAN
Exact Position Title

(714) 992-7578
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth A. Guzman Date 3/16/06

If you have any questions, please contact _____, at _____

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- Sara

Hi, Jacqueline

mer

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FAO / CC
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

(714) 484-7118
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15'					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15'					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10'					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10'					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jackie Ha Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE - CYPRESS COLLEGE
Department/Location

RENIE HARTER
Employee Name

MANAGER CAMPUS ACCOUNTING
Exact Position Title

484-7316
Telephone #

12mo/11mo/10mo/hrly (12mo circled)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (all circled)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 3-3-06

If you have any questions, please contact ______________________, at ______________

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EFCW 1.7-2

minutes to fill out form.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCD — District

Bursars Office — Department/Location

Kevin Henty — Employee Name

Cashier/Registration Clerk — Exact Position Title

(714) 679-3263 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min.	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min.	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min.					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-10-06

If you have any questions, please contact _____, at _____

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Kanaan, Jihad

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FORM

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

CC - BUSINESS
Department/Location

JAY KANAAN
Employee Name

ACCT TECH
Exact Position Title

(714)484-7317
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J. Kanaan Date 2-24-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Tina Lam
Employee Name

Financial Aid Technician
Exact Position Title

(714) 992-9947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5-10 mins	need time all change 7.5				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature TL Date 3/22/06

If you have any questions, please contact Tina Lam, at (714) 992-9947

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Nancy Larson
Employee Name

Coordinator
Exact Position Title

992-7059
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. all

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/24/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admission & Records / Fullerton College
Department/Location

Stephen Ledesma
Employee Name

Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	~~10 min~~ 1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

CC Bursar — Department/Location

Maureen Leopold — Employee Name

Accounting Specialist — Exact Position Title

47318 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10min					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maureen Leopold — Date 2/20/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records Fullerton College
Department/Location

Elizabeth Loviano
Employee Name

OFFICE CLERK - HOURLY
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Loviano Date 3-15-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Tina Mackens
Employee Name

XX Clerical Assistant I
Exact Position Title

XX 714-484-3744 XX (2mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: XX 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3	X	BOB changed to 2.5			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Tina Mack XX Date 3/27/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

N.O.C.C.C.D
District

Bursar - Fullerton College
Department/Location

Leslie Mahoney
Employee Name

Account Clerk II
Exact Position Title

714-992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in *minutes*
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	~~0~~					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~0~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min					✓

40 90

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Leslie Mahoney Date 04-17-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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fill out 3 forms?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

nocccd
District

A&R Fullerton College
Department/Location

Debra Martinez
Employee Name

A&R Technician
Exact Position Title

(714) 992-7577
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Debra Martinez Date 2-16-06

If you have any questions, please contact _____, at _____

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Fill out is form 1

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Monica Martinez
Employee Name

Clerk (Transcripts) - Hourly
Exact Position Title

(714)992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 ~~99-00~~ 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on the form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Monica Martinez

Date 3/15/06

If you have any questions, please contact _____, at _____

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- SAR fill out 3 form's 10 mins

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE — CC
Department/Location

SARAH MEINERT
Employee Name

HOURLY - REGISTRATION
Exact Position Title

484-7317
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	9min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10min					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature SMeinert Date 3.3.06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Jesus Menchaca
Employee Name

HOURLY CLERK
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/15/09

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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05/06 MAP -5MR

Fill out this form? 5 MINUTES

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

SC. BURSAR'S OFFICE
Department/Location

JOHN MILLER
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

714-992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 MIN.	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 MIN.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7 MIN.					✓

40%

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Miller Date 4/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX CHRISTY MONTENEGRO
Employee Name

XX Admissions & Records tech.
Exact Position Title

XX 714.484.7348
Telephone #

XX (12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: XX 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1-3 min.	X		B&B	changed to 2	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3-5 min	X		B&B	changed to 4	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1-15 min	X		B&B	changed to 5	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 min	X		B&B	changed to 5	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 03/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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05-06 MAP - Eng

to complete this form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Cypress - Nursars
Department/Location

Lisa Morales
Employee Name

Acct. Tech
Exact Position Title

714.484-7314 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	30				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-24-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Amelia MOSLEY
Employee Name

XX Clerical Assistant
Exact Position Title

XX ext.48265
Telephone #

XX 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: XX 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3-5	X		B/C	changed to 4	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3-5	X			B/C changed to 4	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3-5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amelia M. Mosley XX Date 03-23-06

If you have any questions, please contact Dave Wassenaar A&R Dean at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Fill out this form!

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Rena Negrete
Employee Name

A & R Tech
Exact Position Title

992-7789
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rena Negrete Date 3/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
398/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Auria Neri
Employee Name

XX Student Hourly
Exact Position Title

XX (714) 484-7410 XX
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: XX 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3min	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/23/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

Tuan Dustin Nguyen
Employee Name

Admissions Lead Specialist
Exact Position Title

(714)484-7429
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 mins	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 mins	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 mins	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	30 mins	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tuan Nguyen Date 3/22/06

"If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Elaine Oropeza
Employee Name

Financial Aid Technician
Exact Position Title

714-992-7054
Telephone #

~~12mo~~/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Oropeza Date 3-23-06

If you have any questions, please contact _____, at _____

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fill out "3 form"?

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD
District

STUDENT SERVICES / ADMISSIONS & Records
Department/Location

JOHN MICHAEL PATAKAS
Employee Name

Technician
Exact Position Title

(714)992-7000 x25199
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3-16-2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College / A+R
Department/Location

Kandi Patterson
Employee Name

Evaluator
Exact Position Title

(714) 992-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kandi Patterson Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

SC-BURSAR'S OFFICE / STUDENT SERVICES 2000 BLDG
Department/Location

LINH QUAN
Employee Name

ACCOUNTING SPECIALIST
Exact Position Title

714.992.7555
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40910

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh Quan Date 4-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Amanda Ramos
Employee Name

XX Clerical Assistant I
Exact Position Title

XX 484-7410 XX (12mo/1mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4-5	X		6+6 changed to 4.5		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3·27·04

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Elizabeth Reyes
Employee Name

XX Student Hourly.
Exact Position Title

XX 484-7410 XX
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.0	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.0	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.0	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Reyes XX Date 3.22.06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid / CE — Department/Location

Alan Reza — Employee Name

Financial Aid Technician — Exact Position Title

(714) 484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	25					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Alan Reza — Date 3/9/06

If you have any questions, please contact _____, at _____

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05-06 MRD - SCFA + fill out this form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar's office Cypress College
Department/Location

Daisy C. Rodriguez
Employee Name

Registration
Exact Position Title

484-7317
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min.	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8 min.	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 min.					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5 min.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8 min.				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min.					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 2-10-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Daniel Salcedo
Employee Name

Clerical Assistant I
Exact Position Title

714-992-7050 (12mo/11mo/10mo/hrly)
Telephone # ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D. P. Salcedo Date 3/23/06

If you have any questions, please contact _____, at _____

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05/06 [illegible] How will [illegible] Fill out this form? 8

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Cypress College - 5410

District: ________________ Department/Location: Fin. Aid

Employee Name: Rebeca Sandoval Exact Position Title: C. C.

Telephone #: X47119 Work ~~year~~ length(circle): 12mo/(11mo)/10mo/hrly

Fiscal Year: 98-99 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12-15	used 15		6 E's changed to 13.5		
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Rebeca Sandoval Date: 3/9/06

If you have any questions, please contact ________________, at ________________

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05/06 mRP - Scott "fill out . s form"? 5 min

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Laurie Schwiebert
Employee Name

Administrative Assistant I
Exact Position Title

992-7050
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurie J Schwiebert Date 3/23/06

If you have any questions, please contact _____, at _____

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fill out "13 form"

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

AMY SHRACK
Employee Name

ADMINISTRATIVE ASSISTANT II
Exact Position Title

714-992-7598
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amy Shrack Date 3/20/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS - FULLERTON
Department/Location

AUDREY SMITH
Employee Name

SPECIALIST
Exact Position Title

992-7583
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Audrey Smith Date 3/17/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Carolyn Sosoaty
Employee Name

Office Clerk - Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 ~~99-00~~ ~~00-01~~ 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5-10 (used 5)				✓	EFF changed to 7.5
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 4			✓		
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4/5 (used 4)			✓		EFF changed to 4.5
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					✓
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature _____ PLEASE USE BLUE INK

Date March 15, 2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Toniesha Taylor
Employee Name

XX Evaluator
Exact Position Title

XX 484-7429 XX (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 (04-05) (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4-6	X				5 (b changed to 5
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5-10	X				7.5 (B changed to 7.5
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fin-Aid / CC
Department/Location

Kimberly Tran
Employee Name

Financial Aid Tech.
Exact Position Title

X48121
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Tran Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Duong Truong
Employee Name

XX Clerical Assistant
Exact Position Title

XX 4847410
Telephone #

XX (12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ XX Date 3/22/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Org. Cty. Comm. Coll. Dist.
District

Admissions&Records/Cypress College
Department/Location

XX Phuc Truong
Employee Name

XX Student Hourly
Exact Position Title

XX 484-7410 XX 12mo/11mo/10mo(hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
XX 02-03 03-04 04-05 (05-06)
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] XX Date 3/27/06

If you have any questions, please contact Dave Wassenaar A&R Dean, at (714)484 7217

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Reference pages

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County Community College — District

Admissions + Records — Department/Location

Nicol Tushla — Employee Name

Evaluator — Exact Position Title

714-992-7593 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature NTT — Date 5-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Fatima Villegas
Employee Name

Clerical Assistant
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. STUD ACCT	5+					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Fatima Villegas Date 3/23/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid - Cypress
Department/Location

Jessica Adams
Employee Name

Clerical Asst I
Exact Position Title

x 47089
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jessica Adams Date 3/8/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Maria G. Aguirre
Employee Name

Financial Aid Tech/Veteran Asst.
Exact Position Title

9/8/2000 ext 25277
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maguirre Date 3.22.06

If you have any questions, please contact _____, at _____

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05/06 MCF - SAM Fill out W3 form? 39

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Jose Alcaraz
Employee Name

Financial Aid Technician
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/2

If you have any questions, please contact Jose Alcaraz, at 27052

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FULLERTON COLLEGE A&R
Department/Location

ALAN AURE
Employee Name

TECHNICIAN
Exact Position Title

714.992.7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records/Fullerton
Department/Location

Jennifer Bassler
Employee Name

Hourly Support Staff
Exact Position Title

714-992-7000 ext. 29907
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Jennifer Bassler Date 16 Mar, 2006

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Reynaldo Bustos
Employee Name

FA Coordinator
Exact Position Title

392 7055
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

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Employee Signature Reynaldo Bustos Date 3-23-06

If you have any questions, please contact _____, at _____

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05/06 FARR -SAC Fill out this form? 15

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FINANCIAL AID OFFICE — Department/Location (Cypress College - SAC)

ROSELLE CALDERON-TENEZA — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

(714) 484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions Office
Department/Location

Barbara Caro
Employee Name

Admissions Technician
Exact Position Title

992-7570
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual date or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Caro Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid / Cypress — Department/Location

Keith Cobb — Employee Name

Director of F.A. — Exact Position Title

714 484-7116 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Keith Cobb — Date 03/10/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FCTAD — Department/Location

Carrie Cruz — Employee Name

Clerical Assistant — Exact Position Title

992-8101 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD — District

Fullerton College A&R — Department/Location

Andrea D. Ilem — Employee Name

Health Support Staff — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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Employee Signature A D Ilem — Date 3 Nov 06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R / FC
Department/Location

Field Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records Fullerton CO
Department/Location

Sara Ealy
Employee Name

Office Clerk - Hourly
Exact Position Title

992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

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PLEASE USE BLUE INK

Employee Signature Sara Ealy

Date 3/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid CC — Department/Location

Arnetta Edwards — Employee Name

Financial Aid Specialist — Exact Position Title

484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 03/09/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NO CCCD
District

ADMISSIONS & RECORDS
Department/Location

ANA
Employee Name

ADMISSIONS/RECORDS SPECIAL
Exact Position Title

992-7576
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 3/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Colleen Fitzgerald
Employee Name

Admissions & Records Tech
Exact Position Title

7145220463
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Colleen Fitzgerald Date 3-16-05

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions/Records - FC
Department/Location

Patricia Foster
Employee Name

Office Coordinator
Exact Position Title

992-7575
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Patricia J Foster Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions
Department/Location

LISA FUNAOKA
Employee Name

Admissions and Records Technician
Exact Position Title

714/992-7569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature _____ Date 3/20/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NORTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICI
Exact Position Title

(714) 992-7578 (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
✓ **Code 21** Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature E. Guzman Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FAO - CC - TE II
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

714) 484-7118
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10'				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10'				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10'				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10'				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10'				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10'				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jackie Ha Date 3/9/06

If you have any questions, please contact _____, at _____

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05/06 MRF → Fill out W3 form? 15min

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC/FAO
Department/Location

Tina Lam
Employee Name

Financial Aid Technician
Exact Position Title

(714) 992-9947
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5mins				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3- mins				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5mins				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10mm				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/22/06

If you have any questions, please contact Tina Lam, at (714) 992-9947

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admission & Record / Fullerton College
Department/Location

Stephen Ledezma
Employee Name

Analyst
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 3/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Will not this form?

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records Fullerton College
Department/Location

Elizabeth Lorenzo
Employee Name

Office Clerk - Hourly
Exact Position Title

(714) 992-75-91
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Lorenzo Date 3-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A & R Fullerton College
Department/Location

Debora Martinez
Employee Name

Technician
Exact Position Title

714 992-7577
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Debora Martinez Date 3/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Monica Martinez
Employee Name

Transcript Clerk - Hourly
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 03/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Jesus Menchaca
Employee Name

Hourly Clerk
Exact Position Title

992 - 7891
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 08/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NO CCCD — District

Admissions & Records — Department/Location

Renee Negrete — Employee Name

A & R Tech — Exact Position Title

992-7789 — Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renee Negrete Date 3/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Elaine Oropeza
Employee Name

Financial Aid Technician
Exact Position Title

714-992-7054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual date or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Oropeza Date 3-3-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

STUDENT SERVICES/ADMISSIONS & Records
Department/Location

JOHN MICHAEL PATAKAS
Employee Name

TECHNICIAN
Exact Position Title

(714) 992-7000 x25799
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature _____ Date 3-16-2006

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College / A+R
Department/Location

Kandi Patterson
Employee Name

Evaluator
Exact Position Title

(714) 992-7572
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Kandi Patterson Date 3/16/06

If you have any questions, please contact _____, at _____

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NOCCCD BUSINESS OFFICE

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Financial Aid Dept - Cypress college - GAB — Department/Location

Alan Reza — Employee Name

Financial Aid Tech — Exact Position Title

(714) 484-7114 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	25				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alan Reza — Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Daniel Salcedo
Employee Name

Clerical Assistant 1
Exact Position Title

714-992-7050
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
ode 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D-P-Salcedo Date 3/23/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NCCCD — District

F.N. AID - Cypress College Campus — Department/Location

Rebecca Sandoval — Employee Name

CC — Exact Position Title

X47119 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	12-14		BOGG changed to 13		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15-20	1 BOGG 1 EFC	BOGG changed to 17.5		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15-25		EFC changed to 20		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20-25		BOGG changed to 22.5		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15-20		BOGG changed to 17.5		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rebecca Sandoval Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EOPS
Department/Location

Laurie Schwiebert
Employee Name

Administrative Assistant I
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurie L Schwiebert Date 3/23/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

AMY SHRACK
Employee Name

ADMINISTRATIVE ASSISTANT II
Exact Position Title

714-992-7598
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amy Shrack Date 3/20/04

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS - FULLERTON
Department/Location

AUDREY SMITH
Employee Name

SPECIALIST
Exact Position Title

992-7583
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Audrey Smith Date 3/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Carolyn SoCoaty
Employee Name

OFFICE CLERK - HOURLY
Exact Position Title

(714) 992-7591
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø				

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Employee Signature _____ Date March 15, 2006

If you have any questions, please contact _____, at _____

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NRP-5668 =

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

Fin-Aid / CC — Department/Location

Kimberly Tran — Employee Name

Financial Aid Tech — Exact Position Title

X48121 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Tran Date 3/9/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County Community College — District

Admissions & Records — Department/Location

Nicol Tichla — Employee Name

Evaluator — Exact Position Title

714-990-7573 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N Nicol — Date 3-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC/FAO
Department/Location

Fatima Villegas
Employee Name

Clerical Assistant
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5+				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5+				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Fatima Villegas Date 3/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 Enrollment Fee Collection and Waivers

NOCCCD Confidential

1. Total Number of Students Enrolled in College

SixTen Form: EFCW 1.8-1, #1.
Source: Headcount from CCCO website

Term	Yr	Cypress	Fullerton
Fall	2005	13,057	19,748
Spring	2006	12,400	18,734
Summer	2006	6,232	10,274
Totals 2005-06		**31,689**	**48,756**

Not yet available on the CCCO website (took info from Banner)

= 80,445 Total TE

2. Total Number of Students Who Paid Enrollment Fees

SixTen Form: EFCW 1.8-1, #2. NOTE: Only have annual totals
Source: Calculated as #1 - #3

Term	Yr	Cypress	Fullerton
2005-06		25,409	40,371

= 65,780 total TE

3. Total Number of Students Waived from Enrollment Fees

SixTen Form: EFCW 1.8-1, #3. NOTE: Only have annual totals
Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton
2005-06	6,280	8,385

Not yet available on the CCCO website (Banner)

= 14,665 no TE

4. Total Number of Students with Enrollment Fee A/R

SixTen Form: EFCW 1.8-2, #1. NOTE: Only have annual totals
Source: Banner a/o 7/6/06

Academic Year	Cypress	Fullerton
Fall 2005	9	12
Spring 2006	155	228
Summer 2006	14	5
	178	245

= 423 no TE

5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility

SixTen Form: EFCW 1.8-2, #2. NOTE: Only have annual totals
Source: Banner

Term	Cypress & Fullerton Combined
Fall 2005	2,299
Spring 2006	1,422
Summer 2006	539

4260 TE

6. Total Number of Enrollment Fee Waivers Requested

SixTen Form: EFCW 1.8-3, #1. NOTE: Only have annual totals
Source: Banner

Academic Year	Cypress	Fullerton
2005-06	10,416	14,485

= 24,901 no TE

0 C
6,280 +
8,385 +
14,665 *

0 C
9 +
155 +
14 +
178 *

12 +
228 +
5 +
245 *

245 +
178 +
423 *

0 C
2,299 +
1,422 +
539 +
4,260 *

0 C
10,416 +
14,485 +
24,901 *

#3
#4
#5
#6

308/95 Enrollment Fee Collection and Waivers

NOCCCD Confidential

7. Total Number of Enrollment Fee Waivers Granted
SixTen Form: EFCW 1.8-3, #2. NOTE: Only have annual totals
Source: Banner

Academic Year	Cypress	Fullerton
2005-06	9,709	13,172

22,881

8. Total Number of Enrollment Fee Waivers Denied
Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
2005-06	707	1,313

2,020

9. Total Enrollment Fees Collected each Year
SixTen Form: EFCW 1.8-4, #1.
Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R
NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton
2005-06	3,858,592	6,691,847

10. Total Enrollment Fees Refunded each Year
SixTen Form: EFCW 1.8-4, #2.

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded. **

Academic Year	Cypress	Fullerton
005-06	748,932	1,354,465

11. Total Enrollment Fee Revenue net each Year
SixTen Form: EFCW 1.8-4, #3.
Source: Banner. Total Enrollment Fees Earned
Calculated as: Net Enrollment Fees minus BOGG'd Fees
NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment.

Academic Year	Cypress	Fullerton
2005-06	3,862,705	6,696,973

10,559,678

12. Total Enrollment Fees Waived each Year
SixTen Form: EFCW 1.8-4, #4A
Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton
2005-06	2,556,060	3,639,428

Not yet available on the CCCO website (took info from Banner)

6,195,488

13. Number of Credit Units for which Enrollment Fees were Waived
SixTen Form: EFCW 1.8-4, #5
Source: Banner

Academic Year	Cypress	Fullerton
Fall 2004	46,883	65,071
ing 2005	44,619	63,279
Summer 2005	6,809	11,629

111,954
107,898
18,438

These are 05-06 figures
Do not match 04-05 figures

9/28/2006

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 16, 2006 11:14:05

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	138	53,636
BOGW - Part B based on income standards	2,923	1,107,171
BOGW - Part C based on financial need	2,962	1,416,220

total 6023

Total Amount = $ 2,577,027

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Cypress 2,577,027
Fullerton 3,670,979
6,248,006

P1 6,023
P2 8,131
14,154

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Thursday, N

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 16, 2006 11:14:34

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	122	48,425
BOGW - Part B based on income standards	3,846	1,542,320
BOGW - Part C based on financial need	4,163	2,080,234
	8131	

Total Amount = $ 3,670,979

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0 c

122
3,845
4,163
8,131

(2)

Schedule 6
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Student Headcount Summary

Purpose: To calculate student headcount.
Source: California Community Colleges Chancellor's Office website.
Findings:

College	Term	Headcount
Cypress	Fall	13,057
	Spring	12,400
	Summer	4,946
Fullerton	Fall	19,748
	Spring	18,734
	Summer	8,620
		77,505

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Fall Term

Data Current As Of November 16, 2006 11:21:06

Total Headcount	13,057

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Cypress
For 2006 Spring Semester

Data Current As Of November 16, 2006 11:21:31

Total Headcount	12,400

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2005 Summer Term

Data Current As Of November 16, 2006 11:20:49

Total Headcount	4,946

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Fullerton
For 2005 Fall Term

Data Current As Of November 16, 2006 11:19:19

Total Headcount	19,748

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2006 Spring Semester

Data Current As Of November 16, 2006 11:20:24

Total Headcount	18,734

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2005 Summer Term

Data Current As Of November 16, 2006 11:19:04

Total Headcount	8,620

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308/95 Enrollment Fee Collection and Waivers

7. Total Number of Enrollment Fee Waivers Granted
SixTen Form: EFCW 1.8-3, #2. NOTE: Only have annual totals
Source: Banner

Academic Year	Cypress	Fullerton
2005-06	9,709	13,172

8. Total Number of Enrollment Fee Waivers Denied
Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
2005-06	707	1,313

9. Total Enrollment Fees Collected each Year
SixTen Form: EFCW 1.8-4, #1.
Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R
NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton
2005-06	3,858,592	6,691,847

10. Total Enrollment Fees Refunded each Year
SixTen Form: EFCW 1.8-4, #2.

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **NOTE:** Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded. **

Academic Year	Cypress	Fullerton
2005-06	748,932	1,354,465

11. Total Enrollment Fee Revenue net each Year
SixTen Form: EFCW 1.8-4, #3.
Source: Banner. Total Enrollment Fees Earned
Calculated as: Net Enrollment Fees minus BOGG'd Fees
NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment.

Academic Year	Cypress	Fullerton
2005-06	3,862,705	6,696,973

12. Total Enrollment Fees Waived each Year
SixTen Form: EFCW 1.8-4, #4A
Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton	
2005-06	2,556,060	3,639,428	Not yet available on the CCCO website (took info from Banner)

13. Number of Credit Units for which Enrollment Fees were Waived
SixTen Form: EFCW 1.8-4, #5
Source: Banner

Academic Year	Cypress	Fullerton
Fall 2004	46,883	65,071
Spring 2005	44,619	63,279
Summer 2005	6,809	11,629

** The refund numbers are overstated with regards to waivers. We were unable to separately identify enrollment refunds. All refunds are lumped together when being paid out.

*** We are unable to separately identify the gross enrollment fees that were collected, prior to any subsequent refunds. The enrollment fee amounts are net of any reversals due to changes in enrollment levels (e.g., dropped classes).

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

North Orange Adult College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 16, 2006 11:21:51

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For North Orange Adult
For 2005 Summer Quarter

Data Current As Of November 16, 2006 11:16:17

Total Headcount	12,800

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For North Orange Adult For 2005 Fall Quarter

Data Current As Of November 16, 2006 11:16:36

Total Headcount	26,179

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For North Orange Adult For 2006 Winter Quarter

Data Current As Of November 16, 2006 11:16:51

Total Headcount	22,540

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For North Orange Adult For 2006 Spring Quarterr

Data Current As Of November 16, 2006 11:17:15

Total Headcount	22,131

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for 04-05.

COMMUNITY COLLEGE DISTRICT NAME: North Orange County CCD

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ACCOUNTING TECH		$ 31.14
	AVERAGE ADMINISTRATIVE ASSISTANT		$ 37.85
	AVERAGE COUNSELOR		$ 89.22
	AVERAGE DIVISION DEAN		$ 90.73
	AVERAGE DIRECTOR		$ 74.26
	AVERAGE INSTRUCTOR		$ 65.91
	AVERAGE MANAGER		$ 56.65
	AVERAGE OFFICE MANAGER		
ADAMS, JESSICA	CC-CLERICAL ASSISTANT I- term 3/16/06	$ 14.30	$ 26.17
AGUIRRE, MARIA	FINANCIAL TECH		$ 28.55
ALCARAZ, JOSE	FC-FINANCIAL AID TECHNICIAN	$ 31.35	$ 37.46
ALIBRANDI, LUCINDA	INSTRUCTOR	$ 61.24	$ 69.28
ALLEN-COURTNEY, AKILAH	CC-A&R RECORDS EVALULATOR SPECIALIST	$ 35.32	$ 42.20
ALMARAZ, ARTURO	CC-A&R CLERICAL ASSISTANT-40%	$ 14.96	$ 25.07
ALTON, MEG	CC-A&R TECHNICIAN	$ 12.99	$ 27.43
AURE, R. ALLEN	FC-A&R TECHNICIAN		$ 32.64
AYON, VIOLET	EXECUTIVE ADMINISTRATIVE AIDE	$ 62.17	$ 63.35

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
BARROW, LINDA	HR SPECIALIST	$ 47.46	$ 50.46
BASSLER, JENNIFER	FC-A&R HOURLY STAFF SUPPORT	$ 9.00	$ 10.71
BEARD, CLAUDIA	FC-BURSAR'S OFFICE-ACCOUNT CLERK II	$ 30.31	$ 34.66
BEELER, RON	DIST. DIRECTOR-FACILITIES	$ 75.42	$ 81.80
BEERS, SUSAN	DIVISION DEAN	$ 77.49	$ 85.40
BENNETT, BARBARA	INSTRUCTOR	$ 51.53	$ 53.84
BETTENDORF, PAM	ADMINISTRATIVE ASSISTANT	$ 42.55	$ 41.78
BLACKLEY, TERRY	DIVISION DEAN-TERM	$ 71.19	
BOYD-DAILEY, NANCY	HR SPECIALIST	$ 41.04	$ 44.63
BRANDES, RAEANE	ACCOUNTING SPECIALIST	$ 43.23	$ 44.65
BRAULT, LORI	DIRECTOR, HEALTH SERVICES	$ 57.87	$ 66.95
BROWN, KALETA	DIVISION DEAN	$ 63.54	$ 79.82
BURCHFIELD, JERRY	INSTRUCTOR	$ 56.30	$ 64.07
BURNS, KRIS	REGISTRAR		$ 54.43
BURNS, MICHAEL	DIVISION DEAN RETIRED	$ 75.88	$ 155.47
BUSTOS, RAYMOND	FC-FINANCIAL AID TECHNICIAN	$ 35.36	$ 41.74
BYRNES, NANCY	VP EDUC SUPPORT/PLAN	$ 79.81	$ 84.40
CALDERON, TENEZA, ROSELLE	CC-FINANCIAL AID TECHNICIAN	$ 28.27	$ 36.20
CANT, KAREN	DIRECTOR BUDGET/FINANCE	$ 74.53	$ 85.17
CARO, BARBARA	FC-A&R TECHNICIAN	$ 35.50	$ 40.56
CARRITHERS, JOE	INSTRUCTOR	$ 52.60	$ 64.51
CARTER, PATRICIA	CC-BURSAR'S OFFICE ACCOUNT-TECHNICIAN	$ 27.66	$ 34.33

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
CHAMBERS, TERRY	BENEFITS SPEC	$ 35.71	$ 36.09
CLARK, ANTIONESE	C-A&R SPECIALIST	$ 21.02	$ 31.07
CLIFFORD, SUSAN	DEAN ACADEMIC SERVICES-TERM	$ 71.52	
COBB, KEITH	CC-DIRECTOR FINANCIAL AID	$ 36.81	$ 56.16
COTTER, SANDRA	EXECUTIVE ASSISTANT	$ 49.84	$ 51.79
COURCHAINE, JEFFERY	INSTRUCTOR/INTERM DEAN	$ 52.11	$ 86.43
CRAIG, DALE	INSTRUCTOR	$ 52.48	$ 67.22
CRUZ, CARRIE	FC-CLERICAL ASSISTANT	$ 23.01	$ 28.62
DAIN, CLAUDETTE	DIRECTOR, FISCAL SERVICES		$ 71.81
DAXON, REGINA (FORMLY HITCHCOCK)	INSTRUCTIONAL ASSISTANT, COMPUTER LAB		$ 36.68
DEAN, BRIAN	CC-A&R TECHNICIAN	$ 17.86	$ 27.74
DeMARKEY, NINA	DIVISION DEAN	$ 55.48	$ 70.51
DIESENBRUCH, ROSEMARY	ACCOUNT TECH		$ 30.75
DILLON, ANDREW	FC-A&R HOURLY STAFF SUPPORT	$ 7.75	$ 8.60
DO, DAO	OFFICE COORDINATOR		$ 35.61
DONLEY, STEVEN	DIVISION DEAN	$ 76.97	$ 88.73
DONOVAN, LEXI	MANAGER CAMPUS ACCOUNTING-TERM 9/30/05	$ 58.03	$ 62.94
DOOLY, GEORGE	COUNSELOR	$ 63.80	$ 70.66
DUNCAN, STEVE	DIST DIR HR	$ 80.25	$ 87.09
EALY, SARA	FC-A&R HOURLY OFFICE CLERK	$ 7.75	$ 9.34
EDWARDS, ARNETTE	CC-FINANCIAL AID TECHNICIAN	$ 31.43	$ 36.82
EISENHUT, LINDA	DIST MGR BENEFITS	$ 50.62	$ 27.88

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
FELIX, ANA	FC-A&R SPECIALIST	$ 38.71	$ 48.96
FILIPPI, GEOVANI	CC-A&R HOURLY CLERICAL ASSISTANT	$ 8.25	$ 10.22
FISHMAN, DARLENE	DIRECTOR NURSING	$ 64.07	$ 74.61
FITZGERALD, COLLEEN	FC-A&R HOURLY TECHNICIAN	$ 9.00	$ 12.57
FLEEMAN, RODNEY	VC FINANCE/FACILITIES-TERM	$ 91.36	
FLORES-CHURCH, ADRIANNA	ADMIN SUPP MGR HR-TERM 2/21/06	$ 43.56	$ 51.46
FONG, PETER	DEAN, ADMISSIONS/RECORDS		$ 84.01
FORD, REGINA	CC-A&R REGISTRAR	$ 41.80	$ 54.88
FOSTER, PATRICIA	FC-A&R OFFICE COORDINATOR	$ 47.84	$ 52.84
FRANKS, JOE	INSTRUCTOR	$ 55.94	$ 62.26
FUNAOKA, LISA	FC-A&R TECHNICIAN	$ 21.88	$ 29.96
GABEL, ANN-MARIE	HOURLY PFE	$ 64.09	$ 38.71
GILES, ERNICE	CC-A&R EVALUATOR	$ 22.54	$ 29.78
GISKA, MARY LOU	CC DIRECTORY HEALTH SERVICES	$ 48.03	$ 57.67
GOMBER, LISA	ADMINISTRATIVE ASSISTANT	$ 44.24	$ 44.69
GREIN, CYNDI	MANAGER, CAMPUS ACCOUNTING		$ 47.08
GUYTON, JEAN	MANAGER APPLICATION SUPPORT-TERM	$ 76.41	
GUZMAN, ELIZABETH	FC-A&R TECHNICIAN	$ 28.18	$ 34.54
HA, JACKIE	CC-FINANCIAL AID TECHNICIAN	$ 36.05	$ 42.07
HANNON, ANDREA	DIV DEAN HEALTH SERVICES	$ 75.88	$ 83.80
HARTER, RENIE	CC-BURSAR'S OFFICE-MANAGER, CAMPUS ACCTING	$ 56.90	$ 67.46
HATCHETT, DONNA	DISTRICT DIRECTOR PUBLIC AFFAIRS-TERM	$ 80.88	

Name	Title	Fiscal Years: 04-05	05-06
HEBSON, CHRIS	IT SPEC., SYSTEMS ANALYST	$ 53.54	$ 55.54
HENDERSON, WILFORD	SAFETY SPECIALIST-TERM	$ 47.21	
HENRY, DIANE	DIVISION DEAN	$ 75.88	$ 84.70
HENRY, KEVIN	CC-BURSAR'S OFFICE-CASHIER/REGISTRATION-HRLY	$ 7.50	$ 8.57
HERRERA, EDGAR ALEX	INSTRUCTOR	$ 49.37	$ 60.02
HITCHCOCK, REGINA (SEE DAXON)	INSTRUCTIONAL ASSISTANT, COMPUTER LAB	$ 33.57	$ 36.86
HORSLEY, JEFF	VICE CHANCELLOR HR	$ 104.35	$ 122.16
HUNTER, JEROME	CHANCELLOR	$ 122.34	$ 145.81
JAY, PAULA	ADMIN ASSISTANT	$ 39.70	$ 24.10
KANAAN, JIHAD (JAY)	CC-BURSAR'S OFFICE-ACCOUNT TECHNICIAN	$ 32.50	38.12
KASLER, MIKE	EXECUTIVE VICE PRESIDENT	$ 84.84	$ 96.92
LAM, TINA	FC-FINANCIAL AID TECHNICIAN	$ 24.40	$ 32.03
LARSON, NANCY	FC-FINANCIAL AID OFFICE COORDINATOR	$ 41.62	$ 47.44
LATIEF, LINA	ACCOUNTING SPEC-TERM	$ 40.89	
LEDEZMA, STEPHEN	FC-A&R HOURLY	$ 9.00	$ 10.68
LEE, PAT	DIST MGR PAYROLL	$ 56.84	$ 60.27
LEOPOLD, MAUREEN	CC-BURSAR'S OFFICE ACCOUNTING SPECIALIST	$ 38.95	45.06
LEWIS, MARGORIE	PRESIDENT- CYPRESS COLLEGE	$ 106.83	$ 125.71
LEYSON, ELIZABETH	INTERIM EXEC VP	$ 82.82	$ 68.01
LUSCH, ROD	SKILLED MAINTAINANCE MECH	$ 44.95	$ 46.05
LUVIANO, ELIZABETH	FC-A&R HOURLY OFFICE CLERK	$ 7.75	$ 8.55
MAERTENS, TINA	CC-A&R-CLERICAL ASSISTANT I	$ 13.49	20.6

Name	Title	Fiscal Years: 04-05	05-06
MAHONEY, LESLIE	FC-BURSAR'S OFFICE-ACCOUNT CLERK II	$ 27.04	34.65
MARTINEZ, MONICA	FC-A&R HOURLY TRANSCRIPT CLERK	$ 8.25	$ 9.39
McALPIN, KENNETH	MGR/ MAINTENANCE & OPS	$ 44.49	$ 49.60
McCLOUD, EDWARD	INSTRUCTOR	$ 54.85	$ 69.04
McGUIRE, GARY	PROVOST	$ 101.50	$ 119.10
MEINERT, SARAH	CC-BURSAR'S OFFICE		25.88
MELELLA, LAURA	INSTRUCTOR	$ 53.85	$ 63.41
MENCHACA, JESUS	FC-A&R HOURLY CLERK		$ 7.94
MILLER, JOHN	FC-BURSAR'S OFFICE-ACCOUNTING TECHNICIAN	$ 28.69	34.33
MIRANDA, ALBERT	DIRECTOR, PHYSICAL PLANT/ FACILITIES	$ 69.45	$ 83.81
MIRANDA, BOB	DIRECTOR FINANCIAL AID	$ 65.35	$ 71.50
MIRANDA, MIGUEL	FACILITIES COORDINATOR		$ 26.65
MONTANO, DIANE	MANAGER, CHILD CARECENTER	$ 48.19	$ 51.88
MONTENEGRO, CHRISTY	CC-A&R TECHNICIAN	$ 25.47	31.14
MOORE, MIKE	INSTRUCTOR	$ 59.33	$ 65.79
MOORE, SALLY	INSTRUCTOR	$ 57.14	$ 64.75
MORALES, LISA	CC-BURSAR'S OFFICE-ACCOUNT TECHNICIAN	$ 30.80	36.92
MORGAN, ROBERT			$ 20.95
MOSLEY, AMELIA	CC-A&R CLERICAL ASSISTANT	$ 13.49	29.85
NADELL, ROBERT	DEAN COUNSELING/STUDENT DEV-TERM	$ 75.75	

Name	Title	Fiscal Years: 04-05	05-06
NEGRETE, RENA	FC-A&R TECHNICIAN	$ 27.13	$ 32.76
NELSON, JANICE	BUS OFFICE SPEC	$ 42.24	$ 44.24
NERI, AURIA	CC-A&R HOURLY STUDENT		8.46
NGUYEN, DUSTIN TUAN	CC-A&R SPECIALIST	$ 32.28	37.85
NICCOLAI, NILO	DIRECTOR ACAD. COMP TECHNL	$ 75.29	$ 78.63
NOVISOFF, ANNA	ADMIN ASSISTANT	$ 43.19	$ 45.11
O'CONNOR, ADAM	DIRECTOR BUDGET/FINANCE	$ 79.51	$ 87.21
OROPEZA, ELAINE	FC-FINANCIAL AID TECHNICIAN	$ 33.13	$ 43.71
PALMER, SANDRA	EXEC ASSISTANT	$ 46.67	$ 48.51
PARISI, TOM	DEAN, SCE INSTRUCTOR/STUDENT SERVICES	$ 76.75	$ 84.72
PATAKAS, JOHN (BRADSHAW)	FC-A&R TECHNICIAN		$ 27.09
PEREZ, JENNIFER	PUBLIC INFO OFFICER	$ 40.70	$ 50.43
PEREZ, RICK	DEAN, COUNSELING/STUDENT DEVELOPMENT	$ 74.79	$ 87.29
PFEIFFER, JODY	ADMINISTRATIVE ASSISTANT-RESIGNED 5/3/06	$ 18.49	$ 18.33
PHILLIPS, JIM	INSTRUCTOR	$ 60.82	$ 63.88
PORTOLAN, JANET	VP, EDUCATION SUPPORT & PLANNING	$ 78.84	$ 84.40
POSNER, MARC	PUBLIC INFORMATION OFFICER	$ 43.59	$ 52.59
QUAN, LINH	FC-BURSAR'S OFFICE-ACCOUNTING SPECIALIST	$ 27.31	$ 36.30

Name	Title	Fiscal Years: 04-05	05-06
RAMIREZ, JORGE	DEAN STUDENT SUPPORT SERVICES-RESIGNED 7/27/06	$ 67.48	$ 169.20
RAMIREZ, RICHARD	INTERIM VP STUDENT SERVICES	$ 78.85	$ 87.78
RAMOS, AMANDA	CC-A&R CLERICAL ASSISTANT	$ 13.49	25.08
RAUBOLT, JACK	DISTRICT DIRECTOR INFO SERVICES-RETIRED 8/1/05	$ 81.73	$ 159.43
REHA, DELORES	INSTRUCTOR	$ 57.88	$ 61.14
REYES, ELIZABETH	CC-A&R HOURLY STUDENT		8.49
REZA, ALAN	CC-FINANCIAL AID TECHNICIAN	$ 25.83	$ 32.27
RODGERS, CAROLANNE	INSTRUCTOR	$ 66.23	$ 68.27
RODRIGUEZ, DAISY	CC-BURSAR'S OFFICE-HOURLY REGISTRATION	$ 11.25	$ 13.68
SALCEDO, DANIEL	FC-CLERICAL ASSISTANT I	$ 23.08	$ 29.24
SANBORN, JACKIE	ADMINISTRATIVE ASSISTANT	$ 48.75	$ 53.07
SANDOVAL, REBECA	CC-FINANCIAL AID TECHNICIAN	$ 31.52	$ 42.20
SCHULZ, GREG	DEAN, SCE INSTRUCTOR/STUDENT SERVICES	$ 60.29	$ 67.45
SCHWIEBERT, LAURIE	FC-ADMINISTRATIVE ASSISTANT I	$ 26.89	$ 33.01
SEFRIED, DAN			$ 23.88
SHRACK, AMY	FC-A&R ADMINISTRATIVE ASSISTANT II	$ 28.51	$ 35.81
SIMPSON, BOB	DIVISION DEAN	$ 77.49	$ 85.40
SMEAD, RICHARD	INSTRUCTOR	$ 49.74	$ 59.16

Name	Title	Fiscal Years: 04-05	05-06
SMITH, AUDREY	FC-A&R SPECIALIST	$ 32.35	$ 39.88
SMITH, FRANK	DIRECTOR ACAD. COMP TECHNL	$ 64.64	$ 71.46
SMITH, SHIRLEY	DIRECTOR, CAMPUS PUBLIC SAFETY	$ 44.49	$ 48.57
SOSOATU, CAROLYN	FC-A&R HOURLY OFFICE CLERK	$ 7.75	$ 8.59
SOTO, ABEL	FC- A&R TECHNICIAN	$ 41.57	$ 22.58
SPARGO, DEBORAH	ACCOUNT TECH		$ 31.52
SPENCER, NORA	INSTRUCTOR	$ 47.48	$ 58.13
ST JOHN, PAUL	INSTRUCTOR	$ 52.44	$ 65.87
TAYLOR, CHRIS	IT SPEC SYS APPLICATION	$ 51.88	$ 51.86
TAYLOR, TONIESHA	CC-A&R EVALUATOR		28.43
TERRY, CHRISTINE	DEAN, SCE INSTRUCTOR/STUDENT SERVICES	$ 74.43	$ 82.12
TESAR, DAN	DIVISION DEAN	$ 75.34	$ 82.57
THOMAS, CONNIE	EXEC ASSISTANT	$ 51.48	$ 55.17
TRAN, KIMBERLY	CC-FINANCIAL AID TECHNICIAN	$ 25.33	$ 34.74
TRUONG, DUONG	CC-A&R CLERICAL ASSISTANT	$ 13.49	25.01
TRUONG, PHUC	CC-A&R HOURLY STUDENT		8.46
TUSHLA, NICOL	FC-A&R EVALUATOR	$ 31.01	$ 38.37
TYRRELL, DONALD	COUNSELOR-TERM	$ 64.85	

Name	Title	Fiscal Years: 04-05	05-06
VILLEGAS, FATIMA	FC-CLERICAL HOURLY ASSISTANT	$ 13.50	$ 20.01
VYAS, KASHU	ACCOUNTING SPECIALIST		$ 28.55
VYSKOCIL, CINDY	DIRECTOR CAMPUS DIVERSITY	$ 60.74	$ 64.28
WALLACE, TOM	MANAGER TECHNICAL SUPPORT	$ 75.95	$ 78.58
WASSENAAR, DAVE	DIVISION DEAN, A&R	$ 76.79	$ 83.94
WHITEHURST, DOROTHY	DISTRICT DIRECTOR PURCHASING	$ 71.74	$ 72.74
WICKS, LORRAINE	MANAGER, SCE SENIORS PROGRAM	$ 63.42	$ 67.75
WILLIAMS, FRED	VICE CHANCELLOR, FISCAL SERVICES	$ 95.39	$ 111.02
WILSON, MARCUS	INSTRUCTOR	$ 57.05	$ 70.72
ZANDY, BEN	INSTRUCTOR	$ 58.55	$ 80.45

Schedule 5
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by	$ 5,057,532	$ 5,128,876	$ 5,126,940	$ 7,598,920	$ 10,757,786	$ 10,559,678
p/E.C. 76300 (c)	2% of Revenue Rec'd.	Client	$ 101,151	$ 102,578	$ 102,539	$ 151,978	$ 215,156	$ 211,194
This data is for comparison with CCCCO 2% calculation directly below.								
1.8-4 line 4A	Enrollment Fees Waived	$ 3,110,245	$ 3,176,990	$ 1,922,055	$ 2,504,265	$ 3,820,034	$ 6,359,607	$ 6,248,006
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192	$ 124,960
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 217,717	For 00-01 through 05-06 - unit fee					
1.8-4 line 5	~~Summer~~ Fall			90,175	98,661	95,215	110,382	111,954
	~~Fall~~ Spring			98,476	95,586	96,382	110,925	107,898
	~~Winter/Interssion~~							
	~~Spring~~ Summer			15,952	13,488	17,086	18,034	18,438
	Total # of credits		288,818	204,603	207,735	208,683	239,341	238,290
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800	$ 216,844
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192	$ 124,960
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 217,717						
1.8-4 5	Credit Units Waived		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800	$ 216,844
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 279,922**	**$ 326,364**	**$ 224,630**	**$ 239,124**	**$ 266,303**	**$ 344,992**	**$ 341,804**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: North Orange County
COUNTY: Orange

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$67,592,065	$60,162,197	$2,035,793	$62,197,990
EQUALIZATION	1,148,029	1,056,186	91,843	1,148,029
ENROLL FEE ADMIN (2%)	118,851	109,343	9,508	118,851
APPRENTICE ALLOWANCE	19,979	18,847	1,132	19,979
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,001,205	921,107	80,098	1,001,205
S.F.A.A.	856,892	788,340	68,552	856,892
E.O.P.S.	2,111,235	1,942,337	168,898	2,111,235
C.A.R.E.	276,254	254,153	22,101	276,254
D.S.P.S.	1,998,022	1,838,181	159,841	1,998,022
STATE HOSPITALS	0	0	0	0
CALWORKS	631,893	550,237	81,656	631,893
MATRICULATION (CREDIT)	1,142,332	1,048,187	94,145	1,142,332
MATRIC. (NONCREDIT)	1,137,173	1,046,200	90,973	1,137,173
FAC.& STAFF DIVERSITY	34,128	28,855	5,273	34,128
PART-TIME FAC. INS.	5,361	0	5,361	5,361
PART-TIME FAC. OFF. HRS	604,093	0	604,093	604,093
PART-TIME FAC. ALLO.	1,561,487	1,436,568	124,919	1,561,487
TELECOMMUNICATIONS	120,299	67,524	52,775	120,299
PLANT & INSTRUCTIONAL	823,913	758,000	65,913	823,913
ECON. DEVELOPMENT	1,346,875	1,131,375	0	1,131,375
TANF	140,259	129,039	11,220	140,259
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	31,605	31,605	63,210
VTEA TITLE I C	408,994	150,907	192,648	343,555
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	3,541,637	3,541,717	-80	3,541,637
TOTAL	$86,696,226	$77,010,905	$3,998,267	$81,009,172

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc e 5A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ -	$ -	$ -	$ -	$ -	$ -	
2	Staff Training	(04)(B)(1)(b)	$ 251.20	$ 253.20	$ 277.44	$ 316.96	$ 306.40	$ 332.96	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ -	$ -	$ -	$ -	$ -	$ -	
4	Waiving student fees	(04)(B)(2)(b)	$ 120,363.31	$ 150,225.40	$ 285,123.46	$ 267,027.01	$ 326,671.60	$ 331,116.92	$ 466,102.48
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,260.80	$ 2,278.80	$ 2,496.96	$ 2,852.64	$ 2,757.60	$ 2,996.64	$ 3,415.68
6	EFCW - Fee Waiver Costs	Total	$ 122,875.31	$ 152,757.40	$ 287,897.86	$ 270,196.61	$ 329,735.60	$ 334,446.52	$ 469,518.16
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 279,922.00	$ 326,364.00	$ 224,630.00	$ 239,124.00	$ 266,303.00	$ 344,992.00	$ 341,804.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (157,046.69)	$ (173,606.60)	$ 63,267.86	$ 31,072.61	$ 63,432.60	$ (10,545.48)	$ 127,714.16
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 122,875.31**	**$ 152,757.40**	**$ 224,630.00**	**$ 239,124.00**	**$ 266,303.00**	**$ 334,446.52**	**$ 341,804.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 16, 2006 11:14:05

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	138	53,636
BOGW - Part B based on income standards	2,923	1,107,171
BOGW - Part C based on financial need	2,962	1,416,220

total 6023

Total Amount = $ 2,577,027

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Cypress 2,577,027
Fullerton 3,670,979
6,248,006

P1 6,023
P2 8,131
14,154

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 16, 2006 11:14:34

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	122	48,425
BOGW - Part B based on income standards	3,846	1,542,320
BOGW - Part C based on financial need	4,163	2,080,234

8,131

Total Amount = $ 3,670,979

Back to Top of Page

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0
122
3,846
4,163
8,131

(2)

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 25, 2008

Claim File Copy

CERTIFIED MAIL # 7006 3450 0000 3941 8703

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
North Orange County Community College District CC30105

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for North Orange County Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. T. Bramwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office | Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC30105

(02) Claimant Name: North Orange County Community College District

County of Location: Orange

Street Address or P.O. Box: 1830 West Romneya Drive

City: Anaheim | State: CA | Zip Code: 92801-1819

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 1,289,000	(13) $ 1,171,883
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 1,171,883
Due from State	(08) $ 1,289,000	(17) $ 1,171,883
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	72
(23) EFCW-1, (04)(A)(1)(b)(f)	4,313
(24) EFCW-1, (04)(A)(2)(a)(f)	938,842
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	389
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	279,745
(29) EFCW-1, (04)(B)(2)(c)(f)	3,497
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	361,923
(32) EFCW-1, (09)	133,267
(33) EFCW-1, (10)	283,631
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) Claudette Dain

Date 1/24/08

Claudette Dain
Type or Print Name

District Director, Fiscal Affairs
Title

(38) Name of Contact Person for Claim

Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: North Orange County Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 71.89	$ -	$ -	$ -	$ -	$ 71.89
b. Staff training (One time per employee)	$ 4,313.40	$ -	$ -	$ -	$ -	$ 4,313.40
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 938,841.50	$ -	$ -	$ -	$ -	$ 938,841.50
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 388.56	$ -	$ -	$ -	$ -	$ 388.56
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 279,745.12	$ -	$ -	$ -	$ -	$ 279,745.12
c. Reporting BOG fee waiver data to CCC	$ 3,497.04	$ -	$ -	$ -	$ -	$ 3,497.04
(05) Total Direct Costs	$ 1,226,857.51	$ -	$ -	$ -	$ -	$ 1,226,857.51

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	29.50%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 361,922.97
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,588,780.48
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 133,267.00
(10) Less: Enrollment Fee Waiver offsets		$ 283,630.72
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,171,882.76

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Harter, Renie Bursar	$71.89	1.0	$ 71.89				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 71.89	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Harter, Renie Bursar	$71.89	60.0	$ 4,313.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 4,313.40	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$32.72	8,870.3	$ 290,236.22				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$32.72	5,686.6	$ 186,065.55				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$32.72	7,068.5	$ 231,281.32				
·iating written and computer records for enrollment fee information Enrollment Office Staff Various	$32.72	6,652.7	$ 217,676.34				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$32.72	59.9	$ 1,959.93				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$32.72	355.2	$ 11,622.14				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 938,841.50	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Larson, Nancy Financial Aid Office Coordinator	$48.57	8.0	$ 388.56				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 388.56	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$31.93	1,717.0	$ 54,823.81				
Receiving waiver applications							
Financial Aid Office Staff Various	$31.93	2,222.0	$ 70,948.46				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$31.93	1,919.0	$ 61,273.67				
[illegible]fying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$31.93	172.3	$ 5,501.54				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$31.93	2,520.3	$ 80,473.18				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$31.93	210.6	$ 6,724.46				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 279,745.12	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
North Orange County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Larson, Nancy Financial Aid Office Coordinator	$48.57	72.0	$ 3,497.04				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 3,497.04	$ -	$ -	$ -	$ -

New 04/06

North Orange County Community College District
308/95 ENROLLME E COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	8,870.30	Enrollment Office Staff	Various	$32.72	$290,236.22	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	5,686.60	Enrollment Office Staff	Various	$32.72	$186,065.55	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	7,068.50	Enrollment Office Staff	Various	$32.72	$231,281.32	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	6,652.70	Enrollment Office Staff	Various	$32.72	$217,676.34	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	59.90	Enrollment Office Staff	Various	$32.72	$1,959.93	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	355.20	Enrollment Office Staff	Various	$32.72	$11,622.14	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	28,693.20	**Enrollment Office Staff Total**			$938,841.50		
06-07	1,717.00	Financial Aid Office Staff	Various	$31.93	$54,823.81	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	2,222.00	Financial Aid Office Staff	Various	$31.93	$70,948.46	Receiving waiver applications	Waiving student fees
06-07	1,919.00	Financial Aid Office Staff	Various	$31.93	$61,273.67	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	172.30	Financial Aid Office Staff	Various	$31.93	$5,501.54	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	2,520.30	Financial Aid Office Staff	Various	$31.93	$80,473.18	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	210.60	Financial Aid Office Staff	Various	$31.93	$6,724.46	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	8,761.20	**Financial Aid Office Staff Total**			$279,745.12		
06-07	1.00	Harter, Renie	Bursar	$71.89	$71.89	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
06-07	60.00	Harter, Renie	Bursar	$71.89	$4,313.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	61.00	**Harter, Renie Total**			$4,385.29		
06-07	8.00	Larson, Nancy	Financial Aid Office Coordinator	$48.57	$388.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	72.00	Larson, Nancy	Financial Aid Office Coordinator	$48.57	$3,497.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	80.00	**Larson, Nancy Total**			$3,885.60		
	37,595.40	**Grand Total**			$1,226,857.51		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

JUN 29 2006

EIN #:

DATE: June 27, 2006

INSTITUTION:
orth Orange County Community College District
1830 W. Romeya Drive

FILING REF.: The preceding Agreement was dated August 8, 2002

Anaheim CA 92801

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/06	06/30/10	29.5	On-Campus	All Programs
PROV.	07/01/10	06/30/11	29.5	On-Campus	All Programs

*BASE:
Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first $25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of $25,000.

U70205

Schedule 1A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

*EFC 1	83,159
Avg. time p/account	6.4
Total Time (in minutes)	532217.6
Per Hour	60
Hours Worked (** Activity 11)	**8870.3**
*EFC 2	68,239
Avg. time p/student	5
Total Time (in minutes)	341195
Per Hour	60
Hours Worked (** Activity 12)	**5686.6**
*EFC 1	83,159
Avg. time p/question	5.1
Total Time (in minutes)	424110.9
Per Hour	60
Hours Worked (** Activity 13)	**7068.5**
*EFC 1	83,159
Avg. time p/file	4.8
Total Time (in minutes)	399163.2
Per Hour	60
Hours Worked (** Activity 14)	**6652.7**
*EFC 4	589
Avg. time p/account	6.1
Total Time (in minutes)	3592.9
Per Hour	60
Hours Worked (** Activity 15)	**59.9**
*EFC 5	4843
Avg. time p/student	4.4
Total Time (in minutes)	21309.2
Per Hour	60
Hours Worked (** Activity 16)	**355.2**

Conclusion: Findings will go forward to the EFCW-2.

*EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

**Activity Codes
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	30,300
Avg. time p/question	3.4
Total Time (in minutes)	103020
Per Hour	60
Hours Worked **(** Activity 21)**	**1717.0**
***EFW 6**	30,300
Avg. time p/application	4.4
Total Time (in minutes)	133320
Per Hour	60
Hours Worked **(** Activity 22)**	**2222.0**
***EFW 6**	30,300
Avg. time p/evaluation	3.8
Total Time (in minutes)	115140
Per Hour	60
Hours Worked **(** Activity 23)**	**1919.0**
***EFW 8**	2,297
Avg. time p/application	4.5
Total Time (in minutes)	10337
Per Hour	60
Hours Worked **(** Activity 24)**	**172.3**
***EFW 7**	28,003
Avg. time p/application	5.4
Total Time (in minutes)	151216
Per Hour	60
Hours Worked **(** Activity 25)**	**2520.3**
***EFW 8**	2,297
Avg. time p/application	5.5
Total Time (in minutes)	12634
Per Hour	60
Hours Worked **(** Activity 26)**	**210.6**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2 and Schedule 2A.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	4	5	
		**Activity Codes					
		11	12	13	14	15	16
Abadzhyan, Susanna	Technician	8		8			
Adakai, Ericka	Administrative Assistant	5		3			
Aguirre, Maria	Technician	8		8			
Alcaraz, Jose	Technician	8		8			
Aldrete, Guadalupe	Admissions & Records Technician	5	5	5	5		
Allen, Akilah	Admissions & Records Technician	20	10	10	20		
Almaraz, Arturo	Clerical Assistant	10	10	15	5		
Alton, Meg	Admissions & Records Technician	3	3	5	3		
Asam, John	Hourly Support Staff	3	4	3	3	3	
Aure, Allan	Technician	3	3	3	2	5	2
Bassler, Jennifer	Hourly Support Staff	4	3	3	4		
Beard, Claudia	Account Clerk	5	7	6			5
Becerril, Shelly	Hourly Registration	5	2	3	2	3	1
Bradshaw, John	Technician	4	3	5	3	4	
Calderon-Tenza, Roselie	Financial Aid Technician	5		10	5		5
Chang, Ly	Evaluator	10	10	5	10		
Clark, Antionese	Admissions & Records Specialist	7	7	7	7		
Cobb, Keith	Director, Financial Aid	8	7	7	10	7	5
Coria, Yessenia	Hourly Support Staff	1	2	1	2	2	
Cruz, Carrie	Clerical Assistant	8		8			
Cupino, Jeff	Hourly Support Staff	1	2	3	1	2	2
Davis, Christy A.	Admissions & Records Technician	10	7	4	4		
Dean, Brian	Admissions & Records Technician	10	5	10	5		
Dillon, Andrew	Hourly Support Staff	1	2	3	2	1	2
Do, Field	Evaluator	4	3	3	2	2	
Edwards, Arnette	Financial Aid Technician	10		5	5		5
Felix, Ana	Admissions & Records Specialist	5	5	5	4	5	5
Filippi, Geovanni	Clerical Assistant	1.5	2	7.5	3.5		
Fisher, Sandra	Hourly Registration	5	8	10	8	10	5
Ford, Regina	Registrar	5	5	10	2		
Funaoka, Lisa	Admissions & Records Technician	3	3	3	3	4	2
Guzman, Elizabeth A.	Admissions & Records Technician	5	5	5	5	5	5
Ha, Jackie	Financial Aid Specialist	10	7	5	5	5	7
Harter, Renie	Manager Campus Accounting	3	3	4	3	3	4
Henry, Kevin	Registration Clerk	2	2	1	1	2	1
Hernandez, Jeri	Administrative Assistant	6	5	10	5		
Hobson, Tori	Hourly Support Staff	3	3	1	2	5	1
Jimenez, Peter	Hourly Support Staff	2	3	1	2	4	4
Jones, LaQuita	Clerical Assistant	10		10	5		5
Kanaan, Jay	Accounting Technician	5	8	5	5	20	5
Larson, Nancy	Coordinator	8		8			
Ledezma, Elizabeth	Admissions Technician	1	3	1	2	2	
Leopold, Maureen	Accounting Specialist	5	8	5	4	10	15
Lorie-Jen, Kim	Evaluator	4	3	3	2		
Lucerno, Cheryl	Financial Aid Technician	3	2	1	2		1
Luviano, Elizabeth	Hourly Support Staff	2	2	1	2	2	
Mahoney, Leslie	Account Clerk	2		1		3	2
Majdali, Umaiylah	Hourly Accounting Technician	6	9	5	5	24	10
Martinez, Delores	Admissions & Records Technician	5	5	5	5	5	5
Mayberry, suzanne	Clerical Assistant	10	7	4	4		
Miller, John	Accounting Technician	3	10	3	6	15	7
Miranda, Sandra	Evaluator	5	4	2	5		
Montana, Erica	Student Support	1.5	2	1.5	1	2	
Morales, Lisa	Accounting Technician	7	7	6	4	25	9
Mosley, Amelia	Clerical Assistant	10	10	10	10		
Negrete, Rena	Admissions & Records Specialist	5	5	5	5	5	5
Nelson, Brittany	Hourly Registration	5	2	3	2	3	1
Nguyen, Tuan	Admissions & Records Specialist	5	10	3	5		
Olivas, Priscilla	Hourly Support Staff	1	2	1	2	2	

Schedule 2
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Study

Oropeza, Elaine	Technician	8		8			
Padilla, Jayme	Evaluator	4	4	3	4	4	3
Quan, Linh	Accounting Specialist	2		2			4
Ramos, Amanda	Admissions & Records Assistant	5	5	2	5		
Reid, Denise	Admissions & Records Technician	5	3	2	3	5	4
Reza, Alan	Fianicial Aid Specialist	9	7	7.5	10	7	5
Rodriguez, Daisy C.	Accounting Technician	5	8	8	5	8	10
Saghaei, Azar	Hourly Support Staff	3	3	1	3	5	2
Sandoval, Rebeca	Financial Aid Specialist	3	2	1	2		1
Specht, Julie	Hourly Support Staff	10	10	10	15		
Thompson, Jeanne	Student Services Technician	60		15			
Tran, Kimberly	Financial Aid Technician	10		5	5		5
Tran, Luu	Admissions & Records Technician	15	5	5	20		
Truong, Phuc (Jason)	Admissions & Records Hourly	3	3	1.5	3		
Villegas, Fatima	Technician	8		8			
Average		**6.4**	**5.0**	**5.1**	**4.8**	**6.1**	**4.4**

Conclusion: Findings go forward to Schedule 1A.

*EFC Workload Multiplier (Client Provided) except Code 12 used default EFC 2.
Used client provided multipiers from 05-06.
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

**Activity Codes
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
North Orange County Community College
308/95 Enrollment Fee collection and Waivers
Fiscal Year 2006-2007
Average PHR

Purpose: To calculate the average PHR for Admissions and Records staff.
Source: North Orange County CCD PHR list.
Findings:

Staff	Title	06-07	
Abadzhyan, Susanna	Technician	30.35	
Adakai, Ericka	Administrative Assistant	44.93	A
Aldrete, Guadalupe	Admissions & Records Technician	32.46	A
Aguirre, Maria	Technician	34.51	
Alcaraz, Jose	Technician	37.87	
Allen, Akilah	Admissions & Records Technician	46.94	
Almaraz, Arturo	Clerical Assistant	32.95	
Alton, Meg	Admissions & Records Technician	30.9	
Asam, John	Hourly Support Staff	12.72	A
Aure, Allan	Technician	36.17	
Bassler, Jennifer	Hourly Support Staff	11.18	
Beard, Claudia	Account Clerk	37.42	
Becerril, Shelly	Hourly Registration	12.72	A
Bradshaw, John	Technician	32.46	A
Calderon-Tenza, Roselle	Financial Aid Technician	38.88	
Chang, Ly	Evaluator	39.44	A
Clark, Antionese	Admissions & Records Specialist	33.66	
Cobb, Keith	Director, Financial Aid	62.32	
Coria, Yessenia	Hourly Support Staff	12.72	A
Cruz, Carrie	Clerical Assistant	31.2	
Cupino, Jeff	Hourly Support Staff	12.72	A
Davis, Christy A.	Admissions & Records Technician	32.46	A
Dean, Brian	Admissions & Records Technician	30.78	
Dillon, Andrew	Hourly Support Staff	10.93	
Do, Field	Evaluator	39.44	A
Edwards, Arnette	Financial Aid Technician	42.2	
Felix, Ana	Admissions & Records Specialist	49.31	
Filippi, Geovanni	Clerical Assistant	26.53	
Fisher, Sandra	Hourly Registration	12.72	A
Ford, Regina	Registrar	67.3	
Funaoka, Lisa	Admissions & Records Technician	33.72	
Guzman, Elizabeth A.	Admissions & Records Technician	38.66	
Ha, Jackie	Financial Aid Specialist	42.35	
Harter, Renie	Manager Campus Accounting	71.89	
Henry, Kevin	Registration Clerk	10.49	
Hernandez, Jeri	Administrative Assistant	44.93	A
Hobson, Tori	Hourly Support Staff	12.72	A
Jimenez, Peter	Hourly Support Staff	12.72	A
Jones, LaQuita	Clerical Assistant	31.34	A
Kanaan, Jay	Accounting Technician	41.26	
Larson, Nancy	Coordinator	48.57	
Ledezma, Elizabeth	Admissions Technician	32.46	A

Schedule 2A
North Orange County Community College
308/95 Enrollment Fee collection and Waivers
Fiscal Year 2006-2007
Average PHR

Staff	Title	06-07	
Leopold, Maureen	Accounting Specialist	97.28	
Lorie-Jen, Kim	Evaluator	39.44	A
Lucerno, Cheryl	Financial Aid Technician	32.46	A
Luviano, Elizabeth	Hourly Support Staff	10.41	
Mahoney, Leslie	Account Clerk	37.13	
Majdali, Umaiylah	Hourly Accounting Technician	12.72	A
Martinez, Delores	Admissions & Records Technician	32.46	A
Mayberry, suzanne	Clerical Assistant	31.34	A
Miller, John	Accounting Technician	37.17	
Miranda, Sandra	Evaluator	39.44	A
Montana, Erica	Student Support	12.72	A
Morales, Lisa	Accounting Technician	41.42	
Mosley, Amelia	Clerical Assistant	31	
Negrete, Rena	Admissions & Records Specialist	41.98	
Nelson, Brittany	Hourly Registration	12.72	A
Nguyen, Tuan	Admissions & Records Specialist	42.79	
Olivas, Priscilla	Hourly Support Staff	12.72	A
Oropeza, Elaine	Technician	44.76	
Padilla, Jayme	Evaluator	39.44	A
Quan, Linh	Accounting Specialist	39.92	
Ramos, Amanda	Admissions & Records Assistant	28.33	
Reid, Denise	Admissions & Records Technician	32.46	A
Reza, Alan	Fianicial Aid Specialist	44.49	
Rodriguez, Daisy C.	Accounting Technician	24.16	
Saghaei, Azar	Hourly Support Staff	12.72	A
Sandoval, Rebeca	Financial Aid Specialist	38.93	
Specht, Julie	Hourly Support Staff	12.72	A
Thompson, Jeanne	Student Services Technician	32.46	A
Tran, Kimberly	Financial Aid Technician	36.86	
Tran, Luu	Admissions & Records Technician	32.46	A
Truong, Phuc (Jason)	Admissions & Records Hourly	10.9	
Villegas, Fatima	Technician	28.53	
Average		**32.72**	

Conclusion: Findings go forward to EFCW-2.

A: Used average PHR.

Schedule 3
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Abadzhyan, Susanna	Technician	4.0	5.0	4.0	5.0	8.0	5.0
Adakai, Erica	Admissions Assistant	1.0					
Aguirre, Maria	Technician	4.0	5.0	4.0	5.0	8.0	5.0
Alcaraz, Jose	Technician	4.0	5.0	4.0	5.0	8.0	5.0
Asam, John	Hourly Support Staff	3.0	2.0	2.0	2.0		
Aure, Allan	Technician	3.0					
Bassler, Jennifer	Hourly Support Staff	4.0					
Beard, Claudia	Account Clerk	8.0					
Bradshaw, John	Technician	2.0					
Calderon-Teneza, Roselle	Financial Aid Technician	10.0	15.0	10.0	10.0	10.0	15.0
Cobb, Keith	Director, Financial Aid	3.0	5.0	2.0	5.0	7.0	8.0
Coria, Yessenia	Hourly Support Staff	1.0					
Cruz, Carrie	Clerical Assistant	4.0	5.0	4.0	5.0	8.0	5.0
Cupino, Jeff	Hourly Support Staff	2.0	3.0	2.0	2.0	3.0	2.0
Dillon, Andrew	Hourly Support Staff	2.0	3.0	2.0	1.0	2.0	1.0
Do, Field	Evaluator	3.0					
Edwards, Arnette	Financial Aid Technician	5.0	5.0	10.0	10.0	5.0	7.0
Felix, Ana	Admissions & Records Specialist	5.0					
Funaoka, Lisa	Admissions & Records Technician	2.0	4.0	5.0	5.0	5.0	4.0
Guzman, Elizabeth A.	Admissions & Records Technician	5.0					
Ha, Jackie	Financial Aid Specialist	5.0	7.0	3.0	7.0	5.0	4.0
Hobson, Tori	Hourly Support Staff	1.0	1.0	2.0	1.0	3.0	2.0
Jimenez, Peter	Hourly Support Staff	2.0	2.0	1.0	3.0	2.0	5.0
Jones, LaQuita	Clerical Assistant	10.0	5.0	5.0	5.0	5.0	10.0
Larson, Nancy	Coordinator	4.0	5.0	4.0	5.0	8.0	5.0
Ledezma, Elizabeth	Admissions Technician	4.0	3.0	3.0	5.0	4.0	4.0
Lorie-Jen, Kim	Evaluator	3.0					
Lucero, Cheryl	Financial Aid Technician	2.0	2.0	1.0		1.0	
Luviano, Elizabeth	Hourly Support Staff	1.5					
Mahoney, Leslie	Senior Account Clerk	1.0					
Martinez, Delores	Admissions & Records Technician	5.0					
Miller, John	Accounting Technician	3.0					
Montana, Erica	Student Support	1.5					
Negrete, Rena	Admissions & Records Specialist	5.0					
Olivas, Prescilla	Hourly Support Staff	1.0					
Oropeza, Elaine	Technician	4.0	5.0	4.0	5.0	8.0	5.0
Padilla, Jayme	Evaluator	3.0					
Quan, Linh	Accounting Specalist	1.0					
Reid, Denise	Admissions & Records Technician	3.0					
Reza, Alan	Financial Aid Specialist	3.0	5.0	2.0	5.0	7.0	8.0
Saghaei, Azar	Hourly Support Staff	1.0	1.0	2.0	2.0	4.0	
Sandoval, Rebeca	Financial Aid Specialist	2.0	2.0	1.0		1.0	
Thompson, Jeanne	Student Services Technician	5.0					
Tran, Kimberly	Financial Aid Technician	5.0	5.0	10.0	1.0	5.0	4.0

Schedule 3
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Staff	Title	6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Villegas, Fatima	Technician	4.0	5.0	4.0	5.0	8.0	5.0
Average		**3.4**	**4.4**	**3.8**	**4.5**	**5.4**	**5.5**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
North Orange County community College
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Average PHR

Purpose: To calculate average PHR for Financial Aid staff.
Source: North Orange County CCD PHR's.
Findings:

Staff	Title	06-07	
Abadzhyan, Susanna	Technician	30.35	
Adakai, Erica	Admissions Assistant	44.93	A
Aguirre, Maria	Technician	34.51	
Alcazar, Jose	Technician	37.87	
Asam, John	Hourly Support Staff	12.72	A
Aure, Allan	Technician	36.17	
Bassler, Jennifer	Hourly Support Staff	11.18	
Beard, Claudia	Account Clerk	37.42	
Bradshaw, John	Technician	32.46	A
Calderon-Teneza, Roselle	Financial Aid Technician	38.88	
Cobb, Keith	Director, Financial Aid	62.32	
Coria, Yessenia	Hourly Support Staff	12.72	A
Cruz, Carrie	Clerical Assistant	31.2	
Cupino, Jeff	Hourly Support Staff	12.72	A
Dillon, Andrew	Hourly Support Staff	10.93	A
Do, Field	Evaluator	39.44	A
Edwards, Arnette	Financial Aid Technician	42.2	
Felix, Ana	Admissions & Records Specialist	49.31	
Funaoka, Lisa	Admissions & Records Technician	33.72	
Guzman, Elizabeth A.	Admissions & Records Technician	38.66	
Ha, Jackie	Financial Aid Specialist	42.35	
Hobson, Tori	Hourly Support Staff	12.72	A
Jimenez, Peter	Hourly Support Staff	12.72	A
Jones, LaQuita	Clerical Assistant	31.34	A
Larson, Nancy	Coordinator	48.57	
Ledezma, Elizabeth	Admissions Technician	32.46	A
Lorie-Jen, Kim	Evaluator	39.44	A
Lucero, Cheryl	Financial Aid Technician	32.46	A
Luviano, Elizabeth	Hourly Support Staff	10.41	
Mahoney, Leslie	Senior Account Clerk	37.13	
Martinez, Delores	Admissions & Records Technician	32.46	A
Miller, John	Accounting Technician	37.17	
Montana, Erica	Student Support	12.72	A
Negrete, Rena	Admissions & Records Specialist	41.98	
Olivas, Prescilla	Hourly Support Staff	12.72	A
Oropeza, Elaine	Technician	44.76	
Padilla, Jayme	Evaluator	39.44	A
Quan, Linh	Accounting Specalist	39.92	
Reid, Denise	Admissions & Records Technician	32.46	A
Reza, Alan	Financial Aid Specialist	44.49	
Saghaei, Azar	Hourly Support Staff	12.72	A
Sandoval, Rebeca	Financial Aid Specialist	38.93	
Thompson, Jeanne	Student Services Technician	32.46	A
Tran, Kimberly	Financial Aid Technician	36.86	
Villegas, Fatima	Technician	28.53	
Average		**31.93**	

Conclusion: Findings go forward to EFCW-2.

A: Average PHR used.

Schedule 4
North Orange County C unity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and excel spreadsheet from client.
Findings:

*Workload Multiplier	Source	Totals								
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1. Enrolled Students	81,052	80,935	88,893	88,897	83,317	76,868	78,803	77,505	83,159
EFC 2	1.8-1 2. Paid Enrollment fees	71,116	71,133	78,391	78,141	71,431	64,723	64,582	63,351	68,239
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	9,936	9,802	10,502	10,756	11,886	12,145	14,221	14,154	14,920
EFC 4	1.8-2 1. Delinquencies collections	Client not able to provide. Pre-Banner Term.			47	262	377	402	423	589
EFC 5	1.8-2 2. Refunds	Client not able to provide. Pre-Banner Term.			3,599	4,298	4,402	4,260	4,260	4,843
EFW 6	1.8-3 1. Waivers Requested	X	9,802	10,502	18,832	17,683	20,762	22,058	24,901	30,300
EFW 7	1.8-3 2. Waivers Approved	X -	9,802	10,502	18,014	16,785	18,539	20,806	22,881	28,003
EFW 8	1.8-3 (1-2) Waivers Denied	X	0	0	818	898	2,223	1,252	2,020	2,297

Conclusion: Findings will go forward to the Schedule 1A and 1B.

*EFC/EFW Workload Multiplier
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 6
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Student Headcount Summary

Purpose: To calculate student headcount.
Source: California Community Colleges Chancellor's Office website.
Findings:

College	Term	Headcount
Cypress	Summer	4720
	Fall	13040
	Spring	12876
Fullerton	Summer	8604
	Fall	20142
	Spring	19464
		78,846

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2006 Fall Term

Data Current As Of December 28, 2007 03:57:05

Total Headcount	13,040

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2007 Spring Semester

Data Current As Of December 28, 2007 03:56:51

Total Headcount	12,876

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Cypress
For 2006 Summer Term

Data Current As Of December 28, 2007 03:57:12

Total Headcount	4,720

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2006 Fall Term

Data Current As Of December 28, 2007 03:57:41

Total Headcount	20,142

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CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fullerton
For 2007 Spring Semester

Data Current As Of December 28, 2007 03:57:55

Total Headcount	19,464

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Fullerton
For 2006 Summer Term

Data Current As Of December 28, 2007 03:57:27

Total Headcount	8,604

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

RECEIVED
DEC 28 2007
BY:

District: North Orange County CCD

Renie Harter — Employee Name

Bursar — Exact Position Title

Cypress — College/Department/Location

714-484-7316 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours 05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:		1	
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:		60	
B. Enrollment Waiver Process:			
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		61	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 12-18-07

If you have any questions, please contact Kashu Vyas, at 714-808-4725

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

RECEIVED
DEC 28 2007
BY:

District: North Orange County CCD

Nancy Larson — Coordinator
Employee Name — Exact Position Title

Fullerton / FAD — 714-992-7057 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours 05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:			
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		8	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		72	
TOTALS:		80	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 12-17-07

If you have any questions, please contact Kasha Vyas, at 714-808-4725

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FAO — Department/Location

Susanna Abadzhyan — Employee Name

Technician — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susanna Abadzhyan Date 1/5/08

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records / FC
Department/Location

Ericka Adakai
Employee Name

Admin. Assistant II
Exact Position Title

(714)992-7000 12mo/11mo/10mo/hrly
Telephone #x25193 Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ericka Adakai Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC FAO
Department/Location

Maria Aguirre
Employee Name

Technician
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Aguirre Date 1/3/08

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC FAO
Department/Location

Jose Alcaraz
Employee Name

Tech
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Guadalupe Andrete
Employee Name

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature G. Andrete Date 5/21/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Akilah Allen
Employee Name

Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Akilah Allen Date 5/17/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Arturo Almaraz
Employee Name

A & R - Clerical Assistant
Exact Position Title

(562) 234-1116
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/16/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

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BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Meg Alton
Employee Name

Admissions and Records Technician
Exact Position Title

(714)484-7349
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Meg E. Alton Date May 17th 2007

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R Fullerton College
Department/Location

John Asam
Employee Name

Hourly Support staff
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

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Employee Signature _____ Date 5-31-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Allan Aure
Employee Name

Technician
Exact Position Title

714 992-7000
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

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Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

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BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Jennifer Bassler
Employee Name

Hourly Support Staff
Exact Position Title

n/a
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Jennifer Bassler Date 31 May, 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar
Department/Location

Claudia Beard
Employee Name

Account Clerk II
Exact Position Title

992-7555
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7 minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6 minutes					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 minutes					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Claudia S. Beard Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCD
District

Bursars office - CC
Department/Location

Shelley Becerril
Employee Name

Hourly - Registration
Exact Position Title

(714) 484-7317
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shelley Becerril Date August 29 07

If you have any questions, please contact _____, at _____

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BY

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Vacco
District

Admissions & Records
Department/Location

John Bradshaw
Employee Name

Technician
Exact Position Title

x25199
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date MAY 31 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County
District

Financial Aid - Cypress
Department/Location

Roselle Calderon-Teneza
Employee Name

Financial Aid Technician
Exact Position Title

714) 480-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Roselle Teneza Date 5/15/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement BY each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

LY CHANG
Employee Name

EVALUATOR
Exact Position Title

(714) 484-7427
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Antionese Clark
Employee Name

Admissions & Records Specialist
Exact Position Title

714-484-7409
Telephone #

12mo/11mo/10mo/hrly (X)
Work year length(circle)

Fiscal Year: 05-06 06-07 (X) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/16/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid
Department/Location

Keith Cobb
Employee Name

Director of Financial Aid
Exact Position Title

(7) 484-7116
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Keith Cobb Date 05/24/07

If you have any questions, please contact Keith Cobb, at 484-7116

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A&R
Department/Location

Yesseina Coria
Employee Name

Hourly Support Staff
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-31-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FAO — Department/Location

Carrie Cruz — Employee Name

Clerical Asst — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/3/08

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College Admissions + Records
Department/Location

Jeff Cupra
Employee Name

Hourly Support Staff
Exact Position Title

(714)
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature JGm Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Christy A. Davis
Employee Name

Admissions & Records Tech
Exact Position Title

4734-8
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/14/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Brian Dean
Employee Name

Admission & Records Tech.
Exact Position Title

(714) 484-7344
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC Admissions
Department/Location

Andrew Dillon
Employee Name

Hourly Support Staff
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. C. Dillon Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

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DEC 28 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records / Fullerton College
Department/Location

Field Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	22					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Field Do Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County
District

Financial Aid - Cypress
Department/Location

Arnette Edwards
Employee Name

Financial Aid Technician
Exact Position Title

714)484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

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DEC 2 8 2007
BY: _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

EC - ADMISSIONS
Department/Location

ANA FELIX
Employee Name

ADMISSIONS & RECORDS SPECIALIST
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 6/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

GIOVANNI FILIPPI
Employee Name

Clerical Assistant (40%)
Exact Position Title

714/484-7410
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 - 2 min	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 mins	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 - 10 mins	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-5 mins	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/16/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 20 min

EFCW 1.7-2

RECEIVED
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BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Cypress College / Bursar
Department/Location

Sandra Fisher
Employee Name

hourly - registration
Exact Position Title

(714) 484-7317
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8 min	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8 min	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min				✓	

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 8/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Regina Ford
Employee Name

Registrar
Exact Position Title

714-484-7432
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Regina Ford Date 5-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC - A&R
Department/Location

Fundoka, Lisa
Employee Name

A&R Technician
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement BY each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICI
Exact Position Title

(714)992-7578 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E. Guzman Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

PAO/CC
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

484-7118
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jackie Ha Date 5/15/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BUSAR - CC
Department/Location

RENIE HARTER
Employee Name

MANAGER CAMPUS ACCOUNTING
Exact Position Title

714-484-7316
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-4-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Kevin Henry
Employee Name

(714)484-7317
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Bursar's Office
Department/Location

Registration clerk
Exact Position Title

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓	Work			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K. Hy Date 8-29-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

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DEC 2 8 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Jeri Hernandez
Employee Name

Administrative Assistant
Exact Position Title

47345
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeri Hernandez Date 5-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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How long did it take you to fill out this form? 2 minutes

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NDCCCD
District

Fullerton College A+P
Department/Location

Tori Hobson
Employee Name

Hourly Support Staff
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-31-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. BY: _____

NoCCCD
District

Fullerton College A+R
Department/Location

Peter Jimenez
Employee Name

Hourly Support Staff
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Peter Jimenez Date 05/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NACCCD
District

Financial Aid
Department/Location

Lashuita Jones
Employee Name

Clerical Assistant I
Exact Position Title

714 484-7089
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Jones Date 5-15-07

If you have any questions, please contact _____, at _____

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How long did it take you to fill out this form? 8

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

JAY KANAAN
Employee Name

(714) 484-7315
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

BURSARS - CYPRESS COLLEGE
Department/Location

ACCOUNTING TECHNICIAN
Exact Position Title

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

40% OF STUDENTS

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 8/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC FAO
Department/Location

Nancy Larson
Employee Name

Coordinator
Exact Position Title

992-7050
Telephone #

(12mo/11mo/10mo/hrly)
~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE ~~USE BLUE~~ INK

Employee Signature _____ Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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DEC 28 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FULLERTON COLLEGE A&R
Department/Location

ELIZABETH LEDEZMA
Employee Name

ADMISSIONS TECHNICIAN
Exact Position Title

(714) 992-7000 EXT. 25197
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

RECEIVED
DEC 28 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar's Office - CC
Department/Location

Maureen Leopold
Employee Name

Accounting Specialist
Exact Position Title

484-7318
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maureen Leopold Date 8/29/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

No. Orange County Comm College Dist. — District
A&R — Department/Location
Kim Lorie-Ten — Employee Name
Evaluator — Exact Position Title
714 992-7574 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Lorie — Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

CC-Fin Aid
Department/Location

Cheryl A. Lucero
Employee Name

Financial Aid Technic
Exact Position Title

ext. 47117
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0 N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl A. Lucero Date 05/15/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Elizabeth Luviano
Employee Name

MIS Student Support
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Luviano Date 5-31-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

N.O.C.C.C.D
District

FC Bursar
Department/Location

Leslie Mahoney
Employee Name

Account Clerk
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	~~0~~					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	1				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~0~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Leslie Mahoney Date 05/04/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

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DEC 2 8 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar / Cypress College
Department/Location

Umaiylah Majdali
Employee Name

Hourly Accounting Tech.
Exact Position Title

(714) 484-7317
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	24				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

40% of Students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Umaiylah Majdali Date 9/4/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records | Fullert College
Department/Location

Delores Martinez
Employee Name

Admissions & Records Technician
Exact Position Title

(7)992-7577
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Delores Martinez Date 5-31-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Suzanne Mayberry
Employee Name

Clerical Assistant
Exact Position Title

714-484-7092 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Suzanne Mayberry Date 5/17/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 10 minutes

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar's office
Department/Location

John Miller
Employee Name

Accounting Technician
Exact Position Title

714-992-7000 x28230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06/06-07/07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	~~5~~ 10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	~~5~~ 6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	15					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Miller Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Sandra Miranda
Employee Name

Evaluator
Exact Position Title

484-7431
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature S Miranda Date 5-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

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BY: _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Erica Montana
Employee Name

Student Support
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(~~circle~~)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1-2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1-2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erica Montana Date 05/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Lisa Morales
Employee Name

Bursar's Cypress
Department/Location

Acct Tech
Exact Position Title

484-7317
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	25				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9					✓

40% of Student

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lisa Morales Date 8-29-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

AMELIA MOSLEY
Employee Name

CLERICAL ASSISTANT
Exact Position Title

(714) 484-7428
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amelia M. Mosley Date 05-16-07

If you have any questions, please contact Dave Wassenaar, A&R Dean at (714) 484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. BY: _____

NOCCCD
District

Admissions & Records
Department/Location

Rena Negrete
Employee Name

Admission & Records Specialist
Exact Position Title

992-7789
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/21/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursars office - CC
Department/Location

Brittany Nelson
Employee Name

Hourly - Registration
Exact Position Title

(714)484-7317
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brittany Nelson Date 12/29/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Tuan Nguyen
Employee Name

A&R Specialist
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tuan Nguyen Date 5/17/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A&R
Department/Location

Priscilla Olivas
Employee Name

Hourly Student support
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature P Olivas Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FAO — Department/Location

Elaine Oropeza — Employee Name

Cashier — Exact Position Title

992-7050 — Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Oropeza Date 1/3/08

If you have any questions, please contact _____, at _____

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DEC 2 8 2007

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD-
District

Admission & Records / Fullerton College
Department/Location

Padilla, Jayme
Employee Name

Evaluator
Exact Position Title

(714) 992-7000 ext. 25194
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee *information, and providing a copy to the student.*	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jayme Padilla Date 6/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE / STUDENT SERVICES 2000 BLDG
Department/Location

LINH QUAN
Employee Name

ACCOUNTING SPECIALIST
Exact Position Title

714.992.7555
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh Quan Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 2

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Amanda Ramos
Employee Name

A&R Clerical Assistant I
Exact Position Title

714 484 7410 (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amanda Ramos Date 5.10.07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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How long did it take you to fill out this form? 2

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Denise Reid
Employee Name

A & R Tech
Exact Position Title

X25195
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Reid Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Cypress College - Financial Aid Dept
Department/Location

Alan Reza
Employee Name

Financial Aid Specialist
Exact Position Title

(714) 484-7114
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8 to 10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 to 10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Alan Reza Date 5/15/07

If you have any questions, please contact Alan Reza, at (714) 484-7114 ext. 7

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Cypress College Bursar's Office
Department/Location

Daisy C. Rodriguez
Employee Name

Acct. Tech
Exact Position Title

(714)484-7314
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06/06-07/07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					✓

40% of students

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 8/29/2007

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A&R
Department/Location

Azar Saghaei
Employee Name

Hourly Support Staff
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Azar Saghaei Date 05/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fin. Aid
Department/Location

Rebeca Sandoval
Employee Name

Financial Aid Specialist
Exact Position Title

(714) 484-7119
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rebeca Sandoval Date 5/15/07

If you have any questions, please contact (714) 484-7119, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 28 2007
BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Julie Specht
Employee Name

Student hourly employee
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie Specht Date 5/17/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714)484-7217

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
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BY

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid / Cypress College
Department/Location

Jeanne Thompson
Employee Name

Student Services Technician
Exact Position Title

(714) 484-7000x45013
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	60					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee *information, and providing a copy to the student.*	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeanne Thompson Date 5/17/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCD
District

Fin. Aid / Cypress
Department/Location

Kimberly Tran
Employee Name

Fin. Aid Tech
Exact Position Title

x48120
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	NA					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kimberly Tran Date 5-16-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Luu Tran
Employee Name

A & R Technician
Exact Position Title

(714) 484-7347
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ (LT) Date 05/18/07

If you have any questions, please contact Dave Wassenaar, A&R Dean, at (714) 484-7217

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 4

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions and Records/Cypress College
Department/Location

Phuc (Jason) Truong
Employee Name

A+R - Hourly
Exact Position Title

(714) 422-6177 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1-2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A	N/A				
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/17/07

If you have any questions, please contact Dave Wassenaar, A&R Dean at (714) 484-7217

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FAO — Department/Location

Fatima Villegas — Employee Name

Technician — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	N/A					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Fatima Villegas Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Revised January 2006

How long did it take you to fill out this form? 5 min 9:06 9:11

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC FIN AID
Department/Location

Susanna Abadzhyan
Employee Name

Technician
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

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Employee Signature Susanna Abadzhyan Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R / FC
Department/Location

Gricka Adakai
Employee Name

Admin. Asst. II
Exact Position Title

(714) 992-7000 X25193
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

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Employee Signature Gricka Adakai Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC FIN AID
Department/Location

Maria Aguirre
Employee Name

Technician
Exact Position Title

992-7050
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

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Employee Signature MAguirre Date 1/3/08

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FIN AID — Department/Location

Jose Alcaraz — Employee Name

Teach — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

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Employee Signature _____ Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R Fullerton College
Department/Location

John Asam
Employee Name

Hourly Support staff
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly (circle) Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature _____ Date 5-31-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY: _____

NOCCCD
District

Admissions & Records
Department/Location

Allan Aune
Employee Name

Technician
Exact Position Title

714.992.7000
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

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Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records.
Department/Location

Jennifer Peasler
Employee Name

Hourly Support Staff
Exact Position/Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Jennifer Peasler Date 31 May, 2007

If you have any questions, please contact _____, at _____

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How long did it take you to fill out this form? 10 minutes

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Bursar
Department/Location

Claudia Beard
Employee Name

Account clerk II
Exact Position Title

992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8 minutes			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

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Employee Signature Claudia S. Beard Date 5-3-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

A&R Admissions & Records
Department/Location

JOHN BRADSHAW
Employee Name

Technician
Exact Position Title

X25199
Telephone #

(12mo) 11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A 0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A 0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A 0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A 0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A 0			

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Employee Signature _____ Date MAY 31 2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

North Orange County
District

Financial Aid - Cypress
Department/Location

Roselle Calderon-Tenezq
Employee Name

Financial Aid Technician
Exact Position Title

714) 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			

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Employee Signature Roselle Tenezq Date 5/15/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY: _____

NOCCCD
District

Financial Aid
Department/Location

Keith Cobb
Employee Name

Director of Financial Aid
Exact Position Title

484-7116
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			

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Employee Signature Keith Cobb Date 05/24/07

If you have any questions, please contact Keith Cobb, at 484-7116

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A&R
Department/Location

Yesseria Coria
Employee Name

hourly Support Staff
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yesseria Coria Date 5-31-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 5 min 9:06 9:11

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FIN AID — Department/Location

Connie Cruz — Employee Name

CLERICAL ASST — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 3 minutes

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College Admissions + Records
Department/Location

Jeff Chpino
Employee Name

Hourly Support Staff
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC Admissions
Department/Location

Andrew Dillon
Employee Name

Hourly Support Staff
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ***ENROLLMENT WAIVER FUNCTIONS***	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	< 1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature A. C. Dillon Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EECW 1.7-3

RECEIVED
DEC 28 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records / Fullerton College
Department/Location

Field Do
Employee Name

Evaluator
Exact Position Title

(714) 992-7790
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	Ø			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	Ø			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	Ø			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	Ø			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	Ø			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature F. Do Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. BY:

North Orange County
District

Financial Aid- Cypress
Department/Location

Arnette Edwards
Employee Name

Financial Aid Technician
Exact Position Title

714 484-7114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

RECEIVED
DEC 2 8 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC - A & R
Department/Location

ANA FELIX
Employee Name

ADMISSIONS & RECORDS SPECIALIST
Exact Position Title

Telephone # _____

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Felix Date 6/1/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FC-A&R
Department/Location

Funaoka Liza
Employee Name

A&R Technician
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

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Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

ADMISSIONS & RECORDS
Department/Location

ELIZABETH A. GUZMAN
Employee Name

ADMISSIONS & RECORDS TECHNICIAN
Exact Position Title

(714)992-7578
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

FAO / CC
Department/Location

JACKIE HA
Employee Name

FAS
Exact Position Title

484-7118
Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

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Employee Signature Jackie Ha Date 5/15/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A+R
Department/Location

Tori Hobson
Employee Name

hourly support staff
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			

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Employee Signature _____ Date 5-31-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College A-IR
Department/Location

Peter Jimenez
Employee Name

Hourly Support Staff
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

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Employee Signature _____ Date 05/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 5 min

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NACCCD
District

Financial Aid
Department/Location

LaQuita Jones
Employee Name

Clerical Assistant I
Exact Position Title

(714) 484-7099
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature L. Jones Date 5-15-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 5 min 1.06 9/11

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FIN AID — Department/Location

Nany Lorsa — Employee Name

Coordinator — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 6

EFCW 17.3

RECEIVED
DEC 28 2007
BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NPCCD
District

FULLERTON COLLEGE - A&R
Department/Location

ELIZABETH LEDEZMA
Employee Name

ADMISSIONS TECH.
Exact Position Title

EXT- 25197
Telephone #

~~12mo~~/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

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Employee Signature _____ Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill o.. .nis form? 2 min

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY: _____

NOCCCD
District

A & R
Department/Location

Kim Lowe-Jen
Employee Name

Evaluator
Exact Position Title

714 992-7574
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim Lowe-Jen Date 5/30/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 25 min

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. BY: _____

NOCCCD
District

CC- Fin Aid
Department/Location

Cheryl A. Lucero
Employee Name

Fin Aid Technician
Exact Position Title

ext. 47117
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Cheryl Lucero Date 05/15/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY: _____

NOCCCD
District

Fullerton College
Department/Location

Elizabeth Lemons
Employee Name

Interim Student Support
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1-2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Elizabeth Lemons Date 5-31-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY: _____

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

N.O.C.C.C.D
District

FC Bursar
Department/Location

Leslie Mahoney
Employee Name

Account Clerk Senior
Exact Position Title

_____
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature _____ Date 6-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

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BY:

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions/Records Fullerton College
Department/Location

Delores Martinez
Employee Name

Admissions+Records Technician
Exact Position Title

714992-7517
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	n/a			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Delores Martinez Date 5-31-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 5 MINUTES

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE
Department/Location

JOHN MILLER
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

714-992-7000 X28230
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

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Employee Signature John Miller Date 5/3/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY: .....

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Fullerton College
Department/Location

Erica Montana
Employee Name

Student Support
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1-2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Erica Montana Date 05/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Rena Negrete
Employee Name

Admission & Records Specialist
Exact Position Title

992-7789
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rena Negrete Date 5/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

FY: .....

NOCCCD
District

Fullerton College A&R
Department/Location

Priscilla Olivas
Employee Name

Hourly Student Support
Exact Position Title

714 992-7405
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature POlivas Date 5/31/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 5 min 9:06 9/11

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District

FC FIN AID — Department/Location

Elaine Lopez — Employee Name

Technician — Exact Position Title

992-7050 — Telephone #

12mo/11mo/10mo/hrly (12mo) — Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Lopez Date 1/3/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admission & Records / Fullerton College
Department/Location

Padilla, Jayme
Employee Name

Evaluator
Exact Position Title

(714) 992-7000 ext. 25194
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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How long did it take you to fill out this form? 2

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

BURSAR'S OFFICE / STUDENT SERVICES 2000 BLDG
Department/Location

LINH QUAN
Employee Name

ACCOUNTING SPECIALIST
Exact Position Title

714-992-7555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh Quan Date 5/3/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Admissions & Records
Department/Location

Denise Reid
Employee Name

A&R Tech
Exact Position Title

x25195
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise Reid Date 5/31/02

If you have any questions, please contact _____, at _____

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How long did it take you to fill out this form? 5 minutes

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
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BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid office - Cypress
Department/Location

Alan Reza
Employee Name

Financial Aid Specialist
Exact Position Title

(714)484-7114 ext 7
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			

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Employee Signature Alan Reza Date 5/15/07

If you have any questions, please contact Alan Reza, at (714)484-7114 exp 7

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 28 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District: Nocccd	Department/Location: Fullerton College A&R
Employee Name: Azar Saghaei	Exact Position Title: Hourly support Staff
Telephone #:	Work year length (circle): 12mo/11mo/10mo/hrly
Fiscal Year: 05-06 (06-07) 07-08	

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Azar Saghaei Date 05/31/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED DEC 28 2007

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

BY: ----------

NOCCCD
District

Fin. Aid
Department/Location

Rebeca SANDOVAL
Employee Name

Financial Aid Specialist
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0			

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Employee Signature Rebeca Sandoval Date 5/15/07

If you have any questions, please contact Rebeca Above, at (714) 484-7119

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD
District

Financial Aid/Cypress College
Department/Location

Jeanne Thompson
Employee Name

Student Services Technician
Exact Position Title

(714) 484-7000 x45013
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	n/A			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/A			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/A			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/A			

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Employee Signature Jeanne Thompson Date 5/17/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

RECEIVED
DEC 2 8 2007
BY:

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCD
District

Fin Aid / Cypress
Department/Location

Kimberly Tran
Employee Name

Financial Aid Tech
Exact Position Title

x48120
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4			

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Employee Signature Kimberly Phan Date 5-16-07

If you have any questions, please contact _____, at _____

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How long did it take you to fill out this form? 5 min 7.06 9/11

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

NOCCCD — District
FC FIN AID — Department/Location
Fatima Villegas — Employee Name
Technician — Exact Position Title
992-7050 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5			

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Employee Signature Fatima Villegas Date 1/3/08

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

RECEIVED
DEC 2 8 2007
BY:

308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT STATISTICS REPORT

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		Please see attached	
Fall			
Winter/ Intersession			
Spring			
Total			
2. Number of students who paid enrollment fees:			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total			
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 12/14/07

Kashu Vyas
Employee Name: (print)

Accounting Specialist
Position or Title

If you have any questions, please contact Kashu Vyas, at 714-808-4725.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 Enrollment Fee Collection and Waivers

NOCCCD Confidential

1. Total Number of Students Enrolled in College
SixTen Form: EFCW 1.8-1, #1.
Source: Headcount from CCCO website

Term	Yr	Cypress	Fullerton
Fall	2006	13,040	20,142
Spring	2007	12,876	19,464
Summer	2007	6,989	10,648
Totals 2006-07		**32,905**	**50,254**

Not yet available on the CCCO website (took info from Banner)

83159 total

2. Total Number of Students Who Paid Enrollment Fees
SixTen Form: EFCW 1.8-1, #2. NOTE: Only have annual totals
Source: Calculated as #1 - #3

Term	Yr	Cypress	Fullerton
2006-07		26,424	41,815

68,239 total

3. Total Number of Students Waived from Enrollment Fees
SixTen Form: EFCW 1.8-1, #3. NOTE: Only have annual totals
Source: Banner

NOTE: CCCO Website no longer presents the unique counts for BOG. Since we took this from Banner, we are presenting the total of Fall 2006, Spring 2007 2007 below, which is consistent with our academic year info in Banner.

Academic Year	Cypress	Fullerton
2006-07	6,481	8,439

14,920 total

1.8-1
Cypress #1
0 c
13,040 +
12,876 +
6,989 +
32,905 *

Fullerton #1
0 c
20,142 +
19,464 +
10,648 +
50,254 *

#1 total
50,254 +
32,905 +
83,159 *

0 c
#2
26,424 +
41,815 +
68,239 *

RE
[illegible]
BY:
0 c
#3
6,481 +
8,439 +
14,920 *

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

RECEIVED
DEC 28 2007

District: North Orange County CCD

BY: .....

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		please see attached	
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 12/14/07

Kashu Vyas
Employee Name: (print)

Accounting Specialist
Position or Title

If you have any questions, please contact Kashu Vyas, at 714-808-4725.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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4. Total Number of Students with Enrollment Fee A/R
SixTen Form: EFCW 1.8-2, #1. NOTE: Only have annual totals
Source: Banner a/o 7/6/06

Academic Year	Cypress	Fullerton
Fall 2006	14	9
Spring 2007	162	167
Summer 2007	108	129

589 +0+0

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BY:.....

5. Total Number of Enrollment Fee Refunds Due to a Change in Waiver Eligibility
SixTen Form: EFCW 1.8-2, #2. NOTE: Only have annual totals
Source: Banner

Term	Cypress & Fullerton Combined
Fall 2006	2,393
Spring 2007	1,613
Summer 2007	837

4843+0+0

1.8-2

0 C

14 +
162 +
#1 108 +
284 +
9 +
157 +
129 +
589 *

0 C

2,393 +
#2 1,613 +
837 +
4,843 *

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

RECEIVED
DEC 2 8 2007
BY:

District: North Orange County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer		please see attached	
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 12/14/07

Kashu Vyas
Employee Name: (print)

Accounting Specialist
Position or Title

If you have any questions, please contact Kashu Vyas, at 714-808-4725.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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6. Total Number of Enrollment Fee Waivers Requested
SixTen Form: EFCW 1.8-3, #1. NOTE: Only have annual totals
Source: Banner

Academic Year	Cypress	Fullerton
2006-07	13,138	17,162

total = 30,300

7. Total Number of Enrollment Fee Waivers Granted
SixTen Form: EFCW 1.8-3, #2. NOTE: Only have annual totals
Source: Banner

Academic Year	Cypress	Fullerton
2006-07	12,023	15,980

= 28,003

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8. Total Number of Enrollment Fee Waivers Denied
Source: Calculated as #6 - #7

Academic Year	Cypress	Fullerton
2006-07	1,115	1,182

= 2297

1.8-3

#1 13,138 + 17,162 + 30,300 *

#2 12,023 + 15,980 + 28,003 *

#3 1,115 + 1,182 + 2,297 *

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

RECEIVED
DEC 2 8 2007

District: North Orange County CCD

BY: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$ please see attached	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: K. Vyas Date 12/14/07

Kashu Vyas
Employee Name: (print)

Accounting Specialist
Position or Title

If you have any questions, please contact Kashu Vyas, at 714-808-4725.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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12. Total Enrollment Fees Waived each Year
SixTen Form: EFCW 1.8-4, #4A
Source: BOGG Waivers per CCCO Website

Academic Year	Cypress	Fullerton
2006-07	2,257,290	3,258,486

CCCO Website presents the year as Summer - Spring

total 5,515,776

Banner presents the year as Fall - Summer. This is the info I used in calculaing the answers for Items 9 - 11 above.

Source: Banner

Term	Yr	Cypress	Fullerton
Fall	2006	1,215,669	1,705,561
Spring	2007	886,000	1,274,480
Summer	2007	158,090	243,660
Totals 2006-07		**2,259,759**	**3,223,701**

5,483,460 total

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BY:.....

13. Number of Credit Units for which Enrollment Fees were Waived
SixTen Form: EFCW 1.8-4, #5
Source: Banner

Academic Year	Cypress	Fullerton
Fall 2006	46,757	65,599
Spring 2007	44,300	63,724
Summer 2007	7,905	12,183

98,962 141,506
total = 240,468

** The refund numbers are overstated with regards to waivers. We were unable to separately identify enrollment refunds. All refunds are lumped together when being paid out.

*** We are unable to separately identify the gross enrollment fees that were collected, prior to any subsequent refunds. The enrollment fee amounts are net of any reversals due to changes in enrollment levels (e.g., dropped classes).

9. Total Enrollment Fees Collected each Year

SixTen Form: EFCW 1.8-4, #1.

Source: Banner. Calculated as: Net Enrollment Fees minus BOGG'd Fees minus A/R

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment. ***

Academic Year	Cypress	Fullerton
2006-07	3,506,509	6,175,023

+0 +0 = 9,681,532

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10. Total Enrollment Fees Refunded each Year

SixTen Form: EFCW 1.8-4, #2.

Source: Banner - Total Refunds, not just those for enrollment fees, but all fees. **

NOTE: Total Enrollment Fees Collected (above) already takes into account any enrollment fees refunded.

Academic Year	Cypress	Fullerton
2006-07	754,447	1,271,194

= 2,025,641

11. Total Enrollment Fee Revenue net each Year

SixTen Form: EFCW 1.8-4, #3.

Source: Banner. Total Enrollment Fees Earned

Calculated as: Net Enrollment Fees minus BOGG'd Fees

NOTE: Net Enrollment Fees equals all the enrollment fees charged as well as any enrollment fees reversed due to change in enrollment.

Academic Year	Cypress	Fullerton
2006-07	3,526,495	6,198,786

= 9,725,281

0. C
0. C
total fees collected
3,506,509. +
6,175,023. +
9,681,532. *
total fees refunded
754,447. +
1,271,194. +
2,025,641. *
total net enrollment fees
3,526,495. +
6,198,786. +
9,725,281. *
not enroll fee

Here are some more PHR's for people who submitted time surveys for the EFCW for 06/07 from the FC Financial Aid Office, who were not on the first PHR update request.

Name	Title	PHR
~~Oropeza, Elaine~~	~~FC Financial Aid - Technician~~	~~40.00~~
~~Garcia, Rosa~~	~~FC Financial Aid - Clerical Asst.~~	~~0.64~~
Abadzhyan, Susanna	FC Financial Aid - Technician	30.35
Aguirre, Maria	FC Financial Aid - Technician	34.51

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for 05-06.

COMMUNITY COLLEGE DISTRICT NAME: North Orange County CCD

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ACCOUNTING TECH	$ 31.14	$ 37.17
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 37.85	$ 44.93
HARTLEY, REDIE	AVERAGE BURSAR		$ 64.55
	AVERAGE CLERICAL ASSISTANT		$ 31.34
	AVERAGE COUNSELOR	$ 89.22	$ 77.60
	AVERAGE DEAN	$ 90.73	$ 91.34
	AVERAGE DIRECTOR	$ 74.26	$ 77.33
	AVERAGE EVALUATOR		$ 39.44
	AVERAGE HOURLY SUPPORT STAFF		$ 12.72
	AVERAGE INSTRUCTOR	$ 65.91	$ 70.85
	AVERAGE MANAGER	$ 56.65	$ 69.31
	AVERAGE TECHNICIAN		$ 32.46
ADAMS, JESSICA	CC-CLERICAL ASSISTANT I	$ 26.17	LEFT DISTRICT
AGUIRRE, MARIA	FINANCIAL AID TECHNICIAN	$ 28.55	$ 34.51
ALCARAZ, JOSE	FC-FINANCIAL AID TECHNICIAN	$ 37.46	$ 37.87
ALIBRANDI, LUCINDA	INSTRUCTOR	$ 69.26	$ 72.95
ALLEN-COURTNEY, AKILAH	CC-A&R RECORDS EVALULATOR SPECIALIST	$ 42.20	$ 46.94

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for 05-06.

COMMUNITY COLLEGE DISTRICT NAME: North Orange County CCD

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ACCOUNTING TECH	$ 31.14	$ 37.17
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 37.85	$ 44.93
	AVERAGE COUNSELOR	$ 89.22	$ 77.60
	AVERAGE DEAN	$ 90.73	$ 91.34
	AVERAGE DIRECTOR	$ 74.26	$ 77.33
	AVERAGE INSTRUCTOR	$ 65.91	$ 70.85
	AVERAGE MANAGER	$ 56.65	$ 69.31
ADAMS, JESSICA	CC-CLERICAL ASSISTANT I	$ 26.17	LEFT DISTRICT
AGUIRRE, MARIA	FINANCIAL AID TECHNICIAN	$ 28.55	$ 34.51
ALCARAZ, JOSE	FC-FINANCIAL AID TECHNICIAN	$ 37.46	$ 37.87
ALIBRANDI, LUCINDA	INSTRUCTOR	$ 69.26	$ 72.95
ALLEN-COURTNEY, AKILAH	CC-A&R RECORDS EVALULATOR SPECIALIST	$ 42.20	$ 46.94
ALMARAZ, ARTURO	CC-A&R CLERICAL ASSISTANT-40%	$ 25.07	$ 32.95
ALTON, MEG	CC-A&R TECHNICIAN	$ 27.43	$ 30.90
AURE, R. ALLEN	FC-A&R TECHNICIAN	$ 32.64	$ 36.17
AYALA, JOHN	DEAN, LEARNING RESOURCES	$ 62.92	RETIRED
AYON, VIOLET	EXECUTIVE ADMINISTRATIVE AIDE	$ 63.35	$ 66.16

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
BARROW, LINDA	HR SPECIALIST	$ 50.46	$ 54.36
BARTLETT, KIM	DIRECTOR, DSPS	$ 71.87	$ 82.09
BASSLER, JENNIFER	FC-A&R HOURLY STAFF SUPPORT	$ 10.71	$ 11.18
BEARD, CLAUDIA	FC-BURSAR'S OFFICE-ACCOUNT CLERK II	$ 34.66	$ 37.42
BEELER, RON	DIST. DIRECTOR-FACILITIES	$ 81.80	$ 93.37
BEERS, SUSAN	DIVISION DEAN	$ 85.40	$ 94.27
BENNETT, BARBARA	INSTRUCTOR	$ 53.84	$ 58.53
BETTENDORF, PAM	ADMINISTRATIVE ASSISTANT	$ 41.78	$ 45.10
BOYD-DAILEY, NANCY	HR SPECIALIST	$ 44.63	$ 47.65
BRANDES, RAEANE	ACCOUNTING SPECIALIST	$ 44.65	RETIRED
BRAULT, LORI (GAYLE)	DIRECTOR, HEALTH SERVICES	$ 66.95	RETIRED
BROWN, KALETA	DIVISION DEAN	$ 79.82	RETIRED
BURCHFIELD, JERRY	INSTRUCTOR	$ 64.07	$ 74.97
BURNS, KRIS	REGISTRAR	$ 54.43	$ 76.78
BURNS, MICHAEL	DIVISION DEAN RETIRED	$ 155.47	RETIRED
BUSTOS, RAYMOND	FC-FINANCIAL AID TECHNICIAN	$ 41.74	$ 46.38
BYRNES, NANCY	VP EDUC SUPPORT/PLAN	$ 84.40	$ 111.52
CALDERON, TENEZA, ROSELLE	CC-FINANCIAL AID TECHNICIAN	$ 36.20	$ 38.88
CANT, KAREN	DIRECTOR BUDGET/FINANCE	$ 85.17	$ 90.19
CARO, BARBARA	FC-A&R TECHNICIAN	$ 40.56	$ 43.94
CARRITHERS, JOE	INSTRUCTOR	$ 64.51	$ 71.41
CARTER, PATRICIA	CC-BURSAR'S OFFICE ACCOUNT-TECHNICIAN	$ 34.33	$ 51.90

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
CHAMBERS, TERRY	BENEFITS SPEC	$ 36.09	$ 40.06
CLARK, ANTIONESE new name coming	C-A&R SPECIALIST	$ 31.07	$ 33.66
COBB, KEITH	CC-DIRECTOR FINANCIAL AID	$ 56.16	$ 62.32
CORDELL, BRUCE	DEAN, NATURAL SCIENCE	$ 72.96	$ 80.91
COTTER, SANDRA	EXECUTIVE ASSISTANT	$ 51.79	$ 54.73
COURCHAINE, JEFFERY	INSTRUCTOR/INTERM DEAN	$ 86.43	LEFT DISTRICT
CRAIG, DALE	INSTRUCTOR	$ 67.22	$ 85.58
CRUZ, CARRIE	FC-CLERICAL ASSISTANT	$ 28.62	$ 31.20
DAIN, CLAUDETTE	DIRECTOR, FISCAL AFFAIRS	$ 71.81	$ 85.66
DAXON, REGINA (FORMLY HITCHCOCK)	INSTRUCTIONAL ASSISTANT, COMPUTER LAB	$ 36.68	$ 39.75
DEAN, BRIAN	CC-A&R TECHNICIAN	$ 27.74	$ 30.78
DeMARKEY, NINA	DIVISION DEAN	$ 70.51	$ 77.63
DIESENBRUCH, ROSEMARY	ACCOUNT TECH	$ 30.75	$ 36.32
DILLON, ANDREW	FC-A&R HOURLY STAFF SUPPORT	$ 8.60	$ 10.93
DO, DAO	OFFICE COORDINATOR	$ 35.61	$ 44.50
DONLEY, STEVEN	DIVISION DEAN	$ 88.73	$ 96.03
DONOVAN, LEXI	MANAGER CAMPUS ACCOUNTING	$ 62.94	LEFT DISTRICT
DOOLY, GEORGE	COUNSELOR	$ 70.66	$ 77.60
DUNCAN, STEVE	DIST DIR HR	$ 87.09	$ 96.00
EALY, SARA	FC-A&R HOURLY OFFICE CLERK	$ 9.34	$ 9.23
EDWARDS, ARNETTE	CC-FINANCIAL AID TECHNICIAN	$ 36.82	$ 42.20
EISENHUT, LINDA	DIST MGR BENEFITS	$ 27.88	RETIRED

Name	Title	Fiscal Years: 05-06	06-07
ENTEZAMPOUR, MO	DIVISION DEAN, SCIENCE, ENGINEERING & MATH (LEFT DISTRICT 6/30/07)	$ 86.27	$ 107.28
FELIX, ANA	FC-A&R SPECIALIST	$ 48.96	$ 49.31
FILIPPI, GEOVANI	CC-A&R CLERICAL ASSISTANT	$ 10.22	$ 26.53
FISHMAN, DARLENE	DIRECTOR NURSING	$ 74.61	$ 78.78
FITZGERALD, COLLEEN	FC-A&R HOURLY TECHNICIAN	$ 12.57	$ 13.50
FLORES-CHURCH, ADRIANNA	ADMIN SUPP MGR HR-TERM 2/21/06	$ 51.46	LEFT DISTRICT
FONG, PETER	DEAN, ADMISSIONS/RECORDS	$ 84.01	$ 93.05
FORD, REGINA	CC-A&R REGISTRAR	$ 54.88	$ 67.30
FOSTER, PATRICIA	FC-A&R OFFICE COORDINATOR	$ 52.84	$ 58.76
FRANKS, JOE	INSTRUCTOR	$ 62.26	$ 67.78
FUNAOKA, LISA	FC-A&R TECHNICIAN	$ 29.96	$ 33.72
GABEL, ANN-MARIE	HOURLY PFE	$ 38.71	LEFT DISTRICT
GAMBOA, JORGE	PROGRAM ASSISTANT/ESL	$ 47.89	$ 52.82
GILES, ERNICE	CC-A&R EVALUATOR	$ 29.78	LEFT DISTRICT
GISKA, MARY LOU	CC DIRECTOR HEALTH SERVICES	$ 57.67	$ 60.58
GLATTY, MARILYN	DIVISION DEAN, FINE ARTS	$ 87.57	$ 97.72
GOMBER, LISA	ADMINISTRATIVE ASSISTANT	$ 44.69	$ 49.60
GREENHALGH, MARK	INSTRUCTOR	$ 72.05	$ 84.05
GREIN, CYNDI	MANAGER, CAMPUS ACCOUNTING	$ 47.08	$ 56.28
GRIMES, KELLY	REOPS PROGRAM COORDINATOR	$ 65.17	$ 51.91
GUZMAN, ELIZABETH	FC-A&R TECHNICIAN	$ 34.54	$ 38.66
HA, JACKIE	CC-FINANCIAL AID TECHNICIAN	$ 42.07	$ 42.35

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
HANNON, ANDREA	DIV DEAN HEALTH SERVICES	$ 83.80	$ 92.67
HARTER, RENIE	CC-BURSAR'S OFFICE-MANAGER, CAMPUS ACCTING	$ 67.46	$ 71.89
HEBSON, CHRIS	IT SPEC., SYSTEMS ANALYST	$ 55.54	$ 61.12
HENRY, DIANE	DIVISION DEAN	$ 84.70	$ 92.67
HENRY, KEVIN	CC-BURSAR'S OFFICE-CASHIER/REGISTRATION-HRLY	$ 8.57	$ 10.49
HERRERA, EDGAR ALEX	INSTRUCTOR	$ 60.02	$ 68.38
HORSLEY, JEFF	VICE CHANCELLOR HR	$ 122.16	$ 134.50
HUBBARD, VANIETHIA	PROGRAM ASSISTANT/OAP	$ 47.55	$ 47.72
HUNTER, JEROME	CHANCELLOR	$ 145.81	$ 151.07
JAY, PAULA	ADMIN ASSISTANT	$ 24.10	RETIRED
JENSEN, BOB	DEAN, FINE ARTS	$ 77.63	$ 88.54
KANAAN, JIHAD (JAY)	CC-BURSAR'S OFFICE-ACCOUNT TECHNICIAN	38.12	$ 41.26
KASLER, MIKE	EXECUTIVE VICE PRESIDENT	$ 96.92	$ 110.55
LAM, TINA	FC-FINANCIAL AID TECHNICIAN (LEFT DISTRICT 7/27/06)	$ 32.03	$ 28.72
LARSEN, DENISE	PROGRAM ASSISTANT/DSPS	$ 49.58	$ 62.66
LARSON, NANCY	FC-FINANCIAL AID OFFICE COORDINATOR	$ 47.44	$ 48.57
LEDEZMA, STEPHEN	FC-A&R HOURLY	$ 10.68	$ 11.28
LEE, PAT	DIST MGR PAYROLL	$ 60.27	$ 73.77
LEOPOLD, MAUREEN	CC-BURSAR'S OFFICE ACCOUNTING SPECIALIST	45.06	$ 97.28
LEWIS, MARJORIE	PRESIDENT- CYPRESS COLLEGE (retired 7/1/06)	$ 125.71	$ 152.58
LEYSON, ELIZABETH	INTERIM EXEC VP (3/1/07 to 6/30/07)	$ 68.01	$ 106.00
LUSCH, ROD	SKILLED MAINTAINANCE MECH	$ 46.05	$ 50.48

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
LUVIANO, ELIZABETH	FC-A&R HOURLY OFFICE CLERK	$ 8.55	$ 10.41
MAERTENS, TINA	CC-A&R-CLERICAL ASSISTANT I	20.6	$ 32.62
MAHONEY, LESLIE	FC-BURSAR'S OFFICE-ACCOUNT CLERK II	34.65	$ 37.13
MARTINEZ, MONICA	FC-A&R HOURLY TRANSCRIPT CLERK	$ 9.39	$ 10.42
MATTSON, CAROL	DEAN	$ 70.10	$ 79.26
McALPIN, KENNETH	MGR/ MAINTENANCE & OPS	$ 49.60	$ 56.65
McCLOUD, EDWARD	INSTRUCTOR	$ 69.04	$ 76.69
McGUIRE, GARY	PROVOST	$ 119.10	$ 131.22
MEINERT, SARAH	CC-BURSAR'S OFFICE	25.88	$ 16.11
MELELLA, LAURA	INSTRUCTOR	$ 63.41	$ 70.91
MENCHACA, JESUS	FC-A&R HOURLY CLERK	$ 7.94	LEFT DISTRICT
MILLER, JOHN	FC-BURSAR'S OFFICE-ACCOUNTING TECHNICIAN	34.33	$ 37.17
MIRANDA, ALBERT	DIRECTOR, PHYSICAL PLANT/ FACILITIES	$ 83.81	$ 92.34
MIRANDA, BOB	DIRECTOR FINANCIAL AID	$ 71.50	$ 75.84
MIRANDA, MIGUEL	FACILITIES COORDINATOR	$ 26.65	$ 35.42
MONTANO, DIANE	MANAGER, CHILD CARECENTER	$ 51.88	$ 55.19
MONTENEGRO, CHRISTY	CC-A&R TECHNICIAN	31.14	$ 35.65
MOORE, MIKE	INSTRUCTOR	$ 65.79	$ 71.80
MOORE, SALLY	INSTRUCTOR (deceased 11/11/06)	$ 64.75	$ 67.64
MORALES, LISA	CC-BURSAR'S OFFICE-ACCOUNT TECHNICIAN	36.92	$ 41.42

MA..DATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
MORGAN, ROBERT	FACILITIES CUSTODIAN II	$ 20.95	$ 34.24
MOSLEY, AMELIA	CC-A&R CLERICAL ASSISTANT	29.85	$ 31.00
NEGRETE, RENA	FC-A&R SPECIALIST	$ 32.76	$ 41.98
NELSON, JANICE	BUSINESS OFFICE SPECIALIST	$ 44.24	$ 48.98
NERI, AURIA	CC-A&R HOURLY STUDENT	8.46	NO WORK IN 06-07
NGUYEN, DUSTIN TUAN	CC-A&R SPECIALIST	37.85	$ 42.79
NICCOLAI, NILO	DIRECTOR ACAD. COMP TECHNL	$ 78.63	$ 83.76
NOVISOFF, ANNA	ADMIN ASSISTANT	$ 45.11	$ 48.81
O'CONNOR, ADAM	DIRECTOR BUDGET/FINANCE	$ 87.21	$ 92.93
OROPEZA, ELAINE	FC-FINANCIAL AID TECHNICIAN	$ 43.71	$ 44.76
PALMER, SANDRA	EXEC ASSISTANT	$ 48.51	$ 51.73
PARISI, TOM	DEAN, SCE INSTRUCTOR/STUDENT SERVICES	$ 84.72	$ 93.70
PATAKAS, JOHN (BRADSHAW)	FC-A&R TECHNICIAN	$ 27.09	$ 30.35
PEREZ, JENNIFER	PUBLIC INFO OFFICER	$ 50.43	
PEREZ, RICK	DEAN, COUNSELING/STUDENT DEVELOPMENT	$ 87.29	LEFT DISTRICT
PFEIFFER, JODY	ADMINISTRATIVE ASSISTANT	$ 18.33	LEFT DISTRICT
PHILLIPS, JIM	INSTRUCTOR	$ 63.88	$ 67.11
PIERCE, RITA	PROGRAM ASSISTANT	$ 49.49	$ 58.54

Name	Title	Fiscal Years: 05-06	06-07
PORTOLAN, JANET	VP, EDUCATION SUPPORT & PLANNING	$ 84.40	$ 100.15
POSNER, MARC	PUBLIC INFORMATION OFFICER	$ 52.59	$ 67.97
PURTELL, VALENTINA	MANAGER - SCE ESL, SPEC ED PROGRAM	$ 58.39	$ 66.62
QUAN, LINH	FC-BURSAR'S OFFICE-ACCOUNTING SPECIALIST	$ 36.30	$ 39.92
RAMIREZ, JORGE	DEAN STUDENT SUPPORT SERVICES	$ 169.20	LEFT DISTRICT
RAMIREZ, RICHARD	DEAN STUDENT SERVICES	$ 87.78	$ 112.24
RAMOS, AMANDA	CC-A&R CLERICAL ASSISTANT	25.08	$ 28.33
RAUBOLT, JACK	DISTRICT DIRECTOR INFO SERVICES	$ 159.43	RETIRED
REHA, DELORES	INSTRUCTOR	$ 61.14	$ 65.47
REYES, ELIZABETH	CC-A&R HOURLY STUDENT	8.49	$ 11.46
REZA, ALAN	CC-FINANCIAL AID TECHNICIAN	$ 32.27	$ 44.49
RICCI, JOYCE	INTERIM DEAN, COUNSELING & STUD. DEV. (LEFT DISTRICT 6/30/07)	$ 68.34	$ 76.13
RODGERS, CAROLANNE	INSTRUCTOR	$ 68.27	$ 74.76
RODRIGUEZ, DAISY	CC-BURSAR'S OFFICE-ACCOUNTING TECHNICIAL	$ 13.68	$ 24.16
SALCEDO, DANIEL	FC-CLERICAL ASSISTANT I	$ 29.24	$ 30.57
SANBORN, JACKIE	ADMINISTRATIVE ASSISTANT	$ 53.07	$ 57.83
SANDOVAL, REBECA	CC-FINANCIAL AID TECHNICIAN	$ 42.20	$ 38.93
SAUCEDO, ESTHER	HR SPECIALIST	$ 47.21	$ 49.93

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
THOMAS, CONNIE	EXEC ASSISTANT	$ 55.17	$ 61.86
TORRES-GUTIERREZ, MARTHA	MANAGER	$ 60.07	$ 71.28
TRAN, KIMBERLY	CC-FINANCIAL AID TECHNICIAN	$ 34.74	$ 36.86
DRAKE, DONORAN	CC-A&R CLERICAL ASSISTANT (left district 3/27/07)	25.01	$ 31.41
TRUONG, PHUC	CLERICAL ASSISTANT	8.46	$ 10.90
TUSHLA, NICOL	FC-A&R EVALUATOR	$ 38.37	$ 41.59
VILLEGAS, FATIMA	FC-CLERICAL HOURLY ASSISTANT	$ 20.01	$ 28.53
VYAS, KASHU	ACCOUNTING SPECIALIST	$ 28.55	$ 40.45
VYSKOCIL, CINDY	DIRECTOR CAMPUS DIVERSITY	$ 64.28	$ 71.16
WALLACE, TOM	MANAGER TECHNICAL SUPPORT	$ 78.58	$ 83.67
WASSENAAR, DAVE	DIVISION DEAN, A&R	$ 83.94	$ 92.83
WHITEHURST, DOROTHY	DISTRICT DIRECTOR PURCHASING	$ 72.74	$ 75.91
WICKS, LORRAINE	MANAGER, SCE SENIORS PROGRAM	$ 67.75	$ 80.26
WILLIAMS, FRED	VICE CHANCELLOR, FISCAL SERVICES	$ 111.02	$ 117.77
WILLOUGHBY, DAN	DIVISION DEAN, HUMANITIES	$ 91.87	$ 93.70
WILSON, MARCUS	INSTRUCTOR	$ 70.72	$ 73.01
YOUNG, ELDON	DEAN, LANGUAGE ARTS	$ 84.72	$ 93.70
ZANDY, BEN	INSTRUCTOR (RETIRED 5/26/07)	$ 80.45	$ 89.02

North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by	$ 5,057,532	$ 5,128,876	$ 5,126,940	$ 7,598,920	$ 10,757,786	$ 10,559,678	$ 9,725,281
p/E.C. 76300 (c)	2% of Revenue Rec'd.	Client	$ 101,151	$ 102,578	$ 102,539	$ 151,978	$ 215,156	$ 211,194	$ 194,506
This data is for comparison with CCCCO 2% calculation directly below.									
1.8-4 line 4A	Enrollment Fees Waived	$ 3,110,245	$ 3,176,990	$ 1,922,055	$ 2,504,265	$ 3,820,034	$ 6,359,607	$ 6,248,006	$ 5,515,776
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192	$ 124,960	$ 110,316
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 217,717							
			For 00-01 through 05-06 - unit fee						
1.8-4 line 5	~~Summer~~ Fall			90,175	98,661	95,215	110,382	111,954	$ 112,356
	~~Fall~~ Spring			98,476	95,586	96,382	110,925	107,898	$ 108,024
	~~Winter/Interssion~~								
	~~Spring~~ Summer			15,952	13,488	17,086	18,034	18,438	$ 20,088
	Total # of credits		288,818	204,603	207,735	208,683	239,341	238,290	240,468
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800	$ 216,844	$ 218,826
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 62,205	$ 63,540	$ 38,441	$ 50,085	$ 76,401	$ 127,192	$ 124,960	$ 110,316
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 217,717							
1.8-4 5	Credit Units Waived		$ 262,824	$ 186,189	$ 189,039	$ 189,902	$ 217,800	$ 216,844	$ 218,826
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 279,922**	**$ 326,364**	**$ 224,630**	**$ 239,124**	**$ 266,303**	**$ 344,992**	**$ 341,804**	**$ 329,142**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: North Orange County
COUNTY: Orange

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$85,573,737	$74,595,191	$5,580,932	$80,176,123
ENROLL FEE ADMIN (2%)	133,267	122,605	10,662	133,267
APPRENTICE ALLOWANCE	23,814	22,356	1,458	23,814
BASIC SKILLS	1,475,669	0	1,475,669	1,475,669
S.F.A.A.	949,126	873,196	75,930	949,126
E.O.P.S.	2,331,067	2,144,581	186,486	2,331,067
C.A.R.E.	293,614	270,125	23,489	293,614
D.S.P.S.	2,451,638	2,255,507	196,131	2,451,638
STATE HOSPITALS	0	0	0	0
CALWORKS	728,771	641,490	87,281	728,771
MATRICULATION (CREDIT)	1,639,432	1,508,278	131,154	1,639,432
MATRIC. (NONCREDIT)	1,476,990	1,358,830	118,160	1,476,990
FAC.& STAFF DIVERSITY	30,998	28,518	2,480	30,998
PART-TIME FAC. ALLO.	1,561,487	1,436,568	124,919	1,561,487
PART-TIME FAC. OFF. HRS	551,165	0	551,165	551,165
PART-TIME FAC. INS.	9,594	0	9,594	9,594
TELECOMMUNICATIONS	104,511	67,523	36,988	104,511
PLANT & INSTRUCTIONAL	381,854	351,305	30,549	381,854
SCHDL. MAINT. & REPAIR	381,889	351,338	30,551	381,889
TANF	133,246	122,587	10,659	133,246
ECON. DEVELOPMENT	1,994,907	1,464,883	210,839	1,675,722
NURSING EDUCATION	297,812	94,661	203,151	297,812
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	784,148	784,148	0	784,148
ONE TIME FUNDS				
TRANSITION PAYMENT	231,456	201,938	29,518	231,456
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	677,900	677,900	0	677,900
BASIC SKILLS -REAPPROP	1,365,380	1,365,380	0	1,365,380
CAR. TECH. TRAILER BIL	1,207,260	1,207,260	0	1,207,260
GEN. PUR. TRAILER BILL	2,361,831	2,361,831	0	2,361,831
INST. MATERIAL TRAILER	1,425,183	1,425,183	0	1,425,183
SCHLD.MAINT. TRAILER B	1,425,183	1,425,183	0	1,425,183
FACULTY STAFF DEV	151,711	151,711	0	151,711
TOTAL	$112,164,640	$97,320,076	$9,127,765	$106,447,841

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
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Jule 5A
North Orange County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ -	$ -	$ -	$ -	$ -	$ -		
2	Staff Training	(04)(B)(1)(b)	$ 251.20	$ 253.20	$ 277.44	$ 316.96	$ 306.40	$ 332.96		$ 388.56
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ -	$ -	$ -	$ -	$ -	$ -		
4	Waiving student fees	(04)(B)(2)(b)	$ 120,363.31	$ 150,225.40	$ 285,123.46	$ 267,027.01	$ 326,671.60	$ 331,116.92	$ 466,102.48	$ 279,745.12
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,260.80	$ 2,278.80	$ 2,496.96	$ 2,852.64	$ 2,757.60	$ 2,996.64	$ 3,415.68	$ 3,497.04
6	EFCW - Fee Waiver Costs	Total	$ 122,875.31	$ 152,757.40	$ 287,897.86	$ 270,196.61	$ 329,735.60	$ 334,446.52	$ 469,518.16	$ 283,630.72
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 279,922.00	$ 326,364.00	$ 224,630.00	$ 239,124.00	$ 266,303.00	$ 344,992.00	$ 341,804.00	$ 329,142.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (157,046.69)	$ (173,606.60)	$ 63,267.86	$ 31,072.61	$ 63,432.60	$ (10,545.48)	$ 127,714.16	$ (45,511.28)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 122,875.31**	**$ 152,757.40**	**$ 224,630.00**	**$ 239,124.00**	**$ 266,303.00**	**$ 334,446.52**	**$ 341,804.00**	**$ 283,630.72**

Conclusion: If linen 8 is negative, then line 6-"Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7-"Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Cypress College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of December 28, 2007 03:59:09

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	125	43,592
BOGW - Part B based on income standards	3,251	1,045,987
BOGW - Part C based on financial need	2,793	1,167,711

total 6169

Total Amount = $ 2,257,290

Back to Top of Page

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total headcount
0 C
6,169 +
9,251 +
14,420 *

total $
0 C
2,257,290 +
3,258,486 +
5,515,776 *

headcount
6169
3251
14420

$
Cypress 2,257,290
Fullerton 3,258,486
total 5,515,776

0 C

Cypress Financial Aid
0 C
125 +
3,251 +
2,793 +
6,169 *

California Home

Friday, D

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fullerton College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of December 28, 2007 03:59:21

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	99	36,092
BOGW - Part B based on income standards	4,391	1,497,205
BOGW - Part C based on financial need	3,761	1,725,189

Total Amount = $ 3,258,486

Back to Top of Page

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Fullerton
FP Loans
Headcount

0 C
99 +
4,391 +
3,751 +
8,251 *

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
[illegible]2 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Palomar Community College District CC37140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Palomar Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 37140

(02) Claimant Name: Palomar Community College District

County of Location: San Diego

Street Address or P.O. Box: 1140 West Mission Road

City: San Marcos | State: CA | Zip Code: 92069-1487

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 712,800	(13) $ 648,022
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 648,022
Due from State	(08) $ 712,800	(17) $ 648,022
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	1,605
(23) EFCW-1, (04)(A)(1)(b)(f)	191
(24) EFCW-1, (04)(A)(2)(a)(f)	515,930
(25) EFCW-1, (04)(B)(1)(a)(f)	1,065
(26) EFCW-1, (04)(B)(1)(b)(f)	891
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	91,403
(29) EFCW-1, (04)(B)(2)(c)(f)	421
(30) EFCW-1, (06)	28
(31) EFCW-1, (07)	168,592
(32) EFCW-1, (09)	38,296
(33) EFCW-1, (10)	93,780
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 6/27/06

Anita Weems
Type or Print Name

Director of Fiscal Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant:

Palomar Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2004-2005

'03) Leave Blank

Direct Costs	Object Accounts					
04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 1,605.10	$ -	$ -	$ -	$ -	$ 1,605.10
b. Staff training (One time per employee)	$ 190.55	$ -	$ -	$ -	$ -	$ 190.55
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 515,929.91	$ -	$ -	$ -	$ -	$ 515,929.91
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. [illegible]paring district policies & procedures for § IV.B.	$ 1,064.75	$ -	$ -	$ -	$ -	$ 1,064.75
b. Staff training (One time per employee)	$ 891.46	$ -	$ -	$ -	$ -	$ 891.46
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 91,402.78	$ -	$ -	$ -	$ -	$ 91,402.78
c. Reporting BOG fee waiver data to CCC	$ 421.36	$ -	$ -	$ -	$ -	$ 421.36
05) Total Direct Costs	$ 611,505.91	$ -	$ -	$ -	$ -	$ 611,505.91

Indirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	27.57%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 168,592.18
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 780,098.09
Cost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 38,296.00
10) Less: Enrollment Fee Waiver offsets		$ 93,780.35
11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 648,021.74

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pa[illegible]ar Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Garavito, Karyn — Supvr., District Cashiering Services	$45.37	10.0	$ 453.70				
Masiello, Ellie — Admissions, Enrollment Coordinator	$38.38	30.0	$ 1,151.40				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 1,605.10	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
P[illegible]ar Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Garavito, Karyn Supvr., District Cashiering Services	$45.37	4.2	$ 190.55				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 190.55	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pr[illegible]ar Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various enrollment office staff Collecting fees	$34.48	3,540.7	$ 122,083.34				
Calculating total enrollment fee to be collected Various enrollment office staff Collecting fees	$34.48	3,797.0	$ 130,920.56				
Answering student's questions regarding enrollment fee collection Various enrollment office staff Collecting fees	$34.48	4,306.2	$ 148,477.78				
Updating written and computer records for enrollment fee information Various enrollment office staff Collecting fees	$34.48	2,233.6	$ 77,014.53				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various enrollment office staff Collecting fees	$34.48	1,055.4	$ 36,390.19				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Garavito, Karyn Supvr., District Cashiering Services	$45.37	23.0	$ 1,043.51				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 515,929.91	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
P ar Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Arzate, Angelina	Systems Module Functional Specialist	$34.39	20.0	$ 687.80				
Johnston, Ann Marie	Financial Aid Advisor	$31.05	3.0	$ 93.15				
San Agustin, Mary S.	Director of Financial Aid	$70.95	4.0	$ 283.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,064.75	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
P[illegible]ar Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Arzate, Angelina	Systems Module Functional Specialist	$34.39	4.0	$ 137.56				
Johnston, Ann Marie	Financial Aid Advisor	$31.05	6.0	$ 186.30				
San Agustin, Mary S.	Director of Financial Aid	$70.95	8.0	$ 567.60				
(05) Total ☒ Subtotal ☐				$ 891.46	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
P[illegible]r Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various financial office staff Waiving enrollment fees	$31.37	652.5	$ 20,468.93				
Receiving waiver applications							
Various financial office staff Waiving enrollment fees	$31.37	622.2	$ 19,518.41				
Evaluating waiver applications and verifying application documents							
Various financial office staff Waiving enrollment fees	$31.37	849.8	$ 26,658.23				
No[illegible] students of additional documentation requirements and how to obtain information							
Various financial office staff Waiving enrollment fees	$31.37	91.3	$ 2,864.08				
Entering approved application information into district records; providing student award letter							
Various financial office staff Waiving enrollment fees	$31.37	625.8	$ 19,631.35				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various financial office staff Waiving enrollment fees	$31.37	72.1	$ 2,261.78				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 91,402.78	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]har Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Arzate, Angelina	Systems Module Functional Specialist	$34.39	4.0	$ 137.56				
San Agustin, Mary S.	Director of Financial Aid	$70.95	4.0	$ 283.80				

(05) Total ☒ Subtotal ☐ Page 1 of 1

$ 421.36	$ -	$ -	$ -	$ -

New 04/06

Palomar Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	20.00	Arzate, Angelina	Systems Module Functional Specialis	$34.39	$687.80	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV
04-05	4.00	Arzate, Angelina	Systems Module Functional Specialis	$34.39	$137.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	4.00	Arzate, Angelina	Systems Module Functional Specialis	$34.39	$137.56	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	28.00	**Arzate, Angelina Total**			$962.92		
04-05	10.00	Garavito, Karyn	Supvr., District Cashiering Services	$45.37	$453.70	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV
04-05	4.20	Garavito, Karyn	Supvr., District Cashiering Services	$45.37	$190.55	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	23.00	Garavito, Karyn	Supvr., District Cashiering Services	$45.37	$1,043.51	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	37.20	**Garavito, Karyn Total**			$1,687.76		
04-05	3.00	Johnston, Ann Marie	Financial Aid Advisor	$31.05	$93.15	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.
04-05	6.00	Johnston, Ann Marie	Financial Aid Advisor	$31.05	$186.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	9.00	**Johnston, Ann Marie Total**			$279.45		
04-05	30.00	Masiello, Ellie	Admissions, Enrollment Coordinator	$38.38	$1,151.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.
	30.00	**Masiello, Ellie Total**			$1,151.40		
04-05	4.00	San Agustin, Mary S.	Director of Financial Aid	$70.95	$283.80	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.
04-05	8.00	San Agustin, Mary S.	Director of Financial Aid	$70.95	$567.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	4.00	San Agustin, Mary S.	Director of Financial Aid	$70.95	$283.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	16.00	**San Agustin, Mary S. Total**			$1,135.20		
04-05	3,540.70	Various enrollment office staff	Collecting fees	$34.48	$122,083.34	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	3,797.00	Various enrollment office staff	Collecting fees	$34.48	$130,920.56	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	4,306.20	Various enrollment office staff	Collecting fees	$34.48	$148,477.78	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	2,233.60	Various enrollment office staff	Collecting fees	$34.48	$77,014.53	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	1,055.40	Various enrollment office staff	Collecting fees	$34.48	$36,390.19	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	14,932.90	**Various enrollment office staff Total**			$514,886.40		
04-05	652.50	Various financial office staff	Waiving enrollment fees	$31.37	$20,468.93	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	622.20	Various financial office staff	Waiving enrollment fees	$31.37	$19,518.41	Receiving waiver applications	Waiving student fees
04-05	849.80	Various financial office staff	Waiving enrollment fees	$31.37	$26,658.23	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	91.30	Various financial office staff	Waiving enrollment fees	$31.37	$2,864.08	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	625.80	Various financial office staff	Waiving enrollment fees	$31.37	$19,631.35	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	72.10	Various financial office staff	Waiving enrollment fees	$31.37	$2,261.78	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	2,913.70	**Various financial office staff Total**			$91,402.78		
	17,966.80	**Grand Total**			$611,505.91		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: Palomar CCD

(02) Period of Claim: 2004-2005

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$39,197,335		$39,197,335	$633,767	$38,563,568
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,345,769		5,345,769	92,178	5,253,591
Course and Curriculum Development	6020	289,730		289,730	121,112	168,618
Academic/Faculty Senate	6030	165,899		165,899	1,645	164,254
Other Instructional Administration & Instructional Governance	6090	4,320,658		4,320,658	1,873	4,318,785
Instructional Support Services	6100					
Learning Center	6110	774,716		774,716	6,000	768,716
Library	6120	2,170,482		2,170,482	187,581	1,982,901
Media	6130	3,780,789		3,780,789	51,688	3,729,101
Museums and Galleries	6140	61,142		61,142		61,142
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	-1,953		-1,953		-1,953
Admissions and Records	6200	2,087,454		2,087,454	76,978	2,010,476
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,372,948		2,372,948		2,372,948
Matriculation and Student Assessment	6320	862,698		862,698	85,942	776,756
Transfer Programs	6330	62,283		62,283		62,283
Career Guidance	6340	57,197		57,197		57,197
Other Student Counseling and Guidance	6390	287,631		287,631		287,631
Other Student Services	6400					
Disabled Students Programs & Services	6420	978,265		978,265	3,843	974,422
Subtotal		$62,813,043	$0	$62,813,043	$1,262,607	$61,550,436

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Palomar CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,295,923	$151,445	$1,144,478	$11,838	$1,132,640
Health Services	6440	620,090		620,090	18,290	601,800
Student Personnel Admin.	6450	73,836		73,836		73,836
Financial Aid Administration	6460	1,328,563		1,328,563	99,882	1,228,681
Job Placement Services	6470	44,996		44,996	18,531	26,465
Veterans Services	6480	147,917		147,917	383	147,534
Miscellaneous Student Services	6490	1,626,025		1,626,025	55,776	1,570,249
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,724,980		1,724,980	1,724,980	0
Custodial Services	6530	1,037,780		1,037,780	1,037,780	0
Grounds Maintenance and Repairs	6550	585,241		585,241	585,241	0
Utilities	6570	1,455,242		1,455,242	1,455,242	0
Other	6590	-1,334		-1,334	-1,334	0
Planning, Policy Making, and Coordination	6600	2,834,375		2,834,375	2,834,375	0
General Inst. Support Services	6700					
Community Relations	6710	683,152		683,152	683,152	0
Fiscal Operations	6720	1,239,602		1,239,602	1,239,602	0
Human Resources Management	6730	501,571		501,571	501,571	0
Noninstructional Staff Benefits & Incentives	6740	1,302,094		1,302,094	1,302,094	0
Staff Development	6750	23,896		23,896	23,896	0
Staff Diversity	6760	5,882		5,882	5,882	0
Logistical Services	6770	2,276,999		2,276,999	2,276,999	0
Management Information Systems	6780	3,371,402		3,371,402	3,371,402	0
Subtotal		$84,991,275	$151,445	$84,839,830	$18,508,189	$66,331,641

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Palomar CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	569,335		569,335	569,335	0
Community Services and Economic Development	6800					
Community Recreation	6810	77,231		77,231		77,231
Community Service Classes	6820	855,364		855,364	15,052	840,312
Community Use of Facilities	6830	4,189		4,189	469	3,720
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940	183,944		183,944		183,944
Parking	6950	1,023,516		1,023,516	32,082	991,434
Student and Co-curricular Activities	6960	456,672		456,672	4,828	451,844
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	568,946		568,946	14,516	554,430
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$88,730,472	$151,445	$88,579,027	$19,144,471	$69,434,556
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				27.57%		
(07) Notes						

CALIFOR[illegible] COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen[illegible]ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	3,149					3,149
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,610,723	14,666	78,687	5,472		1,709,548
Business and Management	0500	1,541,613	10,152	12,234			1,563,999
Communications	0600	720,269	5,030	54,731	14,185		794,215
Computer and Information Science	0700	1,753,610	79,168	51,839	43,661		1,928,278
Education	0800	3,017,226	6,757	108,616	46,321		3,178,920
Engineering and Related Industrial Tech.	0900	2,796,228	23,305	87,394	4,038		2,910,965
Fine and Applied Arts	1000	3,773,165	40,324	116,844			3,930,333
Foreign Language	1100	1,403,825	9,941	10,867	26,468		1,451,101
Health	1200	1,776,744		80,854	32,062		1,889,660
Consumer Education and Home Economics	1300	1,219,384		109,483	7,128		1,335,995
Law	1400	105,657		908			106,565
Humanities (Letters)	1500	5,269,109	5,062	35,044	3,075		5,312,290
Library Science	1600	22,385		4,413			26,798
Mathematics	1700	3,382,095	10,745	12,438	1,578		3,406,856
Military Studies	1800						
Physical Sciences	1900	1,945,101	27,111	57,662	1,342		2,031,216
Psychology	2000	1,147,083		21,080			1,168,163
Public Affairs and Services	2100	863,740	767	218,374	14,147		1,097,028
Social Sciences	2200	3,864,797	1,399	23,793	11,738		3,901,727
Commercial Services	3000			9,700			9,700
Interdisciplinary Studies	4900	5,854,852	38,338	598,751	792,727		7,284,668
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	628,079					628,079
Subtotal - Instructional Activities	**599**	42,698,834	272,765	1,693,712	1,003,942		45,669,253

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,057,880	1,789,172	65,942		5,912,994
Course and Curriculum Development	6020		141,699	23,665	118,148		283,512
Academic/Faculty Senate	6030		99,583	8,947			108,530
Other Instruct. Admin. & Instruct. Governance	6090		4,681,646	13,739	2,232		4,697,617
Subtotal - Instructional Administration	**6000**		8,980,808	1,835,523	186,322		11,002,653
Instructional Support Services (6100)							
Learning Center	6110	8,481	868,001	3,555	3,083		883,120
Library	6120		1,897,798	33,465	93,729		2,024,992
Media	6130		2,637,975	1,912,881	255,380		4,806,236
Museums and Galleries	6140		62,093	10,544			72,637
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		159,266				159,266
Subtotal - Instructional Support Services	**6100**	8,481	5,625,133	1,960,445	352,192		7,946,251
Admissions and Records	**6200**		2,271,391	183,738	14,862		2,469,991
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,881,135	22,040			2,903,175
Matriculation and Student Assessment	6320		705,410	139,895	357,062		1,202,367
Transfer Programs	6330		74,957	5,314			80,271
Career Guidance	6340		57,249	5,908			63,157
Other Student Counseling and Guidance	6390		210,448	60,605	4,902		275,955
Subtotal - Student Counseling and Guidance	**6300**		3,929,199	233,762	361,964		4,524,925

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORN' COMMUNITY COLLEGES
Annual Fin.ncial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenc ires by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		996,014	112,119	6,142		1,114,275
Extended Opportunity Prgms. & Services (EOPS)	6430		1,129,400	178,402	2,116	57,202	1,367,120
Health Services	6440		627,608	64,268	6,188		698,064
Student Personnel Administration	6450		5,355		1,645		7,000
Financial Aid Administration	6460		1,358,048	174,760	21,917		1,554,725
Job Placement Services	6470		61,805				61,805
Veterans Services	6480		165,309	4,908			170,217
Miscellaneous Student Services	6490		802,150	797,062	14,543		1,613,755
Subtotal - Other Student Services	**6400**		5,145,689	1,331,519	52,551	57,202	6,586,961
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,731,808	194,206	87,589		2,013,603
Custodial Services	6530		1,105,373	139,254	12,053		1,256,680
Grounds Maintenance and Repairs	6550		579,789	55,998	3,282		639,069
Utilities	6570			1,466,864			1,466,864
Other Operation and Maintenance of Plant	6590			(11,173)	8,499		(2,674)
Subtotal - Operation and Maintenance of Plant	**6500**		3,416,970	1,845,149	111,423		5,373,542
Planning, Policymaking, and Coordination	**6600**		2,258,536	594,752	128,832		2,982,120

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		412,170	577,672	9,378		999,220
Fiscal Operations	6720		1,544,702	(73,810)	25,829		1,496,721
Human Resources Management	6730		423,844	173,735	2,159		599,738
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		204,327				204,327
Staff Development	6750		550	49,146			49,696
Staff Diversity	6760			28,357	4,582		32,939
Logistical Services	6770		2,056,239	713,283	72,930		2,842,452
Management Information Systems	6780		2,073,264	906,294	377,538		3,357,096
Other General Institutional Support Services	6790		5,918				5,918
Subtotal - General Institutional Support Services	**6700**		6,721,014	2,374,677	492,416		9,588,107
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		63,432	1,485			64,917
Community Service Classes	6820	8,493	395,442	525,040	2,595		931,570
Community Use Facilities	6830			3,329			3,329
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	8,493	458,874	529,854	2,595		999,816

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910			4,000			4,000
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940		115,607				115,607
Parking	6950		1,100,884	111,987	52,243		1,265,114
Student and Co-curricular Activities	6960		340,719	118,504	1,611		460,834
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,557,210	234,491	53,854		1,845,555
Auxiliary Operations (7000)							
Contract Education	7010	122,770	235,452	113,689			471,911
Other Auxiliary Operations	7090		25,183	74,067		193,473	292,723
Subtotal - Auxiliary Operations	**7000**	122,770	260,635	187,756		193,473	764,634
Physical Property and Related Acquisitions (7100)	**7100**				100,000		100,000
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					510,155	510,155
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					510,155	510,155
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					296,163	296,163
Student Aid	7320					480,871	480,871
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					777,034	777,034
TOTAL EXPENDITURES and OTHER OUTGO	**391**	42,838,578	40,898,224	13,005,378	2,860,953	1,537,864	101,140,997

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	57,416
Avg. time p/account	3.7
Total Time (in minutes)	212439
Per Hour	60
Hours Worked **(** Activity 11)**	**3,540.7**
***EFC 2**	44,671
Avg. time p/student	5.1
Total Time (in minutes)	227822
Per Hour	60
Hours Worked **(** Activity 12)**	**3,797.0**
***EFC 1**	57,416
Avg. time p/question	4.5
Total Time (in minutes)	258372
Per Hour	60
Hours Worked **(** Activity 13)**	**4,306.2**
***EFC 2**	44,671
Avg. time p/file	3.0
Total Time (in minutes)	134013
Per Hour	60
Hours Worked **(** Activity 14)**	**2,233.6**
***EFC 4**	4,139
Avg. time p/account	15.3
Total Time (in minutes)	63327
Per Hour	60
Hours Worked **(** Activity 15)**	**1,055.4**
~~N/A~~	**Note - Client does by batch processing. See schedule 1A-1.**
Avg. time p/student	
Total Time (in minutes)	0
Per Hour	60
~~Hours Worked **(** Activity 16)~~	~~**0.0**~~

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1A-1
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Batch Refunds for fiscal year 04-05 and Karen Garavito's EFCW 1.7-2 Code 16.
Findings:

Garavito, Karen

# of Batch Refunds	18
Avg. time p/account	76.5
Total Time (in minutes)	1377
Per Hour	60
Hours Worked **(** Activity 16)**	**23.0**

Conclusion: Findings will go forward to the EFCW-2.

****Activity Code**
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	9,105
Avg. time p/question	4.3
Total Time (in minutes)	39152
Per Hour	60
Hours Worked (** **Activity 21)**	**652.5**
***EFW 6**	9,105
Avg. time p/application	4.1
Total Time (in minutes)	37331
Per Hour	60
Hours Worked (** **Activity 22)**	**622.2**
***EFW 6**	9,105
Avg. time p/evaluation	5.6
Total Time (in minutes)	50988
Per Hour	60
Hours Worked (** **Activity 23)**	**849.8**
***EFW 8**	1,442
Avg. time p/application	3.8
Total Time (in minutes)	5480
Per Hour	60
Hours Worked (** **Activity 24)**	**91.3**
***EFW 7**	7,663
Avg. time p/application	4.9
Total Time (in minutes)	37549
Per Hour	60
Hours Worked (** **Activity 25)**	**625.8**
***EFW 8**	1,442
Avg. time p/application	3.0
Total Time (in minutes)	4326
Per Hour	60
Hours Worked (** **Activity 26)**	**72.1**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Borrell, Claudia	Senior Accounting Assistant	2	3	1	2	18	
Burrows, Ardith	Enrollment Services Specialist	2	4	5	2		
Butler, Susan	Education Center Assistant	2.5	2	7	2		
Chen, Hui-Chun	Senior Accounting Assistant	1	3	1	2	10	15
Foraker, Marta	Education Center Coordinator	3	2	7	2		
Garavito, Karyn	Supervisor, District Cashiering Services	2	5	4	3	10	76.5
Gutierrez, M. Vanessa	Admissions Assistant	3	3	2	3		
Lambert, Theresa	Senior Accounting Assistant	3	3	2	2	45	68
Masiello, Ellie	Admissions and Enrollment Coordinator					30	
Masiello, Mari	Senior Accounting Assistant	1.5	1.5	1	1	5.5	81.5
McCluskey, Becky	Account Technician	18	18	4	8	3	
McKnight, Vandy	Enrollment Services Specialist	3	10	5	5	10	
Moss, Benjamin	Supervisor, Admissions	7	6	6	5		
Nelson, Teresa	Education Center Assistant	2	3	6	3		
Reyes, Patricia	Senior Accounting Assistant	3	3	2	2	15	
Rodriguez, Sandra	Student Cashier	1	2	1	1	5	
Sabanovic, Mirela	Student Cashier	4	5	3	3.5	6.5	
Schnarr, Aaron	Education Center Assistant	2.25	2.5	6.5	2.5		
Velazco, Adriana	Enrollment Services Specialist	8	5	4	4		
Vosburg, Silvia	Education Center Assistant	3	3	6	2		
Wallace, Terri	Senior Accounting Assistant	2	18	16	5	25	10
Average		**3.7**	**5.1**	**4.5**	**3.0**	**15.3**	**50.2**

Conclusion: Findings go forward to Schedule 1A.

Note - Client does by batch processing. See schedule 1A-1.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and PHR lists provided by client by fiscal year and either classified or administrative staff. For fiscal years 03-04 through 05-06 there is also a separate list of hourly employees provided on a memorandum from the client.
Findings:

PHR List	Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Classified	McCluskey, Becky	Account Technician	**$22.04**	**$28.56**	**$30.35**	**$33.25**	**$35.13**	**$37.66**	**$41.58**
Classified	Masiello, Ellie	Admissions and Enrollment Coordinator	**$21.92**	**$25.96**	**$28.99**	**$31.38**	**$34.84**	**$38.38**	**$41.69**
Hourly	Gutierrez, M. Vanessa	Admissions Assistant							***8.75**
Classified	Butler, Susan	Education Center Assistant	**$11.44**	**$15.14**	**$16.62**	**$18.29**	**$21.82**	**$25.83**	**$27.95**
Classified	Nelson, Teresa	Education Center Assistant	$0.36	***2.55**	***3.74**	***7.26**	***7.57**	***8.42**	***10.09**
Classified	Schnarr, Aaron	Education Center Assistant		$1.77	$3.79	$4.05	$5.39	$4.74	***5.67**
Classified	Vosburg, Silvia	Education Center Assistant		***6.74**	**$19.54**	**$21.55**	**$24.39**	**$27.25**	**$32.11**
Classified	Foraker, Marta	Education Center Coordinator	**$21.98**	**$28.51**	**$30.29**	**$32.36**	**$34.99**	**$37.45**	**$41.36**
Classified	Burrows, Ardith	Enrollment Services Specialist	$6.19	$11.55	$13.54	$23.98	$28.51	$32.73	**$37.19**
ssified	McKnight, Vandy	Enrollment Services Specialist	**$19.17**	**$25.33**	**$26.02**	**$27.92**	**$30.21**	**$34.67**	**$39.06**
ot Found	Velazco, Adriana	Enrollment Services Specialist							
Hourly	Borrell, Claudia	Senior Accounting Assistant						***15**	***15.5**
Hourly	Chen, Hui-Chun	Senior Accounting Assistant						***15**	***15**
Classified	Lambert, Theresa	Senior Accounting Assistant						$18.37	**$31.30**
Hourly	Masiello, Mari	Senior Accounting Assistant					***9.5**	***12**	***14**
Classified	Reyes, Patricia	Senior Accounting Assistant		***1.44**	**$26.40**	**$23.36**	**$27.63**	**$29.19**	**$36.73**
Classified	Wallace, Terri	Senior Accounting Assistant	**$15.51**	**$22.28**	$22.91	$26.68	$31.59	$34.16	$37.30
Hourly	Rodriguez, Sandra	Student Cashier					***8**	***12**	***14**
Hourly	Sabanovic, Mirela	Student Cashier						***8.5**	***8.5**
Admin.	Moss, Benjamin	Supervisor, Admissions		$28.18	$30.01	$33.82	$36.71	$40.73	**$51.62**
Admin.	Garavito, Karyn	Supervisor, District Cashiering Services	**$27.35**	**$38.33**	**$41.50**	**$40.85**	**$41.72**	**$45.37**	**$48.99**
Average PHR			**$19.92**	**$26.30**	**$27.46**	**$28.62**	**$31.34**	**$34.48**	**$39.05**

Conclusion: Findings go forward to EFCW-2.

Fiscal Years Bolded = Years used in average. These years were circled on each staff members EFCW 1.7-2 form.
PHR not used in average because too low. Low due to possibly not being employed full fiscal year.
****PHR for students, not used.***

Schedule 3
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Armenta, Cristina	Enrollment Services Specialist	5	7	7	10	N/A	N/A
Burrows, Ardith	Enrollment Services Specialist	3	5	N/A	N/A	N/A	N/A
de Gonzatez, Maria F. L.	Financial Aid Specialist	12	5	6	5	N/A	N/A
Dratler, Pamela	Ed. Center Coordinator	5	3	N/A	N/A	N/A	N/A
Espinozz, Justina	Financial Aid (Student Employee)	3	5	10	5	N/A	5
Fugate, Lea	Enrollment Services Specialist	3	7	5	N/A	N/A	N/A
Gutierrez, M. Vanessa	Admissions Assistant (Student)	2	2	2	2	N/A	2
Hicks, Carolyn	Financial Aid Specialist	3	2	2	1	N/A	N/A
Johnston, Ann Marie	Financial Aid Advisor	3	1	4	2	2	3
Kleaskin, Yekaterina	Financial Aid Specialist	1.5	N/A	7.5	3	N/A	3
Luther, Wesley	Financial Aid Advisor	2	1	2	2	4	2
Magsulit, Lenore	Financial Aid Advisor	5	2	5	5	5	5
Martinez-Heffner, Angie	Enrollment Services Specialist	5	7	7	10	N/A	N/A
McKnight, Vandy	Enrollment Services Specialist	5	5	8	1	N/A	N/A
Moss, Benjamin	Supervisor, Admissions	4	5	N/A	N/A	N/A	N/A
Nava, Ulises	Enrollment Services Specialist	8	3	7	2	12	4
Pina, Jenna M.	Financial Aid (Student Employee)	3	5	7	2	N/A	2
Purcell, R. Harrison	Enrollment Services Specialist	6	8	8	5	N/A	N/A
Richards, Barbara	Financial Aid Advisor	3	N/A	4	3	3	2
Richhart, Karen (Belinda K.)	Financial Aid Coordinator	2	3	3	1	N/A	N/A
Sedillo, Robert	Financial Aid Specialist	2	4	3	3		2
Seely, Paulette M.	Enrollment Services Specialist	8	5	10	3	N/A	N/A
Springer, Morris	Financial Aid Specialist	4	2	5	3	N/A	N/A
Stiles, Jane	Enrollment Services Specialist	5			7		
Stuart, Linda	Enrollment Services Specialist	8	5	11	10	7	N/A
Tate, Irene	Financial Aid Advisor	2	3	4	3	5	3
Valle-Peters, R. Pixie	Campus Service Assistant	5	5	N/A	N/A	N/A	N/A
Williams, Javier A.	Financial Aid Specialist	5	3	3	2	5	3
Wulf, Michael	Financial Aid Advisor	2	N/A	3	2	1	3
Average		**4.3**	**4.1**	**5.6**	**3.8**	**4.9**	**3.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and PHR lists provided by client by fiscal year and either classified or administrative staff.
Findings:

PHR List	Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Student	Gutierrez, M. Vanessa	Admissions Assistant (Student)							
Classified	Valle-Peters, R. Pixie	Campus Service Assistant	$14.15	$19.00	**$22.56**	**$25.93**	**$29.27**	**$31.54**	**$34.48**
Classified	Dratler, Pamela	Ed. Center Coordinator	$2.86	$5.36	$20.41	**$24.26**	**$27.33**	**$30.36**	**$34.67**
Classified	Armenta, Cristina	Enrollment Services Specialist		$3.67	$7.41	$19.87	$25.56	**$30.18**	**$34.50**
Classified	Burrows, Ardith	Enrollment Services Specialist	$6.19	$11.55	***13.54***	**$23.98**	**$28.51**	**$32.73**	**$37.19**
Classified	Fugate, Lea	Enrollment Services Specialist	$11.08	$19.88	$23.11	$25.12	$27.78	**$31.88**	**$35.12**
Classified	Martinez-Heffner, Angie	Enrollment Services Specialist		$15.75	$21.15	$22.90	$21.92	**$28.74**	**$34.35**
Classified	McKnight, Vandy	Enrollment Services Specialist	$19.17	$25.33	$26.02	$27.92	$30.21	**$34.67**	**$39.06**
Classified	Nava, Ulises	Enrollment Services Specialist		$0.20	$6.51	$11.55	***11.89***	***12.57***	**$24.39**
Classified	Purcell, R. Harrison	Enrollment Services Specialist		$2.34	$10.90	$20.98	$24.22	**$29.11**	**$33.58**
Classified	Seely, Paulette M.	Enrollment Services Specialist						***11.67***	**$28.65**
Classified	Stiles, Jane	Enrollment Services Specialist	$15.79	$21.91	$23.24	$25.39	$27.92	$31.95	**$35.35**
Classified	Stuart, Linda	Enrollment Services Specialist	$10.83	$13.89	$14.74	$15.62	$16.07	**$18.48**	**$20.86**
Student	Espinozz, Justina	Financial Aid (Student Employee)							
Student	Pina, Jenna M.	Financial Aid (Student Employee)							
Classified	Johnston, Ann Marie	Financial Aid Advisor	$2.33	***5.19***	**$21.04**	**$24.54**	**$27.75**	**$31.05**	**$39.66**
Classified	Luther, Wesley	Financial Aid Advisor	**$17.25**	**$24.98**	**$28.92**	**$32.12**	**$35.19**	**$35.93**	**$39.67**
Classified	Magsulit, Lenore	Financial Aid Advisor	**$20.09**	**$26.69**	**$28.21**	**$30.20**	**$32.40**	**$34.74**	**$38.44**
Classified	Richards, Barbara	Financial Aid Advisor				***15.77***	**$28.78**	**$32.24**	**$37.73**
Classified	Tate, Irene	Financial Aid Advisor	**$22.48**	**$28.96**	**$30.68**	**$32.64**	**$35.41**	**$38.02**	**$42.20**
Classified	Wulf, Michael	Financial Aid Advisor							**$29.68**
Classified	Richhart, Karen (Belinda K.)	Financial Aid Coordinator	$16.75	$23.43	$27.39	**$28.75**	**$32.23**	$36.33	$39.99
Not Found	de Gonzatez, Maria F. L.	Financial Aid Specialist							
Classified	Hicks, Carolyn	Financial Aid Specialist	$19.16	$27.51	$28.33	$29.37	***8.75***	**$26.90**	**$34.40**
Classified	Khaskin, Yekaterina	Financial Aid Specialist							**$18.25**
Classified	Sedillo, Robert	Financial Aid Specialist				$6.13	$6.08	**$25.25**	**$34.87**
Classified	Springer, Morris	Financial Aid Specialist	$16.88	$24.46	**$24.36**	**$26.34**	**$29.74**	**$32.12**	**$35.06**
Classified	Williams, Javier A.	Financial Aid Specialist		$6.16	$8.38	$9.68	$27.79	$32.15	**$36.29**
Admin.	Moss, Benjamin	Supervisor, Admissions		$28.18	**$30.01**	**$33.82**	**$36.71**	**$40.73**	**$51.62**
Average PHR			**$19.94**	**$26.88**	**$26.54**	**$28.26**	**$31.21**	**$31.37**	**$34.59**

Conclusion: Findings go forward to EFCW-2.

Fiscal Years Bolded = Years used in average. These years were circled on each staff members EFCW 1.7-3 form.
PHR not used in average because too low. Low due to possibly not being employed full fiscal year.

Schedule 4
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	53,827	53,103	55,422	62,158	59,380	58,409	57,416
EFC 2	1.8-1	2.	Paid Enrollment fees		43,718	47,038	48,192	46,741	46,713	44,671
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)		4,111	4,278	4,448	4,592	4,968	6,345
EFC 4	1.8-2	1.	Delinquencies collections	1,926	4,033	4,660	6,443	3,994	3,115	4,139
EFC 5	1.8-2	2.	Refunds	Note - Client does by batch processing. See schedule 1A-1						
EFW 6	1.8-3	1.	Waivers Requested	X	Records Not Kept				6,660	9,105
EFW 7	1.8-3	2.	Waivers Approved	X -	4,140	4,426	4,833	5,016	6,523	7,663
EFW 8	1.8-3	(1-2)	Waivers Denied	X					137	1,442

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: PALOMAR COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	10197	10156	10751	13841	12104	11392	11061	11177
Fall	22200	21988	22712	24492	24223	23813	23732	23335
Winter/ Intersession								
Spring	21430	20959	21959	23825	23053	23204	22623	22354
Total #1	53827	53103	55422	62158	59380	58409	57416	56866
2. Number of students who paid enrollment fees:								
Summer		7419	8371	9276	9116	8518	8522	7938
Fall		17876	19134	19343	19694	19396	18379	17669
Winter/ Intersession								
Spring		18423	19533	19573	17931	18799	17770	16786
Total #2		43,718	47,038	48,192	46,741	46,713	44,671	42,393
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Kara Marie Garanito Date 5/5/06

Employee Name: (print) Kara Marie Garanito

Position or Title Supervisor, District Cashiering Services

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Copy-original 26 in resources of 04-05 claim

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: PALOMAR

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer				1227	1694	1759	2030	2047
Fall				3333	3683	3837	4586	4716
Winter/ Intersession								
Spring				3328	3308	3690	4769	4346
Total Unique BOG students		4111	4278	4448	4592	4968	6345	6146

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/27/06

Angelina Tate — Employee Name: (print)

Systems Information Specialist (FAO) — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Palomar College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	429	710	584	1324	911	337	521	680
Fall	580	1812	1624	2568	1832	1365	1643	2118
Winter/Intersession								
Spring	917	1511	2452	2551	1251	1413	1975	2299
Total	1926	4033	4660	6443	3994	3115	4139	5097
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	Please see form EFC 1.7-2 with attached memo for explanation							
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Karen Garanto Date 5/5/06

Karen Garanto
Employee Name: (print)

Supervisor, District Cashiering Service
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Palomar College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	Records not kept					6660	9105	9305
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer			247	1794	2719	2180	2223	2366
Fall		3493	3564	4017	4443	5947	6632	6991
Winter/Intersession								
Spring		4123	4381	4813	4944	6268	7536	7782
Total Unique Students		4140	4426	4833	5016	6523	7663	8011

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/27/06

Employee Name: (print) Angelina Arzate

Position or Title Systems Functional Specialist (FAO)

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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COPY

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Palomar CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 997,175	$ 194,573	$ 714,665	$ 786,637	$ 859,998	$ 1,170,021	$ 2,541,344	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 19,956	$ 3,891	$ 14,293	$ 15,633	$ 17,200	$ 23,400	$ 50,827	$
7% Enrollment Fees Waived (Line 4A x 7%)	$ 69,844	$ 13,620						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring TOTAL CREDITS (Line 4A ÷ Enrollment Fee)			64,970	71,058	78,182	94,666	108,884	
TOTAL x $0.81 per credit			59,123	64,663	71,146	67,946	99,014	
(Enrollment Fee Used in Calculation)			$11.00	$11.00	$11.00	*$15.67	**$23.34	$26.00

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee signature: Angelina E. Arzate Date 6/6/06

Employee Name: (Print) Angelina E. Arzate Position or Title Systems Module Functional Specialist

If you have any questions, please contact Angelina Arzate, at 760 744 1150 x 2349

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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* FY 03-04 - Per Unit (11+18+18)/3 = $15.67

** FY 04-05 - Per Unit (18+26+26)/2 = $23.34

Tricia's Data

State Mandated Reimbursement

Mari Claudia

Semester/Year	$ amounts of enrollment receivable acounts	Number of enrollment receivable accounts	Number of 3rd-party enrollment receivables	Number of NSF enrollment receivables	Totals number of accounts per enrollment receivables	Totals numbers of accounts per fiscal year
'99 0985	n/a	n/a	429	n/a	429	
0987	n/a	n/a	421	159	580	
0993	n/a	n/a	775	142	917	1926
'00 0995	$12,859.75	280	390	40	710	
0997	$55,190.10	801	882	129	1812	
2003	$76,148.94	1092	324	95	1511	4033
'01 2005	$21,389.61	429	115	40	584	
2007	$89,597.36	1147	335	142	1624	
2013	$89,932.67	1138	1218	96	2452	4660
'02 2015	$40,109.00	662	643	19	1324	
2017	$92,964.63	1274	1184	110	2568	
2023	$77,053.00	1062	1408	81	2551	6443
'03 2025	$13,974.88	304	600	7	911	
2027	$14,603.25	269	1465	98	1832	
2033	$7,298.51	135	1046	70	1251	3994
'04 2035	$4,476.50	126	196	15	337	
2037	$24,353.00	275	998	92	1365	
2043	$57,522.00	628	708	77	1413	3115
'05 2045	$13,984.50	199	306	16	521	
2047	$105,320.61	655	901	87	1643	
2053	$142,006.00	998	903	74	1975	4139
'06 2055	$26,470.32	297	367	16	680	
2057	$152,512.15	980	1092	46	2118	
2063	$378,785.59	1928	368	3	2299	5097
	$1,496,552.37	14679	17074	1654	33407	33407

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 04-05 and the missing rates for FY: 03-04.

COMMUNITY COLLEGE DISTRICT NAME Palomar Community College District

		Fiscal Years:	
Name	**Title**	**03-04**	**04-05**
	AVERAGE ADMINISTRATIVE ASSISTANT		
	AVERAGE DEAN		
	AVERAGE DIRECTOR		
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY		
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		
AMADOR, SHERRILL	SUPERINTENDENT/PRESIDENT		
ASHOUR, CHERYL	ADMIN ASSISTANT	$ 35.44	$ 39.23
BARTON, MICHELLE	DIRECTOR, RESEARCH/PLANNING	$ 60.12	$ 66.37
COLEMAN, SUSAN	AP SUPERVISOR/INTERNAL AUDITOR	$ 46.76	$ 52.38
CONWAY, JAYNE	DIRECTOR, COLLEGE HEALTH SERVICES	$ 61.67	$ 66.21
CUMMINGS, DIANE	SUPERVISOR, BUSINESS & MAIL SVCS	$ 34.74	$ 39.84
FAWCETT-MURDERS, LANI	SR ADMIN SECRETARY	$ 34.64	$ 36.21

MANDATE REIMBURSEMENT SERVICES

Name	Title	03-04	04-05
GARAVITO, KARA	SUPERVISOR DISTRICT CASHIERING SERVICE	$ 41.72	$ 45.37
GIESE, JO ANNE	ADMIN ASSISTANT	$ 43.61	$ 46.54
GOOD, MARTIN	DIRECTOR, FISCAL SERVICES		$ 81.73
HAAS, KRISTINA	ADMIN ASSISTANT		$ 25.82
HEARN, SHAWNA			$ 35.85
HORIO, NANCY	MANAGER, HR SERVICES	$ 43.39	$ 48.03
JAY, KEN	DIRECTOR, BUSINESS SERVICES	$ 64.51	$ 72.08
JOHNSON, MARIA	PERSONNEL SPECIALIST		$ 34.66
KRATCOSKI, RICK	GROUNDS SVCS SUPERVISOR/RECYCLING COORD	$ 41.20	$ 45.55
LAU-THOMPSON, JANIEN	PAYROLL ASSISTANT II	$ 38.20	
LEE, HERMAN	DIRECTOR, ENROLLMENT SVCS	$ 78.20	$ 86.65
MADRIGAL, JOE	VP/ASSISTANT SUPERINTENDENT, STUDENT SVCS	$ 88.07	$ 94.47
McCRORY, MARGERY	STAFF ASSISTANT	$ 26.42	$ 28.28
MIYAMOTO, JACK	VP/ASSISTANT SUPERINTENDENT, HR SVCS		$ 96.93
OWENS, SHIRLEY	SR ADMIN SECRETARY	$ 44.71	$ 47.12
OWENS, WILMA	DEAN, CAREER & TECHNICAL EDUCATION	$ 75.04	$ 80.10
PLOTTS, TOM	DIRECTOR PUBLIC SAFETY/POLICE	$ 65.22	$ 70.29
POOLE, EILEEN	CONTRACTS SECRETARY	$ 36.42	$ 42.91

MANDATE REIMBURSEMENT SERVICES

Name	Title	03-04	04-05
ROURKE, MICHAEL	DEAN, MATH/NATURAL & HEALTH SCIENCES		$ 53.29
SAN AGUSTIN, MARY	DIRECTOR, FINANCIAL AID & SCHOLARSHIPS	$ 66.36	$ 70.95
SCHMIDLING, MICHAEL	LEAD PROGRAMMER ANALYST	$ 50.32	$ 55.81
SCHWERDTFEGER, PAT	DEAN, BUSINESS & COMM. SVCS	$ 71.87	$ 79.09
SILVA, JOSEPHINE	ADMINISTRATIVE ASSISTANT	$ 42.15	$ 48.20
STONEY, JIM	CHIEF OF POLICE	$ 52.72	$ 55.36
TAVEUVEU, BRANDI	BUDGET ANALYST	$ 37.19	$ 47.21
VEACH, DIANE	MANAGER, INSTRUCTION OFFICE	$ 46.37	$ 50.33
VERNOY, MARK	INTERIM DEAN, HUMAN ARTS & SCIENCES	$ 70.63	$ 78.48
WALLACE, TERRI	STAFF AIDE	$ 31.59	$ 34.16
WARD, PATTY	ADMIN SECRETARY	$ 33.14	$ 35.35
WICK, CHRISTINE	STAFF ASSISTANT	$ 32.47	$ 34.60
WIND, JUDITH	POLICE DEPT RECORD SPEC		$ 24.30
WOODS, JOHN	DIRECTOR, ATHLETICS	$ 68.65	$ 75.06
YZERMAN, PATRICIA	OFFICE SPECIALIST		$ 30.32

Schedule 6

Palomar Community College District
308/95 Enrollmer e Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 769,966	$ (282,575)	$ (494,643)	$ (1,548,249)	$ 646,430	$ 1,854,982
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 15,399	$ (5,651)	$ (9,893)	$ (30,965)	$ 12,929	$ 37,100
1.8-4 line 4A	Enrollment Fees Waived	$ 194,573	$ 714,665	$ 781,637	$ 859,998	$ 1,170,021	$ 2,541,344
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 3,891	$ 14,293	$ 15,633	$ 17,200	$ 23,400	$ 50,827
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 13,620	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		64,969	71,057	78,181	74,666	108,883
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 59,122	$ 64,662	$ 71,145	$ 67,946	$ 99,084
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 3,891	$ 14,293	$ 15,633	$ 17,200	$ 23,400	$ 50,827
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 13,620					
1.8-4 5.	Credit Units Waived		$ 59,122	$ 64,662	$ 71,145	$ 67,946	$ 99,084
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 17,511**	**$ 73,415**	**$ 80,295**	**$ 88,345**	**$ 91,346**	**$ 149,911**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Palomar
COUNTY: San Diego

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$19,709,034	$20,288,486	$-1,621,325	$18,667,161
ENROLL FEE ADMIN (2%)	38,296	32,935	5,361	38,296
APPRENTICE ALLOWANCE	1,078,006	922,822	155,184	1,078,006
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,064,151	2,635,170	428,981	3,064,151
S.F.A.A.	499,388	428,184	71,204	499,388
E.O.P.S.	1,017,570	873,731	143,839	1,017,570
C.A.R.E.	102,457	86,299	16,158	102,457
D.S.P.S.	853,582	730,492	123,090	853,582
STATE HOSPITALS	0	0	0	0
CALWORKS	279,471	225,725	53,746	279,471
MATRICULATION (CREDIT)	781,987	664,593	117,394	781,987
MATRIC. (NONCREDIT)	270,412	232,554	37,858	270,412
FAC. & STAFF DIVERSITY	20,667	14,692	5,975	20,667
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	838,297	720,936	117,361	838,297
BLOCK GRANT (ONE-TIME)	406,682	349,747	56,935	406,682
ECON. DEVELOPMENT	63,937	0	53,707	53,707
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	59,991	51,592	8,399	59,991
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	40,248	3,096	43,344
VTEA TITLE I C	268,706	104,795	120,918	225,713
PLANT & INSTRUCTIONAL	456,157	392,295	63,862	456,157
PRIOR YEAR CORRECTION	-86,083	-102,797	16,714	-86,083
TOTAL	$29,827,411	$28,724,059	$0	$28,724,059

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Palomar Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Total EFCW - Fee Waiver Costs	EFCW-1	$26,683.60	$38,326.02	$41,330.67	$45,633.79	$66,968.75	$93,780.35
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$17,511.00	$73,415.00	$80,295.00	$88,345.00	$91,346.00	$149,911.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$9,172.60	-$35,088.98	-$38,964.33	-$42,711.21	-$24,377.25	-$56,130.65
4								
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$17,511.00**	**$38,326.02**	**$41,330.67**	**$45,633.79**	**$66,968.75**	**$93,780.35**

California Home

Monday, April 30, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Palomar College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of April 30, 2012 12:26:03

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	124	49,881
BOGW - Part A-2 based on SSI recipient status	249	72,033
BOGW - Part A-3 based on general assistance recipient status	1	78
BOGW - Part B based on income standards	1,896	776,646
BOGW - Part C based on financial need	3,332	1,474,564

Total Amount = $ 2,373,202

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

December 28, 2006

CERTIFIED MAIL #7003 3110 0000 2900 4884

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Palomar Community College District CC37140

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Palomar Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
961/75	Collective Bargaining	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC37140

(02) Claimant Name: Palomar Community College District

County of Location: San Diego

Street Address or P.O. Box: 1140 West Mission Road

City: San Marcos | State: CA | Zip Code: 92069-1487

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 751,500	(13) $ 683,218
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 683,218
Due from State	(08) $ 751,500	(17) $ 683,218
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	196
(24) EFCW-1, (04)(A)(2)(a)(f)	552,012
(25) EFCW-1, (04)(B)(1)(a)(f)	570
(26) EFCW-1, (04)(B)(1)(b)(f)	940
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	102,805
(29) EFCW-1, (04)(B)(2)(c)(f)	511
(30) EFCW-1, (06)	25
(31) EFCW-1, (07)	167,412
(32) EFCW-1, (09)	36,402
(33) EFCW-1, (10)	104,826
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | Date 12/20/06

Anita Weems | Director of Fiscal Services

Type or Print Name | Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Program 2??	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Palomar Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 195.96	$ -	$ -	$ -	$ -	$ 195.96
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 552,011.93	$ -	$ -	$ -	$ -	$ 552,011.93
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 569.92	$ -	$ -	$ -	$ -	$ 569.92
b. Staff training (One time per employee)	$ 940.24	$ -	$ -	$ -	$ -	$ 940.24
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 102,804.94	$ -	$ -	$ -	$ -	$ 102,804.94
c. Reporting BOG fee waiver data to CCC	$ 511.08	$ -	$ -	$ -	$ -	$ 511.08
(05) Total Direct Costs	$ 657,034.07	$ -	$ -	$ -	$ -	$ 657,034.07

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	25.48%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 167,412.28
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 824,446.35

Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 36,402.00
(10) Less: Enrollment Fee Waiver offsets		$ 104,826.18
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 683,218.17

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ar Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Garavito, Karyn Supervisor, District Cashering Services	$48.99	4.0	$ 195.96				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 195.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]ar Community College District

(02) Fiscal Year
2005-2006

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- ☐ Staff Training (One Time per Employee)

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- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records							
Various Enrollment Office St Collecting Fees	$37.26	3,506.7	$ 130,659.64				
Calculating total enrollment fee to be collected							
Various Enrollment Office St Collecting Fees	$37.26	3,603.4	$ 134,262.68				
Answering student's questions regarding enrollment fee collection							
Various Enrollment Office St Collecting Fees	$37.26	4,265.0	$ 158,913.90				
[illegible]ng written and computer records for enrollment fee information							
Various Enrollment Office St Collecting Fees	$37.26	2,119.7	$ 78,980.02				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Various Enrollment Office St Collecting Fees	$37.26	1,299.7	$ 48,426.82				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Garavito, Karyn — Supervisor, District Cashering Services	$48.99	2.6	$ 127.37				
Lambert, Theresa — Senior Accounting Assistant	$31.30	15.9	$ 497.67				
Masiello, Mari — Senior Accounting Assistant	$17.54	8.2	$ 143.83				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 552,011.93	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ar Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

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- ☐ Staff Training (One Time per Employee)

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- ☐ Calculating and Collecting Enrollment Fees

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B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Arzate, Angelina	Systems Module Functional Specialist	$49.90	2.0	$ 99.80				
Johnston, Ann Marie B.	Financial Aid Advisor	$39.66	4.0	$ 158.64				
SanAgustin, Mary S.	Director, Financial Aid	$77.87	4.0	$ 311.48				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 569.92	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ar Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

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- ☐ Staff Training (One Time per Employee)

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- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Johnston, Ann Marie B. Financial Aid Advisor	$39.66	8.0	$ 317.28				
SanAgustin, Mary S. Director, Financial Aid	$77.87	8.0	$ 622.96				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 940.24	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]ar Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	666.9	$ 23,068.07				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	635.8	$ 21,992.32				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	868.5	$ 30,041.42				
[illegible]ng students of additional documentation requirements and how to obtain information							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	82.0	$ 2,836.38				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	654.2	$ 22,628.78				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staf Waiving Enrollment Fees	$34.59	64.7	$ 2,237.97				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 102,804.94	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]ar Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Arzate, Angelina	Systems Module Functional Specialist	$49.90	4.0	$ 199.60				
SanAgustin, Mary S.	Director, Financial Aid	$77.87	4.0	$ 311.48				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 511.08	$ -	$ -	$ -	$ -

New 04/06

2005-2006

by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	2.00	Arzate, Angelina	Systems Module Functional Specialist	$49.90	$99.80	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	4.00	Arzate, Angelina	Systems Module Functional Specialist	$49.90	$199.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	6.00	**Arzate, Angelina Total**			$299.40		
05-06	4.00	Garavito, Karyn	Supervisor, District Cashering Services	$48.99	$195.96	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.60	Garavito, Karyn	Supervisor, District Cashering Services	$48.99	$127.37	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	6.60	**Garavito, Karyn Total**			$323.33		
05-06	4.00	Johnston, Ann Marie B.	Financial Aid Advisor	$39.66	$158.64	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	8.00	Johnston, Ann Marie B.	Financial Aid Advisor	$39.66	$317.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	12.00	**Johnston, Ann Marie B. Total**			$475.92		
05-06	15.90	Lambert, Theresa	Senior Accounting Assistant	$31.30	$497.67	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	15.90	**Lambert, Theresa Total**			$497.67		
05-06	8.20	Masiello, Mari	Senior Accounting Assistant	$17.54	$143.83	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	8.20	**Masiello, Mari Total**			$143.83		
05-06	4.00	SanAgustin, Mary S.	Director, Financial Aid	$77.87	$311.48	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	8.00	SanAgustin, Mary S.	Director, Financial Aid	$77.87	$622.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	4.00	SanAgustin, Mary S.	Director, Financial Aid	$77.87	$311.48	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	16.00	**SanAgustin, Mary S. Total**			$1,245.92		
05-06	3,506.70	Various Enrollment Office Staff	Collecting Fees	$37.26	$130,659.64	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,603.40	Various Enrollment Office Staff	Collecting Fees	$37.26	$134,262.68	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	4,265.00	Various Enrollment Office Staff	Collecting Fees	$37.26	$158,913.90	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,119.70	Various Enrollment Office Staff	Collecting Fees	$37.26	$78,980.02	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	1,299.70	Various Enrollment Office Staff	Collecting Fees	$37.26	$48,426.82	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	14,794.50	**Various Enrollment Office Staff Total**			$551,243.06		
05-06	666.90	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$23,068.07	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	635.80	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$21,992.32	Receiving waiver applications	Waiving student fees
05-06	868.50	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$30,041.42	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	82.00	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$2,836.38	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	654.20	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$22,628.78	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	64.70	Various Financial Office Staff	Waiving Enrollment Fees	$34.59	$2,237.97	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	2,972.10	**Various Financial Office Staff Total**			$102,804.94		
	17,831.30	**Grand Total**			$657,034.07		

CCD	Method	98-99	99-00	02-03	03-04	04-05	05-06	06-07	07-08	08-09	09-10	10-11
CerrC	FAM-29C	39.3	40.33	29.26	28.16	34.11	30.68	29.17				
	w/deprec.						30.81	34.58	*31.64	30.8	34.02	
Citrus	FAM-29C	51.75	44.86	41.72	45.53	40.58	40.6	41.95				
	w/deprec.						48.98	52.46	47.53	42.72	46.82	
Contra	FED rate	34.00	34.00	32.80	32.80	32.80	32.8	32.5	32.5	32.5	32.5	
										42.6	40.9	
ElCam	FAM-29C	39.18	41.4	30.38	29.10	35.22	35.02	32.00				
	w/deprec.						34.99	35.65	*34.98	38.0	43.02	
Foot	FAM-29C	28.67	30.09	32.28	31.11	29.66	28.9	29.69				
	w/deprec.						33.96	39.45	*43.69	49.37	49.12	
Gavilan	FAM-29C	35.68	34.23	32.88	36.29	33.96	36.92	36.45				
	w/deprec.						39.74	39.55	*39.59	38.86	37.56	
Kern	*FED rate*								*32.00*	*32.00*	*32.00*	*32.00*
	FAM-29C	66.87	55.25	48.94	39.43	42.89	39.91	37.49				
	w/deprec.						41.26	45.86	*48.65	46.23	46.06	
L.Rios	*FED rate*						*30.00*	*30.00*				
	FAM-29C	33.73	33.68	31.09	30.88	31.96	*32.61*					
	w/deprec *(per client)*						***36.95***	***37.7***	***36.16***	***37.02***	43.6	
LongB	FAM-29C		36.8	35.01	33.40	32.33	33.86	32.7				
	w/deprec.						36.33	35.37	34.47	36.67	38.26	
N.Org	*FED rate*	***38.00***	***38.00***	***39.00***	***39.00***	***39.00***	***39.00***	***29.50***	*29.50*	*29.50*	*29.50*	
	FAM-29C *w/deprec.*								37.04	39.08	40.48	
PalC	FAM-29C	32.61	32.87	33.72	29.56	27.57	25.48	26.35				
	w/deprec.						29.08	28.44				
PASA	*FED rate*	***30.00***	***30.00***	***30.00***	***30.00***	***32.80***	***32.80***	***32.80***	*31.70*	*31.70*	*31.70*	
	FAM-29C *w/deprec.*								39.02	41.26	39.55	
Rancho	*FED rate*					***30.00***	***30.00***	***30.00***	***30.00***	*30.00*	*30.00*	
										43.03	40.87	
R.Woods	FAM-29C	42.74	39.44	38.92	38.64	37.90	37.45	39.6				
	w/deprec.						48.2	42.59	43.16	42.67	39.13	
SBC	FAM-29C	51.36	45.57	49.18	44.42	45.62	47.74	45.3				
	w/deprec.						50.11	53.93	56.53	54.48	56.25	
SMateo	***FED rate***		***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***	***30.00***			
	w/deprec.									41.5	46.88	
Sierra	FAM-29C	45.92	42.04	36.79	38.41	40.90	35.70	38.49				
	w/deprec.						42.58	37.83	*35.75	47.24	46.94	
S.Org	FAM-29C (deprec. Starts in 04-05)			32.95	35.15	42.65	45.68	42.59	39.38	40.81		
	OMB A-21 or previous consultant's FAM-29C				47.97				30.43	32.13	41.35	
S.West	FAM-29C											
StateC	*FED rate*					***36.50***	***36.50***	***36.50***	***36.50***	*36.50*		
	FAM-29C	38.96	38.26	34.62	31.33	32.25				***31.76***	31.54	
VVC	FAM-29C	57.9	58.96	55.20	53.91	45.61	46.57	41.33				
	w/deprec.						48.58	59.52	49.0	48.91	49.58	
WVM	FAM-29C	40.47	44.02	33.37	34.89	35.80	37.57	38.86				
	w/deprec.						41.1	41.22		40.69	44.12	46.84
WestK	FAM-29C	33.92	37.65	37.46	31.79	38.32	34.32	34.87				
	w/deprec.						37.79	37.98	34.46	41.19	40.79	
YCCD	FAM-29C	33.05	32.67	26.87	26.35	34.88	36.38	32.23				
	w/deprec.						36.3	41.07	39.01	42.62	40.93	

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 6, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8901

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

Re: Annual Reimbursement Claims
Palomar Community College District CC37140

Enclosed please find the original claims and extra copies of the FAM-27 for Palomar Community College Districts reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007
308/95	Enrollment Fee Collection and Waivers	2007-2008

If you have any questions regarding these claims, please contact me at (858) 514-8605

Sincerely,

Sergio M. Perez

State Controller's Office — Claim File Copy — Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC37140
(02) Claimant Name: Palomar Community College District
County of Location: San Diego
Street Address or P.O. Box: 1140 West Mission Road
City: San Marcos | State: CA | Zip Code: 92069-1487

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,401,027
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 1,391,027
Due from State	(08)	(17) $ 1,391,027
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	1,108,900
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	105,521
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	28
(31) EFCW-1, (07)	345,381
(32) EFCW-1, (09)	53,254
(33) EFCW-1, (10)	105,521
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — for PJL — **Date** 2/2/09

Phyllis Laderman
Type or Print Name

Director, Fiscal Services
Title

(38) Name of Contact Person for Claim
SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Palomar Community College District	Reimbursement	X	2006-2007
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
I. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
I. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 1,108,899.53	$ -	$ -	$ -	$ -	$ 1,108,899.53
I. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
I. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 105,520.93	$ -	$ -	$ -	$ -	$ 105,520.93
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 1,214,420.46	$ -	$ -	$ -	$ -	$ 1,214,420.46

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	28.44%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 345,381.18
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,559,801.64
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 53,254.00
(10) Less: Enrollment Fee Waiver offsets		$ 105,520.93
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,401,026.71

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Palomar Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection							
Enrollment Office Staff Collecting Fees	$35.13	11,954.7	$ 419,968.61				
Calculating total enrollment fee to be collected							
Enrollment Office Staff Collecting Fees	$35.13	3,445.3	$ 121,033.39				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Enrollment Office Staff Collecting Fees	$35.13	639.1	$ 22,451.58				
viding refund of enrollment fees paid to students establishing fee waiver after enrollment							
Enrollment Office Staff Collecting Fees	$35.13	225.8	$ 7,932.35				
Referencing student accounts and records							
Enrollment Office Staff Collecting Fees	$35.13	7,050.2	$ 247,673.53				
Updating written and computer records for enrollment fee information							
Enrollment Office Staff Collecting Fees	$35.13	8,250.5	$ 289,840.07				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,108,899.53	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
'omar Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Staff Waiving Fees	$39.05	685.7	$ 26,776.59				
Entering approved application information into district records; providing student award letter							
Financial Aid Staff Waiving Fees	$39.05	500.2	$ 19,532.81				
Evaluating waiver applications and verifying application documents							
Financial Aid Staff Waiving Fees	$39.05	757.1	$ 29,564.76				
ase of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Staff Waiving Fees	$39.05	40.8	$ 1,593.24				
Notifying students of additional documentation requirements and how to obtain information							
Financial Aid Staff Waiving Fees	$39.05	61.3	$ 2,393.77				
Receiving waiver applications							
Financial Aid Staff Waiving Fees	$39.05	657.1	$ 25,659.76				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 105,520.93	$ -	$ -	$ -	$ -

Palomar Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	7,050.20	Enrollment Office Staff	Collecting Fees	$35.13	$247,673.53	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	3,445.30	Enrollment Office Staff	Collecting Fees	$35.13	$121,033.39	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	11,954.70	Enrollment Office Staff	Collecting Fees	$35.13	$419,968.61	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	8,250.50	Enrollment Office Staff	Collecting Fees	$35.13	$289,840.07	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	639.10	Enrollment Office Staff	Collecting Fees	$35.13	$22,451.58	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	225.80	Enrollment Office Staff	Collecting Fees	$35.13	$7,932.35	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	31,565.60	**Enrollment Office Staff Total**			$1,108,899.53		
06-07	685.70	Financial Aid Staff	Waiving Fees	$39.05	$26,776.59	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	657.10	Financial Aid Staff	Waiving Fees	$39.05	$25,659.76	Receiving waiver applications	Waiving student fees
06-07	757.10	Financial Aid Staff	Waiving Fees	$39.05	$29,564.76	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	61.30	Financial Aid Staff	Waiving Fees	$39.05	$2,393.77	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	500.20	Financial Aid Staff	Waiving Fees	$39.05	$19,532.81	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	40.80	Financial Aid Staff	Waiving Fees	$39.05	$1,593.24	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	2,702.20	**Financial Aid Staff Total**			$105,520.93		
	34,267.80	**Grand Total**			$1,214,420.46		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Palomar Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$50,392,174		$50,392,174	$1,467,251	$48,924,923
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	6,694,718		6,694,718	81,938	6,612,780
Course and Curriculum Development	6020	388,381		388,381	242,125	146,256
Academic/Faculty Senate	6030	197,900		197,900		197,900
Other Instructional Administration & Instructional Governance	6090	5,649,991		5,649,991	6,427	5,643,564
Instructional Support Services	6100					
Learning Center	6110	1,009,272		1,009,272	9,563	999,709
Library	6120	2,329,668		2,329,668	197,237	2,132,431
Media	6130	5,049,506		5,049,506	490,390	4,559,116
Museums and Galleries	6140	78,005		78,005	3,453	74,552
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	493,163		493,163		493,163
Admissions and Records	6200	2,800,727		2,800,727	43,700	2,757,027
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,948,975		3,948,975	12,000	3,936,975
Matriculation and Student Assessment	6320	1,514,024		1,514,024	331,737	1,182,287
Transfer Programs	6330	100,189		100,189		100,189
Career Guidance	6340	21,527		21,527		21,527
Other Student Counseling and Guidance	6390	320,255		320,255	682	319,573
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,352,308		1,352,308	24,161	1,328,147
Subtotal		$82,340,783	$0	$82,340,783	$2,910,664	$79,430,119

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Palomar Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,689,704	$85,399	$1,604,305	$92	$1,604,213
Health Services	6440	731,666		731,666	3,005	728,661
Student Personnel Admin.	6450	4,513		4,513		4,513
Financial Aid Administration	6460	1,773,337		1,773,337	9,929	1,763,408
Job Placement Services	6470	70		70		70
Veterans Services	6480	121,977		121,977	2,271	119,706
Miscellaneous Student Services	6490	2,623,423		2,623,423	35,620	2,587,803
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,595,347		2,595,347	2,595,347	0
Custodial Services	6530	1,583,312		1,583,312	1,583,312	0
Grounds Maintenance and Repairs	6550	832,994		832,994	832,994	0
Utilities	6570	1,877,668		1,877,668	1,877,668	0
Other	6590	5,143		5,143	5,143	0
Planning, Policy Making, and Coordination	6600	3,330,789		3,330,789	3,330,789	0
General Inst. Support Services	6700					
Community Relations	6710	1,332,489		1,332,489	1,332,489	0
Fiscal Operations	6720	1,581,069		1,581,069	1,581,069	0
Human Resources Management	6730	665,760		665,760	665,760	0
Noninstructional Staff Benefits & Incentives	6740	55,791		55,791	55,791	0
Staff Development	6750	34,698		34,698	34,698	0
Staff Diversity	6760	15,785		15,785	15,785	0
Logistical Services	6770	3,173,738		3,173,738	3,173,738	0
Management Information Systems	6780	3,808,879		3,808,879	3,808,879	0
Subtotal		$110,178,935	$85,399	$110,093,536	$23,855,043	$86,238,493

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Palomar Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	5,500		5,500	5,500	0
Community Services and Economic Development	6800					
Community Recreation	6810	100,654		100,654		100,654
Community Service Classes	6820					
Community Use of Facilities	6830	5,103		5,103	819	4,284
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910	7,473		7,473		7,473
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950	1,356,773		1,356,773	3,730	1,353,043
Student and Co-curricular Activities	6960	531,855		531,855		531,855
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	1,529,677		1,529,677	32,234	1,497,443
Other Auxiliary Operations	7090	112,249	-71,212	41,037		41,037
Depreciation or Use Allowance - Building					559,256	
Depreciation or Use Allowance - Equipment					1,072,840	
(05) Total		$113,828,219	$156,611	$113,671,608	$25,529,422	$89,774,282
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				28.44%		
(07) Notes						

NOTE 5 - CAPITAL ASSETS:

The following provides a summary of changes in capital assets for the year ended June 30, 2007:

	Balance July 1, 2006	Additions	Dispositions	Balance June 30, 2007
Capital Assets				
Land and improvements	$15,622,795	$40,198,004	$	$55,820,799
Site and site improvements	25,331,751	630,824		25,962,575
Equipment	14,015,676	1,728,585	(657,977)	15,086,284
Construction in progress	23,479,250	14,423,446	(1,207,825)	36,694,871
Total cost	78,449,472	56,980,859	(1,865,802)	133,564,529
Accumulated Depreciation				
Land improvements	(9,469,726)	(792,538)		(10,262,264)
Site and site improvements	(12,872,673)	(559,256)		(13,431,929)
Equipment	(11,868,128)	(1,072,840)	657,977	(12,282,991)
Total accumulated depreciation	(34,210,527)	(2,424,634)	657,977	(35,977,184)
Net capital assets	$44,238,945	$54,556,225	$(1,207,825)	$97,587,345

NOTE 6 - LEASES:

A. Capital Leases

The District leases equipment and a building valued at approximately $1,129,000 under agreements which provide for title to pass upon expiration of the lease period. Future minimum lease payments are as follows:

Fiscal Year	Principal	Interest	Total
2007-08	$ 69,720	$ 4,935	$ 74,655
2008-09	72,496	2,159	74,655
Total	$142,216	$ 7,094	$149,310

The District will receive no sublease rental revenues nor pay any contingent rentals for this equipment.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,621,209	12,828	125,764			1,759,801
Business and Management	0500	1,722,802	8,552	4,490			1,735,844
Communications	0600	1,575,236	35,782	87,657	65,203		1,763,878
Information Technology	0700	2,016,607	84,377	56,874	8,462		2,166,320
Education	0800	3,976,714	5,324	114,285	122,541		4,218,864
Engineering and Industrial Tech.	0900	2,465,865	23,753	166,126	102,693		2,758,437
Fine and Applied Arts	1000	3,952,578	14,933	128,872	57,781		4,154,164
Foreign Language	1100	1,634,203	2,895	11,491	8,515		1,657,104
Health	1200	2,238,000	39,860	134,748	82,559		2,495,167
Family and Consumer Sciences	1300	1,378,967		90,509	4,822		1,474,298
Law	1400	61,592		753			62,345
Humanities (Letters)	1500	5,616,957	8,533	36,922	4,606		5,667,018
Library Science	1600	28,533		8,120	3,136		39,789
Mathematics	1700	3,936,510	4,841	17,795	30,517		3,989,663
Military Studies	1800						
sical Sciences	1900	2,062,266	22,860	65,136			2,150,262
chology	2000	1,198,192		9,271	3,077		1,210,540
Public and Protective Services	2100	1,111,421	36	218,062	36,302		1,365,821
Social Sciences	2200	4,367,839	10,816	100,832	5,342		4,484,829
Commercial Services	3000	143,481		171,659			315,140
Interdisciplinary Studies	4900	4,983,179	25,899	496,196	931,695		6,436,969
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	485,921					485,921
Subtotal - Instructional Activities	**599**	46,578,072	301,269	2,045,562	1467,251		50,392,174

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Palomar Community College District | 060 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,477,832	2,134,948	[illegible]		6,694,718
Course and Curriculum Development	6020		138,425	7,831	[illegible]		388,381
Academic/Faculty Senate	6030		191,663	6,237			197,900
Other Instruct. Admin. & Instruct. Governance	6090		5,624,984	18,580	[illegible]		5,649,991
Subtotal - Instructional Administration	**6000**		10,432,904	2,167,596	330,490		12,930,990
Instructional Support Services (6100)							
Learning Center	6110	8,164	986,182	5,363	[illegible]		1,009,272
Library	6120		2,082,027	50,404	[illegible]		2,329,668
Media	6130		2,581,495	1,977,621	[illegible]		5,049,506
Museums and Galleries	6140		53,090	21,512	[illegible]		78,055
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		493,163				493,163
Subtotal - Instructional Support Services	**6100**	8,164	6,195,957	2,054,900	700,643		8,959,664
Admissions and Records	**6200**		2,609,190	147,837	[illegible]		2,800,727
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,892,603	44,372	[illegible]		3,948,975
Matriculation and Student Assessment	6320		948,029	234,258	[illegible]		1,514,024
Transfer Programs	6330		89,161	11,028			100,189
Career Guidance	6340		18,848	2,679			21,527
Other Student Counseling and Guidance	6390		246,464	73,109	[illegible]		320,255
Subtotal - Student Counseling and Guidance	**6300**		5,195,105	365,446	344,419		5,904,970

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Palomar Community College District | 060 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2006-07

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,234,643	93,504	[illegible]		1,352,308
Extended Opportunity Prgms. & Services (EOPS)	6430		1,348,408	255,805	[illegible]	[illegible]	1,689,704
Health Services	6440		658,427	70,234	[illegible]		731,666
Student Personnel Administration	6450		4,513				4,513
Financial Aid Administration	6460		1,568,852	194,556	[illegible]		1,773,337
Job Placement Services	6470			70			70
Veterans Services	6480		112,726	6,980	[illegible]		121,977
Miscellaneous Student Services	6490		1,533,674	1,054,129	[illegible]		2,623,423
Subtotal - Other Student Services	**6400**		6,461,243	1,675,278	75,078	85,399	8,296,998
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,118,826	361,582	114,939		2,595,347
Custodial Services	6530		1,403,768	161,142	18,402		1,583,312
Grounds Maintenance and Repairs	6550		719,025	57,104	56,865		832,994
Utilities	6570			1,877,668			1,877,668
Other Operation and Maintenance of Plant	6590			5,143			5,143
Subtotal - Operation and Maintenance of Plant	**6500**		4,241,619	2,462,639	190,206		6,894,464
Planning, Policymaking, and Coordination	**6600**		2,626,376	623,667	80,746		3,330,789

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Palomar Community College District | 060 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		538,220	789,785	4,484		1,332,489
Fiscal Operations	6720		1,701,752	(134,525)	13,842		1,581,069
Human Resources Management	6730		636,728	18,296	10,736		665,760
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		55,791				55,791
Staff Development	6750			34,698			34,698
Staff Diversity	6760		210	15,575			15,785
Logistical Services	6770		2,264,203	743,785	165,750		3,173,738
Management Information Systems	6780		2,422,950	1,127,441	258,488		3,808,879
Other General Institutional Support Services	6790			5,500			5,500
Subtotal - General Institutional Support Services	**6700**		7,619,854	2,600,555	453,300		10,673,709
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		95,841	4,813			100,654
Community Service Classes	6820						
Community Use Facilities	6830			4,284	819		5,103
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		95,841	9,097	819		105,757

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Palomar Community College District **060** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910			7,473			7,473
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,228,899	124,144	[illegible]		1,356,773
Student and Co-curricular Activities	6960		421,749	110,106			531,855
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		1,650,648	241,723	3,730		1,896,101
Auxiliary Operations (7000)							
Contract Education	7010	15,800	806,081	675,562	[illegible]		1,529,677
Other Auxiliary Operations	7090			41,037		[illegible]	112,249
Subtotal - Auxiliary Operations	**7000**	15,800	806,081	716,599	32,234	71,212	1,641,926
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					497,948	497,948
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Total - Long-Term Debt and Other Financing	**7200**					497,948	497,948
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					2,837,289	2,837,289
Student Aid	7320					368,613	368,613
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					3,205,902	3,205,902
TOTAL EXPENDITURES and OTHER OUTGO	**391**	46,602,036	48,236,107	15,110,899	3,722,616	3,860,461	117,532,119

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Palomar Community College District | 060 | District Code No.

Schedule 1A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	61,306
Avg. time p/account	6.9
Total Time (in minutes)	423011
Per Hour	60
Hours Worked **(** Activity 11)**	**7,050.2**
***EFC 2**	54,399
Avg. time p/student	3.8
Total Time (in minutes)	206716
Per Hour	60
Hours Worked **(** Activity 12)**	**3,445.3**
***EFC 1**	61,306
Avg. time p/question	11.7
Total Time (in minutes)	717280
Per Hour	60
Hours Worked **(** Activity 13)**	**11,954.7**
***EFC 2**	54,399
Avg. time p/file	9.1
Total Time (in minutes)	495031
Per Hour	60
Hours Worked **(** Activity 14)**	**8,250.5**
***EFC 4**	6,727
Avg. time p/account	5.7
Total Time (in minutes)	38344
Per Hour	60
Hours Worked **(** Activity 15)**	**639.1**
***EFC 5**	2,022
Avg. time p/student	6.7
Total Time (in minutes)	13547
Per Hour	60
Hours Worked **(** Activity 16)**	**225.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	8,571
Avg. time p/question	4.8
Total Time (in minutes)	41141
Per Hour	60
Hours Worked **(** Activity 21)**	**685.7**
***EFW 6**	8,571
Avg. time p/application	4.6
Total Time (in minutes)	39427
Per Hour	60
Hours Worked **(** Activity 22)**	**657.1**
***EFW 6**	8,571
Avg. time p/evaluation	5.3
Total Time (in minutes)	45426
Per Hour	60
Hours Worked **(** Activity 23)**	**757.1**
***EFW 8**	875
Avg. time p/application	4.2
Total Time (in minutes)	3675
Per Hour	60
Hours Worked **(** Activity 24)**	**61.3**
***EFW 7**	7,696
Avg. time p/application	3.9
Total Time (in minutes)	30014
Per Hour	60
Hours Worked **(** Activity 25)**	**500.2**
***EFW 8**	875
Avg. time p/application	2.8
Total Time (in minutes)	2450
Per Hour	60
Hours Worked **(** Activity 26)**	**40.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Armenta, Christina	Enrollment Scvs. Specialist	1	3	10	10		
Fugate, Lea	Enrollment Scvs. Specialist	8	1	12		6	9
Marks, Gail L.	Enrollment Scvs. Specialist	10	5	20	10		
Martinez-Heffner, Angie N.	Enrollment Scvs. Specialist	1	5	3	3		
McKnight, Vandy	Enrollment Scvs. Specialist	10	1	10		8	10
Nava, Ulises	Enrollment Scvs. Specialist	6	3	2	9	3	1
Purcell, R. Harrison	Enrollment Scvs. Specialist	10	10	20	20		
Stiles, Jane	Enrollment Scvs. Specialist	3	1	5	1		
Stuart, Linda	Enrollment Scvs. Specialist	10	5	20	10		
Taylor, Tamara	Enrollment Scvs. Specialist	10		15	10		
Average		**6.9**	**3.8**	**11.7**	**9.1**	**5.7**	**6.7**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Enrollment Fee Collection Average PHR

Purpose: To summarize PHR data.
Source: Palomar CCD PHR list.
Findings:

Staff	Title	06-07	
Armenta, Christina	Enrollment Services Specialist	$35.63	A
Fugate, Lea	Enrollment Services Specialist	$36.88	
Marks, Gail L.	Enrollment Services Specialist	$35.63	A
Martinez-Heffner, Angie N.	Enrollment Services Specialist	$35.50	
McKnight, Vandy	Enrollment Services Specialist	$41.46	
Nava, Ulises	Enrollment Services Specialist	$32.00	
Purcell, R. Harrison	Enrollment Services Specialist	$36.86	
Stiles, Jane	Enrollment Services Specialist	$37.28	
Stuart, Linda	Enrollment Services Specialist	$22.34	
Taylor, Tamara	Admissions Assistant	$37.70	A
Average PHR		**$35.13**	

A: Used average PHR.

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Burrows, Ardith D.	Enrollment Services Specialist	3.0	2.0	4.0	4.0		
Fugate, Lea	Enrollment Services Specialist	2.5	4.0	5.0			
Hicks, Carolyn	Financial Assistance Specialist	2.0	2.0	3.0	3.0	3.0	
Johnston, Ann Marie	Financial Assistance Advisor		2.0	3.0	4.0	4.0	3.0
Limon de Gonzalez, Maria Francisca	Financial Assistance Specialist	5.0	4.0	5.0	5.0	5.0	
Magsulit, Lenore	Financial Aid Advisor	2.0	2.0	3.0	2.0	2.0	2.0
Maldonado, Yenifer	Financial Assistance Specialist	5.0	5.0	8.0	8.0		
Martinez-Heffner, Angie N.	Enrollment Services Specialist	10.0	15.0	10.0			
McKnight, Vandy	Enrollment Specialist	10.0	15.0	15.0			
Moss, Benjamin	Supervisor, Admissions	3.0	2.0	4.0	4.0		
Purcell, R. Harrison	Enrollment Services Specialist	15.0	10.0	10.0	5.0	5.0	
Richards, Barbara	Financial Aid Assistance Advisor	2.0	3.0	4.0	3.0	3.0	2.0
Sanchez-Velazco, Adriana	Enrollment Services Specialist	3.0	2.0	4.0	4.0		
Sedillo, Robert M.	Financial Assistance Specialist	3.0	3.0	4.0	5.0		
Springer, Morris	Financial Aid Specialist	3.0	2.0	3.0	4.0		
Stiles, Jane	Financial Assistance Specialist	7.0	4.0	4.0			
Tate, Irene P.	Financial Assistance Advisor	3.0	4.0	4.0	4.0	4.0	3.0
Valle-Peters, Rosemary Pixie	Campus Service Assistant	3.0	2.0	4.0	4.0		
Wulf, Michael A.	Financial Assistance Advisor			3.0	4.0	5.0	4.0
Average		**4.8**	**4.6**	**5.3**	**4.2**	**3.9**	**2.8**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: Palomar CCD PHR List.
Findings:

Staff	Title	06-07	
Burrows, Ardith D.	Enrollment Services Specialist	$38.99	
Fugate, Lea	Enrollment Services Specialist	$36.88	
Hicks, Carolyn	Financial Assistance Specialist	$39.21	
Johnston, Ann Marie	Financial Assistance Advisor	$41.07	
Limon de Gonzalez, Maria Francisca	Financial Assistance Specialist	$40.69	
Magsulit, Lenore	Financial Aid Advisor	$40.52	
Maldonado, Yenifer	Financial Assistance Specialist	$38.03	A
Martinez-Heffner, Angie N.	Enrollment Services Specialist	$35.50	
McKnight, Vandy	Enrollment Specialist	$41.46	
Moss, Benjamin	Supervisor, Admissions	$52.89	
Purcell, R. Harrison	Enrollment Services Specialist	$36.86	
Richards, Barbara	Financial Aid Assistance Advisor	$39.56	
Sanchez-Velazco, Adriana	Enrollment Services Specialist	$35.63	A
Sedillo, Robert M.	Financial Assistance Specialist	$33.48	
Springer, Morris	Financial Aid Specialist	$38.54	
Stiles, Jane	Financial Assistance Specialist	$37.28	
Tate, Irene P.	Financial Assistance Advisor	$44.24	
Valle-Peters, Rosemary Pixie	Campus Service Assistant	$36.32	
Wulf, Michael A.	Financial Assistance Advisor	$34.80	
Average PHR		**$39.05**	

A: Used average PHR.

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		05-06	06-07
EFC 1	1.8-1 1.	Enrolled Students	56,866	61,306
EFC 2	1.8-1 2.	Paid Enrollment fees	42,393	54,399
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	6,146	7,696
EFC 4	1.8-2 1.	Delinquencies collections	5,097	6,727
EFC 5	1.8-2 2.	Refunds		2,022
EFW 6	1.8-3 1.	Waivers Requested	9,305	8,571
EFW 7	1.8-3 2.	Waivers Approved	8,011	7,696
EFW 8	1.8-3 (1-2)	Waivers Denied	1,294	875

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Palomar
For 2006 Summer Term

Data Current As Of April 30, 2012 02:04:07

Total Headcount	15,965

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Palomar
For 2006 Fall Term

Data Current As Of April 30, 2012 02:04:15

Total Headcount	31,058

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Palomar
For 2007 Spring Semester

Data Current As Of April 30, 2012 02:04:25

Total Headcount	30,946

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Palomar College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer from 1st day of ~~class~~ – end of sum term	5324	5481	5705
Fall from 1st day of class – end of fall term	2227	1853	2124
Winter/Intersession	NA	NA	NA
Spring day after fall ends – end of spring term	1020	1703	1721
Total	8571	9037	9550
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession	NA	NA	NA
Spring			
Total	7696	8184	8785

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date: 1/21/09

Angelina E. Hrzic
Employee Name: (print)

FA Systems Functional Specialist
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Palomar

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 7,033,959	$ 6,414,477	$
(4A) Total Enrollment Fees Waived (BOGG, etc.) (Angelina)	$ 296,092	$ 2,199,160	$ 250,510 (As of 1/21/09)
(4B) 2% Enrollment Fees Waived (Line 4A x 2%) (Angelina	$ 47922	$ 43,983	$ 50,130
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only PLEASE USE BLUE INK

Employee Signature: _____ Date 1/21/09

Angelina E. Arzate
Employee Name: (print)

FA SIS Functional Spec.
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
BURROWS, ARDITH	ENROLLMENT SERVICES SPECIALIST	$ 36.99	$ 38.99
FUGATE, LEA	ENROLLMENT SERVICES SPECIALIST	$ 35.06	$ 36.88
HICKS, CAROLYN	FINANCIAL AID SPECIALIST	$ 34.92	$ 39.21
JOHNSTON, ANN MARIE	FINANCIAL AID ADVISOR	$ 39.47	$ 41.07
JOHNSTON, CYNTHIA	INSTRUCTIONAL SUPPORT ASSISTANT I	$ 4.82	$ 5.04
LIMON DE GONZALES, MARIA	FINANCIAL ASSISTANCE SPECIALIST	$ 37.14	$ 40.69
MAGSULIT, LENORE	FINANCIAL AID ADVISOR	$ 38.33	$ 40.52
MARTINEZ-HEFFNER, ANGIE	ENROLLMENT SERVICES SPECIALIST	$ 34.28	$ 35.50
McKNIGHT, VANDY	ENROLLMENT SERVICES SPECIALIST	$ 38.95	$ 41.46
MOSS, BENJAMIN (JAIME)	ADMISSIONS SUPERVISOR	$ 51.62	$ 52.89
NAVA, ULISES	ENROLLMENT SERVICES SPECIALIST	$ 24.39	$ 32.00
PURCELL, R. HARRISON	ENROLLMENT SERVICES SPECIALIST	$ 33.58	$ 36.86
RICHARDS, BARBARA	FINANCIAL AID ADVISOR	$ 37.73	$ 39.56

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
SEDILLO, ROBERT	FINANCIAL AID SPECIALIST	$ 34.87	$ 33.48
SPRINGER IV, MORRIS	FINANCIAL ASSISTANCE SPECIALIST	$ 35.26	$ 38.54
STILES, JANE	ENROLLMENT SERVICES SPECIALIST	$ 35.35	$ 37.28
STUART, LINDA	ENROLLMENT SERVICES SPECIALIST	$ 20.86	$ 22.34
TATE, IRENE	FINANCIAL AID ADVISOR	$ 42.20	$ 44.24
VALLE-PETERS, R. PIXIE	CAMPUS SERVICE ASSISTANT	$ 34.48	$ 36.32
WULF, MICHAEL	FINANCIAL AID ADVISOR	$ 29.68	$ 34.80

Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 200[illegible]06 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 1,357,331	$ 7,033,959
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 27,147	$ 140,679
1.8-4 line 4A	Enrollment Fees Waived	$ 2,586,129	$ 2,396,092
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 51,723	$ 47,922
		Unit Fees	
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**	$ 26.00	$ 20.00
Total # of credits	Line 4A divided by unit fee	99,466	119,804
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)	$ 90,514	$ 109,022
Summary			
1.8-4 line 4B.	2% of Fees Waived	$ 51,723	$ 47,922
1.8-4 5.	Credit Units Waived	$ 90,514	$ 109,022
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 142,237**	**$ 156,944**

**Per unit fee
F/Y 2005-206 fees are $26.00
F/Y 2006-2007 fees are $20.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Palomar
COUNTY: San Diego

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$30,107,303	$27,669,933	$538,334	$28,208,267
ENROLL FEE ADMIN (2%)	53,254	48,993	4,261	53,254
APPRENTICE ALLOWANCE	1,230,173	1,131,759	98,414	1,230,173
BASIC SKILLS	513,113	0	513,113	513,113
S.F.A.A.	528,178	485,923	42,255	528,178
E.O.P.S.	1,174,859	1,080,871	93,988	1,174,859
C.A.R.E.	126,448	116,332	10,116	126,448
D.S.P.S.	1,201,412	1,105,299	96,113	1,201,412
STATE HOSPITALS	0	0	0	0
CALWORKS	360,847	382,120	-21,273	360,847
MATRICULATION (CREDIT)	1,224,374	1,126,424	97,950	1,224,374
MATRIC. (NONCREDIT)	337,475	310,477	26,998	337,475
FAC.& STAFF DIVERSITY	21,062	19,377	1,685	21,062
PART-TIME FAC. ALLO.	838,297	771,234	67,063	838,297
PART-TIME FAC. OFF. HRS	11,299	0	11,299	11,299
PART-TIME FAC. INS.	4,088	0	4,088	4,088
TELECOMMUNICATIONS	471,958	424,762	47,196	471,958
PLANT & INSTRUCTIONAL	220,020	202,419	17,601	220,020
SCHDL. MAINT. & REPAIR	220,039	202,436	17,603	220,039
TANF	56,992	52,432	4,560	56,992
ECON. DEVELOPMENT	0	0	0	0
NURSING EDUCATION	179,352	150,655	28,697	179,352
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	177,729	177,729	0	177,729
PRIOR YEAR CORRECTION	-915,180	-915,180	0	-915,180
ONE TIME FUNDS				
TRANSITION PAYMENT	49,748	43,404	6,344	49,748
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	390,598	390,598	0	390,598
BASIC SKILLS -REAPPROP	431,766	431,766	0	431,766
CAR. TECH. TRAILER BIL	695,608	695,608	0	695,608
GEN. PUR. TRAILER BILL	1,360,858	1,360,858	0	1,360,858
INST. MATERIAL TRAILER	821,172	821,172	0	821,172
SCHLD.MAINT. TRAILER B	821,172	821,172	0	821,172
FACULTY STAFF DEV	87,414	87,414	0	87,414
TOTAL	$42,806,428	$39,200,987	$1,706,405	$40,907,392

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Palomar Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006 through 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 569.92	
2	Staff Training	(04)(B)(1)(b)	$ 940.24	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)		
4	Waiving student fees	(04)(B)(2)(b)	$ 102,804.94	$ 105,520.93
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 511.08	
6	EFCW - Fee Waiver Costs	Total	$ 104,826.18	$ 105,520.93
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 142,237.00	$ 156,944.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (37,410.82)	$ (51,423.07)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 104,826.18**	**$ 105,520.93**

Conclusion: If linen 8 is negative, then line 6-"Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7-"Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Palomar College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of April 30, 2012 02:03:42

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	145	58,910
BOGW - Part A-2 based on SSI recipient status	212	47,415
BOGW - Part A-3 based on general assistance recipient status	2	632
BOGW - Part B based on income standards	1,974	735,763
BOGW - Part C based on financial need	3,555	1,380,686
Fee Waiver – Dependent child of Deceased Law Enforcement/Fire Suppression	1	78
Fee Waiver – Dependent child of deceased or disabled Veteran	364	163,307

Total Amount = $ 2,386,791

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
[illegible] Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 28, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4785

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Pasadena Area Community College District CC19335

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Pasadena Area Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 19335

(02) Claimant Name: Pasadena Area Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1570 E. Colorado Blvd

City: Pasadena | State: CA | Zip Code: 91106-2003

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 78,000	(13) $ 70,965
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 70,965
Due from State	(08) $ 78,000	(17) $ 70,965
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	106,286
(25) EFCW-1, (04)(B)(1)(a)(f)	9,411
(26) EFCW-1, (04)(B)(1)(b)(f)	298
(27) EFCW-1, (04)(B)(2)(a)(f)	25,328
(28) EFCW-1, (04)(B)(2)(b)(f)	166,608
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	101,001
(32) EFCW-1, (09)	136,323
(33) EFCW-1, (10)	201,645
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 7-27-06

James Albanese — **Type or Print Name**

Interim Vice President, Administrative Services — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Pasadena Area Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 106,286.34	$ -	$ -	$ -	$ -	$ 106,286.34
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 9,411.00	$ -	$ -	$ -	$ -	$ 9,411.00
b. Staff training (One time per employee)	$ 298.02	$ -	$ -	$ -	$ -	$ 298.02
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 25,327.50	$ -	$ -	$ -	$ -	$ 25,327.50
b. Waiving student fees	$ 166,608.34	$ -	$ -	$ -	$ -	$ 166,608.34
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 307,931.20	$ -	$ -	$ -	$ -	$ 307,931.20

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 101,001.43
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 408,932.63
Cost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 136,323.00
10) Less: Enrollment Fee Waiver offsets		$ 201,644.86
11) Total Claimed Amount	[Line (08) - (Line (09) + Line (10))]	$ 70,964.77

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
asadena Area Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [X] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Allan, Cleon Data Controller	$34.38	9.0	$ 309.42				
Calculating total enrollment fee to be collected College Assistant Various	$15.97	2,916.7	$ 46,579.70				
Answering student's questions regarding enrollment fee collection College Assistant Various	$15.97	3,719.3	$ 59,397.22				
(05) Total [X] Subtotal [ ]			$ 106,286.34	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Bustamante, Maria Intake Specialist	$31.37	300.0	$ 9,411.00				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 9,411.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Bustamante, Maria Intake Specialist	$31.37	9.5	$ 298.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 298.02	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Bustamante, Maria Intake Specialist	$31.37	750.0	$ 23,527.50				
Mitchell, Felisia Data Technician	$30.00	60.0	$ 1,800.00				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 25,327.50	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Pasadena Area Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Hourly Support Various	$17.85	7,311.0	$ 130,501.35				
Receiving waiver applications Hourly Support Various	$17.85	487.4	$ 8,700.09				
Evaluating waiver applications and verifying application documents Hourly Support Various	$17.85	609.3	$ 10,876.01				
Entering approved application information into district records; providing student award letter Hourly Support Various	$17.85	926.1	$ 16,530.89				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 166,608.34	$ -	$ -	$ -	$ -

New 04/06

Pasadena Area Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	9.00	Allan, Cleon	Data Controller	$34.38	$309.42	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	9.00	**Allan, Cleon Total**			$309.42		
04-05	9.50	Bustamante, Maria	Intake Specialist	$31.37	$298.02	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	750.00	Bustamante, Maria	Intake Specialist	$31.37	$23,527.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	300.00	Bustamante, Maria	Intake Specialist	$31.37	$9,411.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	1,059.50	**Bustamante, Maria Total**			$33,236.52		
04-05	2,916.70	College Assistant	Various	$15.97	$46,579.70	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,719.30	College Assistant	Various	$15.97	$59,397.22	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
	6,636.00	**College Assistant Total**			$105,976.92		
04-05	7,311.00	Hourly Support	Various	$17.85	$130,501.35	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	487.40	Hourly Support	Various	$17.85	$8,700.09	Receiving waiver applications	Waiving student fees
04-05	609.30	Hourly Support	Various	$17.85	$10,876.01	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	926.10	Hourly Support	Various	$17.85	$16,530.89	Entering approved application information into district records; providing student award letter	Waiving student fees
	9,333.80	**Hourly Support Total**			$166,608.34		
04-05	60.00	Mitchell, Felisia	Data Technician	$30.00	$1,800.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	60.00	**Mitchell, Felisia Total**			$1,800.00		
	17,098.30	**Grand Total**			$307,931.20		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: June 22, 2005

INSTITUTION:
Pasadena City College
(aka Pasadena Area Community College)
1570 East Colorado Boulevard

FILING REF.: The preceding Agreement was dated July 2, 2004

Pasadena CA 91106-2003

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/07	32.8	All	(1) – Health Ins should use this
PROV.	07/01/04	06/30/06	19.4	All	ED Restricted Pgrms. FDC grants
PROV.	07/01/07	06/30/08	32.8	All	(1)

(1) All except ED restricted programs.

*BASE:
Direct salaries and wages including all fringe benefits.

U73191

Schedule 1A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 11)**	**0.0**
***EFC 2**	43,750
Avg. time p/student	4.0
Total Time (in minutes)	175000
Per Hour	60
Hours Worked **(** Activity 12)**	**2,916.7**
***EFC 1**	69,737
Avg. time p/question	3.2
Total Time (in minutes)	223158
Per Hour	60
Hours Worked **(** Activity 13)**	**3,719.3**
***EFC 1**	
Avg. time p/file	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 14)**	**0.0**
***EFC 4**	0
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5**	0
Avg. time p/student	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used default EFC-2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	14,622
Avg. time p/question	30.0
Total Time (in minutes)	438660
Per Hour	60
Hours Worked **(** Activity 21)**	**7,311.0**
***EFW 7**	14,622
Avg. time p/application	2.0
Total Time (in minutes)	29244
Per Hour	60
Hours Worked **(** Activity 22)**	**487.4**
***EFW 7**	14,622
Avg. time p/evaluation	2.5
Total Time (in minutes)	36555
Per Hour	60
Hours Worked **(** Activity 23)**	**609.3**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	14,622
Avg. time p/application	3.8
Total Time (in minutes)	55564
Per Hour	60
Hours Worked **(** Activity 25)**	**926.1**
***EFW 8**	0
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)Except activity code 24**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
			2	1			5
		**Activity Codes					
		11	12	13	14	15	16
Braud, Roland	College Assistant IV		4	3			
Caputo, RaeAnn	Senior Account Clerk II		4	4			5
Keep, Teresa	College Assistant IV		4	3			
Ramirez, Ana	College Assistant IV		4	3			5
Ramirez, Verenice	College Assistant IV		4	3			
Average			**4.0**	**3.2**			**5.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used Default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-2 and Summary of Employees on Forms 1-7.2 & 1-7.3 & Productive Hourly Rates Form 1-4 provided by client.
Findings:

Staff	Title	04-05
Braud, Roland	College Assistant IV	$10.00
Caputo, RaeAnn	Senior Account Clerk II	$37.85
Keep, Teresa	College Assistant IV	$10.00
Ramirez, Ana	College Assistant IV	$12.00
Ramirez, Verenice	College Assistant IV	$10.00
AVERAGE		$15.97

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier 7 **Activity Codes					
		21	22	23	24	25	26
Baroody, Albert	Hourly Support	30	2	2.5	4	3.8	4
Bustamante, Maria	Intake Support	30	2	2.5	4	3.8	4
Canales, Judy	Hourly Support	30	2	2.5	4	3.8	4
Cosio, Eunice	Hourly Support	30	2	2.5	4	3.8	4
Crutchfield, Kayla	Hourly Support	30	2	2.5	4	3.8	4
Do, David	Hourly Support	30	2	2.5	4	3.8	4
Gonzales, Valerie	Hourly Support	30	2	2.5	4	3.8	4
Hines, Cathy	Hourly Support	30	2	2.5	4	3.8	4
Miles, Kim	Assistant Dean	30	2	2.5	4	3.8	4
Miller, Tracy	Hourly Support	30	2	2.5	4	3.8	4
Moseley, Natasha	Hourly Support	30	2	2.5	4	3.8	4
Perry, Yolande	Hourly Support	30	2	2.5	4	3.8	4
Rayyiss, Charles	Hourly Support	30	2	2.5	4	3.8	4
Rayyiss, Ronald	Hourly Support	30	2	2.5	4	3.8	4
Truonhg, Erica	Hourly Support	30	2	2.5	4	3.8	4
Wright, Damien	Hourly Support	30	2	2.5	4	3.8	4
Zamudio, Josie	Hourly Support	30	2	2.5	4	3.8	4
Average		**30.0**	**2.0**	**2.5**	**4.0**	**3.8**	**4.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW 1.7-3 and Summary of Employees on Forms 1-7.2 & 1-7.3 and Productive Hourly Rates Form 1-4 provided by client
Findings:

Staff	Title	04-05
Baroody, Albert	Hourly Support	$12.00
Bustamante, Maria	Intake Syooirt	$31.37
Canales, Judy	Hourly Support	$9.50
Cosio, Eunice	Hourly Support	$16.00
Crutchfield, Kayla	Hourly Support	$10.00
Do, David	Hourly Support	$7.50
Gonzales, Valerie	Hourly Support	$12.00
Hines, Cathy	Hourly Support	
Miles, Kim	Assistant Dean	$60.39
Miller, Tracy	Hourly Support	$10.00
Moseley, Natasha	Hourly Support	$19.00
Perry, Yolande	Hourly Support	$16.00
Rayyiss, Charles	Hourly Support	$19.00
Rayyiss, Ronald	Hourly Support	$19.00
Troung, Erica	Hourly Support	
Wright, Damien	Hourly Support	$10.00
Zamudio, Josie	Hourly Support	$16.00
Average PHR		$17.85

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1 1.	Enrolled Students	58,326	59,175	60,693	64,494	65,592	69,556	69,737
EFC 2	1.8-1 2.	Paid Enrollment fees	44,536	45,916	45,586	48,042	46,643	46,572	43,750
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	9,709	9,464	9,962	10,827	12,530	13,543	14,622
EFC 4	1.8-2 1.	Delinquencies collections							
EFC 5	1.8-2 2.	Refunds							

EFW 6	1.8-3 1.	Waivers Requested*	X	9,464	9,962	10,827	12,530	13,543	14,622
		*(Waivers Approved used where Waivers Requested not supplied)							
EFW 7	1.8-3 2.	Waivers Approved	X	9,464	9,962	10,827	12,530	13,543	14,622
EFW 8	1.8-3 (1-2)	Waivers Denied	X	N/A - Waivers Requested not provided					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena CCD
For 2004 Summer Term

Data Current As Of June 22, 2006 08:26:32

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	12,612

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena CCD
For 2004 Fall Term

Data Current As Of June 22, 2006 08:26:56

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	28,794

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena CCD
For 2005 Winter Intersession

Data Current As Of June 22, 2006 08:27:13

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	12,154

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena CCD
For 2005 Spring Semester

Data Current As Of June 22, 2006 08:27:34

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	27,641

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1.6's, 1.7's &/or 1.8's used in multiple years

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: PASADENA

Fiscal Year: 2004 - 05

Glen Allan
Employee Name

Data Controller
Exact Position Title

FINANCIAL AID L-114
Dept. & Location #

626-585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length

Date	Description of Activities		Time in Hours	Leave Blank
2004	look up SSN for student refunds		9	
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5.18.06

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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January 2006

EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
3906/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: PASADENA Fiscal Year: 2004-05

MARIA M. BUSTAMANTE — Employee Name
INTAKE SPECIALIST — Exact Position Title

FINANCIAL AID L -114 — Department/Location
(626) 585-7401 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
/ /	1A 1B 2A (2B) 3 4	BI MONTHLY HOURLY MEETINGS	9 1/2
/ /	1A 1B 2A 2B (3) 4	FILE & MAINTAING FILES	750
/ /	1A (1B) 2A 2B 3 4	PROCEDURES W/STAFF & PAUL VISIK	300
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria M. Bustamante Date JUNE 6, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: PASADENA Fiscal Year: 04-05

FELISIA MITCHELL DATA TECH

Employee Name Exact Position Title

FINANCIAL AID 626-585-7932 12mo/11mo/10mo/hrly

Dept. & Location # Telephone # Work year length

Date	Description of Activities		Time in Hours	Leave Blank
3/1/04	DOWNLOADING FINANCIAL		60	
6/30/05	AID NEED FOR AUTOMATED			
/ /	BOG PROGRAM			
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

FELISIA MITCHELL

Employee Name: (print) Position or Title

If you have any questions, please contact KIM MILES, at 626-585-7401

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10-

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Cashier's office L113
Department/Location

Boland Braud
Employee Name

College Ass't II
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Boland Braud III Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Counter's Office L113
Department/Location

Bal Ann Caputo
Employee Name

Senior Account Clerk II / Registration
Exact Position Title

585-7085
Telephone #

~~12mo~~/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4 min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bal Ann Caputo Date 5/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District
Cashier's office L113 — Department/Location
Teresa Keep — Employee Name
College Ass't IV — Exact Position Title
5857085 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa Keep / Adm Walker — Date 5/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District
Cashier Office L113 — Department/Location
Ana Ramirez — Employee Name
College Ass't IV — Exact Position Title
585-7085 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	Y				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Maria Ramirez Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Cashiers Office L113
Department/Location

Verenice Ramirez
Employee Name

College Ass't IV
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Verenice Ramirez Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Albert Baroody
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Albert Baroody Date 6/15/06

If you have any questions, please contact Kim Miles, at (626) 585-7401

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Maria Bustamante
Employee Name

Intake Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Judy Canales — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Kayla Crutchfield — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

David Do — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Valerie Gonzales
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Not Available for signature Date 6/16/06

If you have any questions, please contact Kim Miles at (626) 585-7401

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Cathy Hines — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 **04-05** 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Kim Miles
Employee Name

Assistant Dean
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

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Employee Signature [signature] Date 6.15.06

If you have any questions, please contact Kim Miles at (626) 585-7401

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Tracy Miller — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Natasha Moseley
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Yolande Perry — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Not Available for signature — Date 6/16/06

If you have any questions, please contact Kim Miles, at (626) 585-7401

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Charles Rayyiss — Employee Name

Hourly Support — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

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PLEASE USE BLUE INK

Employee Signature Not available for signature — Date 6/16/06

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Ronald Rayyiss — Employee Name

Hourly Support — Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Not available for signature Date 6/16/06

If you have any questions, please contact Kim Miles, at (626) 585-7401

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Erica Truong
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 98-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

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Employee Signature Erica T. Date 6-16-06

If you have any questions, please contact Kim Miles, at (626) 585-7401

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Damien Wright
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

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Employee Signature Not available for signature Date 6/16/06

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Josie Zamudio
Employee Name

Hourly Support
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	30		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2.50		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3.75		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4		✓		

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Employee Signature Not available for signature Date 6/16/06

If you have any questions, please contact Kim Miles, at (626) 585-7401

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Pasadena

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	11802	11795	12221	13645	14798	10247	10568	
Fall	23319	23930	24202	25480	25875	25587	24968	
Winter/ Intersession	0	0	0	0	0	9635	10283	
Spring	23205	23450	24270	25369	24919	24087	23918	
Total	58326	59175	60693	64494	65592	69556	69737	
2. Number of students who paid enrollment fees:								
Summer	9651	9923	10105	11075	11614	7957	7515	
Fall	17865	18629	18021	19036	18035	17463	16002	
Winter/ Intersession	0	0	0	0	0	5896	5551	
Spring	17020	17369	17460	17931	16994	15256	14282	
Total	44536	45916	45586	48042	46643	46572	43750	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

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Employee Signature: Brigitte Norsworthy Date 5/30/06

Brigitte Norsworthy
Employee Name: (print)

Principal Accountant
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Revised January 2006

#2

06/21/06 Pasadena City College
Count of Students paying Enroll Fee

Summer 1998	Count =	9651
Fall 1998	Count =	17865
Spring 1999	Count =	17020
Summer 1999	Count =	9923
Fall 1999	Count =	18629
Spring 2000	Count =	17364
Summer 2000	Count =	10105
Fall 2000	Count =	18021
Spring 2001	Count =	17460
Summer 2001	Count =	11075
Fall 2001	Count =	19036
Spring 2002	Count =	17931
Summer 2002	Count =	11614
Fall 2002	Count =	18035
Spring 2003	Count =	16994
Summer 2003	Count =	7957
Fall 2003	Count =	17463
Winter 2004	Count =	5896
Spring 2004	Count =	15256
Summer 2004	Count =	7515
Fall 2004	Count =	16002
Winter 2005	Count =	5951
Spring 2005	Count =	14282
Total	Count =	321045

44,534

45,916

45,588

48,042

46,643

46,572

43,750

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$4,198,595	$4,004,152	$3,698,205	$4,151,982	$4,030,947	$5,404,059	$7,879,097	$
2. Enrollment Fees Refunded	$399,464	$395,047	$343,616	$390,185	$375,060	$336,500	$744,715	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$3,799,131	$3,609,105	$3,624,589	$3,761,797	$3,655,887	$5,067,559	$7,128,382	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$2,107,127	$1,869,849	$1,877,814	$2,068,530	$2,413,892	$4,164,892	$6,852,032	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

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Employee Signature: _____ Date _____

_____ _____

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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California Home

Monday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Pasadena College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 12, 2006 10:43:05

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	799	282,123
BOGW - Part B based on income standards	5,427	2,121,342
BOGW - Part C based on financial need	8,396	4,448,567

Total Unduplicated Count = 14,622
Total Amount = $ 6,852,032

Use

Back to Top of Page

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Schedule 6
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
1999-2000 through 2004-2005
Average PHR

Staff	Title	04-05	03-04	02-03	01-02	00-01	99-00
Baroody, Albert	Hourly Support					-------	-------
Blakeley, Bonita	Hourly Support	-------	-------				**$9.61**
Canales, Judy	Hourly Support				-------	-------	-------
Cosio, Eunice	Hourly Support	-------				-------	-------
Crutchfield, Kayla	Hourly Support			-------	-------	-------	-------
Cunegin, Yolanda	Intake Specialist	-------	-------	-------	-------		$9.33
Do, David	Hourly Support			-------	-------	-------	-------
Gonzales, Valerie	Hourly Support	$12.00	-------	-------	-------	-------	-------
Hines, Cathy	Hourly Support					$9.00	-------
Jackson, Karen	Hourly Support	-------	-------	-------	-------	-------	
Jimenez, Valerie	Hourly Support	-------			-------	-------	-------
Lopez, Serena	Hourly Support	-------		-------	-------	-------	-------
Miller, Tracy	Hourly Support				-------	-------	-------
Moseley, Natasha	Hourly Support		-------	-------	-------	-------	-------
Nguyen, Tammy	Assistant Director	-------	-------	-------	-------		
Pastis, Patti	Intake Specialist	-------	-------	-------	-------	-------	
Perry, Yolande	Hourly Support	$16.00	$12.00	-------	-------	-------	-------
Rayyiss, Charles	Hourly Support		-------	-------	-------	-------	-------
Rayyiss, Ronald	Hourly Support		-------	-------	-------	-------	-------
Truong, Erica	Hourly Support					$12.00	$10.00
Wright, Damien	Hourly Support		-------	-------	-------	-------	-------
Zamudio, Josie	Hourly Support	$16.00	$12.00	$10.00	-------	-------	-------

Pasadena Area Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-2000 through 2004-2005
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 3,609,105	$ 3,624,589	$ 3,761,797	$ 3,655,887	$ 5,067,559	$ 7,128,382
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 72,182	$ 72,492	$ 75,236	$ 73,118	$ 101,351	$ 142,568
1.8-4 line 4A	Enrollment Fees Waived	$ 1,869,849	$ 1,877,814	$ 2,068,530	$ 2,413,892	$ 4,164,892	$ 6,852,032
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 130,889	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		170,710	188,048	219,444	265,787	293,574
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 130,889					
1.8-4 5.	Credit Units Waived		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 168,286**	**$ 192,902**	**$ 212,495**	**$ 247,972**	**$ 325,164**	**$ 404,193**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Pasadena Area
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$55,733,970	$53,051,420	$-1,821,938	$51,229,482
ENROLL FEE ADMIN (2%)	136,323	117,237	19,086	136,323
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,852,657	3,313,285	539,372	3,852,657
S.F.A.A.	874,148	750,477	123,671	874,148
E.O.P.S.	1,314,668	1,190,876	123,792	1,314,668
C.A.R.E.	139,562	120,023	19,539	139,562
D.S.P.S.	928,385	794,509	133,876	928,385
STATE HOSPITALS	0	0	0	0
CALWORKS	530,893	456,568	74,325	530,893
MATRICULATION (CREDIT)	1,037,153	890,485	146,668	1,037,153
MATRIC. (NONCREDIT)	375,189	322,663	52,526	375,189
FAC. & STAFF DIVERSITY	22,982	16,337	6,645	22,982
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	998,221	858,470	139,751	998,221
BLOCK GRANT (ONE-TIME)	476,904	410,137	66,767	476,904
ECON. DEVELOPMENT	492,143	350,665	62,735	413,400
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	122,821	105,626	17,195	122,821
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	13,416	29,928	43,344
VTEA TITLE I C	472,008	245,444	151,043	396,487
PLANT & INSTRUCTIONAL	534,923	460,033	74,890	534,923
PRIOR YEAR CORRECTION	139,249	120,663	18,586	139,249
TOTAL	$68,286,902	$63,619,894	$0	$63,619,894

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waiver
Fiscal Years 1999-2000 to 2004-2005
Enrollment Fee Waiver Offset

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 7,463.64	$ 7,837.56	$ 2,068.04	$ 5,314.86	$ 8,718.00	$ 9,411.00
2	Staff Training	(04)(B)(1)(b)				$ 98.90	$ 276.07	$ 298.02
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)				$ 7,807.50	$ 33,201.60	$ 25,327.50
4	Waiving student fees	(04)(B)(2)(b)	30657.28	$ 37,974.28	$ 50,284.20	$ 61,567.59	$ 142,122.16	$ 166,608.34
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)						
6	EFCW - Fee Waiver Costs	Total	$ 38,120.92	$ 45,811.84	$ 52,352.24	$ 74,788.85	$ 184,317.83	$ 201,644.86
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 1,869,849.00	$ 1,877,814.00	$ 2,062,530.00	$ 2,413,892.00	$ 4,164,892.00	$ 6,852,032.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (1,831,728.08)	$ (1,832,002.16)	$ (2,010,177.76)	$ (2,339,103.15)	$ (3,980,574.17)	$ (6,650,387.14)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 38,120.92**	**$ 45,811.84**	**$ 52,352.24**	**$ 74,788.85**	**$ 184,317.83**	**$ 201,644.86**

Conclusion:

California Home

Monday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Pasadena College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 12, 2006 10:43:05

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	799	282,123
BOGW - Part B based on income standards	5,427	2,121,342
BOGW - Part C based on financial need	8,396	4,448,567

Total Unduplicated Count = 14,622
Total Amount = $ 6,852,032

Use

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 16, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Pasadena Area Community College District CC 19335

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Pasadena Area Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2005-2006
1/84	Health Fee Elimination	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Kit Bramwell

for Keith B. Petersen, President

State Controller's Office

Claim File Cor

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC19335

(02) Claimant Name: Pasadena Area Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1570 E. Colorado Boulevard

City: Pasadena | State: CA | Zip Code: 91106-2003

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	X	(09) Reimbursement	X
	(04) Combined		(10) Combined	
	(05) Amended		(11) Amended	
Fiscal Year of cost	(06) 2006-2007		(12) 2005-2006	
Total Claimed Amount	(07) $ 63,900		(13) $ 58,167	
Less: 10% Late Penalty			(14) $ -	
Less: Prior Claim Payment Received			(15) $ -	
t Claimed Amount			(16) $ 58,167	
Due from State	(08) $ 63,900		(17) $ 58,167	
Due to State			(18)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	110,265
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	9,532
(27) EFCW-1, (04)(B)(2)(a)(f)	32,182
(28) EFCW-1, (04)(B)(2)(b)(f)	84,247
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	77,482
(32) EFCW-1, (09)	129,580
(33) EFCW-1, (10)	125,961
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the *Parameters and Guidelines* are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1/11/07

James Albanese
Type or Print Name

Interim Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

K Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:
Pasadena Area Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 110,265.00	$ -	$ -	$ -	$ -	$ 110,265.00
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 9,532.25	$ -	$ -	$ -	$ -	$ 9,532.25
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 32,181.62	$ -	$ -	$ -	$ -	$ 32,181.62
b. Waiving student fees	$ 84,246.66	$ -	$ -	$ -	$ -	$ 84,246.66
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 236,225.53	$ -	$ -	$ -	$ -	$ 236,225.53

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 77,481.97
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 313,707.50
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 129,580.00
(10) Less: Enrollment Fee Waiver offsets		$ 125,960.53
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 58,166.97

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ *Adopting Procedures, Recording, and Maintaining Records*
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection College Assistant Various	$16.47	3,761.2	$ 61,946.96				
Calculating total enrollment fee to be collected College Assistant Various	$16.47	2,933.7	$ 48,318.04				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 110,265.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Bustamante, Maria Intake Supervisor	$29.33	325.0	$ 9,532.25				
(05) Total ☒ Subtotal ☐			$ 9,532.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bustamante, Maria	Intake Supervisor	$29.33	775.0	$ 22,730.75				
Caputo, Rae Ann	Senior Account Clerk	$32.34	3.0	$ 97.02				
Visick, Paul F.	Senior Programmer Analyst	$56.69	165.0	$ 9,353.85				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 32,181.62	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Pasadena Area Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Office Staff Various	$24.90	966.7	$ 24,070.83				
Receiving waiver applications Financial Office Staff Various	$24.90	725.0	$ 18,052.50				
Evaluating waiver applications and verifying application documents Financial Office Staff Various	$24.90	725.0	$ 18,052.50				
Entering approved application information into district records; providing student award letter Financial Office Staff Various	$24.90	966.7	$ 24,070.83				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 84,246.66	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

05-2006

by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	10.00	Bustamante, Maria	Intake Supervisor	$29.33	$293.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	775.00	Bustamante, Maria	Intake Supervisor	$29.33	$22,730.75	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	315.00	Bustamante, Maria	Intake Supervisor	$29.33	$9,238.95	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1,100.00	**Bustamante, Maria Total**			$32,263.00		
05-06	3.00	Caputo, Rae Ann	Senior Account Clerk	$32.34	$97.02	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3.00	**Caputo, Rae Ann Total**			$97.02		
05-06	3,761.20	College Assistant	Various	$16.47	$61,946.96	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,933.70	College Assistant	Various	$16.47	$48,318.04	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
	6,694.90	**College Assistant Total**			$110,265.00		
05-06	966.70	Financial Office Staff	Various	$24.90	$24,070.83	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	725.00	Financial Office Staff	Various	$24.90	$18,052.50	Receiving waiver applications	Waiving student fees
05-06	725.00	Financial Office Staff	Various	$24.90	$18,052.50	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	966.70	Financial Office Staff	Various	$24.90	$24,070.83	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,383.40	**Financial Office Staff Total**			$84,246.66		
05-06	165.00	Visick, Paul F.	Senior Programmer Analyst	$56.69	$9,353.85	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	165.00	**Visick, Paul F. Total**			$9,353.85		
	11,346.30	**Grand Total**			$236,225.53		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: June 22, 2005

INSTITUTION:
Pasadena City College
(aka Pasadena Area Community College)
1570 East Colorado Boulevard

FILING REF.: The preceding Agreement was dated July 2, 2004

Pasadena CA 91106-2003

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/07	32.8	All	(1) — Health Sho vid use this
PROV.	07/01/04	06/30/06	19.4	All	ED Restricted Pgrms. #Dc
PROV.	07/01/07	06/30/08	32.8	All	(1) grants

(1) All except ED restricted programs.

*BASE:
Direct salaries and wages including all fringe benefits.

U73191

Schedule 1A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	70,523
Avg. time p/account	0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 11)**	**0.0**
***EFC 2**	44,006
Avg. time p/student	4.0
Total Time (in minutes)	176024
Per Hour	60
Hours Worked **(** Activity 12)**	**2,933.7**
***EFC 1**	70,523
Avg. time p/question	3.2
Total Time (in minutes)	225674
Per Hour	60
Hours Worked **(** Activity 13)**	**3,761.2**
***EFC 1**	70,523
Avg. time p/file	0.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 14)**	**0.0**
***EFC 4**	0
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5**	0
Avg. time p/student	5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used default EFC-2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	14,500
Avg. time p/question	4.0
Total Time (in minutes)	58000
Per Hour	60
Hours Worked **(** Activity 21)**	**966.7**
***EFW 7**	14,500
Avg. time p/application	3.0
Total Time (in minutes)	43500
Per Hour	60
Hours Worked **(** Activity 22)**	**725.0**
***EFW 7**	14,500
Avg. time p/evaluation	3.0
Total Time (in minutes)	43500
Per Hour	60
Hours Worked **(** Activity 23)**	**725.0**
***EFW 8**	0
Avg. time p/application	4.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	14,500
Avg. time p/application	4
Total Time (in minutes)	58000
Per Hour	60
Hours Worked **(** Activity 25)**	**966.7**
***EFW 8**	0
Avg. time p/application	4.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)Except activity code 24**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 04/05 timestudy.
Findings:

		*EFC Workload Multiplier					
			2	1			5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Braud, Roland	College Assistant IV		4	3			
Caputo, RaeAnn	Senior Account Clerk II		4	4			5
Keep, Teresa	College Assistant IV		4	3			
Ramirez, Ana	College Assistant IV		4	3			5
Ramirez, Verenice	College Assistant IV		4	3			
Average			**4.0**	**3.2**			**5.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used Default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW-2 and PHR listing.
Findings:

Staff	Title	05-06
Braud, Roland	College Assistant IV	$12.00
Caputo, RaeAnn	Senior Account Clerk II	$32.34
Keep, Teresa	College Assistant IV	$10.00
Ramirez, Ana	College Assistant IV	$16.00
Ramirez, Verenice	College Assistant IV	$12.00
AVERAGE		$16.47

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier 7 **Activity Codes					
		21	22	23	24	25	26
Allan, Cleon	Data Controller	4	3	3	4.5	4	4.5
Araiza, Alice	F.A. Interviewer	4	3	3	4.5	4	4.5
Arden, Rebecca	F.A. Interviewer	4	3	3	4.5	4	4.5
Barboza, Mildred	Secretary	4	3	3	4.5	4	4.5
Baroody, Albert	Financial Aid Intake	4	3	3	4.5	4	4.5
Bustamante, Maria M.	Intake Supervisor	4	3	3	4.5	4	4.5
Canales, Judy	Financial Aid Outreach Specialist	4	3	3	4.5	4	4.5
Carreon, Juan	Hourly Support	4	3	3	4.5	4	4.5
Crutchfield, Kayla	Student Assistant	4	3	3	4.5	4	4.5
Doa, Han	F.A. Interviewer	4	3	3	4.5	4	4.5
Hines, Cathy	Hourly Support	4	3	3	4.5	4	4.5
Law, Morgan	Hourly Support	4	3	3	4.5	4	4.5
Liau, Ichen	Hourly Support	4	3	3	4.5	4	4.5
Martinez, Mary E.	College Assistant	4	3	3	4.5	4	4.5
Matthews, Lillian	F.A. Interviewer	4	3	3	4.5	4	4.5
Miles, Kim	Assistant Dean	4	3	3	4.5	4	4.5
Mitchell, Felisia R.	Data Tech	4	3	3	4.5	4	4.5
Perry, Yolande	Hourly Support	4	3	3	4.5	4	4.5
Querada, Lorena	Data Tech	4	3	3	4.5	4	4.5
Sum, Anita	F.A. Interviewer	4	3	3	4.5	4	4.5
Truong, Erica	Sub-Relief Clerk	4	3	3	4.5	4	4.5
Wright, Damien	Intake	4	3	3	4.5	4	4.5
Zamudio, Josie	Hourly Support	4	3	3	4.5	4	4.5
Average		4	3	3	4.5	4	4.5

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW-3 and PHR listing.
Findings:

Staff	Title	05-06
Allan, Cleon	Data Controller	$31.57
Araiza, Alice	F.A. Interviewer	$40.29
Arden, Rebecca	F.A. Interviewer	$28.52
Barboza, Mildred	Secretary	$31.57
Baroody, Albert	Financial Aid Intake	$16.00
Bustamante, Maria M.	Intake Supervisor	$29.33
Canales, Judy	Financial Aid Outreach Specialist	$16.00
Carreon, Juan	Hourly Support	$14.56
Crutchfield, Kayla	Student Assistant	$12.00
Doa, Han	F.A. Interviewer	$36.54
Hines, Cathy	Hourly Support	$14.56
Law, Morgan	Hourly Support	$14.56
Liau, Ichen	Hourly Support	$14.56
Martinez, Mary E.	College Assistant	$12.50
Matthews, Lillian	F.A. Interviewer	$38.37
Miles, Kim	Assistant Dean	$62.98
Mitchell, Felisia R.	Data Tech	$32.34
Perry, Yolande	Hourly Support	$19.00
Querada, Lorena	Data Tech	$32.34
Sum, Anita	F.A. Interviewer	$37.44
Truong, Erica	Hourly Support	$14.56
Wright, Damien	Intake	$8.50
Zamudio, Josie	Hourly Support	$14.56
Average		**$24.90**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	58,326	59,175	60,693	64,494	65,592	69,556	69,737	70,523
EFC 2	1.8-1	2.	Paid Enrollment fees	44,536	45,916	45,586	48,042	46,643	46,572	43,750	44,006
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	9,709	9,464	9,962	10,827	12,530	13,543	14,622	14,500
EFC 4	1.8-2	1.	Delinquencies collections								
EFC 5	1.8-2	2.	Refunds								
EFW 6	1.8-3	1.	Waivers Requested*	X	9,464	9,962	10,827	12,530	13,543	14,622	14,500
			*(Waivers Approved used where Waivers Requested not supplied)								
EFW 7	1.8-3	2.	Waivers Approved	X	9,464	9,962	10,827	12,530	13,543	14,622	14,500
EFW 8	1.8-3	(1-2)	Waivers Denied	X	N/A - Waivers Requested not provided						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Headcount By Unit Load
For Pasadena CCD For 2005 Summer Quarter

Please note: The District figures represent 1 reported colleges out of total 1 reporting entities district wide
Data Current As Of November 28, 2006 12:32:00

Download The Result In Comma Delimited Format

Download The Result With College Breakdown In Comma Delimited Format

Unit Load	Headcount
0.1 - 2.9	1,136
12.0 -14.9	14
3.0 - 5.9	7,326
6.0 - 8.9	2,090
9.0 - 11.9	182
Non-Credit	2,046
Grand Total	12,796

-not in classes
10750

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Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Headcount By Unit Load
For Pasadena CCD For 2005 Fall Term

Please note: The District figures represent 1 reported colleges out of total 1 reporting entities district wide
Data Current As Of November 28, 2006 12:32:15

Download The Result in Comma Delimited Format

Download The Result With College Breakdown In Comma Delimited Format

Unit Load	Headcount
0.1 - 2.9	1,295
12.0 -14.9	6,202
15 +	1,831
3.0 - 5.9	5,944
6.0 - 8.9	4,880
9.0 - 11.9	4,509
Non-Credit	3,698
Grand Total	28,359

24661

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Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Headcount By Unit Load
For Pasadena CCD For 2006 Winter Intersession

Please note: The District figures represent 1 reported colleges out of total 1 reporting entities district wide
Data Current As Of November 28, 2006 12:32:24

Download The Result In Comma Delimited Format

Download The Result With College Breakdown In Comma Delimited Format

Unit Load	Headcount
0.1 - 2.9	1,115
12.0 -14.9	9
15 +	1
3.0 - 5.9	7,477
6.0 - 8.9	2,464
9.0 - 11.9	106
Non-Credit	2,177
Grand Total	13,349

11172

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Headcount By Unit Load
For Pasadena CCD For 2006 Spring Semester

Please note: The District figures represent 1 reported colleges out of total 1 reporting entities district wide
Data Current As Of November 28, 2006 12:32:36

Download The Result In Comma Delimited Format

Download The Result With College Breakdown In Comma Delimited Format

Unit Load	Headcount
0.1 - 2.9	1,132
12.0 -14.9	5,617
15 +	1,872
3.0 - 5.9	6,371
6.0 - 8.9	4,712
9.0 - 11.9	4,236
Non-Credit	3,799
Grand Total	27,739

23940

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Pasadena Fiscal Year: 05-06

Maria Bustamante — Employee Name

Intake Supervisor — Exact Position Title

Financial Aid — Department/Location

(626) 585-7401 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/15/06	1A 1B 2A 2B 3 4	Bi-Monthly Hourly Meetings	10
/ /	1A 1B 2A 2B 3 4	File and Maintaining Files	7.75
/ /	1A 1B 2A 2B 3 4	Procedures w/ FA staff	3.15
/ /	1A 1B 2A 2B 3 4	and Paul Visick	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D M Le for Maria Bustamante Date 11/22/06

If you have any questions, please contact David LeClaire, at (626) 585-7492

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: PASADENA

Bae Ann Capito — Senior Account Clerk II / Registrat
Employee Name — Exact Position Title

Cashier's Office L13 — 585-7085 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities: per FISCAL YEARS- Report time in hours

~~98-99~~	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance. ____ ____ ____ ____ ____ ____ ____ 3hrs

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and *number of waivers*** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ 3hrs

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bae Ann Capito — Date 10/20/06

If you have any questions, please contact _____, at _____

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: Pasadena Fiscal Year: 2005-2006

Paul F. Visick — Employee Name

Sr. Programmer Analyst — Exact Position Title

M.I.S. — Dept. & Location #

(626) 585-7516 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length

Date	Description of Activities		Time in Hours	Leave Blank
4/01/06	Creating, implementing and		165	
/ /	maintaining the O BOGW			
/ /	Waiver automated			
/ /	program			
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

record keeping

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: for Paul Visick Date 11/22/06

Paul F. Visick
Employee Name: (print)

Sr. Programmer Analyst
Position or Title

If you have any questions, please contact David LeChevrier, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Cashier's office L113
Department/Location

Boland Braud
Employee Name

College Ass't IV
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	/					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Boland Braud III Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Cashier's Office L113 — Department/Location

Rae Ann Capato — Employee Name

Senior Account Clerk II/Registration — Exact Position Title

585-7085 — Telephone #

~~Work~~ 12mo/11mo/10mo/hrly year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4 min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rae Ann Capato Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District
Cashier's office U13 — Department/Location
Teresa Keep — Employee Name
College Ass't IV — Exact Position Title
585-7085 — Telephone #
12mo/11mo/10mo/hrly (circle) — Work year length
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa Keep / Donna Walker Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$12

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Cashier Office L113 — Department/Location

Ana Ramirez — Employee Name

College Asst IV — Exact Position Title

585-7085 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	Y				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ana Maria Ramirez Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

$10

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Cashiers Office L113
Department/Location

Verenice Ramirez
Employee Name

College Asst IV
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 min	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	✓					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Verenice Ramirez Date 5/25/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

Cleon Allan
Employee Name

Data Controller
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature For Glenn Allan Date 11/22/01

If you have any questions, please contact _____, at (626) 585-7997

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

ALICE C. ARAIZA
Employee Name

F.A. Interviewer
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature [signature] Date 11-22-06

If you have any questions, please contact [signature], at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

REBECCA ARDEN
Employee Name

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

FINANCIAL AID INTERVIEWER
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Rebecca Arden Date 11-21-06

If you have any questions, please contact [illegible], at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

Mildred Barboza
Employee Name

Secretary
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature For Mildred Barboza Date 11/22/06

If you have any questions, please contact [illegible], at (626)585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

ALBERT BARODY
Employee Name

FINANCIAL AID INTAKE
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Albert Barody Date 11/21/06

If you have any questions, please contact [illegible], at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

MARIA M BUSTAMANTE
Employee Name

INTAKE SUPERVISOR
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria M. Bustamante Date 11/21/06

If you have any questions, please contact (626) 585-7401, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

JUDY CANALES
Employee Name

FINANCIAL AID OUTREACH SPECIALIST
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 11/21/06

If you have any questions, please contact _____, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Juan Carreon
Employee Name

Family Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature David LeClaire For Juan Carreon Date 11/22/06

If you have any questions, please contact David LeClaire, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL ATD
Department/Location

Kayla Crutchfield
Employee Name

Student Assistant 4
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Kayla Crutchfield Date 11/21/06

If you have any questions, please contact _____, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL ATD
Department/Location

Han Dao
Employee Name

Financial Aid Interviewer
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature _____ Date 11-21-06

If you have any questions, please contact _____, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

Cathy Hines
Employee Name

Hourly Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature For Cathy Hines Date 11/22/01

If you have any questions, please contact _____, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Morgan Law
Employee Name

Head Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		√		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		√		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		√		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		√		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		√		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		√		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature David Le For Morgan Law Date 11/22/06

If you have any questions, please contact David Le, at (626)585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

I Chen Liao
Employee Name

Hourly Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature David L Chen for I Chen Liao, Date 11/22/06

If you have any questions, please contact David L Chen, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Mary E. Martinez
Employee Name

College Asst V
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Mary E. Martinez Date 11/22/06

If you have any questions, please contact [illegible] at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Lillian Matthews
Employee Name

Financial Aid Interviewer
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature for Lillian Matthews Date 11/22/04

If you have any questions, please contact _____, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

Kim Miles
Employee Name

Asst. Dean
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature _____ Date 11/20/06

If you have any questions, please contact _____, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Felisia R. Mitchell
Employee Name

DATA Tech
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Felisia R. Mitchell Date 11/21/06

If you have any questions, please contact _____ at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Yolande Perry
Employee Name

Hourly Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature FW Yolande Perry, Date 11/22/06

If you have any questions, please contact David Lee Kbirw, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

Lorena Quezada
Employee Name

Data Tech II
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature _____ Date 11/21/06

If you have any questions, please contact _____, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

ANNA Sum
Employee Name

Financial Aid Technician
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Anna Sum Date 11/21/06

If you have any questions, please contact _____, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

ERICA TRUONG
Employee Name

SUB-RELIEF CLERK
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature Erica Truong Date 11-21-06

If you have any questions, please contact _____, at (626) 585-7997

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIPS AND FINANCIAL AID
Department/Location

DAMIEN WRIGHT
Employee Name

INTAKE
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature _____ Date 11/21/06

If you have any questions, please contact _____, at (626) 585-7497

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

SCHOLARSHIP AND FINANCIAL AID
Department/Location

Josie Zamudio
Employee Name

Hourly Support
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.5		✓		

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Employee Signature David Lee For Josie Zamudio Date 11/22/06

If you have any questions, please contact David Lee Chiu, at (626) 585-7992

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: Pasadena City College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	4-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								10750
Fall								24661
Winter/ Intersession								11172
Spring								23940
Total								70523
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3. Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Brigitte Norsworthy Date 11/28/06

Brigitte Norsworthy
Employee Name: (print)

Principal Accountant
Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: Barstow City College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
2. Number of students who paid enrollment fees:								
Summer								7619
Fall								15751
Winter/ Intersession								6540
Spring								14096
Total								44006
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 1/8/07

Brigitte Nursworthy — Principal Accountant

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

01/08/07 Pasadena City College
Count of Students paying Enroll Fee

Summer	2005	Count =	7619
Fall	2005	Count =	15751
Winter	2006	Count =	6540
Spring	2006	Count =	14096
	Total	Count =	44006

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Pasadena City College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								14500

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 11/28/06

Brigitte Nordworthy
Employee Name: (print)

Principal Accountant
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

CC SHT 2004 SixTen and Associates

STATISTICAL DATA	FISCAL YEARS						
	05-06						
1. Enrollment Fees Collected	$8,095,693						
2. Enrollment Fees Refunded	$753,035						
3. Enrollment Fees Revenue (Line 1 subtract line 2)	$7,342,658						
4A. Total Enrollment Fees Waived (Bogg, etc.)	$4,641,013						
4B. 2% Enrollment Fees Waived (Line 4A x 2%)							
4B. 7% Enrollment Fees Waived (Line 4A x 7%)							

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
0 Page(s) attachment

FAX TRANSMITTAL

DATE: December 4, 2006

FAX TO: Brigitte Norsworthy
Pasadena Area Community College District
626-585-7968

CC: John Hendrickson

FROM: Keith Petersen

Rcvd 12-7-06

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006

PLEASE RESPOND BY: December 8, 2006

In order to continue processing the above referenced claim we need the following PHR's:

Name	Title	PHR 05-06
Araiza, Alice	F.A. Interviewer	$ 40.29
Arden, Rebecca	F.A. Interviewer	$ 28.52
Barboza, Mildred	Secretary	$ 31.57
Doa, Han	F.A. Interviewer	$ 36.54
Holloway, Donna	Assistant Director	$ -0-
Matthews, Lillian	F.A. Interviewer	$ 38.37
Sum, Anita	F.A. Interviewer	$ 37.44
Visick, Paul F.	Sr. Programmer Analyst	$ 56.69

Thank you

tb

Six[illegible]n and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: PASADENA AREA COMMUNITY COLLEGE DISTRICT

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE SECRETARY		
MARTINEZ, MARY	AVERAGE COLLEGE ASSISTANT		$ 12.50
	AVERAGE DEAN		
	AVERAGE DIRECTOR		
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY		
HINES, CAMPOS, JOSE CARREON, Juan LAW MORGAN LIAU, ICHEN	AVERAGE HOURLY SUPPORT		$ 14.56
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		
	AVERAGE GARDENER		$ 28.52
	AVERAGE CUSTODIAN		$ 26.44
ALLAN, CLEON	DATA CONTROLLER	$ 30.00	$ 31.57
ALTMETZ, MALINDA	ADMINISTRATIVE ASSISTANT I	$ 35.59	$ 39.32
BARGSTEN BOTTCHER, MELISSA	SENIOR CLERK	$ 30.74	$ 32.35
BAROODY, ALBERT	HOURLY SUPPORT	$ 12.00	$ 16.00

Six n and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: PASADENA AREA COMMUNITY COLLEGE DISTRICT

		Fiscal Years:	
Name	**Title**	**04-05**	**05-06**
	AVERAGE ADMINISTRATIVE SECRETARY		
	AVERAGE DEAN		
	AVERAGE DIRECTOR		
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY		
	AVERAGE PRESIDENT		
	AVERAGE VICE PRESIDENT		
	AVERAGE GARDENER		$ 28.52
	AVERAGE CUSTODIAN		$ 26.44
ALLAN, CLEON	DATA CONTROLLER	$ 30.00	$ 31.57
ALTMETZ, MALINDA	ADMINISTRATIVE ASSISTANT I	$ 35.59	$ 39.32
BARGSTEN BOTTCHER, MELISSA	SENIOR CLERK	$ 30.74	$ 32.35
BAROODY, ALBERT	HOURLY SUPPORT	$ 12.00	$ 16.00
BRAUD, ROLAND	COLLEGE ASSISTANT IV	$ 10.00	$ 12.00
BRICKERT, PEGGY	SENIOR PURCHASING CLERK	$ 26.55	$ 29.33

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
BROWN, STAN	LEAD CUSTODIAN		RETIRED
BURNS, DOROTHY	PAYROLL SUPERVISOR	$ 41.20	$ 43.35
BUSTAMANTE, MARIA	INTAKE SPECIALIST	$ 26.55	$ 29.33
CANALES, JUDY	HOURLY SUPPORT	$ 9.50	$ 16.00
CAPUTO, RAE ANN	SENIOR ACCOUNT CLERK II	$ 37.85	$ 32.34
CARLSON, PAUL	CUSTODIAN	$ 26.80	$ 28.20
COLLINS, VIC	INTERIM DEAN, HUMAN RESOURCES	$ 78.14	
CORTEZ, LORI	HUMAN RESOURCES TECHNICIAN II	$ 36.48	$ 38.39
COSIO, EUNICE	HOURLY SUPPORT	$ 16.00	$ 16.00
CRUTCHFIELD, KAYLA	HOURLY SUPPORT	$ 10.00	$ 12.00
DESCALZO, MARIA	ACCOUNTING SUPERVISOR	$ 40.55	$ 45.52
DIAZ, CANDELARIO	CUSTODIAN	$ 23.73	$ 25.58
DO, DAVID	HOURLY SUPPORT	$ 7.50	
DUNN, BILLIE	CUSTODIAN	$ 27.08	$ 29.18
FLORES, SARAH	GROUNDS SUPERVISOR	39.03	$ 45.52
GARCIA, ALFRED	SKILLED TRADES WORKER	$ 33.39	$ 33.39
GLASSCOCK, ED	GARDNER	$ 26.80	$ 28.20
GOMEZ, PAUL	CUSTODIAN	$ 24.92	$ 24.97
GONZALES, VALERIE	HOURLY SUPPORT	$ 12.00	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
GONZALEZ, ARTURO	GARDNER		RETIRED
GRIFFITH, BILL	GARDNER	$ 27.47	$ 28.91
HARDASH, PETER	VP, ADMINISTRATIVE SERVICES	$ 93.85	$ 109.42
HASSAN, SHERRY	DIRECTOR, BUSINESS SERVICES	$ 68.36	$ 72.38
HERNANDEZ, RIGO	CUSTODIAN	$ 23.73	$ 24.97
HOLCOMB, META	ADMINISTARTIVE ASSISTANT II	$ 46.56	$ 48.99
HOLDEN, ALICE	CUSTODIAN		RETIRED
JACOBS, JACKIE	VP INSTRUCTION	$ 93.85	$ 109.94
JENNINGS, MICHAEL	POWER SWEEPER OPEREATOR	$ 28.85	$ 30.35
JIMENEZ, BEN	CUSTODIAN	$ 24.92	$ 26.22
JIMENEZ, MARIA	CUSTODIAN	$ 23.17	$ 24.97
KEEP, TERESA	COLLEGE ASSISTANT IV	$ 10.00	$ 10.00
LAM, DOUG	SKILLED TRADES WORKER	$ 31.05	$ 35.14
LITTLETON, RONNIE	CUSTODIAN	$ 23.73	$ 24.97
LOPEZ, EUGENE	GARDNER	$ 29.55	$ 31.09
MAGEE, LINDA	TRATIVE ASSISTANT I	$ 39.48	$ 42.32
MALAGON, APOLLO	GARDNER	$ 26.16	$ 27.53
MILES, KIM	ASSISTSANT DEAN	$ 60.39	$ 62.98
MILLER, SUSAN	ADMINISTRATIVE ASSISTANT I	$ 41.20	$ 43.35

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
MILLER, TRACY	HOURLY SUPPORT	$ 10.00	$ 10.00
MITCHELL, FELISIA QUERADA LORENA	DATA TECHNICIAN	$ 30.73	$ 32.34
MONTGOMERY, DARYL	GARDNER	$ 25.53	$ 26.86
MOSELEY, NATASHA	HOURLY SUPPORT	$ 19.00	$ 19.00
NANDKISHORE, EDGAR	DIRECTOR, PURCHASING DEPARTMENT	$ 62.39	$ 65.65
NORSWORTHY, BRIGITTE	PRINCIPAL ACCOUNTANT	$ 37.83	$ 42.30
PASTIS, LEAH	INTERMEDIATE CLERK II	$ 27.21	$ 28.63
PEREZ, YURI	HUMAN RESOURCES TECHNICIAN II	$ 31.69	$ 33.96
PERRY, YOLANDE	HOURLY SUPPORT	$ 16.00	$ 19.00
PETTY, HELEN	CUSTODIAN	$ 26.80	$ 28.91
PINEDA, ESTHER	INTERMEDIATE CLERK II	$ 30.00	$ 31.57
POLO, MELINDA	COORDINATOR, HUMAN RESOURCES	$ 48.69	$ 51.44
RAMEY, MARGARET	ASSOCIATE DEAN OF ADMISSIONS		$ 93.65
RAMIREZ, ANA	COLLEGE ASSISTANT IV	$ 12.00	$ 16.00
RAMIREZ, VERENICE	COLLEGE ASSISTANT IV	$ 10.00	$ 12.00
RAYYISS, CHARLES	HOURLY SUPPORT	$ 19.00	
RAYYISS, RONALD	HOURLY SUPPORT	$ 19.00	
RYAN, KATHERINE	HUMAN RESOURCES TECHNICIAN II	$ 32.01	RETIRED
SCIALDONE, FRANK	INTERIM DIRECTOR, COLLEGE SAFETY	$ 72.84	

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 04-05	05-06
SMITH, CINDY	ADMINISTRATIVE ASSISTANT II	$ 39.00	$ 41.29
SUGIMOTO, LISA	VP STUDENT SERVICES	$ 93.85	$ 108.38
ULMER, AMY	DIVISION DEAN, ENGLISH DEPT.	$ 69.59	$ 67.96
VAN PELT, RICK	DIRECTOR, FACILITIES SERVICES	$ 73.98	$ 77.85
WALKER, ODESSA	DIRECTOR, FISCAL SERVICES	$ 66.31	$ 74.15
WRIGHT, DAMIEN	HOURLY SUPPORT	$ 10.00	$ 8.50
ZAMUDIO, JOSIE	HOURLY SUPPORT	$ 16.00	

308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-2006
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 3,609,105	$ 3,624,589	$ 3,761,797	$ 3,655,887	$ 5,067,559	$ 7,128,382	$ 7,342,658
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 72,182	$ 72,492	$ 75,236	$ 73,118	$ 101,351	$ 142,568	$ 146,853
1.8-4 line 4A	Enrollment Fees Waived	$ 1,869,849	$ 1,877,814	$ 2,068,530	$ 2,413,892	$ 4,164,892	$ 6,852,032	$ 6,985,732
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041	$ 139,715
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 130,889	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		170,710	188,048	219,444	265,787	293,574	268,682
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152	$ 244,501
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041	$ 139,715
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 130,889						
1.8-4 5.	Credit Units Waived		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152	$ 244,501
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 168,286**	**$ 192,902**	**$ 212,495**	**$ 247,972**	**$ 325,164**	**$ 404,193**	**$ 384,216**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00.

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Pasadena Area
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$66,562,236	$60,699,968	$550,377	$61,250,345
EQUALIZATION	1,008,088	927,441	80,647	1,008,088
ENROLL FEE ADMIN (2%)	129,580	119,212	10,368	129,580
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	646,489	594,770	51,719	646,489
S.F.A.A.	845,635	776,909	68,726	845,635
E.O.P.S.	1,356,832	1,244,028	112,804	1,356,832
C.A.R.E.	138,193	127,136	11,057	138,193
D.S.P.S.	913,174	840,120	73,054	913,174
STATE HOSPITALS	0	0	0	0
CALWORKS	530,893	488,420	42,473	530,893
MATRICULATION (CREDIT)	972,099	714,324	257,775	972,099
MATRIC. (NONCREDIT)	330,083	303,677	26,406	330,083
FAC.& STAFF DIVERSITY	24,978	21,118	3,860	24,978
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	998,221	918,364	79,857	998,221
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	529,622	487,253	42,369	529,622
ECON. DEVELOPMENT	357,751	300,511	0	300,511
TANF	122,821	112,996	9,825	122,821
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	18,812	15,802	0	15,802
VTEA TITLE I C	492,927	118,660	295,399	414,059
NURSING CARE	104,917	0	104,917	104,917
PRIOR YEAR CORRECTION	571,352	571,352	0	571,352
TOTAL	$76,707,035	$69,415,823	$1,840,203	$71,256,026

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Pasadena Area Community College District
308/95 Enrollme Collection and Waiver
Fiscal Years 2000 to 2005-2006
Enrollment Fee Waiver Offset

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 7,463.64	$ 7,837.56	$ 2,068.04	$ 5,314.86	$ 8,718.00	$ 9,411.00	
2	Staff Training	(04)(B)(1)(b)				$ 98.90	$ 276.07	$ 298.02	$ 9,532.25
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)				$ 7,807.50	$ 33,201.60	$ 25,327.50	$ 32,181.62
4	Waiving student fees	(04)(B)(2)(b)	30657.28	$ 37,974.28	$ 50,284.20	$ 61,567.59	$ 142,122.16	$ 166,608.34	$ 84,246.66
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)							
6	EFCW - Fee Waiver Costs	Total	$ 38,120.92	$ 45,811.84	$ 52,352.24	$ 74,788.85	$ 184,317.83	$ 201,644.86	$ 125,960.53
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 1,869,849.00	$ 1,877,814.00	$ 2,062,530.00	$ 2,413,892.00	$ 4,164,892.00	$ 6,852,032.00	$ 384,216.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (1,831,728.08)	$ (1,832,002.16)	$ (2,010,177.76)	$ (2,339,103.15)	$ (3,980,574.17)	$ (6,650,387.14)	$ (258,255.47)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 38,120.92**	**$ 45,811.84**	**$ 52,352.24**	**$ 74,788.85**	**$ 184,317.83**	**$ 201,644.86**	**$ 125,960.53**

Conclusion:

California Home

Tuesday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Pasadena College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 28, 2006 12:39:27

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	910	322,049
BOGW - Part B based on income standards	5,030	2,022,670
BOGW - Part C based on financial need	8,560	4,641,013

14,500

Total Amount = $ 6,985,732

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 13, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8741

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Pasadena Area Community College District CC 19335

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Pasadena Area Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers 2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

(01) Claimant Identification Number: CC19335

(02) Claimant Name: Pasadena Area Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1570 East Colorado Boulevard

City: Pasadena | State: CA | Zip Code: 91106-2003

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 95,000	(13) $ 86,386
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 86,386
Due from State	(08) $ 95,000	(17) $ 86,386
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	9,831
(23) EFCW-1, (04)(A)(1)(b)(f)	445
(24) EFCW-1, (04)(A)(2)(a)(f)	132,079
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	35,307
(28) EFCW-1, (04)(B)(2)(b)(f)	89,459
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	33
(31) EFCW-1, (07)	87,616
(32) EFCW-1, (09)	143,585
(33) EFCW-1, (10)	124,766
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: Feb 8, 2008

Kindred Murillo
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:
asadena Area Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2006-2007

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 9,831.15	$ -	$ -	$ -	$ -	$ 9,831.15
b. Staff training (One time per employee)	$ 445.06	$ -	$ -	$ -	$ -	$ 445.06
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 132,078.76	$ -	$ -	$ -	$ -	$ 132,078.76
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P ring district policies & procedures f V.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 35,307.21	$ -	$ -	$ -	$ -	$ 35,307.21
b. Waiving student fees	$ 89,459.13	$ -	$ -	$ -	$ -	$ 89,459.13
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
) Total Direct Costs	$ 267,121.31	$ -	$ -	$ -	$ -	$ 267,121.31

irect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.80%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 87,615.79
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 354,737.10
t Reduction		
Less: Enrollment Fee Revenue offset		$ 143,585.00
Less: Enrollment Fee Waiver offsets		$ 124,766.34
Tota laimed Amount	[Line (08) - [Line (09) + Line (10)]]	$ 86,385.76

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Bustamonte, Maria Intake Supervisor	$31.21	315.0	$ 9,831.15				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 9,831.15	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Bustamonte, Maria — Intake Supervisor	$31.21	12.0	$ 374.52				
Caputo, Rae Ann — Senior Account Clerk	$35.27	2.0	$ 70.54				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 445.06	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Pasadena Area Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Calculating total enrollment fee to be collected							
Enrollment Office Staff Various	$18.82	3,037.6	$ 57,167.63				
Answering student's questions regarding enrollment fee collection							
Enrollment Office Staff Various	$18.82	3,980.4	$ 74,911.13				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 132,078.76	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Pasadena Area Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Bustamonte, Maria	Intake Supervisor	$31.21	780.0	$ 24,343.80				
Caputo, Rae Ann	Senior Account Clerk	$35.27	3.0	$ 105.81				
Visick, Paul	Senior Programmer Analyst	$60.32	180.0	$ 10,857.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 35,307.21	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Pasadena Area Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$28.37	764.4	$ 21,686.03				
Receiving waiver applications							
Financial Aid Office Staff Various	$28.37	907.8	$ 25,754.29				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$28.37	716.7	$ 20,332.78				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$28.37	764.4	$ 21,686.03				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 89,459.13	$ -	$ -	$ -	$ -

New 04/06

Pasadena Area Community College District
308/95 ENROLLMF ...EE COLLECTIONS/WAIVERS
...06-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	12.00	Bustamonte, Maria	Intake Supervisor	$31.21	$374.52	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	780.00	Bustamonte, Maria	Intake Supervisor	$31.21	$24,343.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
06-07	315.00	Bustamonte, Maria	Intake Supervisor	$31.21	$9,831.15	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	1,107.00	**Bustamonte, Maria Total**			$34,549.47		
06-07	2.00	Caputo, Rae Ann	Senior Account Clerk	$35.27	$70.54	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	3.00	Caputo, Rae Ann	Senior Account Clerk	$35.27	$105.81	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	5.00	**Caputo, Rae Ann Total**			$176.35		
06-07	3,037.60	Enrollment Office Staff	Various	$18.82	$57,167.63	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	3,980.40	Enrollment Office Staff	Various	$18.82	$74,911.13	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
	7,018.00	**Enrollment Office Staff Total**			$132,078.76		
06-07	764.40	Financial Aid Office Staf	Various	$28.37	$21,686.03	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	907.80	Financial Aid Office Staf	Various	$28.37	$25,754.29	Receiving waiver applications	Waiving student fees
06-07	716.70	Financial Aid Office Staf	Various	$28.37	$20,332.78	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	764.40	Financial Aid Office Staf	Various	$28.37	$21,686.03	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,153.30	**Financial Aid Office Staff Total**			$89,459.13		
06-07	180.00	Visick, Paul	Senior Programmer Analyst	$60.32	$10,857.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	180.00	**Visick, Paul Total**			$10,857.60		
	11,463.30	**Grand Total**			$267,121.31		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: June 22, 2005

INSTITUTION:
Pasadena City College
(aka Pasadena Area Community College)
1570 East Colorado Boulevard

FILING REF.: The preceding Agreement was dated July 2, 2004

Pasadena CA 91106-2003

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/07	32.8	All	(1) – Health Ins should use this
PROV.	07/01/04	06/30/06	19.4	All	ED Restricted Pgrms. ≠DO grants
PROV.	07/01/07	06/30/08	32.8	All	(1)

(1) All except ED restricted programs.

*BASE:
Direct salaries and wages including all fringe benefits.

Schedule 1A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 11)**	**0.0**
***EFC 2**	45,564
Avg. time p/student	4.0
Total Time (in minutes)	182256
Per Hour	60
Hours Worked **(** Activity 12)**	**3,037.6**
***EFC 1**	72,371
Avg. time p/question	3.3
Total Time (in minutes)	238824
Per Hour	60
Hours Worked **(** Activity 13)**	**3,980.4**
***EFC 1**	
Avg. time p/file	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 14)**	**0.0**
***EFC 4**	
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 15)**	**0.0**
***EFC 5**	
Avg. time p/student	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used default EFC-2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 7**	14,333
Avg. time p/question	3.2
Total Time (in minutes)	45866
Per Hour	60
Hours Worked **(** Activity 21)**	**764.4**
***EFW 7**	14,333
Avg. time p/application	3.8
Total Time (in minutes)	54465
Per Hour	60
Hours Worked **(** Activity 22)**	**907.8**
***EFW 7**	14,333
Avg. time p/evaluation	3.0
Total Time (in minutes)	42999
Per Hour	60
Hours Worked **(** Activity 23)**	**716.7**
***EFW 8**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	14,333
Avg. time p/application	3.2
Total Time (in minutes)	45866
Per Hour	60
Hours Worked **(** Activity 25)**	**764.4**
***EFW 8**	
Avg. time p/application	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)Except activity code 24**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
			2	1			5
		**Activity Codes					
		11	12	13	14	15	16
Braud, Roland	College Assistant V		4	3			2
Caputo, RaeAnn	Senior Account Clerk II		4	4			5
Ramirez, Ana	College Assistant VI		4	3			5
Ramirez, Verenice	College Assistant V		4	3			2
Average			**4.0**	**3.3**			**3.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)(Except Code 12, Used Default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Enrollment Fee Collection Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW-2 and PHR listing.
Findings:

Staff	Title	06-07
Braud, Roland	College Assistant V	$12.00
Caputo, RaeAnn	Senior Account Clerk II	$35.27
Ramirez, Ana	College Assistant Vi	$16.00
Ramirez, Vernice	College Assistant V	$12.00
AVERAGE		$18.82

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier 7 **Activity Codes 21	22	23	24	25	26
Araiza, Alice	Financial Aid Interviewer	4	3	3	5	4	5
Arden, Rebecca	Financial Aid Interviewer	4	3	3	5	4	5
Adriano, Mia	Financial Aid Technician	3	4	3	5	3	5
Baroody, Albert	Hourly Support	3	4	3	5	3	5
Bustamonte, Marla	Intake Supervisor	3	4	3	5	3	5
Canales, Judy	Hourly Support	4	3	3	5	3	5
Dao, Han	Interviewer	4	3	3	5	4	5
Esparza, Abran	Hourly Support	3	4	3	5	3	5
Green, Alicia	Hourly Support	3	4	3	5	3	5
Le Claire, David	Assistant Director	3	4	3	5	3	5
Liao, I Chen	Hourly Support	3	4	3	5	3	5
Matthews, Lillian	Interviewer	4	3	3	5	4	5
Miles, Kim	Assistant Dean	3	4	3	5	3	5
Mitchell, Felisia R.	Data Technician	3	4	3	5	3	5
Nguyen, Lynn	Hourly Support	3	4	3	5	3	5
Quezada, Lorena	Data Technician	3	4	3	5	3	5
Saghdejian, Janine	College Assistant	3	4	3	5	3	5
Scharler, Grace	Secretary	3	4	3	5	3	5
Serrano, Fernando	Hourly Support	3	4	3	5	3	5
Sum, Anita	Financial Aid Interviewer	4	3	3	5	4	5
Torres, Christine P.	Hourly Support	3	4	3	5	3	5
Torres, Gonzalo	Hourly Support	3	4	3	5	3	5
Tran, Lucinda	Hourly Support	3	4	3	5	3	5
Troung, Erica	Hourly Support	3	4	3	5	3	5
Wright, Damian	Hourly Support	3	4	3	5	3	5
Average		**3.2**	**3.8**	**3.0**	**5.0**	**3.2**	**5.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Enrollment Fee Waiver Functions Average PHR

Purpose: To summarize PHR data.
Source: EFCW-3 and PHR listing.
Findings:

Staff	Title	06-07
Araiza, Alice	Financial Aid Interviewer	$42.87
Arden, Rebecca	Financial Aid Interviewer	$31.11
Adriano, Mia	Financial Aid Technician	$38.70
Baroody, Albert	Hourly Support	$16.00
Bustamonte, Maria	Intake Supervisor	$31.21
Canales, Judy	Hourly Support	$19.00
Dao, Han	Interviewer	$38.88
Esparaza, Abran	Hourly Support	$18.33
Green, Alicia	Hourly Support	$18.33
Le Claire, David	Assistant Director	
Liao, I Chen	Hourly Support	$18.33
Matthews, Lillian	Interviewer	$40.83
Miles, Kim	Assistant Dean	$69.20
Mitchell, Felisia R.	Data Technician	$35.27
Nguyen, Lynn	Hourly Support	$18.33
Quezada, Lorena	Data Technician	$35.27
Saghdejian, Janine	College Assistant	$12.50
Scharler, Grace	Secretary	$46.81
Serrano, Fernando	Hourly Support	$18.33
Sum, Anita	Financial Aid Interviewer	$39.83
Torres, Christine P.	Hourly Support	$18.33
Torres, Gonzalo	Hourly Support	$18.33
Tran, Lucinda	Hourly Support	$18.33
Troung, Erica	Hourly Support	$18.33
Wright, Damian	Hourly Support	$18.33
Average		**$28.37**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Pasadena Area Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	58,326	59,175	60,693	64,494	65,592	69,556	69,737	70,523	72,371
EFC 2	1.8-1	2.	Paid Enrollment fees	44,536	45,916	45,586	48,042	46,643	46,572	43,750	44,006	45,564
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	9,709	9,464	9,962	10,827	12,530	13,543	14,622	14,500	14,333
EFC 4	1.8-2	1.	Delinquencies collections									
EFC 5	1.8-2	2.	Refunds									
EFW 6	1.8-3	1.	Waivers Requested*	X	9,464	9,962	10,827	12,530	13,543	14,622	14,500	14,333
			*(Waivers Approved used where Waivers Requested not supplied)									
EFW 7	1.8-3	2.	Waivers Approved	X	9,464	9,962	10,827	12,530	13,543	14,622	14,500	14,333
EFW 8	1.8-3 (1-2)		Waivers Denied	X	N/A - Waivers Requested not provided							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena For 2006 Summer Term

Data Current As Of January 21, 2008 12:49:20

Total Headcount	13,527

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Summer 13,527
Fall 28,566
Winter 13,800
Spring 27,941
total 83,834

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena
For 2006 Fall Term

Data Current As Of January 21, 2008 12:49:12

Total Headcount	28,566

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California Home

Monday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena
For 2007 Winter Intersession

Data Current As Of January 21, 2008 12:49:04

Total Headcount	13,800

© 2001 State of California. California Community Colleges, Chancellor's Office

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Pasadena
For 2007 Spring Semester

Data Current As Of January 21, 2008 12:48:52

Total Headcount	27,941

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Pasadena Fiscal Year: 06-07

Maria Bustamante Intake Supervisor
Employee Name Exact Position Title

Financial Aid (626) 585-7401 12mo/11mo/10mo/hrly
Department/Location Telephone # ~~Work~~ year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/1/07	1A 1B 2A 2B 3 4	Bi-Monthly Hourly Meetings	12
/ /	1A 1B 2A 2B 3 4	File and Maintaining Files	780
/ /	1A 1B 2A 2B 3 4	Policies and Procedures with	315
/ /	1A 1B 2A 2B 3 4	FA Staff and Paul Visits	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature For Maria Bustamante Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7492

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: PASADENA

RAEANN CAPUTO — Employee Name

Senior Account Clerk II / Registrar — Exact Position Title

CASHIER'S OFFICE LIBA — College/Department/Location

585-7085 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

~~98-99~~	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____

B. Enrollment Waiver Process: ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ 2hrs

B. Enrollment Waiver Process: ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ 3hrs

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

~~3hrs~~

TOTALS: 5hrs

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature RaeAnn Caputo Date 10/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
NOV 5 2007
BY: _____

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EFCW 2.2

Individual Activities Time Log for Mandated Costs of

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

District: Pasadena Fiscal Year: 2006-2007

Paul Visick Sr. Programmer Analyst

Employee Name Exact Position Title

M.I.S. (626) 585-7516 12mo/11mo/10mo/hrly

Dept. & Location # Telephone # Work year length

Date	Description of Activities		Time in Hours	Leave Blank
4/1 OT	Creating, implementing and		180	
/ /	Maintaining the BOG/W			
/ /	Waiver automated program			
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: For Paul Visick Date 1/11/06

Paul Visick Sr. Programmer Analyst

Employee Name: (print) Position or Title

If you have any questions, please contact David La Chance, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA — District

CASHIER'S OFFICE L113A — Department/Location

Roland Braud — Employee Name

College Ass't IV — Exact Position Title

585-7085 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Unavailable — Date 10/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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NOV 5 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

Cashier's Office LL3
Department/Location

Rae Ann CAPUTO
Employee Name

Senior Account Clerk II/Registr
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rae Ann Caputo Date 10/17/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

RECEIVED
NOV 5 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

Cashier's Office 41137
Department/Location

Ana Ramirez
Employee Name

College Asst VI
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5min					

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Employee Signature X Ana Maria Ramirez Date X 10/22/07

If you have any questions, please contact _____, at _____

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NOV 5 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

Cashier Office L110A
Department/Location

Veronice Ramirez
Employee Name

College Ass't II
Exact Position Title

585-7085
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronice Ramirez Date 10/17/07

If you have any questions, please contact _____, at _____

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RECEIVED
NOV 5 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena — District

Financial Aid — Department/Location

Alice Araiza — Employee Name

F.A. Interviewer — Exact Position Title

(626) 585-7492 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature David Le Claire for Alice Araiza Date 1/11/06

If you have any questions, please contact David Le Claire, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA City College District
District

FINANCIAL AID
Department/Location

REBECCA ARDEN
Employee Name

FINANCIAL AID INTERVIEWER
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rebecca A. Date 1-11-08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

FINANCIAL AID / SCHOLARSHIPS L 114
Department/Location

MIA ADRIANO
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

626/585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/11/2008

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

ALBERT BARADY
Employee Name

College Accountant
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) (07-08)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Albert Barady Date 1/11/08

If you have any questions, please contact David La Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Maria Bustamante
Employee Name

Intake Supervisor
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature for Maria Bustamante Date 1/11/08

If you have any questions, please contact David LeClaire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Scholarships & Financial Aid
Department/Location

Judy Canales
Employee Name

Hourly Support
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature David LeChevez For Judy Canales Date 1/11/08

If you have any questions, please contact David LeChevez, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

HAN DAO
Employee Name

Interviewer
Exact Position Title

(626) 585-7461
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 / 06-07 / 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature _____, Date 6/11/08

If you have any questions, please contact David La Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Abran Esparza
Employee Name

Hourly Support
Exact Position Title

(626) 585-7930
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Abran Esparza Date 1/11/06

If you have any questions, please contact David La Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

ALICIA GREEN
Employee Name

HOURLY
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

David Le Claire
Employee Name

Assistant Director
Exact Position Title

(626) 585-7401 — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 05-06 / 06-07 / 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature _____ Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

I Chen Liao
Employee Name

Hourly Support
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature I Chen Liao Date 1/11/08

If you have any questions, please contact David LeClaire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA City College
District

FINANCIAL AID
Department/Location

LILLIAN MATTHEWS
Employee Name

INTERVIEWER
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Lillian Matthews Date 1-11-08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Kim Miles
Employee Name

Assistant Dean
Exact Position Title

626 585-7400 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature _____ Date 1-10-08

If you have any questions, please contact David LeClaire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Felisia B. Mitchell
Employee Name

DATA Technician
Exact Position Title

626 585-7932
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the *appropriate workload multiplier from Form 17-1*

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Felisia B Mitchell, Date 1/11/08

If you have any questions, please contact Daniel Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

FINANCIAL AID OFFICE
Department/Location

LYNN T. NGUYEN
Employee Name

HOURLY SUPPORT
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynn Nguyen Date 1/11/2006

If you have any questions, please contact David Le Claire, at (626) 585-7492

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

Financial Aid
Department/Location

LORENA QUEZADA
Employee Name

DATA Tech II
Exact Position Title

585-7298
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/10/06

If you have any questions, please contact David LeClaire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Janine Saghdejian
Employee Name

College Assistant
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 1/10/08

If you have any questions, please contact David Le Claire, at (626) 585-7992

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Grace Scharler
Employee Name

Secretary I
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Grace Scharler Date 1-11-08

If you have any questions, please contact David LeClaire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Fernando Serano
Employee Name

Aanly
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature _____ Date 01.11.08

If you have any questions, please contact David La Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Scholarship & Financial Aid
Department/Location

ANITA SUM
Employee Name

Financial Aid Interviewer
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Anita Sum, Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

CHRISTINE P. TORRES
Employee Name

Hourly Support
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Christine P. Torres Date 1/11/06

If you have any questions, please contact David La Chance, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

FINANCIAL AID
Department/Location

GONZALO TORRES
Employee Name

HOURLY SUPPORT
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature David Le for Gonzalo Torres Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

FINANCIAL AID
Department/Location

LUCINDA TRAN
Employee Name

HOURLY SUPPORT
Exact Position Title

(626)585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature David Le Claire For Lucinda Tran Date 1/11/08

If you have any questions, please contact David Le Claire, at (626) 585-7992

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Pasadena
District

Financial Aid
Department/Location

Erica Truong
Employee Name

Hourly Support
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature Debbie for Erica Truong Date 1/11/06

If you have any questions, please contact David LeClaire, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

PASADENA
District

FINANCIAL AID
Department/Location

DAMIAN WRIGHT
Employee Name

HOURLY SUPPORT
Exact Position Title

(626) 585-7401
Telephone #

12mo/11mo/10mo/hrly
Work year length (circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5		✓	

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Employee Signature D Le for Damian Wright Date 1/11/05

If you have any questions, please contact David Le Claire, at (626) 585-7992

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Pasadena City College

The following cost accounting statistics will be used to calculate your reimbursement. Plea
required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	06-07							
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	11594							
Fall	24957							
Winter/ Intersession	11558							
Spring	24262							
Total	72371							
2. Number of students who paid enrollment fees:								
Summer	7915							
Fall	15617							
Winter/ Intersession	7053							
Spring	14979							
Total	45564							
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/01/07

Brigitte Norsworthy — Principal Accountant

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SEND THIS INFORMATION BY _____; TO _____.

RECEIVED
NOV 5 2007
BY: _____

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Sorry, I didn't know which semesters to run. I see you were asking for the FY0607. See if this is what you want.

11/01/07 Pasadena City College
Count of Students paying Enroll Fee

TERMTITLE	COUNT
Summer 06	7,915
Fall 06	15,617
Winter 07	7,053
Spring 07	14,979
Total =	45,564

Jeff

Jeff Laun wrote:
> 11/01/07 Pasadena City College
> Count of Students paying Enroll Fee
>
> Winter 07 Count = 7053
>
> Spring 07 Count = 14979
>
> Summer 07 Count = 9208
>
> Fall 07 Count = 17514
>
> Total Count = 48754
>
>
>
>
> Jeff
>
> Brigitte R. Norsworthy wrote:
>> Hi Dale,
>> It is that time of year again. Would you please provide me a listing

RECEIVED
NOV 5 2007
BY:

Six Ten and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: PASADENA AREA COMMUNITY COLLEGE DISTRICT

Name	Title	Fiscal Years: 05-06	06-07
SHARKEY, GRACE	AVERAGE ADMINISTRATIVE ASSISTANT	$ 43.05	46.81
	AVERAGE ADMINISTRATIVE SECRETARY		
SAGHDEJIAN, JANINE	AVERAGE COLLEGE ASSISTANT	$ 12.50	$ 12.50
	AVERAGE ASSISTANT DEAN	$ 71.20	
	AVERAGE DEAN	$ 80.81	
	AVERAGE DIRECTOR	$ 72.51	
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY		
ADRIANO, MIA	AVERAGE FINANCIAL AID TECHNICIAN		$ 38.70
GREEN, ALICIA ESPARZA/BRAND	AVERAGE HOURLY SUPPORT LIAO, ICHEN; PUGLIESE, LYNN; WRIGHT, DARIAN; TRUONG, RICA		$ 18.33
	AVERAGE PRESIDENT		
	AVERAGE SKILLED TRADES WORKER		$ 38.47
	AVERAGE VICE PRESIDENT	$ 109.25	
ALLAN, CLEON	DATA CONTROLLER	$ 31.57	LEFT DISTRICT
ADRIANO, MIA	FINANCIAL AID TECHNICIAN		

* SERRANO, FERNANDO
* TORRES, CHRISTINE
* TORRES GONZALO
* TRAD LUCINDA

Si[illegible]en and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: PASADENA AREA COMMUNITY COLLEGE DISTRICT

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 43.05	
	AVERAGE ADMINISTRATIVE SECRETARY		
	AVERAGE COLLEGE ASSISTANT	$ 12.50	
	AVERAGE ASSISTANT DEAN	$ 71.20	
	AVERAGE DEAN	$ 80.81	
	AVERAGE DIRECTOR	$ 72.51	
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY		
	AVERAGE PRESIDENT		
	AVERAGE SKILLED TRADES WORKER		$ 38.47
	AVERAGE VICE PRESIDENT	$ 109.25	
ALLAN, CLEON	DATA CONTROLLER	$ 31.57	LEFT DISTRICT
ALTMETZ, MALINDA	ADMINISTRATIVE ASSISTANT I	$ 39.32	$ 41.84
AQUINIGA, JORGE	DEAN, HUMAN RESOURCES	$ 91.99	$ 97.88
ARAIZA, ALICE	F.A. INTERVIEWER	$ 40.29	$ 42.87

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
ARDEN, REBECCA	F.A. INTERVIEWER	$ 28.52	$ 31.11
BAIN, CONNA	INTERMEDIATE CLERK II	$ 30.06	$ 32.77
BARBOZA, MILDRED	SECRETARY	$ 31.57	LEFT DISTRICT
BARGSTEN BOTTCHER, MELISSA	SENIOR CLERK	$ 32.35	$ 33.59
BAROODY, ALBERT	HOURLY SUPPORT	$ 16.00	$ 16.00
BRAUD, ROLAND	COLLEGE ASSISTANT IV	$ 12.00	$ 12.00
BRICKERT, PEGGY	SENIOR PURCHASING CLERK	$ 29.33	$ 31.21
BUCZKO, JO	NURSE	$ 55.40	$ 60.75
BUCZKO, JO	HELATH NURSE		$ 60.75
BURNS, DOROTHY	PAYROLL SUPERVISOR	$ 43.35	$ 47.28
BUSTAMANTE, MARIA	INTAKE SPECIALIST	$ 29.33	$ 31.21
CANALES, JUDY	HOURLY SUPPORT	$ 16.00	$ 19.00
CAPUTO, RAE ANN	SENIOR ACCOUNT CLERK II	$ 32.34	$ 35.27
CARLSON, PAUL	CUSTODIAN	$ 28.20	$ 28.20
CLIFFORD, SUSAN	ASSOCIATE DEAN	$ 74.40	$ 79.16
CORTEZ, LORI	HUMAN RESOURCES TECHNICIAN II	$ 38.39	$ 41.84
COSIO, EUNICE	HOURLY SUPPORT	$ 16.00	$ 16.00
CRUTCHFIELD, KAYLA	HOURLY SUPPORT	$ 12.00	$ 16.00
DAO, HAN	F.A. INTERVIEWER	$ 36.54	$ 38.88

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
JENNINGS, MICHAEL	POWER SWEEPER OPEREATOR	$ 30.35	$ 30.35
JIMENEZ, BEN	CUSTODIAN	$ 26.22	$ 27.53
JIMENEZ, MARIA	CUSTODIAN	$ 24.97	$ 24.97
KEEP, TERESA	COLLEGE ASSISTANT IV	$ 10.00	$ 10.00
KRAUSE, PAT	INTERMEDIATE CLERK II	$ 32.34	$ 34.41
LAM, DOUG	SKILLED TRADES WORKER	$ 35.14	$ 35.14
LAUN, MARY ANN	ASSISTANT DEAN, LIBRARY	$ 77.36	$ 84.49
LITTLETON, RONNIE	CUSTODIAN	$ 24.97	$ 26.86
LOPEZ, EUGENE	GARDNER	$ 31.09	$ 31.09
MAGEE, LINDA	ADMINISTRATIVE ASSISTANT I	$ 42.32	$ 45.03
MALAGON, APOLLO	GARDNER	$ 27.53	$ 28.20
MATTHEWS, LILLIAN	F.A. INTERVIEWER	$ 38.37	$ 40.83
MILES, KIM	ASSISTANT DEAN	$ 62.98	$ 69.20
MILLER, SUSAN	ADMINISTRATIVE ASSISTANT I	$ 43.35	$ 46.13
MILLER, TRACY	HOURLY SUPPORT	$ 10.00	LEFT DISTRICT
MITCHELL, FELISIA	DATA TECHNICIAN	$ 32.34	$ 35.27
MONTGOMERY, DARYL	GARDNER	$ 26.86	$ 26.86
MOSELEY, NATASHA	HOURLY SUPPORT	$ 19.00	LEFT DISTRICT
NANDKISHORE, EDGAR	DIRECTOR, PURCHASING DEPARTMENT	$ 65.65	$ 71.56

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
NORSWORTHY, BRIGITTE	PRINCIPAL ACCOUNTANT	$ 42.30	$ 45.01
PASTIS, LEAH	INTERMEDIATE CLERK II	$ 28.63	$ 31.21
PEREZ, YURI	HUMAN RESOURCES TECHNICIAN II	$ 33.96	$ 38.90
PERRY, YOLANDE	HOURLY SUPPORT	$ 19.00	LEFT DISTRICT
PETTY, HELEN	CUSTODIAN	$ 28.91	RETIRED
PINEDA, ESTHER	INTERMEDIATE CLERK II	$ 31.57	$ 34.41
POLO, MELINDA	COORDINATOR, HUMAN RESOURCES	$ 51.44	$ 57.47
RAMEY, MARGARET	ASSOCIATE DEAN OF ADMISSIONS	$ 93.65	$ 86.01
RAMIREZ, ANA	COLLEGE ASSISTANT IV	$ 16.00	$ 16.00
RAMIREZ, JUAN	SKILLED TRADES WORKER		$ 40.21
RAMIREZ, VERENICE	COLLEGE ASSISTANT IV	$ 12.00	$ 12.00
RAYYISS, CHARLES	HOURLY SUPPORT	$ 23.00	$ 23.00
RAYYISS, RONALD	HOURLY SUPPORT	$ 23.00	$ 23.00
RIVAS-PLATA, JORGE	INTERMEDIATE CLERK II	$ 30.80	$ 32.77
RODARTE, KATHLEEN	ASSISTANT DEAN, EOP	$ 75.30	$ 82.31
SMITH, CINDY	ADMINISTRATIVE ASSISTANT II	$ 41.29	$ 43.93
SUGIMOTO, LISA	VP STUDENT SERVICES	$ 108.38	$ 115.96
SUM, ANITA	F.A. INTERVIEWER	$ 37.44	$ 39.83
TSE, ROSIE	INTERMEDIATE CLERK II	$ 29.33	$ 31.21

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
TUCKER, SANDRA	RECYCLER		$ 11.00
ULMER, AMY	DIVISION DEAN, ENGLISH DEPT.	$ 67.96	$ 74.60
VAN PELT, RICK	DIRECTOR, FACILITIES SERVICES	$ 77.85	$ 84.91
VISICK, PAUL F.	SENIOR PROGRAMMER ANALYST	$ 56.69	$ 60.32
WALKER, ODESSA	DIRECTOR, FISCAL SERVICES	$ 74.15	$ 78.89
WILCOX, STUART	DEAN, INSTITUTIONAL SUPPORT	$ 91.99	$ 100.48
WRIGHT, DAMIEN	HOURLY SUPPORT	$ 8.50	$ 16.00
YAMAUCHI, KENT	ASSISTANT DEAN, SPECIAL SERVICES	$ 79.41	$ 86.68

Schedule 5
Pasadena Area Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-2000 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 3,609,105	$ 3,624,589	$ 3,761,797	$ 3,655,887	$ 5,067,559	$ 7,128,382	$ 7,342,658	$ 6,864,352
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 72,182	$ 72,492	$ 75,236	$ 73,118	$ 101,351	$ 142,568	$ 146,853	$ 137,287
1.8-4 line 4A	Enrollment Fees Waived	$ 1,869,849	$ 1,877,814	$ 2,068,530	$ 2,413,892	$ 4,164,892	$ 6,852,032	$ 6,985,732	$ 6,068,336
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041	$ 139,715	$ 121,367
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 130,889	For 00-01 through 05-06 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 24.50
Total # of credits	Line 4A divided by unit fee		170,710	188,048	219,444	265,787	293,574	268,682	247,687
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152	$ 244,501	$ 225,395
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 37,397	$ 37,556	$ 41,371	$ 48,278	$ 83,298	$ 137,041	$ 139,715	$ 121,367
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 130,889							
1 5.	Credit Units Waived		$ 155,346	$ 171,124	$ 199,694	$ 241,866	$ 267,152	$ 244,501	$ 225,395
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 168,286**	**$ 192,902**	**$ 212,495**	**$ 247,972**	**$ 325,164**	**$ 404,193**	**$ 384,216**	**$ 346,762**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-06 fees are $26.00.
FY 2006-07 fees are Summer, Fall and Winter $26.00, Spring $20.00. ($26.00+$26.00+$26.00+$20.00=Average $24.50)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Pasadena Area
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$77,574,845	$72,981,978	$-300,213	$72,681,765
ENROLL FEE ADMIN (2%)	143,585	132,099	11,486	143,585
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	394,819	0	394,819	394,819
S.F.A.A.	853,956	785,639	68,317	853,956
E.O.P.S.	1,340,316	1,233,090	107,226	1,340,316
C.A.R.E.	139,056	127,931	11,125	139,056
D.S.P.S.	1,118,761	1,029,260	89,501	1,118,761
STATE HOSPITALS	0	0	0	0
CALWORKS	579,349	533,001	46,348	579,349
MATRICULATION (CREDIT)	1,391,973	1,399,755	-7,782	1,391,973
MATRIC. (NONCREDIT)	412,261	379,280	32,981	412,261
FAC.& STAFF DIVERSITY	22,742	20,922	1,820	22,742
PART-TIME FAC. ALLO.	998,221	918,364	79,857	998,221
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	251,674	231,540	20,134	251,674
SCHDL. MAINT. & REPAIR	251,697	231,562	20,135	251,697
TANF	116,680	107,345	9,335	116,680
ECON. DEVELOPMENT	531,000	344,400	101,640	446,040
NURSING EDUCATION	273,587	187,985	85,602	273,587
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	703,130	703,130	0	703,130
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	446,793	446,793	0	446,793
BASIC SKILLS -REAPPROP	414,415	414,415	0	414,415
CAR. TECH. TRAILER BIL	795,686	795,686	0	795,686
GEN. PUR. TRAILER BILL	1,556,646	1,556,646	0	1,556,646
INST. MATERIAL TRAILER	939,316	939,316	0	939,316
SCHLD.MAINT. TRAILER B	939,316	939,316	0	939,316
FACULTY STAFF DEV	99,991	99,991	0	99,991
TOTAL	$92,341,773	$86,578,206	$785,527	$87,363,733

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Pasadena Area C... nunity College District
308/95 Enrollment Fee Collection and Waiver
Fiscal Years 1999-2000 to 2006-2007
Enrollment Fee Waiver Offset

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 7,463.64	$ 7,837.56	$ 2,068.04	$ 5,314.86	$ 8,718.00	$ 9,411.00		
2	Staff Training	(04)(B)(1)(b)				$ 98.90	$ 276.07	$ 298.02	$ 9,532.25	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)				$ 7,807.50	$ 33,201.60	$ 25,327.50	$ 32,181.62	$ 35,307.21
4	Waiving student fees	(04)(B)(2)(b)	30657.28	$ 37,974.28	$ 50,284.20	$ 61,567.59	$ 142,122.16	$ 166,608.34	$ 84,246.66	$ 89,459.13
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)								
6	EFCW - Fee Waiver Costs	Total	$ 38,120.92	$ 45,811.84	$ 52,352.24	$ 74,788.85	$ 184,317.83	$ 201,644.86	$ 125,960.53	$ 124,766.34
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 1,869,849.00	$ 1,877,814.00	$ 2,062,530.00	$ 2,413,892.00	$ 4,164,892.00	$ 6,852,032.00	$ 384,216.00	$ 346,762.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (1,831,728.08)	$ (1,832,002.16)	$ (2,010,177.76)	$ (2,339,103.15)	$ (3,980,574.17)	$ (6,650,387.14)	$ (258,255.47)	$ (221,995.66)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 38,120.92**	**$ 45,811.84**	**$ 52,352.24**	**$ 74,788.85**	**$ 184,317.83**	**$ 201,644.86**	**$ 125,960.53**	**$ 124,766.34**

Conclusion:

California Home

Monday, January 21, 2008

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Pasadena College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 21, 2008 12:59:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	792	246,448
BOGW - Part B based on income standards	4,827	1,649,412
BOGW - Part C based on financial need	8,710	4,171,500
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	130
Fee Waiver – Dependent of (children) deceased or disabled Veteran	3	846

14333

Total Amount = $ 6,068,336

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5[illegible] Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Redwoods Community College District CC12145

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Redwoods Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC12145

(02) Claimant Name: Redwoods Community College District

County of Location: Humboldt

Street Address or P.O. Box: 7351 Tompkins Hill Road

City: Eureka | State: CA | Zip Code: 95501

Type of Claim	Estimated Claim		Reimbursement Claim	
	(03) Estimated	X	(09) Reimbursement	X
	(04) Combined		(10) Combined	
	(05) Amended		(11) Amended	
Fiscal Year of cost	(06) 2005-2006		(12) 2004-2005	
Total Claimed Amount	(07) $ 25,000		(13) $ 22,730	
Less : 10% Late Penalty			(14) $ -	
Less : Prior Claim Payment Received			(15) $ -	
Claimed Amount			(16) $ 22,730	
Due from State	(08) $ 25,000		(17) $ 22,730	
Due to State			(18)	

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	34,038
(25) EFCW-1, (04)(B)(1)(a)(f)	96
(26) EFCW-1, (04)(B)(1)(b)(f)	907
(27) EFCW-1, (04)(B)(2)(a)(f)	96
(28) EFCW-1, (04)(B)(2)(b)(f)	32,688
(29) EFCW-1, (04)(B)(2)(c)(f)	2,098
(30) EFCW-1, (06)	38
(31) EFCW-1, (07)	26,501
(32) EFCW-1, (09)	37,808
(33) EFCW-1, (10)	35,885
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) Date JUL 19 2006

BUSINESS SERVICES

Scott Thomason
Type or Print Name

Vice President, Chief Business Officer
Title

(20) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

State Controller's Office

Community College Mandated Cost Manual

Program 237	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Redwoods Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 34,037.64	$ -	$ -	$ -	$ -	$ 34,037.64
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 95.94	$ -	$ -	$ -	$ -	$ 95.94
b. Staff training (One time per employee)	$ 907.26	$ -	$ -	$ -	$ -	$ 907.26
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 95.94	$ -	$ -	$ -	$ -	$ 95.94
b. Waiving student fees	$ 32,687.98	$ -	$ -	$ -	$ -	$ 32,687.98
c. Reporting BOG fee waiver data to CCC	$ 2,098.23	$ -	$ -	$ -	$ -	$ 2,098.23
(05) Total Direct Costs	$ 69,922.99	$ -	$ -	$ -	$ -	$ 69,922.99

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	37.90%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 26,500.81
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 96,423.80
Cost Reduction		
Less: Enrollment Fee Revenue offset		$ 37,808.00
Less: Enrollment Fee Waiver offsets		$ 35,885.35
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 22,730.45

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Re is Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various enrollment office staff Collecting fees	$25.20	261.0	$ 6,577.20				
Calculating total enrollment fee to be collected Various enrollment office staff Collecting fees	$25.20	83.9	$ 2,114.28				
Answering student's questions regarding enrollment fee collection Various enrollment office staff Collecting fees	$25.20	548.1	$ 13,812.12				
Upda[illegible]ritten and computer records for enrollment fee information Various enrollment office staff Collecting fees	$25.20	62.9	$ 1,585.08				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various enrollment office staff Collecting fees	$25.20	394.8	$ 9,948.96				
5) Total ☒ Subtotal ☐		Page 1 of 1	$ 34,037.64	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
R ods Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Imrem, Anna Supervisor, Financial Aid	$31.98	3.0	$ 95.94				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 95.94	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
R ›ds Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Theisen, Lyn Director, Financial Aid	$52.35	10.0	$ 523.50				
Imrem, Anna Supervisor, Financial Aid	$31.98	12.0	$ 383.76				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 907.26	$ -	$ -	$ -	$ -

w 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ods Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Imrem, Anna Supervisor, Financial Aid	$31.98	3.0	$ 95.94				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 95.94	$ -	$ -	$ -	$ -

rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
R ıds Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Various Financial Office Staff Waiving enrollment fees	$24.62	268.8	$ 6,617.86				
Receiving waiver applications Various Financial Office Staff Waiving enrollment fees	$24.62	154.8	$ 3,811.18				
Evaluating waiver applications and verifying application documents Various Financial Office Staff Waiving enrollment fees	$24.62	252.5	$ 6,216.55				
Ente pproved application information into district records; providing student award letter Various Financial Office Staff Waiving enrollment fees	$24.62	651.6	$ 16,042.39				
5) Total ☒ Subtotal ☐		Page 1 of 1	$ 32,687.98	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: oods Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Henson, Michelle	Instructional Site Manager	$34.41	3.0	$ 103.23				
Theisen, Lyn	Director, Financial Aid	$52.35	32.0	$ 1,675.20				
Imrem, Anna	Supervisor, Financial Aid	$31.98	10.0	$ 319.80				
(05) Total ☒ Subtotal ☐				$ 2,098.23	$ -	$ -	$ -	$ -

Redwoods Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3.00	Henson, Michelle	Instructional Site Manager	$34.41	$103.23	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	3.00	**Henson, Michelle Total**			$103.23		
04-05	3.00	Imrem, Anna	Supervisor, Financial Aid	$31.98	$95.94	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	12.00	Imrem, Anna	Supervisor, Financial Aid	$31.98	$383.76	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	3.00	Imrem, Anna	Supervisor, Financial Aid	$31.98	$95.94	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	10.00	Imrem, Anna	Supervisor, Financial Aid	$31.98	$319.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	28.00	**Imrem, Anna Total**			$895.44		
04-05	10.00	Theisen, Lyn	Director, Financial Aid	$52.35	$523.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	32.00	Theisen, Lyn	Director, Financial Aid	$52.35	$1,675.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	42.00	**Theisen, Lyn Total**			$2,198.70		
04-05	261.00	Various enrollment office staff	Collecting fees	$25.20	$6,577.20	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	83.90	Various enrollment office staff	Collecting fees	$25.20	$2,114.28	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	548.10	Various enrollment office staff	Collecting fees	$25.20	$13,812.12	Answering student's questions regarding enrollment fee collection.	Calculating and collecting enrollment fees
04-05	62.90	Various enrollment office staff	Collecting fees	$25.20	$1,585.08	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	394.80	Various enrollment office staff	Collecting fees	$25.20	$9,948.96	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	1,350.70	**Various enrollment office staff Total**			$34,037.64		
04-05	268.80	Various Financial Office Staff	Waiving enrollment fees	$24.62	$6,617.86	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	154.80	Various Financial Office Staff	Waiving enrollment fees	$24.62	$3,811.18	Receiving waiver applications	Waiving student fees
04-05	252.50	Various Financial Office Staff	Waiving enrollment fees	$24.62	$6,216.55	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	651.60	Various Financial Office Staff	Waiving enrollment fees	$24.62	$16,042.39	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,327.70	**Various Financial Office Staff Total**			$32,687.98		
	2,751.40	**Grand Total**			$69,922.99		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods CCD				(02) Period of Claim 2004-05		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$14,075,319		$14,075,319	$219,483	$13,855,836
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,115,734		2,115,734	11,101	2,104,633
Course and Curriculum Development	6020	10,170		10,170		10,170
Academic/Faculty Senate	6030	45,813		45,813	654	45,159
Other Instructional Administration & Instructional Governance	6090	521,776		521,776		521,776
Instructional Support Services	6100					
Learning Center	6110	192,444		192,444		192,444
Library	6120	676,410		676,410	62,582	613,828
Media	6130	213,120		213,120		213,120
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	533,938		533,938	1,512	532,426
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,785,316		1,785,316	14,743	1,770,573
Matriculation and Student Assessment	6320	57,955		57,955		57,955
Transfer Programs	6330	111,913		111,913		111,913
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	899,639		899,639	37,807	861,832
Subtotal		$21,239,547	$0	$21,239,547	$347,882	$20,891,665

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods CCD				(02) Period of Claim 2004-05		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$479,584		$479,584		$479,584
Health Services	6440	165,683		165,683		165,683
Student Personnel Admin.	6450	52,451		52,451		52,451
Financial Aid Administration	6460	750,744		750,744	23,035	727,709
Job Placement Services	6470	5,165		5,165	1,459	3,706
Veterans Services	6480	1,532		1,532		1,532
Miscellaneous Student Services	6490	18,997		18,997		18,997
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	963,951		963,951	963,951	0
Custodial Services	6530	610,901		610,901	610,901	0
Grounds Maintenance and Repairs	6550	219,203		219,203	219,203	0
Utilities	6570	915,092		915,092	915,092	0
Other	6590	140,018		140,018	140,018	0
Planning, Policy Making, and Coordination	6600	1,501,895		1,501,895	1,501,895	0
General Inst. Support Services	6700					
Community Relations	6710	116,778		116,778	116,778	0
Fiscal Operations	6720	542,142		542,142	542,142	0
Human Resources Management	6730	590,110		590,110	590,110	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750					
Staff Diversity	6760	6,709		6,709	6,709	0
Logistical Services	6770	1,674,488		1,674,488	1,674,488	0
Management Information Systems	6780	1,059,410		1,059,410	1,059,410	0
Subtotal		$31,054,400	$0	$31,054,400	$8,713,073	$22,341,327

Revised 9/04

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods CCD				(02) Period of Claim 2004-05		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810	28,495		28,495		28,495
Community Service Classes	6820	456,467		456,467	4,000	452,467
Community Use of Facilities	6830					
Economic Development	6840	5,189		5,189		5,189
Other Community Services & Economic Development	6890	10,265		10,265		10,265
Ancillary Services	6900					
Bookstores	6910	228,927		228,927		228,927
Child Development Center	6920	39,988		39,988	1,489	38,499
Farm Operations	6930	6,506		6,506		6,506
Food Services	6940					
Parking	6950	184,201		184,201	12,863	171,338
Student and Co-curricular Activities	6960	442		442		442
Student Housing	6970					
Other	6990	1,000		1,000		1,000
Auxiliary Operations	7000					
Contract Education	7010	15,180		15,180		15,180
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	99,703		99,703	99,703	0
(05) Total		$32,130,763	$0	$32,130,763	$8,831,128	$23,299,635
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				37.90%		
(07) Notes						

CALI. RNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	262,765	21,818	5,355	13,109		303,047
Architecture and Environmental Design	0200						
Biological Sciences	0400	703,443	3,664	22,873	13,930		743,910
Business and Management	0500	821,027		5,046			826,073
Communications	0600	28,227		48			28,275
Computer and Information Science	0700	743,300	12,819	28,822	79,769		864,710
Education	0800	851,654	61,177	147,798	488		1,061,117
Engineering and Related Industrial Tech.	0900	996,715	1,977	51,599	47,890		1,098,181
Fine and Applied Arts	1000	908,228	12,706	21,203	16,697		958,834
Foreign Language	1100	310,801			70		310,871
Health	1200	989,316	4,188	66,222	1,632		1,061,358
Consumer Education and Home Economics	1300	315,219	44,089	114,699	2,724		476,731
Law	1400	36,312		1,755	1,669		39,736
Humanities (Letters)	1500	1,672,996	8,765	8,370			1,690,131
Library Science	1600						
Mathematics	1700	1,314,733	8,147	13,320	2,212		1,338,412
Military Studies	1800						
Physical Sciences	1900	607,436	3,227	9,767	6,894		627,324
Psychology	2000	329,221		200	796		330,217
Public Affairs and Services	2100	373,457	83,220	26,281	10,332		493,290
Social Sciences	2200	747,875		51,525	5,550		804,950
Commercial Services	3000						
Interdisciplinary Studies	4900	553,637	393,152	55,642	15,721		1,018,152
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	12,566,362	658,949	630,525	219,483		14,075,319

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALI[illegible]RNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,890,271	214,362	11,101		2,115,734
Course and Curriculum Development	6020		3,429	6,741			10,170
Academic/Faculty Senate	6030		40,875	4,284	654		45,813
Other Instruct. Admin. & Instruct. Governance	6090		521,776				521,776
Subtotal - Instructional Administration	**6000**		2,456,351	225,387	11,755		2,693,493
Instructional Support Services (6100)							
Learning Center	6110	63,565	117,476	11,403			192,444
Library	6120		548,308	65,520	62,582		676,410
Media	6130		193,843	19,277			213,120
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	63,565	859,627	96,200	62,582		1,081,974
Admissions and Records	**6200**		451,533	80,893	1,512		533,938
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,568,749	201,824	14,743		1,785,316
Matriculation and Student Assessment	6320		52,150	5,805			57,955
Transfer Programs	6330		111,319	594			111,913
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		1,732,218	208,223	14,743		1,955,184

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIF NIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		809,243	52,589	37,807		899,639
Extended Opportunity Prgms. & Services (EOPS)	6430		460,897	18,687			479,584
Health Services	6440		65,240	100,443			165,683
Student Personnel Administration	6450		52,451				52,451
Financial Aid Administration	6460		591,587	136,122	23,035		750,744
Job Placement Services	6470			3,706	1,459		5,165
Veterans Services	6480			1,532			1,532
Miscellaneous Student Services	6490		1,043	17,954			18,997
Subtotal - Other Student Services	**6400**		1,980,461	331,033	62,301		2,373,795
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		737,739	199,549	26,663		963,951
Custodial Services	6530		600,515	10,386			610,901
Grounds Maintenance and Repairs	6550		207,080	12,123			219,203
Utilities	6570			915,092			915,092
Other Operation and Maintenance of Plant	6590		137,841	579	1,598		140,018
Subtotal - Operation and Maintenance of Plant	**6500**		1,683,175	1,137,729	28,261		2,849,165
Planning, Policymaking, and Coordination	**6600**		1,195,011	292,693	14,191		1,501,895

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		115,832	946			116,778
Fiscal Operations	6720		472,379	68,867	896		542,142
Human Resources Management	6730		428,092	157,830	4,188		590,110
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750						
Staff Diversity	6760			6,709			6,709
Logistical Services	6770		827,582	827,599	19,307		1,674,488
Management Information Systems	6780		699,076	251,978	108,356		1,059,410
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		2,542,961	1,313,929	132,747		3,989,637
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		28,495				28,495
Community Service Classes	6820	182,488	138,505	131,474	4,000		456,467
Community Use Facilities	6830						
Economic Development	6840			5,189			5,189
Other Community Svcs. & Economic Development	6890		1,553	8,712			10,265
Subtotal - Community Services	**6800**	182,488	168,553	145,375	4,000		500,416

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALI RNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		222,531	6,396			228,927
Child Development Centers	6920		38,499		1,489		39,988
Farm Operations	6930		6,506				6,506
Food Services	6940						
Parking	6950		145,787	25,551	12,863		184,201
Student and Co-curricular Activities	6960			442			442
Student Housing	6970						
Other Ancillary Services	6990			1,000			1,000
Subtotal - Ancillary Services	**6900**		413,323	33,389	14,352		461,064
Auxiliary Operations (7000)							
Contract Education	7010	9,514	3,328	2,338			15,180
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**	9,514	3,328	2,338			15,180
Physical Property and Related Acquisitions (7100)	**7100**			93,131	6,572		99,703
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			75,212			75,212
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			75,212			75,212
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					1,287,189	1,287,189
Other Outgo	7330					793,329	793,329
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,080,518	2,080,518
TOTAL EXPENDITURES and OTHER OUTGO	**391**	12,821,929	14,145,490	4,666,057	572,499	2,080,518	34,286,493

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	15,661
Avg. time p/account	1
Total Time (in minutes)	15661
Per Hour	60
Hours Worked **(** Activity 11)**	**261.0**
***EFC 2**	4,194
Avg. time p/student	1.2
Total Time (in minutes)	5033
Per Hour	60
Hours Worked **(** Activity 12)**	**83.9**
***EFC 1**	15,661
Avg. time p/question	2.1
Total Time (in minutes)	32888
Per Hour	60
Hours Worked **(** Activity 13)**	**548.1**
***EFC 2**	4,194
Avg. time p/file	0.9
Total Time (in minutes)	3775
Per Hour	60
Hours Worked **(** Activity 14)**	**62.9**
***EFC 4**	2,692
Avg. time p/account	8.8
Total Time (in minutes)	23690
Per Hour	60
Hours Worked **(** Activity 15)**	**394.8**
***EFC 5**	
Avg. time p/student	6.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Used Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	4,887
Avg. time p/question	3.3
Total Time (in minutes)	16127
Per Hour	60
Hours Worked (** **Activity 21**)	**268.8**
***EFW 6**	4,887
Avg. time p/application	1.9
Total Time (in minutes)	9285
Per Hour	60
Hours Worked (** **Activity 22**)	**154.8**
***EFW 6**	4,887
Avg. time p/evaluation	3.1
Total Time (in minutes)	15150
Per Hour	60
Hours Worked (** **Activity 23**)	**252.5**
***EFW 8**	0
Avg. time p/application	12
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 24**)	**0.0**
***EFW 7**	4,887
Avg. time p/application	8.0
Total Time (in minutes)	39096
Per Hour	60
Hours Worked (** **Activity 25**)	**651.6**
***EFW 8**	0
Avg. time p/application	9.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Buchanan, Patricia	Lead Cashier	1	1	2	1	5	3
Gordon, Juliana	Admissions & Records Assistant	2	2	3	1		
Hall, Sheila	Admission & Records	2	2	3	1		
Johnson, Jennifer	Administrative Office Assistant I	0.5	1	1	0.5		
King, Sherrie	Accounting Clerk IV	0.5	0.5	1	0.5	12.5	10
Kline, Margaret	Admissions Assistant I	1	1	2	1		
Lund, Joy	Admission Assistant II	1					
McQueen, Ronald	Student Services Specialist 4	1	1	3	1		
Pival, Jamie	Administrative Office Assistant I	0.5	1	1	0.5		
Quigley/Vaughn, Tina	Admission Assistant I	1	1	2	1		
Yates, Melody	Student Services Specialist	1	1	3	1		
Average		**1.0**	**1.2**	**2.1**	**0.9**	**8.8**	**6.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Used Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Redwoods Community College District
308/95 Enrollment fee Collection and Waivers
Fiscal Year: 2004-2005
Enrollment Staff Average PHR

Purpose: To calculate the average PHR for various enrollment office staff.
Source: Redwoods PHR listing.
Findings:

Name	Title	04-05
Buchanan, Patricia	Lead Cashier	$27.63
Johnson, Jennifer	Administrative Office Assistant I	$14.68
King, Sherrie	Accounting Clerk IV	$31.20
Lund, Joy	Admission Assistant II	$25.36
McQueen, Ronald	Student Services Specialist 4	$28.67
Pival, Jamie	Administrative Office Assistant I	$15.90
Yates, Melody	Student Services Specialist	$32.95
Average		**$25.20**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Charlotte August		3	2	3	12	8	10
Megan Buchanan	Financial Aid Specialist I	3	2	3		8	
Kathy Cline	Financial Aid Technician	3	2	3		8	
Anna Imrem	Financial Aid Assistant/Supervisor	3	2	3	12	8	10
Karen Johnson	Director, Financial Aid	6	1	4			8
Seth Klempner	Financial Aid Specialist 2	3	2	3		8	
Janelle Kusters	Financial Aid Specialist 2	3	2	3	12	8	10
Ann Marie Larroque	Financial Aid Assistant	3	2	3	12	8	10
Lyn Maffei	Financial Aid Assistant	3	2	3	12	8	10
Tara Pueblo	Financial Aid Specialist 1	3	2	3	12	8	10
Carolina Whitaker	Financial Aid Assistant	3	2	3	12	8	10
Rashaun Willett-Potts	Financial Aid Specialist 1	3	2	3		8	
Average		**3.3**	**1.9**	**3.1**	**12.0**	**8.0**	**9.8**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Financial Staff Average PHR

Purpose: To calculate the average PHR for various financial office staff.
Source: Redwoods PHR listing.
Findings:

Name	Title	04-05
Charlotte August	Financial Aid Assistant	$28.67
Megan Buchanan	Financial Aid Specialist I	$24.84
Seth Klempner	Financial Aid Specialist 2	$22.03
Lyn Maffei	Financial Aid Assistant	$28.67
Tara Pueblo	Financial Aid Specialist 1	$22.54
Rashaun Willett-Potts	Financial Aid Specialist 1	$20.98
Average		**$ 24.62**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1. Enrolled Students		15,710	16,235	18,143	18,113	15,957	15,661
EFC 2	1.8-1	2. Paid Enrollment fees		7,489	8,075	9,685	7,672	5,566	4,194
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)		3,662	3,624	3,613	4,310	4,509	4,887
EFC 4	1.8-2	1. Delinquencies collections		1,497	1,695	2,130	1,706	3,089	2,692
EFC 5	1.8-2	2. Refunds							
EFW 6	1.8-3	1. Waivers Requested	X	3,991	3,950	3,938	4,676	4,869	4,887
EFW 7	1.8-3	2. Waivers Approved	X -	3,662	3,624	3,613	4,310	4,509	4,887
EFW 8	1.8-3 (1-2)	Waivers Denied	X	329	326	325	366	360	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Friday, June 15, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Redwoods For 2004-2005

Data Current As Of June 15, 2012 02:53:50

Download The Result in Comma Delimited Format

Headcount
9,892

Back to Top of Page

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1.6's, 1.7's &/or 1.8's used in multiple years

Michelle Henson

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Redwoods

Michelle Henson — Employee Name

Instructional Site Manager — Exact Position Title

Arcata Site — College/Department/Location

822-8619 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	(02-03)	(03-04)	(04-05)	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ ____ ____

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ 15 20 3 ____

TOTALS: ____ ____ ____ ____ 15 20 3 ____

SIGN HERE

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information and belief." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michelle Henson Date 6/7/06

If you have any questions, please contact Pam Olmstead, at 476-4113

PLEASE SUBMIT THIS INFORMATION BY 6-8-06; TO Pam O

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Anna

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Redwoods

Anna Imrem — Employee Name

Supervisor Fin Aid — Exact Position Title

Fin Aid — College/Department/Location

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	3	3	3	3	3	3	3	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	10	10	10	12	12	12	12	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	2	2	2	2	3	3	3	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	0	0	0	0	0	5	10	
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anna Imrem Date 6-22-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Redwoods

Lynn Thiesen — Dir. Financial Aid

Employee Name — Exact Position Title

Fin Aid — 476-4182 — (12mo/11mo/10mo/hrly)

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						10		
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						32		
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Business Office
Department/Location

Patricia Buchanan
Employee Name

Lead Cashier
Exact Position Title

476-4121
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 Data tel

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min				✓	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 min				✓	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min				✓	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 min				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 min				✓	

used Declar

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Buchanan Date 6-9-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

legacy

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

ES / Eureka
District

Juliana Gordon
Employee Name

Department/Location

Admissions & Records Asst
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: [redacted] 99-00

Circle the years for wh[redacted]

Reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Juliana Gordon Date 5-25-06

If you have any questions, please contact Barb, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

ESI Eureka
Department/Location

Sheila Hall
Employee Name

Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 02-03

Circle the years for which you are reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila F Hall Date 5/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES/Eureka — Department/Location

Jennifer Johnson — Employee Name

Admin Office Asst I — Exact Position Title

19 hr./wk — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 04-05

Circle the years for which you are reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	-					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	-					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

RCCD
District

Business
Department/Location

Shanne King
Employee Name

Acct Clk IV
Exact Position Title

4764124
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

Dataref

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30sec					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	30sec					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	30sec					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10-15 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shanne King Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES / Eureka — Department/Location

Margaret Kline — Employee Name

Admission Asst I — Exact Position Title

426-4200 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 ~~04-05 05-06~~

Circle the years for which you have reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Kline per Rebecca Date 5-24-06

If you have any questions, please contact Becca, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES / Eureka — Department/Location

Joy Lund — Employee Name

Admission Asst III — Exact Position Title

476-4200 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ 03-04 ~~04-05~~ ~~05-06~~

Circle the years for which you are reporting ~~04-05~~

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	03/04 04/05	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	—					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	—					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ESI Eureka — Department/Location

Ronald McQueen — Employee Name

Student Services Specialist 4 — Exact Position Title

476-4200 — Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

.50 FTE

Fiscal Year: 03-04

Circle the years for which you are reporting. 04-05

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ron McQueen Date 5/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES/ Eureka — Department/Location

Jamie Pival — Employee Name

Admin Office Asst I — Exact Position Title

19 hrs/wk — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	-					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	-					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 5/31/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES / Eureka — Department/Location

Jana Quigley/Vaughn — Employee Name

Admission Asst II — Exact Position Title

476-4200 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 only

Circle the years for v[illegible]

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	03/04 1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 03/04	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	03/04 2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	03/04 1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

used Default

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Vaughn — Date 5/25/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES/Eureka — Department/Location

Melody Yates — Employee Name

Student Services Specialist I ✓ — Exact Position Title

Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 02-03 04-05 03-04 ~~04-05~~ ~~05-06~~

.75 FTE

Circle the years for which you are responding.

Reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

Used Dept

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melody Yates Date 5/25/06

If you have any questions, please contact _____, at _____

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4 11-8-00

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

7th — Department/Location

Charlotte August — Employee Name

Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

00-01 thru 04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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H 8/7/02

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Megan Buchanan — Employee Name

Fin Aid Specialist I — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: reportable

Circle the years for w reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

~~02-03~~ 04-05
03-04

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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here 11/1/99 Letter 12-28-01

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin. Aid — Department/Location

Kathy Cline — Employee Name

FA Tech — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathy Cline by Susan Lopez Date 6-22-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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hire 8/4/97

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Anna Imrem — Employee Name

Fin Aid asst / Supervisor — Exact Position Title

476-4187 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 ~~02-03~~ 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6-22-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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hire 5-31-01 term 12-27-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Karen Johnson — Employee Name

Dir Fin. Aid — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

used Deborah K

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Johnson by [illegible] Date 6-22-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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: H 4-6-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Seth Klempner — Employee Name

Fin Aid Specialist 2 — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: [redacted] reportables 05-06 years

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-P4-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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: A-6-10-02 T 1-4-04

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Fin Aid
Department/Location

Janelle Kusters
Employee Name

Fin Aid Specialist 2
Exact Position Title

476-4182
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

02-03
03-04

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janelle Kusters by Susan Lynn Date 6-22-06

If you have any questions, please contact _____, at _____

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hire 9-30-96 term 4/7/2006

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Ann Marie Harroque — Employee Name

Fin Aid Asst — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

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Employee Signature Anne Marie Larroque By Pamela Meisen Date 6-22-06

If you have any questions, please contact Lynn Meisen, at 476-4113

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hire 7-7-99

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Fin Aid
Department/Location

Lynn Maffei
Employee Name

Fin Aid Asst
Exact Position Title Processing Specialist

476-4187
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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: # 2-9-04
T 2-1-05

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Tara Pueblo — Employee Name

Fin Aid Specialist I — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year [redacted] 02 06

Circle the years for reportable [redacted] years are expanding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

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Employee Signature Tara Pueblo by Ann Lmen Date 6-22-06

If you have any questions, please contact _____, at _____

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H 2-13-01
T 9-5-03

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Carolina Whitaker — Employee Name

Fin Aid Asst — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1 01-02 02-03

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carolina Whitaker by Anna Lam Date 6-22-06

If you have any questions, please contact _____, at _____

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: H 2-2-05

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Rashawn Willett-Potts — Employee Name

Fin Aid Specialist I — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 02-03 reportable year

Circle the years for which you are reporting. 04-05

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature _____ Date 6/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Redwoods

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	Not Collected	1794	1824	1754	2383	1437	1692	
Fall		6859	7139	7908	7623	6896	6666	
Winter/ Intersession		n/a	n/a	769	755	676	627	
Spring		7057	7272	7712	7352	6948	6676	
Total		15710	16235	18143	18113	15957	15661	
2. Number of students who paid enrollment fees:								
Summer	No data	897	912	883	1001	503	457	
Fall		3197	3515	4295	3312	2387	1779	
Winter/ Intersession		n/a	n/a	408	317	237	169	
Spring		3395	3648	4099	3042	2439	1789	
Total		7489	8075	9685	7672	5566	4194	
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer		897	912	871	1382	934	1235	
Fall		3662	3624	3613	4310	4509	4887	
Winter/ Intersession		n/a	n/a	361	438	439	458	
Spring		3662	3624	3613	4310	4509	4887	
Total		8221	8160	8458	10440	10391	~~10367~~ 11467	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. ~~PLEASE USE BLUE INK~~

Employee Signature: Pamela L Olmstead Date 6-12-06

Pamela Olmstead
Employee Name: (print)

Budget Tech
Position or Title

If you have any questions, please contact me, at 476-4113

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ____________________

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Revised January 2006

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Redwoods

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer		179	191	194	220	110	100	
Fall		639	738	945	750	1852	1405	
Winter/Intersession		—	—	90	162	52	37	
Spring		679	766	901	574	1075	1150	
Total		1497	1695	2130	1706	3089	2692	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall		Unknown						
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela Olmstead Date 6-14-06

Pamela Olmstead
Employee Name: (print)

Budget Technician
Position or Title

If you have any questions, please contact me, at 707-476-4113

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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# AR	99-00	00-01	01-02	02-03	03-04	04-05
Summer	179	191	194	220	110	100
Fall	639	738	945	750	1852	1405
Winter	n/a	na	90	162	52	37
Spring	679	766	901	574	1075	1150
Total	1497	1695	2130	1706	3089	2692

# Refunds						
Summer	unknown	unknown	unknown	unknown	unknown	unknown
Fall	unknown	unknown	unknown	unknown	unknown	unknown
Winter	unknown	unknown	unknown	unknown	unknown	unknown
Spring	unknown	unknown	unknown	unknown	unknown	unknown

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: REDWOODS

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		3791	3950	3938	4676	4869	4887	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		3662	3624	3613	4310	4509	4887	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela L Olmstead Date 6-22-06

Pamela L Olmstead
Employee Name: (print)

Budget Technician
Position or Title

If you have any questions, please contact me, at 707 476 4113

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

Please add data sheet

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela L Olmstead Date June 13, 2006

Pamela Olmstead
Employee Name: (print)

Budget Technician
Position or Title

If you have any questions, please contact me, at 707-496-4113

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-4

Statistical data EFCW 1.8-4
Enrollment Fee Collection and Waiver

	Data`	99-00	00-01	01-02	02-03	03-04	04-05	Source
1.	Fee collected	unknown	unknown	unknown	unknown	unknown	unknown	
2.	Fee Refunded	unknown	unknown	unknown	unknown	unknown	unknown	
3.	Fee Revenue	729,774	715,124	760,985	682,623	966,607	1,213,524	CCCC Enrolment Fee Report
4A	Enrollment Fees waived	674,368	640,801	654,965	700,047	1,155,117	1,673,719	CCCC Financial Aid and Amount
4B	2% waived	13,487	12,816	13,099	14,001	23,102	33,474	
4C	7% waived	51,926	49,342	50,432	53,904	88,944	128,876	
5.	**Cost per unit**	**12**	**12**	**12**	**18**	**26**	**26**	Per legislation
	# of credits waived							
	Summer	5620	5874	5458	5056	3998	7081	
	Fall	25289	23496	23470	15946	19104	27681	Calculated
	Winter	n/a	n/a	2183	1556	1777	1931	Calculated
	Spring	25289	24030	23470	15946	19548	27681	Calculated
	Total	56197	53400	54580	38503	44428	64374	Calculated
	Total	56,197	53,400	54,580	38,892	44,428	64,374	Calculated
	Total x $0.91	51,139.57	48,594.08	49,668.18	35,391.27	40,429.10	58,580.17	

Used the #5 - NOT chancellor's report for 4A

See Attached for employee certification signature

Redwood DS

txtLinkValues	txtLinkName	txtLastName	Text51	F10	F26	txtTotalCost	F28	F29	F30
11000-5134-000	Enrollment Services								
	2004-05								
		Johnson, Jennifer	602			12419		846	14.67966903
		Lund, Joy	321			45643		1800	25.35722222
		McQueen, Ronald	349			25807		900	28.67444444
		Pival, Jamie	603			13451		846	15.89952719
		Yates, Melody	612			44484		1350	32.95111111
				149899	84963		234862		
11000-6035-000	Financial Aid Office								
		August, Charlotte	519			41289		1800	22.93833333
		Buchanan, Megan	649			44717		1800	24.84277778
		Buchanan, Megan	331			23689			
		Crombie, Whitney	728			12670		1800	7.038888889
		Gunn, Rebecca	564			11127			
		Johnson, Karen	3			59785			
		Klempner, Seth	724			39658		1800	22.03222222
		Klempner, Seth	673			18878			
		Maffei, Lyn	518			51614		1800	28.67444444
		Open, Position	719			23822		1800	13.23444444
		Pueblo, Tara	725			24207		1800	13.44833333
		Pueblo, Tara	672			19571			
		Willett-Potts, Rashaun	729			9655		1800	5.363888889
11048-6035-315	Financial Aid Administration			203111	115433		380682		
11048-6035-315	Financial Aid Administration								
		August, Charlotte	519			10324		1800	5.735555556
		Imrem, Anna	471			57556		1800	31.97555556
		Sears, Judy	701			23786		1800	13.21444444
				58227	33439		91666		
				411237	233835		707210		
	Fiscal Operation	King, Sharrie				56161		1800	31.20055556
	Fiscal Operation	Buchanan, Patricia				49732		1800	27.62888889
	ITS	Michelle Henson				12388		360	34.41111111

PHR 04-05 Enrollment Services
Cashiers
IT

txtLinkValues	txtLinkName	txtLastName	Text5	txtComp2	txtOther	txtTotalComp	txtTotalBenefits		txtTotalCost			
						Text79:	*Text71:*	*#REF!*	*Text70:*	*#REF!*		
11000-6035-000	*Financial Aid Office*											
	2004-05	August, Charlotte	519	25,908.00	0.00	25,908.00	15,381.00		41,289.00		1440	28.67292
		Buchanan, Megan	649	12,281.00	0.00	12,281.00	8,747.00		44,717.00		1800	24.84278
		Buchanan, Megan	331	14,459.00	0.00	14,459.00	9,230.00		23,689.00			don't use
		Klempner, Seth	724	12,077.00	0.00	12,077.00	8,703.00		39,658.00		1800	22.03222
		Klempner, Seth	673	10,520.00	0.00	10,520.00	8,358.00		18,878.00			don't use
		Maffei, Lyn	518	32,386.00	0.00	32,386.00	19,228.00		51,614.00		1800	28.67444
		Pueblo, Tara	725	2,150.00	0.00	2,150.00	2,486.00		24,207.00		1074	22.53911
		Pueblo, Tara	672	11,088.00	0.00	11,088.00	8,483.00		19,571.00			don't use
		Willett-Potts, Rashaun	729	7,083.00	0.00	21,008.04	16,759.05		37,767.09		1800	20.98172
		Theisen, Lyn				67,308.80	26,928.06		94,236.86		1800	52.35381
						Text79:	*Text71:*	*97,375.05*	*Text70:*	*301,390.09*		

[illegible] College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 19[illegible]00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 729,774	$ 715,124	$ 760,985	$ 682,623	$ 966,607	$ 1,213,524
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 14,595	$ 14,302	$ 15,220	$ 13,652	$ 19,332	$ 24,270
1.8-4 line 4A	Enrollment Fees Waived	$ 674,368	$ 640,801	$ 654,965	$ 700,047	$ 1,155,117	$ 1,673,719
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 13,487	$ 12,816	$ 13,099	$ 14,001	$ 23,102	$ 33,474
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 47,206					
1.8-4 line 5	Summer	5620	5,874	5,458	5,056	3,998	7,081
	Fall	25289	23,496	23,470	15,946	19,104	27,681
	Winter/Interssion			2,183	1,556	1,777	1,931
	Spring	25289	24,030	23,470	15,946	19,548	27,681
	Total # of credits	56,197	53,400	54,581	38,504	44,427	64,374
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)	$ 51,139.57	$ 48,594	$ 49,669	$ 35,039	$ 40,429	$ 58,580

For 00-01 through 04-05 - unit fee

Summary

1.8-4 line 4B.	2% of Fees Waived	$ 13,487	$ 12,816	$ 13,099	$ 14,001	$ 23,102	$ 33,474
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 47,206					
1.8-4 5	Credit Units Waived		$ 48,594	$ 49,669	$ 35,039	$ 40,429	$ 58,580
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 60,693**	**$ 61,410**	**$ 62,768**	**$ 49,040**	**$ 63,531**	**$ 92,054**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Redwoods
COUNTY: Humboldt

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$14,632,360	$12,658,567	$625,339	$13,283,906
ENROLL FEE ADMIN (2%)	37,808	32,515	5,293	37,808
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	1,048,760	901,934	146,826	1,048,760
S.F.A.A.	320,198	261,180	59,018	320,198
E.O.P.S.	822,646	707,476	115,170	822,646
C.A.R.E.	129,887	111,703	18,184	129,887
D.S.P.S.	1,021,606	874,286	147,320	1,021,606
STATE HOSPITALS	0	0	0	0
CALWORKS	205,021	176,318	28,703	205,021
MATRICULATION (CREDIT)	218,213	187,663	30,550	218,213
MATRIC. (NONCREDIT)	2,179	1,874	305	2,179
FAC. & STAFF DIVERSITY	11,268	8,010	3,258	11,268
PART-TIME FACULTY INS.	3,667	0	3,667	3,667
PART-TIME FACULTY OFFIC	161,390	0	161,390	161,390
PART-TIME FACULTY ALLOC	263,346	226,478	36,868	263,346
BLOCK GRANT (ONE-TIME)	119,724	102,962	16,762	119,724
ECON. DEVELOPMENT	147,112	75,929	47,645	123,574
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	47,141	40,541	6,600	47,141
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	68,800	53,664	4,128	57,792
VTEA TITLE I C	243,478	189,913	14,609	204,522
PLANT & INSTRUCTIONAL	134,289	115,489	18,800	134,289
PRIOR YEAR CORRECTION	401,301	392,188	9,113	401,301
TOTAL	$20,093,297	$17,150,250	$1,521,091	$18,671,341

FISCAL SERVICES: 06/23/05 16:14
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Schedule 5A
Redwoods Con ty College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 50.34	$ 58.29	$ 68.01	$ 77.34	$ 55.05	$ 95.94
2	Staff Training	(04)(B)(1)(b)	$ 167.80	$ 194.30	$ 272.04	$ 309.36	$ 220.20	$ 907.26
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 33.56	$ 38.86	$ 68.01	$ 77.34	$ 55.05	$ 95.94
4	Waiving student fees	(04)(B)(2)(b)	$ 21,806.12	$ 22,571.65	$ 32,231.94	$ 38,904.10	$ 41,830.66	$ 32,687.98
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,091.70	$ 149.94	$ 162.48	$ 1,881.40	$ 2,449.55	$ 2,098.23
6	EFCW - Fee Waiver Costs	Total	$ 23,149.52	$ 23,013.04	$ 32,802.48	$ 41,249.54	$ 44,610.51	$ 35,885.35
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 60,693.00	$ 61,410.00	$ 62,768.00	$ 49,040.00	$ 63,531.00	$ 92,054.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (37,543.48)	$ (38,396.96)	$ (29,965.52)	$ (7,790.46)	$ (18,920.49)	$ (56,168.65)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 23,149.52**	**$ 23,013.04**	**$ 32,802.48**	**$ 41,249.54**	**$ 44,610.51**	**$ 35,885.35**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Redwoods College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 16, 2006 08:30:53

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	82	21,531
BOGW - Part A-2 based on SSI recipient status	110	21,172
BOGW - Part A-3 based on general assistance recipient status	7	2,483
BOGW - Part A-4 based on Veteran's or National Guard dependent status	54	20,921
BOGW - Part B based on income standards	2,063	537,742
BOGW - Part C based on financial need	4,887	1,069,870

Total Unduplicated Count = 4,888
Total Amount = $ 1,673,719

Back to Top of Page

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used #'s
should give
sample of
report.

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 16, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Redwoods Community College District CC12145

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Redwoods Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Jim Branwell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC12145

(02) Claimant Name: Redwoods Community College District

County of Location: Humboldt

Street Address or P.O. Box: 7351 Tompkins Hill Road

City: Eureka | State: CA | Zip Code: 95501

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 30,300	(13) $ 27,607
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 27,607
Due from State	(08) $ 30,300	(17) $ 27,607
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	33,901
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	45,260
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	29,646
(32) EFCW-1, (09)	35,939
(33) EFCW-1, (10)	45,260
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1/05/07

Scott Thomason
Type or Print Name

Vice President, Chief Business Officer
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 17	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Redwoods Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs (04) Reimbursable Components	Object Accounts (a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 33,900.55	$ -	$ -	$ -	$ -	$ 33,900.55
Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 45,260.31	$ -	$ -	$ -	$ -	$ 45,260.31
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 79,160.86	$ -	$ -	$ -	$ -	$ 79,160.86

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	37.45%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 29,645.74
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 108,806.60
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 35,939.00
(10) Less: Enrollment Fee Waiver offsets		$ 45,260.31
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 27,607.29

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Rds Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various enrollment office sta Collecting Fees	$27.98	234.4	$ 6,558.51				
Calculating total enrollment fee to be collected Various enrollment office sta Collecting Fees	$27.98	71.8	$ 2,008.96				
Answering student's questions regarding enrollment fee collection Various enrollment office sta Collecting Fees	$27.98	492.3	$ 13,774.55				
U[illegible] written and computer records for enrollment fee information Various enrollment office sta Collecting Fees	$27.98	53.8	$ 1,505.32				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various enrollment office sta Collecting Fees	$27.98	359.3	$ 10,053.21				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 33,900.55	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Rods Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various financial office staff Waiving enrollment fees	$25.42	360.5	$ 9,163.91				
Receiving waiver applications							
Various financial office staff Waiving enrollment fees	$25.42	207.5	$ 5,274.65				
Evaluating waiver applications and verifying application documents							
Various financial office staff Waiving enrollment fees	$25.42	336.6	$ 8,607.21				
Er[illegible] approved application information into district records; providing student award letter							
Various financial office staff Waiving enrollment fees	$25.42	873.9	$ 22,214.54				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 45,260.31	$ -	$ -	$ -	$ -

New 04/06

Redwoods Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	234.40	Various enrollment office staff	Collecting Fees	$27.98	$6,558.51	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	71.80	Various enrollment office staff	Collecting Fees	$27.98	$2,008.96	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	492.30	Various enrollment office staff	Collecting Fees	$27.98	$13,774.55	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	53.80	Various enrollment office staff	Collecting Fees	$27.98	$1,505.32	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	359.30	Various enrollment office staff	Collecting Fees	$27.98	$10,053.21	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
	1,211.60	**Various enrollment office staff Total**			$33,900.55		
05-06	360.50	Various financial office staff	Waiving enrollment fees	$25.42	$9,163.91	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	207.50	Various financial office staff	Waiving enrollment fees	$25.42	$5,274.65	Receiving waiver applications	Waiving student fees
05-06	338.60	Various financial office staff	Waiving enrollment fees	$25.42	$8,607.21	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	873.90	Various financial office staff	Waiving enrollment fees	$25.42	$22,214.54	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,780.50	**Various financial office staff Total**			$45,260.31		
	2,992.10	**Grand Total**			$79,160.86		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$15,056,052		$15,056,052	$530,229	$14,525,823
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,288,913		2,288,913	12,184	2,276,729
Course and Curriculum Development	6020	17,098		17,098	11,201	5,897
Academic/Faculty Senate	6030	48,089		48,089		48,089
Other Instructional Administration & Instructional Governance	6090	762,434		762,434		762,434
Instructional Support Services	6100					
Learning Center	6110	163,718		163,718	2,344	161,374
Library	6120	588,149		588,149	87,363	500,786
Media	6130	216,882		216,882		216,882
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	5,230		5,230	4,526	704
Other Instructional Support Services	6190	200		200		200
Admissions and Records	6200	455,182		455,182	2,949	452,233
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,777,912		1,777,912	15,241	1,762,671
Matriculation and Student Assessment	6320	63,026		63,026		63,026
Transfer Programs	6330	117,942		117,942		117,942
Career Guidance	6340	1,171		1,171	425	746
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	937,709		937,709	25,478	912,231
Subtotal		$22,499,707	$0	$22,499,707	$691,940	$21,807,767

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$509,657		$509,657	$6,216	$503,441
Health Services	6440	102,151		102,151		102,151
Student Personnel Admin.	6450	55,347		55,347		55,347
Financial Aid Administration	6460	821,031		821,031	11,279	809,752
Job Placement Services	6470	5,814		5,814	2,752	3,062
Veterans Services	6480	5,579		5,579		5,579
Miscellaneous Student Services	6490	133,588		133,588		133,588
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	912,722		912,722	912,722	0
Custodial Services	6530	624,027		624,027	624,027	0
Grounds Maintenance and Repairs	6550	238,696		238,696	238,696	0
Utilities	6570	866,410		866,410	866,410	0
Other	6590	95,892		95,892	95,892	0
Planning, Policy Making, and Coordination	6600	1,382,506		1,382,506	1,382,506	0
General Inst. Support Services	6700					
Community Relations	6710	219,038		219,038	219,038	0
Fiscal Operations	6720	670,181		670,181	670,181	0
Human Resources Management	6730	574,182		574,182	574,182	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	362		362	362	0
Staff Diversity	6760	11,979		11,979	11,979	0
Logistical Services	6770	1,672,681		1,672,681	1,672,681	0
Management Information Systems	6780	1,075,656		1,075,656	1,075,656	0
Subtotal		$32,477,206	$0	$32,477,206	$9,056,519	$23,420,687

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Redwoods Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810	21,605		21,605		21,605
Community Service Classes	6820	498,143		498,143	1,370	496,773
Community Use of Facilities	6830					
Economic Development	6840	2,067		2,067		2,067
Other Community Services & Economic Development	6890	568		568		568
Ancillary Services	6900					
Bookstores	6910	253,106		253,106		253,106
Child Development Center	6920	29,722		29,722		29,722
Farm Operations	6930	3,969		3,969		3,969
Food Services	6940					
Parking	6950	324,924		324,924	25,125	299,799
Student and Co-curricular Activities	6960	106		106		106
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100	103,393		103,393	103,393	0
(05) Total		$33,714,809	$0	$33,714,809	$9,186,407	$24,528,402
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				37.45%		
(07) Notes						

CAL RNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Exp ditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	242,901	24,037	1,040	16,262		284,240
Architecture and Environmental Design	0200						
Biological Sciences	0400	790,512	8,953	26,555	75,593		901,613
Business and Management	0500	892,620		6,715	28,058		927,393
Communications	0600	29,964					29,964
Computer and Information Science	0700	753,571	17,471	39,506	79,553		890,101
Education	0800	777,662	121,356	174,446	12,412		1,085,876
Engineering and Related Industrial Tech.	0900	964,516	835	50,230	96,536		1,112,117
Fine and Applied Arts	1000	1,019,896	9,498	49,703	21,891		1,100,988
Foreign Language	1100	325,667		120	3,269		329,056
Health	1200	990,493	3,789	50,995	15,573		1,060,850
Consumer Education and Home Economics	1300	415,458	57,624	112,727	32,598		618,407
Law	1400	46,088		1,500	4,062		51,650
Humanities (Letters)	1500	1,691,531	4,873	13,176	15,035		1,724,615
Library Science	1600						
Mathematics	1700	1,324,819	4,623	18,989	14,050		1,362,481
Military Studies	1800						
Physical Sciences	1900	620,056	3,896	8,047	11,143		643,142
Psychology	2000	337,682		1,052	407		339,141
Public Affairs and Services	2100	506,873	30,679	41,929	25,693		605,174
Social Sciences	2200	804,922		52,483	2,742		860,147
Commercial Services	3000						
Interdisciplinary Studies	4900	704,496	305,796	43,453	75,352		1,129,097
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900						
Subtotal - Instructional Activities	**599**	13,239,727	593,430	692,666	530,229		15,056,052

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,103,883	172,846	12,184		2,288,913
Course and Curriculum Development	6020			5,897	11,201		17,098
Academic/Faculty Senate	6030		42,896	5,193			48,089
Other Instruct. Admin. & Instruct. Governance	6090		762,298	136			762,434
Subtotal - Instructional Administration	**6000**		2,909,077	184,072	23,385		3,116,534
Instructional Support Services (6100)							
Learning Center	6110	42,749	105,512	13,113	2,344		163,718
Library	6120		434,056	66,730	87,363		588,149
Media	6130		203,823	13,059			216,882
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150			704	4,526		5,230
Other Instructional Support Services	6190			200			200
Subtotal - Instructional Support Services	**6100**	42,749	743,391	93,806	94,233		974,179
Admissions and Records	**6200**		422,030	30,203	2,949		455,182
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,458,547	304,124	15,241		1,777,912
Matriculation and Student Assessment	6320		54,002	9,024			63,026
Transfer Programs	6330		117,291	651			117,942
Career Guidance	6340		450	296	425		1,171
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		1,630,290	314,095	15,666		1,960,051

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		809,140	103,091	25,478		937,709
Extended Opportunity Prgms. & Services (EOPS)	6430		451,264	52,177	6,216		509,657
Health Services	6440		5,337	96,814			102,151
Student Personnel Administration	6450		55,347				55,347
Financial Aid Administration	6460		650,634	159,118	11,279		821,031
Job Placement Services	6470		2,010	1,052	2,752		5,814
Veterans Services	6480		5,579				5,579
Miscellaneous Student Services	6490		29,661	103,927			133,588
Subtotal - Other Student Services	**6400**		2,008,972	516,179	45,725		2,570,876
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		689,689	201,385	21,648		912,722
Custodial Services	6530		582,297	41,730			624,027
Grounds Maintenance and Repairs	6550		220,549	18,147			238,696
Utilities	6570			866,410			866,410
Other Operation and Maintenance of Plant	6590		92,638	745	2,509		95,892
Subtotal - Operation and Maintenance of Plant	**6500**		1,585,173	1,128,417	24,157		2,737,747
Planning, Policymaking, and Coordination	**6600**		1,077,409	298,504	6,593		1,382,506

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		134,026	85,012			219,038
Fiscal Operations	6720		522,219	146,589	1,373		670,181
Human Resources Management	6730		449,135	120,471	4,576		574,182
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750			362			362
Staff Diversity	6760			10,304	1,675		11,979
Logistical Services	6770		783,049	877,111	12,521		1,672,681
Management Information Systems	6780		762,077	267,059	46,520		1,075,656
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		2,650,506	1,506,908	66,665		4,224,079
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		21,605				21,605
Community Service Classes	6820	172,290	144,504	179,979	1,370		498,143
Community Use Facilities	6830						
Economic Development	6840			2,067			2,067
Other Community Svcs. & Economic Development	6890		568				568
Subtotal - Community Services	**6800**	172,290	166,677	182,046	1,370		522,383

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CAL[illegible]RNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Exp[illegible]ditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910		238,707	14,399			253,106
Child Development Centers	6920		29,722				29,722
Farm Operations	6930		3,969				3,969
Food Services	6940						
Parking	6950		282,038	17,761	25,125		324,924
Student and Co-curricular Activities	6960			106			106
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		554,436	32,266	25,125		611,827
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**			103,393			103,393
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			16,275			16,275
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			16,275			16,275
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,500,617	1,500,617
Student Aid	7320					776,973	776,973
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					2,277,590	2,277,590
TOTAL EXPENDITURES and OTHER OUTGO	**391**	13,454,766	14,341,391	5,098,830	836,097	2,277,590	36,008,674

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Redwoods Community College District | 160 | District Code No.

Schedule 1A
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	14,065
Avg. time p/account	1.0
Total Time (in minutes)	14065
Per Hour	60
Hours Worked **(** Activity 11)**	**234.4**
***EFC 2**	3,588
Avg. time p/student	1.2
Total Time (in minutes)	4306
Per Hour	60
Hours Worked **(** Activity 12)**	**71.8**
***EFC 1**	14,065
Avg. time p/question	2.1
Total Time (in minutes)	29537
Per Hour	60
Hours Worked **(** Activity 13)**	**492.3**
***EFC 2**	3,588
Avg. time p/file	0.9
Total Time (in minutes)	3229
Per Hour	60
Hours Worked **(** Activity 14)**	**53.8**
***EFC 4**	2,450
Avg. time p/account	8.8
Total Time (in minutes)	21560
Per Hour	60
Hours Worked **(** Activity 15)**	**359.3**
***EFC 5**	
Avg. time p/student	6.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Used Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,554
Avg. time p/question	3.3
Total Time (in minutes)	21628
Per Hour	60
Hours Worked **(** Activity 21)**	**360.5**
***EFW 6**	6,554
Avg. time p/application	1.9
Total Time (in minutes)	12453
Per Hour	60
Hours Worked **(** Activity 22)**	**207.5**
***EFW 6**	6,554
Avg. time p/evaluation	3.1
Total Time (in minutes)	20317
Per Hour	60
Hours Worked **(** Activity 23)**	**338.6**
***EFW 8**	0
Avg. time p/application	12.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	6,554
Avg. time p/application	8.0
Total Time (in minutes)	52432
Per Hour	60
Hours Worked **(** Activity 25)**	**873.9**
***EFW 8**	0
Avg. time p/application	9.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 04-05 timestudy.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Buchanan, Patricia	Lead Cashier	1	1	2	1	5	3
Gordon, Juliana	Admissions & Records Assistant	2	2	3	1		
Hall, Sheila	Admission & Records	2	2	3	1		
Johnson, Jennifer	Administrative Office Assistant I	0.5	1	1	0.5		
King, Sherrie	Accounting Clerk IV	0.5	0.5	1	0.5	12.5	10
Kline, Margaret	Admissions Assistant I	1	1	2	1		
Lund, Joy	Admission Assistant II	1					
McQueen, Ronald	Student Services Specialist 4	1	1	3	1		
Pival, Jamie	Administrative Office Assistant I	0.5	1	1	0.5		
Quigley/Vaughn, Tina	Admission Assistant I	1	1	2	1		
Yates, Melody	Student Services Specialist	1	1	3	1		
Average		**1.0**	**1.2**	**2.1**	**0.9**	**8.8**	**6.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Used Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Redwoods Community College District
308/95 Enrollment fee Collection and Waivers
Fiscal Year: 2005-2006
Enrollment Staff Average PHR

Purpose: To calculate the average PHR for various enrollment office staff.
Source: Redwoods PHR listing.
Findings:

Name	Title	05-06
Buchanan, Patricia	Lead Cashier	$30.40
Johnson, Jennifer	Administrative Office Assistant I	$15.66
King, Sherrie	Accounting Clerk IV	$35.12
Lund, Joy	Admission Assistant II	$29.30
McQueen, Ronald	Student Services Specialist 4	$31.55
Pival, Jamie	Administrative Office Assistant I	$16.88
Yates, Melody	Student Services Specialist	$36.93
Average		**$27.98**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 04-05 timestudy.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Charlotte August		3	2	3	12	8	10
Megan Buchanan	Financial Aid Specialist I	3	2	3		8	
Kathy Cline	Financial Aid Technician	3	2	3		8	
Anna Imrem	Financial Aid Assistant/Supervisor	3	2	3	12	8	10
Karen Johnson	Director, Financial Aid	6	1	4			8
Seth Klempner	Financial Aid Specialist 2	3	2	3		8	
Janelle Kusters	Financial Aid Specialist 2	3	2	3	12	8	10
Ann Marie Larroque	Financial Aid Assistant	3	2	3	12	8	10
Lyn Maffei	Financial Aid Assistant	3	2	3	12	8	10
Tara Pueblo	Financial Aid Specialist 1	3	2	3	12	8	10
Carolina Whitaker	Financial Aid Assistant	3	2	3	12	8	10
Rashaun Willett-Potts	Financial Aid Specialist 1	3	2	3		8	
Average		**3.3**	**1.9**	**3.1**	**12.0**	**8.0**	**9.8**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Financial Staff Average PHR

Purpose: To calculate the average PHR for various financial office staff.
Source: Redwoods PHR listing.
Findings:

Name	Title	05-06
Charlotte August	Financial Aid Assistant	$25.20
Megan Buchanan	Financial Aid Specialist I	$24.84
Seth Klempner	Financial Aid Specialist 2	$25.01
Lyn Maffei	Financial Aid Assistant	$32.29
Tara Pueblo	Financial Aid Specialist 1	$22.54
Rashaun Willett-Potts	Financial Aid Specialist 1	$22.64
Average		**$25.42**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, EFCW 1.8-3, and attachments.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students		15,710	16,235	18,143	18,113	15,957	15,661	14,065
EFC 2	1.8-1	2.	Paid Enrollment fees		7,489	8,075	9,685	7,672	5,566	4,194	3,588
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)		3,662	3,624	3,613	4,310	4,509	4,887	*6,554
EFC 4	1.8-2	1.	Delinquencies collections		1,497	1,695	2,130	1,706	3,089	2,692	2,450
EFC 5	1.8-2	2.	Refunds								
EFW 6	1.8-3	1.	Waivers Requested	X	3,991	3,950	3,938	4,676	4,869	4,887	*6,554
EFW 7	1.8-3	2.	Waivers Approved	X -	3,662	3,624	3,613	4,310	4,509	4,887	*6,554
EFW 8	1.8-3 (1-2)		Waivers Denied	X	329	326	325	366	360	0	

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Thursday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Redwoods CCD
For 2005 Summer Quarter

Data Current As Of November 09, 2006 01:00:37

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	1,208

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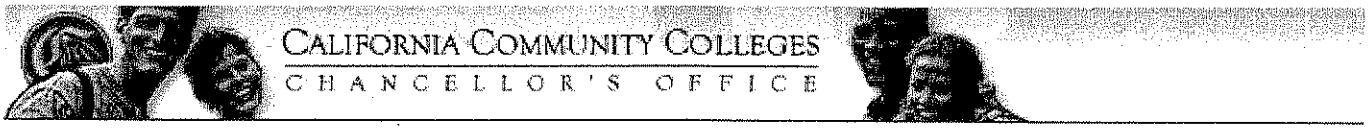
California Home

Thursday, I



Student Demographics

Student Total Headcount For Redwoods CCD
For 2005 Fall Term

Data Current As Of November 09, 2006 01:01:02

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	6,521

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California Home

Thursday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Redwoods CCD
For 2006 Winter Intersession

Data Current As Of November 09, 2006 01:01:37

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	382

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California Home

Thursday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Redwoods CCD
For 2006 Spring Semester

Data Current As Of November 09, 2006 01:02:07

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	5,954

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Business Office
Department/Location

Patricia Buchanan
Employee Name

Head Cashier
Exact Position Title

476-4121
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 Data tel
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min				✓	
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 min				✓	
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min				✓	
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 min				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 min				✓	

used Desktop

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Buchanan Date 6-9-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

legacy

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

ES / Eureka
District / Department/Location

Juliana Gordon
Employee Name

Admissions & Records Asst
Exact Position Title

Telephone # / 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: [redacted] 99-00 [redacted]

Circle the years for wh[redacted]

Reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Juliana Gordon per Deborah Ball Date 5-25-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

ESI Eureka
District / Department/Location

Sheila Hall
Employee Name / Exact Position Title

12mo/11mo/10mo/hrly
Telephone # / Work year length(circle) / Fiscal Year: 02-03

Circle the years for which you are reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheila F Hall Date 5/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

ES/Eureka
Department/Location

Jennifer Johnson
Employee Name

Admin Office Asst I
Exact Position Title

19 hr./wk (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 03-04 04-05
Circle the years for which you are reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years: 4

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	-					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	-					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

RCCD
District

Business
Department/Location

Shanne King
Employee Name

Acct Clk IV
Exact Position Title

4764124
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. Datafy

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	30sec					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	30sec					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	30sec					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10-15 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shanne King Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

ES / Eureka
Department/Location

Margaret Kleine
Employee Name

Admission Asst I
Exact Position Title

426-4200
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 03-04 [illegible]

Circle the years for which you are reporting time

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

used to refund

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Kleine per Debra K Date 5-24-06

If you have any questions, please contact Debra K, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES / Eureka — Department/Location

Joy Lund — Employee Name

Admission asst III — Exact Position Title

476-7200 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 04-05

Circle the years for which you are reporting. Reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	03/04 04/05	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	—					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	—					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joy Lund Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ESI Eureka — Department/Location

Ronald McQueen — Employee Name

Student Services Specialist 4 — Exact Position Title

476-4200 — Telephone #

(12mo/11mo/10mo/hrly) Work year length (circle)

.50 FTE

Fiscal Year: 03-04 04-05

Circle the years for which you are responding.

reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ron McQueen Date 5/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES/Eureka — Department/Location

Jamie Pival — Employee Name

Admin Office Asst I — Exact Position Title

19 hrs/wk — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 [illegible] 04/05 are responding.

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	-					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	-					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jamie L. Pival — Date 5/31/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

ES / Eureka — Department/Location

Jena Quigley/Vaughn — Employee Name

Admission Asst II — Exact Position Title

476-4200 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 03-04 only

Circle the years for which you are reporting.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reportable years

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	03/04 1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1 03/04	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	03/04 2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	03/04 1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

used Default

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Jena Quigley/Vaughn

Date 5/25/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

ES/Eureka
Department/Location

Melody Yates
Employee Name

Student Services Specialist (V
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 02-03 04-05 03-04 04-05 03-04 04-05

.75 FTE

Circle the years for which you are responding. Reportable years

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

Used Datatel

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melody Yates Date 5/25/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin — Department/Location

Charlotte August — Employee Name

Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

00-01 thru 04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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IT 8/7/02

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Megan Buchanan — Employee Name

Fin Aid Specialist I — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: reportable

Circle the years for which you are reporting

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

~~02-03~~ 04-05
03-04

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin. Aid — Department/Location

Kathy Cline — Employee Name

FA Tech — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathy Cline by Susan Lowe Date 6-22-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Fin Aid
Department/Location

Anna Imrem
Employee Name

Fin Aid asst / Supervisor
Exact Position Title

476-4187
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ 00-01 01-02 ~~02-03~~ 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anna Imrem Date 6-22-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Karen Johnson — Employee Name

Dir Fin Aid — Exact Position Title

476-4187 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6			✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	8			✓	

Used Default

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Johnson by Cynthia Lee Date 6-22-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Seth Klempner — Employee Name

Fin Aid Specialist 2 — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: [illegible] reportable 05-06

Circle the years for which you are responding. 04-05

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1 04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Fin Aid
Department/Location

Janelle Kusters
Employee Name

Fin Aid Specialist 2
Exact Position Title

476-4182
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

02-03
03-04

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janelle Kusters by Rosa Lam Date 6-22-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Ann-Marie Larroque — Employee Name

Fin Aid Asst — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anne Marie Larroque By Annette Amistad Date 6-22-06

If you have any questions, please contact Lynn Theisen, at 476-4113

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods
District

Fin Aid
Department/Location

Lynn Maffei
Employee Name

Fin Aid Asst
Exact Position Title Processing Specialist

476-4187
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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T 2-1-05

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Tara Pueblo — Employee Name

Fin Aid Specialist I — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year [redacted] 02 reportable 05 06

Circle the years for which you are claiming.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1 04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tara Pueblo by Dana Lee Date 6-22-06

If you have any questions, please contact _____, at _____

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7 9-5-03

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Carolina Whitaker — Employee Name

Fin Aid Asst — Exact Position Title

476-4182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1 01-02 02-03

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	12			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carolina Whitaker by Carol Lam Date 6-22-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Redwoods — District

Fin Aid — Department/Location

Ra Shaun Willett-Potts — Employee Name

Fin Aid Specialist I — Exact Position Title

476-9182 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 02-03 reportable years

Circle the years for which you are claiming costs.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

04-05

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/22/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: Redwoods

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								1208
Fall								6521
Winter/ Intersession								382
Spring								5954
Total								14065
2. Number of students who paid enrollment fees:								
Summer								494
Fall								1577
Winter/ Intersession								109
Spring								1408
Total								3588
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								214
Fall								4944
Winter/ Intersession								273
Spring								4546
Total								10477

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela L Olmstead Date 12-4-06

Pamela L Olmstead
Employee Name: (print)

Budget Technician
Position or Title

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02-03 AR	02-03 Net	03-04 total	03-04 WT	03-04 Net	04-05 total	04-05 AR	04-05 Net	05-06	05-06 AR	05-06 net	Source
220	2163	1437	110	1327	1692	100	1592	1208	320	888	CCCC data mart & datatel
750	6873	6897	1852	5045	6666	1405	5261	6521	1031	5490	CCCC data mart & datatel
162	593	676	52	624	627	37	590	382	70	312	CCCC data mart & datatel
	7352	6948	3089	3859	6676	1150	5526	5954	1029	4925	CCCC data mart & datatel
		503			457			494			calculated
		2387			1779			1577			calculated
		237			169			109			calculated
		2439			1789			1408			calculated
		934			1235			714			calculated
		4509			4887			4944			CCCC data mart
		439			458			273			calculated
		4509			4887			4546			CCCC data mart

#1 enrolled students

#2 paid enrollment fees

#3 exempt from fees

for #3 useing Chancellors report #3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Redwoods

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								320
Fall								1031
Winter/Intersession								70
Spring								1029
Total								2450
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession		Unable to determine						
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela L Olmstead Date 12-4-06

Pamela Olmstead — Budget Technician

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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# AR	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Summer	179	191	194	220	110	100	320
Fall	639	738	945	750	1852	1405	1031
Winter	n/a	na	90	162	52	37	70
Spring	679	766	901	574	1075	1150	1029
Total	1497	1695	2130	1706	3089	2692	2450

# Refunds						
Summer	unknown	unknown	unknown	unknown	unknown	unknown
Fall	unknown	unknown	unknown	unknown	unknown	unknown
Winter	unknown	unknown	unknown	unknown	unknown	unknown
Spring	unknown	unknown	unknown	unknown	unknown	unknown

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Redwoods

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$ 1135315 cc
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$ 83386 cc
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$ 16687 cc
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								32089
Summer								2246
Fall								15082
Winter/Intersession								963
Spring								13798
TOTAL x $0.91 per credit								29201. cc

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Pamela L Olmstead Date 12-04-06

Pamela L Olmstead
Employee Name: (print)

Budget Technician
Position or Title

If you have any questions, please contact me, at 707-476-4113

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Statistical data EFCW 1.8-4

Enrollment Fee Collection and Waiver

	Data`	99-00	00-01	01-02	02-03	03-04	04-05	05-06	Source
	Fee collected	unknown	unknown	unknown	unknown	unknown	unknown		
	Fee Refunded	unknown	unknown	unknown	unknown	unknown	unknown		
#3	Fee Revenue	729,774	715,124	760,985	682,623	966,607	1,213,524	1,135,315	CCCC Enrolment Fee Report
4A	Enrollment Fees wa	674,368	640,801	654,965	700,047	1,155,117	1,673,719	834,326	CCCC Financial Aid and Amount
4B	2% waived	13,487	12,816	13,099	14,001	23,102	33,474	16,687	
4C	7% waived	51,926	49,342	50,432	53,904	88,944	128,876		
# 5	**Cost per unit**	**12**	**12**	**12**	**18**	**26**	**26**	**26**	Per legislation
	# of credits waived								
	Summer	5620	5874	5458	5056	3998	7081	2246	
	Fall	25289	23496	23470	15946	19104	27681	15082	Calculated
	Winter	n/a	n/a	2183	1556	1777	1931	963	Calculated
	Spring	25289	24030	23470	15946	19548	27681	13798	Calculated
	Total	56197	53400	54580	38503	44428	64374	32089	Calculated
	Total	56,197	53,400	54,580	38,892	44,428	64,374	32,089	Calculated
	Total x $0.91	51,139.57	48,594.08	49,668.18	35,391.27	40,429.10	58,580.17	29,201.41	

used CCCCO's report #'s for 4A

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates and missing titles for the FY: 05-06 and missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Redwoods Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE ASSISTANT		$ 29.68
	AVERAGE CHANCELLOR		
	AVERAGE CUSTODIAN		$ 26.65
	AVERAGE DEAN		
	AVERAGE DIRECTOR		$ 63.61
	AVERAGE EXECUTIVE SECRETARY		
	AVERAGE FACULTY MEMBER		
	AVERAGE PRESIDENT		
	AVERAGE VICE CHANCELLOR		
	AVERAGE VICE PRESIDENT		
ADAMS, VINCI	BUDGET TECHNICIAN	$ 39.64	$ 41.23
AGPAWA, PAUL	COORDINATOR, TECH INFRASTUCTURE	$ 50.53	$ 52.97
ALI, IBRAHIM (ABE)	DIRECTOR OF HUMAN RESOURCES	$ 78.41	$ 85.95

Name	Title	04-05	05-06
ALTON, SUE	ASSISTANT TO THE PRESIDENT	$ 49.27	$ 51.63
AUGUST, CHARLOTTE	FINANCIAL AID ASSISTANT	$ 28.67	$ 25.20
BACCHETTI, MIKE	SENIOR CUSTODIAN	$ 31.70	$ 18.77
BAILEY, SUE	INTEGRATED TECH COORDINATOR	$ 54.27	
BINCHAUS, AL	CUSTODIAN	$ 28.97	$ 24.29
BLAKE, GENVRA	COMMUNITY ED BUSINESS DEV MGR.	$ 43.24	
BOBBITT, JEFF	VP ACADEMIC AFFAIRS	$ 97.77	$ 109.92
BORELLI, DEBORAH	OFFICE MANAGER	$ 35.33	$ 36.63
BUCHANAN, HENRY	CUSTODIAN	$ 24.08	$ 24.94
BUCHANAN, MEGAN	FINANCIAL AID SPECIALIST I	$ 24.84	
BUCHANAN, PATRICIA	LEAD CASHIER	$ 27.63	$ 30.40
CARLSON, CONNIE	HR TECHNICIAN	$ 37.50	$ 40.07
CLEMENTS, RUTH	CUSTODIAL SUPERVISOR	$ 38.72	$ 41.51
CONNORS, BILL	ENVIRONMENTAL HEALTH SAFETY MGR.	$ 47.55	
COX, RON	DIRECTOR, FISCAL SERVICES	$ 71.00	$ 72.68
CRABILL (KATHLEEN), CASEY	PRESIDENT/SUPT	$ 125.11	$ 134.89
DAILY, AMY	HR TECHNICIAN	$ 39.64	$ 41.23
DAILY, DAVID	CUSTODIAN	$ 28.97	$ 30.25

Name	Title	04-05	05-06
DALY, MARCIA	OFFICE MANAGER	$ 36.95	
DEMARK, PAUL	COMM. & MARKETING MGR	$ 52.12	$ 54.65
DORAN, TIM	GARDNER	$ 25.77	$ 26.71
EKHOLDT, ROBERT	DIRECTOR, RESIDENTIAL PROGRAMS	$ 35.32	$ 36.79
FIELDING, AHN	COMMUNITY RELATION MGR.	$ 45.71	$ 47.85
FLANAGAN, TIM	FACILITIES & OPS SUPERVISOR	$ 45.71	$ 50.29
FOSTER, MARCY	COUNSELOR, CAL WORKS	$ 50.50	
FRANKLIN, BARBARA	PAYROLL MANAGER	$ 37.94	$ 40.50
FRASER, DaVITA	INSTRUCTIONAL SITE MANAGER	$ 35.57	$ 37.06
FRAZIER (WINTHERS), SALLY	ADMINISTRATIVE SECRETARY	$ 31.31	$ 33.21
GEARY, RAY	DEAN, COMMUNITY & ECONOMIC	$ 73.23	$ 77.17
GIBBS, ROY (ALAN)	PRINTING SERVICE SUPV	$ 39.43	$ 40.99
GOODLIVE, KATHY	ADMIN. OFFICE MANAGER	$ 36.42	$ 37.97
GOSSI, PEGGY	ADMISSION ASSISTANT I		$ 22.64
GREEN, MELISSA	DIRECTOR, STUDENT DEVELOPMENT	*$ 65.50*	
HADDOCK, LESLIE	ADMIN ASSISTANT	$ 35.79	$ 37.60
HARRIS, DAVE	COMPUTER INFO SPECIALIST	$ 63.39	
HARRIS, MERIDITH	DIRECTOR, NURSING OPERATION	$ 66.89	$ 68.91

Name	Title	04-05	05-06
HASH, JOE	DIRECTOR, PE & ATHLETICS	$ 59.61	$ 62.98
HAYS, LYNDA	ADMIN. OFFICE MANAGER		$ 40.86
HENSON, MICHELLE	INSTRUCTIONAL SITE MANAGER	$ 45.13	
IMREM, ANNA	FINANCIAL AID SUPERVISOR	$ 33.94	
JOHNSON, JENNIFER	ADMINISTRATIVE OFFICE ASSISTANT I	$ 14.68	$ 15.66
JOHNSON, KAREN	DIRECTOR, FINANCIAL AID	$ 60.76	
KALOOSTIAN, RODNEY	SPECIAL ASS'T. TO VP, STUDENT SERVICES	$ 50.82	$ 53.65
KING, SHERRIE	ACCOUNTING CLERK IV	$ 31.20	$ 35.12
KLEMPNER, SETH	FINANCIAL AID SPECIALIST 2	$ 22.03	$ 25.01
KVINSLAND, JUDITH	CAMPUS VICE PRESIDENT	$ 69.11	$ 74.91
LARSON, SYDNEY	DIVISION CHAIR	$ 65.10	$ 66.73
LAWSON, LESLIE	ASSOCIATE VICE PRESIDENT	$ 75.97	
LINDLEY, PAT	ACADEMIC AFFAIRS PROJ COORD	$ 40.14	
LUND, JOY	ADMISSION ASSISTANT II	$ 25.36	$ 29.30
MAFFEI, LYN	FINANCIAL AID ASSISTANT	$ 28.67	$ 32.29
MANNING, MARCY	PROGRAM DEVELOPMENT COORDINATOR	$ 48.96	
MAYESKI, JOHN	FACULTY COORD, LIBRARY	$ 66.89	$ 68.91
McBREARTY, JOHN	DIRECTOR, INFO TECHNOLOGY	$ 67.06	$ 70.53

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
McGILL, COLLEEN	CUSTODIAN	$ 26.20	$ 27.16
McQUEEN, RONALD	STUDENT SERVICES SPECIALIST 4	$ 28.67	$ 31.55
MENDOZA, MIKE	MAINTENANCE SPECIALIST 3	$ 37.54	$ 38.95
MILLER, MARY	ADMINISTRATIVE ASSISTANT	$ 43.76	$ 45.79
MORENO, JESSE	CUSTODIAN	$ 24.59	$ 24.89
OLIVARES, THOMAS	GARDNER	$ 30.62	$ 31.59
OLMSTEAD, PAM	MANDATED COST SPECIALIST	$ 31.07	$ 34.96
ORSENICO, LOIS	ACCOUNTING COORDINATOR	$ 40.28	
PATTON, SEAN	GARDNER	$ 28.12	$ 29.14
PETERSEN, DANIELLE	DIRECTOR, ACADEMIC SUPPORT CENTER	$ 37.92	
PIVAL, JAMIE	ADMINISTRATIVE ASSISTANT I	$ 15.90	$ 16.88
PORRAS, JOE	DIRECTOR, FACILITIES & OPERATIONS	$ 64.77	$ 63.13
PRYSTOWSKY, RICHARD	DEAN, ACADEMIC TRANSFER	$ 62.26	
PUEBLO, TARA	FINANCIAL AID SPECIALIST 1	$ 22.54	
RULOFSON, FRANZ	BIANCHI FARM MANAGER 01-02	$ 30.51	$ 44.46
SANDEEN, STEVE	SENIOR GARDNER	$ 31.39	$ 32.55
SHERMAN, CHRIS	CUSTODIAN	$ 24.08	
SISTO, BARBARA	TRANSPORT EVALUATOR		$ 33.31

Name	Title	04-05	05-06
STRATTON, STEVE	COORD, TECH INFRASTRUCTURE	$ 49.27	$ 51.63
THOMAS, TRACEY	DIRECTOR, DISABLED STUDENT PROGRAMS	$ 52.01	$ 54.84
THOMASON, SCOTT	VICE-PRESIDENT, BUSINESS SERVICES	$ 87.08	$ 93.26
THROGMORTON, DAVE	CAMPUS VICE PRESIDENT	$ 69.66	
TUCKER, CHERYL	ASS'T. DIRECTOR, SPECIAL PROGRAMS	$ 35.78	
TURNER, LINDA	ADMIN. OFFICE MANAGER	$ 38.21	$ 39.86
VAUGHN, TINA	ADMISIION ASSISTANT 3		$ 32.83
WILLETT-POTTS, RASHAUN	FINANCIAL AID SPECIALIST 1	$ 20.98	$ 22.64
WILSON, DARLENE	CUSTODIAN	$ 27.36	$ 28.36
YATES, MELODY	STUDENT SERVICES SPECIALIST	$ 32.95	$ 36.93

Schedule 5
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. 2005-2006 Enrollment Fees Waived used Chancellor's number.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 729,774	$ 715,124	$ 760,985	$ 682,623	$ 966,607	$ 1,213,524	$ 1,135,315
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 14,595	$ 14,302	$ 15,220	$ 13,652	$ 19,332	$ 24,270	$ 22,706
1.8-4 line 4A	Enrollment Fees Waived	$ 674,368	$ 640,801	$ 654,965	$ 700,047	$ 1,155,117	$ 1,673,719	$ 1,453,321
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 13,487	$ 12,816	$ 13,099	$ 14,001	$ 23,102	$ 33,474	$ 29,066
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 47,206	For 00-01 through 05-06 - unit fee					
1.8-4 line 5	Summer	5620	5,874	5,458	5,056	3,998	7,081	2,246
	Fall	25289	23,496	23,470	15,946	19,104	27,681	15,082
	Winter/Interssion			2,183	1,556	1,777	1,931	963
	Spring	25289	24,030	23,470	15,946	19,548	27,681	13,798
	Total # of credits	56,197	53,400	54,581	38,504	44,427	64,374	32,089
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)	$ 51,140	$ 48,594	$ 49,669	$ 35,039	$ 40,429	$ 58,580	$ 29,201
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 13,487	$ 12,816	$ 13,099	$ 14,001	$ 23,102	$ 33,474	$ 29,066
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 47,206						
1.8-4 5	Credit Units Waived		$ 48,594	$ 49,669	$ 35,039	$ 40,429	$ 58,580	$ 29,201
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 60,693**	**$ 61,410**	**$ 62,768**	**$ 49,040**	**$ 63,531**	**$ 92,054**	**$ 58,267**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Redwoods
COUNTY: Humboldt

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$14,411,317	$12,998,047	$263,198	$13,261,245
EQUALIZATION	81,010	74,530	6,480	81,010
ENROLL FEE ADMIN (2%)	35,939	33,064	2,875	35,939
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	175,985	161,907	14,078	175,985
S.F.A.A.	293,587	269,027	24,560	293,587
E.O.P.S.	881,114	810,625	70,489	881,114
C.A.R.E.	131,990	121,430	10,560	131,990
D.S.P.S.	1,031,344	948,838	82,506	1,031,344
STATE HOSPITALS	0	0	0	0
CALWORKS	215,021	188,620	26,401	215,021
MATRICULATION (CREDIT)	234,590	215,822	18,768	234,590
MATRIC. (NONCREDIT)	1,294	1,192	102	1,294
FAC.& STAFF DIVERSITY	11,842	10,013	1,829	11,842
PART-TIME FAC. INS.	2,190	0	2,190	2,190
PART-TIME FAC. OFF. HRS	128,847	0	128,847	128,847
PART-TIME FAC. ALLO.	263,346	242,279	21,067	263,346
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	119,487	109,928	9,559	119,487
ECON. DEVELOPMENT	152,502	128,101	1	128,102
TANF	47,141	43,369	3,772	47,141
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	75,250	63,210	0	63,210
VTEA TITLE I C	181,311	91,474	60,827	152,301
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	304,334	304,334	0	304,334
TOTAL	$18,831,773	$16,849,572	$766,679	$17,616,251

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sched A
Redwoods Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 50.34	$ 58.29	$ 68.01	$ 77.34	$ 55.05	$ 95.94	
2	Staff Training	(04)(B)(1)(b)	$ 167.80	$ 194.30	$ 272.04	$ 309.36	$ 220.20	$ 907.26	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 33.56	$ 38.86	$ 68.01	$ 77.34	$ 55.05	$ 95.94	
4	Waiving student fees	(04)(B)(2)(b)	$ 21,806.12	$ 22,571.65	$ 32,231.94	$ 38,904.10	$ 41,830.66	$ 32,687.98	$ 45,260.31
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,091.70	$ 149.94	$ 162.48	$ 1,881.40	$ 2,449.55	$ 2,098.23	
6	EFCW - Fee Waiver Costs	Total	$ 23,149.52	$ 23,013.04	$ 32,802.48	$ 41,249.54	$ 44,610.51	$ 35,885.35	$ 45,260.31
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 60,693.00	$ 61,410.00	$ 62,768.00	$ 49,040.00	$ 63,531.00	$ 92,054.00	$ 58,267.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (37,543.48)	$ (38,396.96)	$ (29,965.52)	$ (7,790.46)	$ (18,920.49)	$ (56,168.65)	$ (13,006.69)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 23,149.52**	**$ 23,013.04**	**$ 32,802.48**	**$ 41,249.54**	**$ 44,610.51**	**$ 35,885.35**	**$ 45,260.31**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Tuesday, N

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Redwoods College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 28, 2006 09:03:53

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	39	13,806
BOGW - Part A-2 based on SSI recipient status	29	7,891
BOGW - Part A-3 based on general assistance recipient status	21	3,965
BOGW - Part A-4 based on Veteran's or National Guard dependent status	40	16,796
BOGW - Part B based on income standards	2,127	576,537
BOGW - Part C based on financial need	4,298	834,326

HEADCOUNT TOTAL 6554

Total Amount = $ 1,453,321

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3591 apps.

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
San Bernardino Community College District CC36150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for San Bernardino Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC 36150

(02) Claimant Name: San Bernardino Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 114 S Del Rosa Drive

City: San Bernardino | State: CA | Zip Code: 92408

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 843,100	(13) $ 766,458
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 766,458
Due from State	(08) $ 843,100	(17) $ 766,458
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	1,911
(23) EFCW-1, (04)(A)(1)(b)(f)	1,711
(24) EFCW-1, (04)(A)(2)(a)(f)	581,686
(25) EFCW-1, (04)(B)(1)(a)(f)	149
(26) EFCW-1, (04)(B)(1)(b)(f)	1,213
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	44,852
(29) EFCW-1, (04)(B)(2)(c)(f)	282
(30) EFCW-1, (06)	46
(31) EFCW-1, (07)	288,229
(32) EFCW-1, (09)	107,079
(33) EFCW-1, (10)	46,497
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | Date

7/10/06

Robert Temple
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 287	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

San Bernardino Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 1,910.55	$ -	$ -	$ -	$ -	$ 1,910.55
b. Staff training (One time per employee)	$ 1,710.70	$ -	$ -	$ -	$ -	$ 1,710.70
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 581,686.40	$ -	$ -	$ -	$ -	$ 581,686.40
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 149.43	$ -	$ -	$ -	$ -	$ 149.43
b. Staff training (One time per employee)	$ 1,212.90	$ -	$ -	$ -	$ -	$ 1,212.90
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 44,852.05	$ -	$ -	$ -	$ -	$ 44,852.05
c. Reporting BOG fee waiver data to CCC	$ 282.40	$ -	$ -	$ -	$ -	$ 282.40
(05) Total Direct Costs	$ 631,804.43	$ -	$ -	$ -	$ -	$ 631,804.43

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	45.62%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 288,229.18
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 920,033.61
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 107,079.00
(10) Less: Enrollment Fee Waiver offsets		$ 46,496.78
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 766,457.83

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Cabrales, Joe Director, Admissions & Records	$43.70	30.0	$ 1,311.00				
Johnson, Helena Director, Admissions & Records	$39.97	15.0	$ 599.55				
(05) Total [X] Subtotal [ ]	Page 1 of 1		$ 1,910.55	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Cabrales, Joe — Director, Admissions & Records	$43.70	30.0	$ 1,311.00				
Johnson, Helena — Director, Admissions & Records	$39.97	10.0	$ 399.70				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,710.70	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ernardino Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions & Records Clerks Various	$23.57	7,602.0	$ 179,179.14				
Calculating total enrollment fee to be collected Admissions & Records Clerks Various	$23.57	3,677.8	$ 86,685.75				
Answering student's questions regarding enrollment fee collection Admissions & Records Clerks Various	$23.57	9,251.5	$ 218,057.86				
Updating written and computer records for enrollment fee information Admissions & Records Clerks Various	$23.57	3,815.3	$ 89,926.62				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions & Records Clerks Various	$23.57	207.8	$ 4,897.85				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions & Records Clerks Various	$23.57	124.7	$ 2,939.18				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 581,686.40	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Bernardino Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Arciero, Esther	Assistant Director, Financial Aid	$28.24	0.5	$ 14.12				
Muskavitch, John	Director, Financial Aid	$53.59	2.0	$ 107.18				
Sousa, Juana	Financial Aid Coordinator	$28.13	1.0	$ 28.13				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 149.43	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Bernardino Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Alanis, Eva	Financial Aid Specialist I	$24.08	12.0	$ 288.96				
Arciero, Esther	Assistant Director, Financial Aid	$28.24	9.0	$ 254.16				
Muskavitch, John	Director, Financial Aid	$53.59	2.0	$ 107.18				
Sousa, Juana	Financial Aid Coordinator	$28.13	20.0	$ 562.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,212.90	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Technicians Various	$24.99	367.6	$ 9,186.32				
Receiving waiver applications							
Financial Aid Technicians Various	$24.99	454.1	$ 11,347.96				
Evaluating waiver applications and verifying application documents							
Financial Aid Technicians Various	$24.99	454.1	$ 11,347.96				
Entering approved application information into district records; providing student award letter							
Financial Aid Technicians Various	$24.99	519.0	$ 12,969.81				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 44,852.05	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Bernardino Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Arciero, Esther Assistant Director, Financial Aid	$28.24	10.0	$ 282.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 282.40	$ -	$ -	$ -	$ -

New 04/06

San Bernardino Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	7,602.00	Admissions & Records Clerks	Various	$23.57	$179,179.14	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	3,677.80	Admissions & Records Clerks	Various	$23.57	$86,685.75	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	9,251.50	Admissions & Records Clerks	Various	$23.57	$218,057.86	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	3,815.30	Admissions & Records Clerks	Various	$23.57	$89,926.62	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	207.80	Admissions & Records Clerks	Various	$23.57	$4,897.85	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	124.70	Admissions & Records Clerks	Various	$23.57	$2,939.18	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	24,679.10	**Admissions & Records Clerks Total**			$581,686.40		
04-05	12.00	Alanis, Eva	Financial Aid Specialist I	$24.08	$288.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	12.00	**Alanis, Eva Total**			$288.96		
04-05	0.50	Arciero, Esther	Assistant Director, Financial Aic	$28.24	$14.12	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	9.00	Arciero, Esther	Assistant Director, Financial Aic	$28.24	$254.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	10.00	Arciero, Esther	Assistant Director, Financial Aic	$28.24	$282.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	19.50	**Arciero, Esther Total**			$550.68		
04-05	30.00	Cabrales, Joe	Director, Admissions & Records	$43.70	$1,311.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	30.00	Cabrales, Joe	Director, Admissions & Records	$43.70	$1,311.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	60.00	**Cabrales, Joe Total**			$2,622.00		
04-05	367.60	Financial Aid Technicians	Various	$24.99	$9,186.32	Answering student's questions regarding enrollment fee waivers/referring to appropriate persor	Waiving student fees
04-05	454.10	Financial Aid Technicians	Various	$24.99	$11,347.96	Receiving waiver applications	Waiving student fees
04-05	454.10	Financial Aid Technicians	Various	$24.99	$11,347.96	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	519.00	Financial Aid Technicians	Various	$24.99	$12,969.81	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,794.80	**Financial Aid Technicians Total**			$44,852.05		
04-05	15.00	Johnson, Helena	Director, Admissions & Records	$39.97	$599.55	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	10.00	Johnson, Helena	Director, Admissions & Records	$39.97	$399.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	25.00	**Johnson, Helena Total**			$999.25		
04-05	2.00	Muskavitch, John	Director, Financial Aid	$53.59	$107.18	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Muskavitch, John	Director, Financial Aid	$53.59	$107.18	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Muskavitch, John Total**			$214.36		
04-05	1.00	Sousa, Juana	Financial Aid Coordinator	$28.13	$28.13	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	20.00	Sousa, Juana	Financial Aid Coordinator	$28.13	$562.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	21.00	**Sousa, Juana Total**			$590.73		
	26,615.40	**Grand Total**			$631,804.43		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$27,578,553		$27,578,553	$506,330	$27,072,223
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,308,580		2,308,580	568,922	1,739,658
Course and Curriculum Development	6020	68,474		68,474	9,151	59,323
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	88,569		88,569		88,569
Instructional Support Services	6100					
Learning Center	6110	412,559		412,559	538	412,021
Library	6120	1,745,220		1,745,220	202,107	1,543,113
Media	6130	183,280		183,280	5,728	177,552
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	224,224		224,224	24,287	199,937
Admissions and Records	6200	1,279,660		1,279,660	5,669	1,273,991
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,530,408		1,530,408		1,530,408
Matriculation and Student Assessment	6320	497,496		497,496	55,580	441,916
Transfer Programs	6330	182,631		182,631	4,749	177,882
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,254,518		1,254,518	48,344	1,206,174
Subtotal		$37,354,172	$0	$37,354,172	$1,431,405	$35,922,767

Revised 9/04

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$769,397		$769,397	$31,987	$737,410
Health Services	6440	475,402		475,402		475,402
Student Personnel Admin.	6450	715,194		715,194	17,200	697,994
Financial Aid Administration	6460	1,290,910		1,290,910	65,495	1,225,415
Job Placement Services	6470	500,412		500,412		500,412
Veterans Services	6480					
Miscellaneous Student Services	6490	534,080		534,080	16,475	517,605
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,193,364		1,193,364	1,193,364	0
Custodial Services	6530	1,400,393		1,400,393	1,400,393	0
Grounds Maintenance and Repairs	6550	721,210		721,210	721,210	0
Utilities	6570	2,406,656		2,406,656	2,406,656	0
Other	6590	544,932		544,932	544,932	0
Planning, Policy Making, and Coordination	6600	2,028,166		2,028,166	2,028,166	0
General Inst. Support Services	6700					
Community Relations	6710	513,148		513,148	513,148	0
Fiscal Operations	6720	1,294,356		1,294,356	1,294,356	0
Human Resources Management	6730	745,506		745,506	745,506	0
Noninstructional Staff Benefits & Incentives	6740	473,645		473,645	473,645	0
Staff Development	6750	104,741		104,741	104,741	0
Staff Diversity	6760					
Logistical Services	6770	2,953,643		2,953,643	2,953,643	0
Management Information Systems	6780	2,043,581		2,043,581	2,043,581	0
Subtotal		$58,062,908	$0	$58,062,908	$17,985,903	$40,077,005

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: San Bernardino CCD

(02) Period of Claim: 2004-2005

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	395,171		395,171	395,171	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	200,847		200,847	9,671	191,176
Community Use of Facilities	6830	48,880		48,880		48,880
Economic Development	6840	201,572		201,572	17,597	183,975
Other Community Services & Economic Development	6890	1,217,387		1,217,387	499,621	717,766
Ancillary Services	6900					
Bookstores	6910	41,271		41,271		41,271
Child Development Center	6920	151,564		151,564	2,931	148,633
Farm Operations	6930					
Food Services	6940	171,630		171,630		171,630
Parking	6950					
Student and Co-curricular Activities	6960	547,109		547,109	36,144	510,965
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	78,848		78,848		78,848
Other Auxiliary Operations	7090	82,983		82,983		82,983
Physical Property Acquisitions	7100	330,038		330,038	330,038	0
(05) Total		$61,530,208	$0	$61,530,208	$19,277,076	$42,253,132
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				45.62%		

(07) Notes

CALIFO[illegible]IA COMMUNITY COLLEGES
Annual F[illegible]ancial and Budget Report

Expe[illegible]litures by Activity

S10 Ge[illegible]eral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	7,574					7,574
Biological Sciences	0400	1,527,462	29,671	42,322	1,753		1,601,208
Business and Management	0500	1,213,941	361,216	85,074	26,231		1,686,462
Communications	0600	122,521	21,239	8,131	8,214		160,105
Computer and Information Science	0700	444,678	86,015	31,704	81,576		643,973
Education	0800	1,444,236	320,806	11,727	10,775		1,787,544
Engineering and Related Industrial Tech.	0900	1,669,430	396,443	137,696	108,851		2,312,420
Fine and Applied Arts	1000	1,010,847	46,320	29,731	15,423		1,102,321
Foreign Language	1100	522,134	3,290	301			525,725
Health	1200	2,909,112	352,794	83,265	26,996		3,372,167
Consumer Education and Home Economics	1300	952,346	130,761	48,515	7,597		1,139,219
Law	1400	9,779	2,597				12,376
Humanities (Letters)	1500	3,244,470	299,045	12,137	20,338		3,575,990
Library Science	1600	14,663					14,663
Mathematics	1700	1,834,451	24,095	2,163	3,691		1,864,400
Military Studies	1800						
Physical Sciences	1900	938,184	574,652	98,360	85,617		1,696,813
Psychology	2000	602,268	4,781	200			607,249
Public Affairs and Services	2100	649,476	245,575	485,949	33,327		1,414,327
Social Sciences	2200	1,767,010	106,576	6,263	9,843		1,889,692
Commercial Services	3000	216,674	25,030	50,280	7,652		299,636
Interdisciplinary Studies	4900	1,151,643	294,090	190,085	58,446		1,694,264
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	170,425					170,425
Subtotal - Instructional Activities	**599**	22,423,324	3,324,996	1,323,903	506,330		27,578,553

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

SUPPL[illegible]ENTAL DATA

For Actual Year: 2003-04

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,623,917	115,741	568,922		2,308,580
Course and Curriculum Development	6020		21,813	37,510	9,151		68,474
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		88,569				88,569
Subtotal - Instructional Administration	**6000**		1,734,299	153,251	578,073		2,465,623
Instructional Support Services (6100)							
Learning Center	6110	310,381	100,924	716	538		412,559
Library	6120		1,381,318	161,795	202,107		1,745,220
Media	6130		168,085	9,467	5,728		183,280
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		137,802	62,135	24,287		224,224
Subtotal - Instructional Support Services	**6100**	310,381	1,788,129	234,113	232,660		2,565,283
Admissions and Records	**6200**		1,249,482	24,509	5,669		1,279,660
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,521,830	8,578			1,530,408
Matriculation and Student Assessment	6320		426,419	15,497	55,580		497,496
Transfer Programs	6330		169,944	7,938	4,749		182,631
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,118,193	32,013	60,329		2,210,535

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual ancial and Budget Report

Expenditures by Activity

S10 G ral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,093,119	113,055	48,344		1,254,518
Extended Opportunity Prgms. & Services (EOPS)	6430		668,898	68,512	31,987		769,397
Health Services	6440		419,976	55,426			475,402
Student Personnel Administration	6450		680,203	17,791	17,200		715,194
Financial Aid Administration	6460		755,673	469,742	65,495		1,290,910
Job Placement Services	6470		455,679	44,733			500,412
Veterans Services	6480						
Miscellaneous Student Services	6490		420,326	97,279	16,475		534,080
Subtotal - Other Student Services	**6400**		4,493,874	866,538	179,501		5,539,913
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		836,297	333,176	23,891		1,193,364
Custodial Services	6530		1,253,691	128,645	18,057		1,400,393
Grounds Maintenance and Repairs	6550		574,999	141,880	4,331		721,210
Utilities	6570			2,406,656			2,406,656
Other Operation and Maintenance of Plant	6590		406,377	128,276	10,279		544,932
Subtotal - Operation and Maintenance of Plant	**6500**		3,071,364	3,138,633	56,558		6,266,555
Planning, Policymaking, and Coordination	**6600**		1,209,162	778,348	40,656		2,028,166

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		375,613	135,197	2,338		513,148
Fiscal Operations	6720		965,706	303,865	24,785		1,294,356
Human Resources Management	6730		720,135	21,825	3,546		745,506
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		473,645				473,645
Staff Development	6750		38,962	45,930	19,849		104,741
Staff Diversity	6760						
Logistical Services	6770		1,787,271	1,036,541	129,831		2,953,643
Management Information Systems	6780		504,791	1,541,096	(2,306)		2,043,581
Other General Institutional Support Services	6790		270,468	28,780	95,923		395,171
Subtotal - General Institutional Support Services	**6700**		5,136,591	3,113,234	273,966		8,523,791
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		124,848	66,328	9,671		200,847
Community Use Facilities	6830		48,880				48,880
Economic Development	6840		129,412	54,563	17,597		201,572
Other Community Svcs. & Economic Development	6890		270,567	447,199	499,621		1,217,387
Subtotal - Community Services	**6800**		573,707	568,090	526,889		1,668,686

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		41,271				41,271
Child Development Centers	6920		127,993	20,640	2,931		151,564
Farm Operations	6930						
Food Services	6940		171,630				171,630
Parking	6950						
Student and Co-curricular Activities	6960		332,040	178,925	36,144		547,109
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		672,934	199,565	39,075		911,574
Auxiliary Operations (7000)							
Contract Education	7010		38,127	40,721			78,848
Other Auxiliary Operations	7090		85,983	(3,000)			82,983
Subtotal - Auxiliary Operations	**7000**		124,110	37,721			161,831
Physical Property and Related Acquisitions (7100)	**7100**		115,655	27,652	186,731		330,038
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					2,117,118	2,117,118
Other Outgo	7330					1,107,949	1,107,949
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	22,733,705	25,612,496	10,497,570	2,686,437	3,225,067	64,755,275

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2004-2005
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	43,030
Avg. time p/account	10.6
Total Time (in minutes)	456118
Per Hour	60
Hours Worked (** **11**)	**7602.0**
***EFC 2**	20,623
Avg. time p/student	10.7
Total Time (in minutes)	220666
Per Hour	60
Hours Worked (** **12**)	**3677.8**
***EFC 1**	43,030
Avg. time p/question	12.9
Total Time (in minutes)	555087
Per Hour	60
Hours Worked (** **13**)	**9251.5**
***EFC 2**	20,623
Avg. time p/file	11.1
Total Time (in minutes)	228915
Per Hour	60
Hours Worked (** **14**)	**3815.3**
***EFC 4**	1,299
Avg. time p/account	9.6
Total Time (in minutes)	12470
Per Hour	60
Hours Worked (** **15**)	**207.8**
***EFC 5**	880
Avg. time p/student	8.5
Total Time (in minutes)	7480
Per Hour	60
Hours Worked (** **16**)	**124.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided, used *EFW 7)**	12,975
Avg. time p/question	1.7
Total Time (in minutes)	22058
Per Hour	60
Hours Worked **(** 21)**	**367.6**
***EFW 6 (Not provided, used *EFW 7)**	12,975
Avg. time p/application	2.1
Total Time (in minutes)	27248
Per Hour	60
Hours Worked **(** 22)**	**454.1**
***EFW 6 (Not provided, used *EFW 7)**	12,975
Avg. time p/evaluation	2.1
Total Time (in minutes)	27248
Per Hour	60
Hours Worked **(** 23)**	**454.1**
***EFW 8**	0
Avg. time p/application	3.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	12,975
Avg. time p/application	2.4
Total Time (in minutes)	31140
Per Hour	60
Hours Worked **(** 25)**	**519.0**
***EFW 8**	0
Avg. time p/application	2.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Aycock, Larry	Clerk III	2	5	10	2	2	1
Benjamin, Veada	Clerk III	10.2	9	8	10	10	
Cabrales, Joe	Director	20	20	30	20	20	20
Carmell, Melissa	Clerk I	10.2	10	10	12		
Diep, Lynn	Clerk II	10.2		10	12		
Galindo, Cecilia	Clerk I	11	10	15	11		
Im, Sophin	Clerk I	11	15	11	12	5	
Jaquez, Silvia	Clerk I	11		15	11		
Karr, Deborah	Clerk II	10	10	15	10	10	10
Molina, Herlinda	Clerk II	11	11	12	13	9	
Mullgrav, Brian	Clerk III	12	12	12	12	10	5
Ochoa, Virginia	Clerk III	10.2	10	12	11	10	12
Overturf, Kristin	Clerk I	10	10	15	10	10	10
Rubin, Cecile	Clerk II	11	10	15	11		
Ruiz, Kathryn	Clerk I	11	10	15	11		
Ulloa, Julie	Clerk II	11	10	15	11		
Villa, Raquel	Clerk I	10.2	10	10	12		5
Vines-Jackson, Yvonne	Clerk I	12	13	12	12		
Williams, Ruby	Clerk III	12	13	10	13		
Wood, Kathe	Coordinator	5	5	5	5	10	5
Average		**10.6**	**10.7**	**12.9**	**11.1**	**9.6**	**8.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Alanis, Eva	Financial Aid Specialist	2	2	1	3	1	2
Arciero, Esther	Assistant Director, Financial Aid	3	2	2	5	3	3
Berry, Patricia	Financial Aid Specialist I	2	2	5	3	2	3
Hall, Christinia	Clerical Assistant II	1	**0.08**	1	**0.5**	2.42	1
Perez-Santana, Maria	Financial Aid Specialist	2.5	2	3		2.5	2.5
Peterson, Cynthia	Clerical Assistant II	1	**0.08**	1	**0.5**	2.42	1
Roberts, Sandra	Financial Aid Specialist I	1	**0.08**	1	**0.5**	2.42	1
Scudder, Baybie F	Financial Aid Specialist I	2	2	3	3	2	3
Sharpe, Diedre	Clerical Assistant II	1	**0.08**	1	**0.5**	2.42	1
Soto, Margaret	Financial Aid Specialist I	2	2	3	2	4	3
Sousa, Juana	Financial Aid Coordinator	1	**0.08**	1	**0.5**	2.42	1
Trujillo, Maria	Financial Aid Specialist II	2	3	3	3	2	2
Average		**1.7**	**2.1**	**2.1**	**3.2**	**2.4**	**2.0**

Note: Times in **bold** were not included in the average for that specific Activity Code

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	42,007	42,041	44,445	46,239	48,992	39,431	43,030
EFC 2	1.8-1	2.	Paid Enrollment fees	24,895	24,713	28,989	28,563	26,891	19,591	20,623
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	17,112	17,328	15,456	17,676	22,101	19,840	22,407
EFC 4	1.8-2	1.	Delinquencies collections		2,246	527	802	658	2,118	1,299
EFC 5	1.8-2	2.	Refunds		326	468	448	602	755	880
EFW 6	1.8-3	1.	Waivers Requested	X						
EFW 7	1.8-3	2.	Waivers Approved	X -	8,684	10,466	11,798	12,870	11,849	12,975
EFW 8	1.8-3 (1-2)		Waivers Denied	X						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

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Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Crafton Hills For 2004-2005

Data Current As Of June 20, 2012 09:40:45

Download The Result In Comma Delimited Format

Headcount
8,027

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For San Bernardino For 2004-2005

Data Current As Of June 20, 2012 09:41:25

Download The Result In Comma Delimited Format

Headcount
19,394

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bdno Community College

Eva Alanis — Financial Aid Specialist I
Employee Name — Exact Position Title

San Bdno Valley College — 909 384-8689 — (12mo)/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	12	12	12	12	12	12	12	12
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	12	12	12	12	12	12	12	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SBCCD

Esther Arciero — Employee Name

Assistant Dir. of Financial Aid — Exact Position Title

SBVC/Financial Aid — College/Department/Location

909 384 8687 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: ~~FISCAL YEARS~~ Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	.5	.5	.5	.5	.5	.5	.5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	9	9	9	9	9	9	9	6
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0							
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	10	10	10	10	10	10	10	10
TOTALS:	21	19.5	19.5	19.5	19.5	19.5	19.5	16.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/16/05

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Joe Cabrales		Director, Admissions and Records
Employee Name		Exact Position Title
Crafton Hills College	909-389-3368	~~12 mo~~ 11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					40	30	30	40 **
B. Enrollment Waiver Process:								
** Info in Director's Ofc								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					40	30	30	0
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:					80	60	60	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joe Cabrales Date June 6, 2006

If you have any questions, please contact _____ at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Helena Johnson		Director, Admissions and Records
Employee Name		Exact Position Title
San Bernardino Valley College	909-384-8249	~~12mo~~/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							15	15
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate								
A. Enrollment Collection Process:							10	10
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:							25	25

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Helena Johnson Date: June 6, 2006

If you have any questions, please contact _____ at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

John Muskavitch — Employee Name

Director Financial Aid — Exact Position Title

Crafton Hills College/Financial Aid — College/Department/Location

(909)389-3269 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	0	3hr	2hr	2hr	2hr	2hr	2hr	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	0	3hr	4hr	4hr	2hr	2hr	2hr	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Muskavitch Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Juana Sousa — Employee Name

Financial Aid Coordinator — Exact Position Title

Crafton Hills College/Financial Aid (909)389-3224 — College/Department/Location / Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	1hr	8hr	1hr	1hr	1 hr	1hr	1hr	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	0	2hr	0	1hr	4hr	1hr	20hrs	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana M Sousa Date 5-4-06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R Clerk
Department/Location

Larry Aycock
Employee Name

Clerk STS
Exact Position Title

389-3663
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~~HH~~ 1					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Larry Aycock Date 5-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District — District

Admissions & Records/SBVC — Department/Location

Veada Benjamin — Employee Name

Clerk III — Exact Position Title

_____ Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veada Benjamin Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Joe Cabrales
Employee Name

Director
Exact Position Title

389-3368
Telephone #

12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joe Cabrales Date 5/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Melissa Carmell
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Carmell Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Lynn Diep
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynn Diep Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecilia Galindo
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecilia Galindo Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Sophin Im
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

(909) 384-8943
Telephone #

12mo/11mo/10mo/hrly (Work year length(circle))

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	11					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/08/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Silvia Jaquez
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Silvia Jaquez Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Com College District — District
A:R — Department/Location
Deborah Karr — Employee Name
A:R Clerk II — Exact Position Title
389-3370 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Karr Date 5/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Herlinda Molina/(Linda)
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	11					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Herlinda M. Molina Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Brian Mullgrav
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brian Mullgrav Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Virginia Ochoa/(Gina)
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
01-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Virginia Ochoa Date 5/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Comm College
District

Admissions & Records
Department/Location

Kristin Overturf
Employee Name

Adm R Clerk I
Exact Position Title

909 889-3367
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristin Overturf Date 5-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecile Rubin
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecile Rubin Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Kathryn Ruiz
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/ SBVC
Department/Location

Julie Ulloa
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie A. Ulloa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Raquel Villa
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raquel Villa Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Yvonne Vines-Jackson
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Y. Vines-Jackson Date 5-9-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the **average** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District
District

Admissions & Records/SBVC
Department/Location

Ruby Williams
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruby L. Williams Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD — District

A&R / CHC — Department/Location

Kathy Wood — Employee Name

Coordinator — Exact Position Title

389-3640 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K Wood Date 05/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community — District
Financial Aid SBVC — Department/Location
Eva Alanis — Employee Name
Financial Aid Specialist — Exact Position Title
(909) 384-8689 — Telephone #
(12mo/11mo/10mo/hrly) — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis — Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid / SBVC
Department/Location

Esther Arciero
Employee Name

Assistant Director of Financial Aid
Exact Position Title

909 384 8687
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid
Department/Location

Patricia Berry
Employee Name

Specialist I
Exact Position Title

909 384-8523
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Berry Date 05/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Christina Hall
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	948
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid Office / SBVC
Department/Location

Maria Perez-Santana
Employee Name

Financial Aid Specialist
Exact Position Title

(909) 384-8678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 1/2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Perez-Santana Date 05-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District
Financial Aid/Crafton Hills College — Department/Location

Cynthia Peterson — Employee Name
Clerical Assistant II — Exact Position Title

(909)389-3223 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 **03-04** 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	11.95
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Sandra Roberts
Employee Name

Financial Aid Specialist I
Exact Position Title

(909) 389-3242
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.51
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Roberts Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN BERNARDINO COMMUNITY
District COLLEGE DISTRICT –

FINANCIAL AID – SBVC
Department/Location

BAYRIE F SCHNEIDER
Employee Name

FINANCIAL AID SPECIALIST I
Exact Position Title

(909) 384-8696
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Diedre Sharpe
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.58
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D Hayes Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid SBVC
Department/Location

Margaret Soto
Employee Name

F.A. Spec I
Exact Position Title

(909) 384-8680
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Soto Date 5/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District

Financial Aid/Crafton Hills College — Department/Location

Juana Sousa — Employee Name

Financial Aid Coordinator — Exact Position Title

(909)389-3224 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	47
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .05				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 45s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana M. Sousa Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Fin. Aid ISBVC
Department/Location

Maria Trujillo
Employee Name

Fin. Aid Spec. II
Exact Position Title

384-8688
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Trujillo Date 5-15-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	7481	7530	8060	8060	9087	3863	6736	7034
Fall	16852	16791	17482	18710	19763	17925	18255	~~14508~~
Winter/ Intersession								17508
Spring	17674	17720	18903	19469	20142	17643	18039	15704
Total	42007	42041	44445	46239	48992	39431	43030	40246
2. Number of students who paid enrollment fees:								
Summer	4243	3390	5138	4760	4315	1248	2423	3943
Fall	10105	10218	11314	11515	11400	9410	9295	9926
Winter/ Intersession								
Spring	10547	11105	12537	12288	11176	8933	8905	8243
Total	24895	24713	28989	28563	26891	19591	20623	22112
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	3238	4140	2922	3300	4772	2615	4313	3091
Fall	6747	6573	6168	7195	8363	8515	8960	7582
Winter/ Intersession								
Spring	7127	6615	6366	7181	8966	8710	9134	7461
Total	17112	17328	15456	17676	22101	19840	22407	18134

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/18/06

Steven Sutorus
Employee Name: (print)

Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006
1. Summer	7481	7530	8060	8060	9087	3863	6736	7034
1. Fall	16852	16791	17482	18710	19763	17925	18255	17508
1. Winter								
1. Spring	17674	17720	18903	19469	20142	17643	18039	15704
1. Total	42007	42041	44445	46239	48992	39431	43030	40246
2. Summer	4243	3390	5138	4760	4315	1248	2423	3943
2. Fall	10105	10218	11314	11515	11400	9410	9295	9926
2. Winter								
2. Spring	10547	11105	12537	12288	11176	8933	8905	8243
2. Total	24895	24713	28989	28563	26891	19591	20623	22112
3. Summer	3238	4140	2922	3300	4772	2615	4313	3091
3. Fall	6747	6573	6168	7195	8363	8515	8960	7582
3. Winter								
3. Spring	7127	6615	6366	7181	8966	8710	9134	7461
3. Total	17112	17328	15456	17676	22101	19840	22407	18134

1.8-1

Final as of 5/12/06

As of Date/Time:	17-May-06	8:45:00
College	Term	Headcount
Crafton Hills	1998 Summer	1899
San Bernardino	1998 Summer	5582
		7481

As of Date/Time:	17-May-06	8:50:28
College	Term	Headcount
Crafton Hills	1999 Summer	1930
San Bernardino	1999 Summer	5600
		7530

As of Date/Time:	17-May-06	8:51:39
College	Term	Headcount
Crafton Hills	2000 Summer	1816
San Bernardino	2000 Summer	6244
		8060

As of Date/Time:	17-May-06	8:52:35
College	Term	Headcount
Crafton Hills	2001 Summer	1895
San Bernardino	2001 Summer	6165
		8060

As of Date/Time:	17-May-06	8:53:36
College	Term	Headcount
Crafton Hills	2002 Summer	2122
San Bernardino	2002 Summer	6965
		9087

As of Date/Time:	17-May-06	8:54:30
College	Term	Headcount
Crafton Hills	2003 Summer	1336
San Bernardino	2003 Summer	2527
		3863

As of Date/Time:	17-May-06	8:55:23
College	Term	Headcount
Crafton Hills	2004 Summer	1424
San Bernardino	2004 Summer	5312
		6736

As of Date/Time:	17-May-06	8:56:34
College	Term	Headcount
Crafton Hills	2005 Summer	1714
San Bernardino	2005 Summer	5320
		7034

As of Date/Time:	17-May-06	8:46:49
College	Term	Headcount
Crafton Hills	1998 Fall Term	5158
San Bernardino	1998 Fall Term	11694
		16852

As of Date/Time:	17-May-06	8:50:59
College	Term	Headcount
Crafton Hills	1999 Fall Term	5084
San Bernardino	1999 Fall Term	11707
		16791

As of Date/Time:	17-May-06	8:51:58
College	Term	Headcount
Crafton Hills	2000 Fall Semes	5154
San Bernardino	2000 Fall Semes	12328
		17482

As of Date/Time:	17-May-06	8:52:53
College	Term	Headcount
Crafton Hills	2001 Fall Semes	5268
San Bernardino	2001 Fall Semes	13442
		18710

As of Date/Time:	17-May-06	8:53:54
College	Term	Headcount
Crafton Hills	2002 Fall Semes	5513
San Bernardino	2002 Fall Semes	14250
		19763

As of Date/Time:	17-May-06	8:54:49
College	Term	Headcount
Crafton Hills	2003 Fall Term	5521
San Bernardino	2003 Fall Term	12404
		17925

As of Date/Time:	17-May-06	8:55:45
College	Term	Headcount
Crafton Hills	2004 Fall Term	5207
San Bernardino	2004 Fall Term	13048
		18255

As of Date/Time:	17-May-06	8:56:56
College	Term	Headcount
Crafton Hills	2005 Fall Term	4892
San Bernardino	2005 Fall Term	12616
		17508

As of Date/Time:	17-May-06	8:48:37	Totals
College	Term	Headcount	
Crafton Hills	1999 Spring S	5495	
San Bernardino	1999 Spring S	12179	**FY 98/99**
		17674	**42007**

As of Date/Time:	17-May-06	8:51:20	
College	Term	Headcount	
Crafton Hills	2000 Spring S	5287	
San Bernardino	2000 Spring S	12433	**FY 99/00**
		17720	**42041**

As of Date/Time:	17-May-06	8:52:18	
College	Term	Headcount	
Crafton Hills	2001 Spring S	5202	
San Bernardino	2001 Spring S	13701	**FY 00/01**
		18903	**44445**

As of Date/Time:	17-May-06	8:53:17	
College	Term	Headcount	
Crafton Hills	2002 Spring S	5460	
San Bernardino	2002 Spring S	14009	**FY 01/02**
		19469	**46239**

As of Date/Time:	17-May-06	8:54:12	
College	Term	Headcount	
Crafton Hills	2003 Spring S	5927	
San Bernardino	2003 Spring S	14215	**FY 02/03**
		20142	**48992**

As of Date/Time:	17-May-06	8:55:04	
College	Term	Headcount	
Crafton Hills	2004 Spring S	5640	
San Bernardino	2004 Spring S	12003	**FY 03/04**
		17643	**39431**

As of Date/Time:	17-May-06	8:56:04	
College	Term	Headcount	
Crafton Hills	2005 Spring S	5525	
San Bernardino	2005 Spring S	12514	**FY 04/05**
		18039	**43030**

	2006 Spring		**FY 05/06**
		15704	**40246**

EFCW 1.8-1 #1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	na	665	134	98	112	37	8	143
Fall	na	855	200	231	423	1880	1063	676
Winter/Intersession								
Spring	na	726	193	473	123	201	228	815
Total	na	2246	527	802	658	2118	1299	1634
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	na	6	21	27	26	15	35	34
Fall	na	196	273	304	396	534	681	469
Winter/Intersession								
Spring	na	124	174	117	180	206	164	153
Total	na	326	468	448	602	755	880	656

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Employee Signature: _____ Date 5/18/06

Employee Name: (print) Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
[illegible]al								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		10684	10966	11798	12870	11849	12915	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/5/06

Employee Name: (print) Steve Summers Position or Title Dir. Fin. Aid

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: SAN BERNARDINO Community College DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 1,873,359	$ 1,186,441	$ 1,328,981	$ 1,571,669	$ 2,186,440	$ 3,283,279	$ 5,085,845	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 23,729	$ 26,580	$ 31,433	$ 43,729	$ 65,686	$ 101,917	$
4C. % Enrollment Fees Waived (Line 4A x 7%)	$	$ 83,031						
Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring TOTAL CREDITS (LINE 4B/ENROLLMENT FEE)			111,725	142,879	194,321	208,085	218,380	
TOTAL x $0.91 per credit			$ 101,672	$ 130,020	$ 176,741	$ 190,085	$ 198,830	
ENROLLMENT FEE USED			$11	$11	$11	$15.69	$23.34	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 6/7/06

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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FY 03-04 - PER UNIT (11+18+18)/3 = 15.67 **

Schedule 6
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Productive Hourly Rates

Purpose: To calculate the average Productive Hourly Rates for Mid-Level Financial Aide Specialist and Mid-Level Admissions and Records Clerk
Source: Productive Hourly Rates submitted by college
Findings:

Financial Aid Specialist------Codes 21,22,23,24,25,26

Staff	Title	04-05	03-04	02-03	01-02	00-01	99-00	98-99
Alanis	Financial Aid Sp.	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Arciero	Asst. Director, Financial Aid	28.24	27.04	25.08	24.50	22.96	21.50	20.67
Berry	Financial Aid Sp. I	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Hall	Clerical Assistant II							
Perez-Santana	Financial Aid Sp.	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Peterson	Clerical Assistant II							
Roberts	Financial Aid Sp. I	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Scudder	Financial Aid Sp. I	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Sharpe	Clerical Assistant II							
Soto	Financial Aid Sp. I	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Sousa	Financial Aid Coordinator	28.13	27.04	25.08	24.40	22.37	20.63	21.61
Trujillo	Financial Aid Sp. II	24.08	22.94	21.21	20.77	20.38	20.05	18.77
		$24.99	$23.85	$22.07	$21.59	$20.89	$20.28	$19.30

Admissions and Records Clerk----Codes 11,12,13,14,15,16

Staff	Title	04-05	03-04	02-03	01-02	00-01	99-00	98-99
Aycock	Clerk III	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Benjamin	Clerk III	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Cabrales	Director	43.70	42.06					
Carmell	Clerk I	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Diep	Clerk II	22.20	21.13	19.53	19.13			
Galindo	Clerk I	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Im	Clerk I	22.20						
Jaquez	Clerk I	22.20	21.13	19.53	19.13			
Karr	Clerk II	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Molina	Clerk II	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Mullgrav	Clerk III	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Ochoa	Clerk III	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Overturf	Clerk I	22.20	21.13	19.53				
Rubin	Clerk II	22.20	21.13	19.53				
Ruiz	Clerk I	22.20	21.13					
Ulloa	Clerk II	22.20	21.13	19.53	19.13	18.79		
Villa	Clerk I	22.20	21.13	19.53	19.13	18.79		
Vines-Jackson	Clerk I	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Williams	Clerk III	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Wood	Coordinator	28.13	27.04	25.08	23.50	22.59	18.66	18.05
		23.57	22.54	19.86	19.42	19.08	18.77	17.19

Conclusion: Findings go forward to EFCW-2

ARCIERO	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	34429.94	5921.95	2134.65628	499.23413	0	8555.84041	2080	20.6662406
99-00	35814.32	6160.06	2220.48784	519.30764	0	8899.85548	2080	21.4971998
00-01	38246.88	6578.46	2371.30656	554.57976	0	9504.34632	2080	22.9573203
01-02	40836	7009.2	2531.832	592.122	0	10133.154	2080	24.504401
02-03	40836	7020	2531.832	592.122	1181.79384	11325.74784	2080	25.0777634
03-04	40836	8019.96	2531.832	592.122	4255.1112	15399.0252	2080	27.0360698
04-05	42468	8798.28	2633.016	615.786	4226.41536	16273.49736	2080	28.2411045
05-06								

CABRALES	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99								
99-00								
00-01								
01-02								
02-03	65172	7020	4040.664	944.994	1886.07768	13891.73568	2080	38.0114114
03-04	67308	8019.96	4173.096	975.966	7013.4936	20182.5156	2080	42.0627479
04-05	69999.3	8575.08	4339.9566	1014.98985	6966.33034	20896.35679	2080	43.699835
05-06								

JOHNSON	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99								
99-00								
00-01								
01-02								
02-03								
03-04								
04-05	63396	8575.08	3930.552	919.242	6309.16992	19734.04392	2080	39.9663873
05-06								

MUSKAVITCH	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	66168	5822.78	4102.416	959.436	0	10884.632	2080	37.0445346
99-00	70884	6237.79	4394.808	1027.818	0	11660.416	2080	39.6848154
00-01	74232	6532.42	4602.384	1076.364	0	12211.168	2080	41.5592154
01-02	77796	6798	4823.352	1128.042	0	12749.394	2080	43.5314394
02-03	79932	7020	4955.784	1159.014	2313.23208	15448.03008	2080	45.8557837
03-04	82020	7016.16	5085.24	1189.29	8546.484	21837.174	2080	49.9313337
04-05	87492	8575.08	5424.504	1268.634	8707.20384	23975.42184	2080	53.5901067
05-06								

SOUSA	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	36158.26	6020.36	2241.81212	524.29477	0	8786.45689	2080	21.908037
99-00	34524	5748.25	2140.488	500.598	0	8389.336	2080	20.6314115
00-01	37440	6233.76	2321.28	542.88	0	9097.92	2080	22.374
01-02	40836	6798	2531.832	592.122	0	9921.954	2080	24.4028625
02-03	40836	7020	2531.832	592.122	1181.79384	11325.74784	2080	25.0777634
03-04	40836	8019.96	2531.832	592.122	4255.1112	15399.0252	2080	27.0360698
04-05	42468	8575.08	2633.016	615.786	4226.41536	16050.29736	2080	28.1337968
05-06								

WOOD	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	29980	5378.4	1852.56	433.26	0	7664.22	2080	18.6601058
99-00	30900	5562	1915.8	448.05	0	7925.85	2080	18.656274
00-01	37392	6730.56	2318.304	542.184	0	9591.048	2080	22.5880638
01-02	38892	7009.2	2411.304	563.934	0	9984.438	2080	23.4962875
02-03	40836	7020	2531.832	592.122	1181.79384	11325.74784	2080	25.0777634
03-04	40836	8019.96	2531.832	592.122	4255.1112	15399.0252	2080	27.0360698
04-05	42468	8575.08	2633.016	615.786	4226.41536	16050.29736	2080	28.1337968
05-06								

MID FA SP	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	30341					8707.87	2080	18.7734952
99-00	32404					9299.95	2080	20.049976
00-01	32940					9453.78	2080	20.3816825
01-02	33564					9631.28	2080	20.7669615
02-03	33564					10558.96	2080	21.2129567
03-04	33564					14142.46	2080	22.9357981
04-05	34908					15176.78	2080	24.0792212
05-06								

MID AR CLK	Yrly Salary	Yrly H/W Benefits	FICA	MEDICARE	PERS	TOTAL BENEFITS	Annual Hours	Prod Rate
98-99	27178.47					8392.57	2080	17.1014615
99-00	29844					9215.83	2080	18.7787644
00-01	29844					9215.83	2080	18.7787644
01-02	30396					9384.8	2080	19.1253846
02-03	30396					10224.81	2080	19.5292637
03-04	30396					13564.67	2080	21.1348894
04-05	31808					14573.78	2080	22.2027788
05-06								

Schedule 5
San Bernardino Co unity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 1,539,976	$ 1,951,296	$ 1,789,558	$ 1,788,078	$ 2,466,701	$ 3,464,286
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 30,800	$ 39,026	$ 35,791	$ 35,762	$ 49,334	$ 69,286
							For comparison w/ above consultant report
1.8-4 line 4A	Enrollment Fees Waived	$ 1,186,141	$ 1,228,981	$ 1,571,669	$ 2,136,440	$ 3,273,239	$ 5,095,842
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,030	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		111,725	142,879	194,221	208,885	218,330
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 83,030					
1.8-4 5.	Credit Units Waived		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680
Total Enrollment Fee Waiver Offset	**Forward to Schedule 5A**	**$ 106,753**	**$ 126,250**	**$ 161,453**	**$ 219,470**	**$ 255,550**	**$ 300,597**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

04-05

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: San Bernardino
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$37,991,632	$32,833,168	$1,648,107	$34,481,275
ENROLL FEE ADMIN (2%)	107,079	92,088	14,991	107,079
APPRENTICE ALLOWANCE	865	492	373	865
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	2,545,921	2,189,492	356,429	2,545,921
S.F.A.A.	779,897	681,032	98,865	779,897
E.O.P.S.	1,034,099	889,325	144,774	1,034,099
C.A.R.E.	183,845	158,107	25,738	183,845
D.S.P.S.	955,716	817,898	137,818	955,716
STATE HOSPITALS	0	0	0	0
CALWORKS	717,738	608,655	109,083	717,738
MATRICULATION (CREDIT)	616,358	525,768	90,590	616,358
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	17,301	12,298	5,003	17,301
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	639,324	549,818	89,506	639,324
BLOCK GRANT (ONE-TIME)	303,287	260,827	42,460	303,287
ECON. DEVELOPMENT	356,375	293,583	5,772	299,355
TELECOMMUNICATIONS	122,612	63,119	59,493	122,612
TANF	166,157	140,811	25,346	166,157
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	0	0	0	0
VTEA TITLE I C	684,918	534,235	41,096	575,331
PLANT & INSTRUCTIONAL	340,185	292,560	47,625	340,185
PRIOR YEAR CORRECTION	-1,385,664	-1,399,656	13,992	-1,385,664
TOTAL	$46,177,645	$39,543,620	$2,957,061	$42,500,681

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch e 5A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waiver Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Total EFCW - Fee Waiver Costs	EFCW-1	$25,464.56	$31,206.47	$36,271.85	$40,348.07	$40,148.91	$46,496.78
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$106,753.00	$126,250.00	$161,453.00	$219,470.00	$255,550.00	$300,597.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$81,288.44	-$95,043.53	-$125,181.15	-$179,121.93	-$215,401.09	-$254,100.22
4								
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$25,464.56**	**$31,206.47**	**$36,271.85**	**$40,348.07**	**$40,148.91**	**$46,496.78**

Conclusion: The lower of the Waiver Costs from the EFCW-1 or Enrollment Fee Waiver offset from Schedule 5 will be carried to the EFCW-1 form for the Waiver offset.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

San Bernardino College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 31, 2006 12:37:40

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	805	266,480
BOGW - Part A-2 based on SSI recipient status	488	146,944
BOGW - Part A-3 based on general assistance recipient status	3	270
BOGW - Part A-4 based on Veteran's or National Guard dependent status	57	20,534
BOGW - Part B based on income standards	7,509	2,757,665
BOGW - Part C based on financial need	2,568	997,001

Total Unduplicated Count = 10,735
Total Amount = $ 4,188,894

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~~2,975~~

SBC = $ 4,188,894
CH = $ 906,948
Total = $ 5,095,842

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Crafton Hills College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 07, 2006 09:01:59

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	57	17,194
BOGW - Part A-2 based on SSI recipient status	53	12,129
BOGW - Part A-3 based on general assistance recipient status	8	3,347
BOGW - Part A-4 based on Veteran's or National Guard dependent status	27	10,316
BOGW - Part B based on income standards	1,186	463,697
BOGW - Part C based on financial need	1,005	400,265

Total Unduplicated Count = 2,240
Total Amount = $ 906,948

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

December 15, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4860

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
San Bernardino Community College District CC 36150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for San Bernardino Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

For Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC36150

(02) Claimant Name: San Bernardino Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 114 S Del Rosa Drive

City: San Bernardino | State: CA | Zip Code: 92408

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 1,031,800	(13) $ 938,012
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 938,012
Due from State	(08) $ 1,031,800	(17) $ 938,012
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,750
(23) EFCW-1, (04)(A)(1)(b)(f)	487
(24) EFCW-1, (04)(A)(2)(a)(f)	686,376
(25) EFCW-1, (04)(B)(1)(a)(f)	168
(26) EFCW-1, (04)(B)(1)(b)(f)	632
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	42,921
(29) EFCW-1, (04)(B)(2)(c)(f)	298
(30) EFCW-1, (06)	48
(31) EFCW-1, (07)	350,236
(32) EFCW-1, (09)	101,838
(33) EFCW-1, (10)	44,019
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 11-29-06

Robert Temple
Type or Print Name

Vice Chancellor Fiscal Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

San Bernardino Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,750.15	$ -	$ -	$ -	$ -	$ 2,750.15
b. Staff training (One time per employee)	$ 487.30	$ -	$ -	$ -	$ -	$ 487.30
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 686,375.85	$ -	$ -	$ -	$ -	$ 686,375.85
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 168.14	$ -	$ -	$ -	$ -	$ 168.14
b. Staff training (One time per employee)	$ 632.30	$ -	$ -	$ -	$ -	$ 632.30
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 42,921.34	$ -	$ -	$ -	$ -	$ 42,921.34
c. Reporting BOG fee waiver data to CCC	$ 297.60	$ -	$ -	$ -	$ -	$ 297.60
(05) Total Direct Costs	$ 733,632.68	$ -	$ -	$ -	$ -	$ 733,632.68

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	47.74%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 350,236.24
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,083,868.92

Cost Reduction	
(09) Less: Enrollment Fee Revenue offset	$ 101,838.00
(10) Less: Enrollment Fee Waiver offsets	$ 44,019.38
(11) Total Claimed Amount [Line (08) - {Line (09) + Line (10)}]	$ 938,011.54

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
emardino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Cabrales, Joe	Director, Admissions and Records	$50.48	40.0	$ 2,019.20				
Johnson, Helena	Director, Admissions and Records	$48.73	15.0	$ 730.95				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 2,750.15	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ernardino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Johnson, Helena Director, Admissions and Records	$48.73	10.0	$ 487.30				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 487.30	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions & Records Clerk Various	$25.06	7,399.7	$ 185,436.48				
Calculating total enrollment fee to be collected Admissions & Records Clerk Various	$25.06	5,217.5	$ 130,750.55				
Answering student's questions regarding enrollment fee collection Admissions & Records Clerk Various	$25.06	9,005.3	$ 225,672.82				
Updating written and computer records for enrollment fee information Admissions & Records Clerk Various	$25.06	5,412.5	$ 135,637.25				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions & Records Clerk Various	$25.06	261.4	$ 6,550.68				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions & Records Clerk Various	$25.06	92.9	$ 2,328.07				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 686,375.85	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Arciero, Esther	Assistant Director, Financial Aid	$29.76	0.5	$ 14.88				
Muskavitch, John	Director, Financial Aid	$61.75	2.0	$ 123.50				
Sousa, Juana	Financial Aid Coordinator	$29.76	1.0	$ 29.76				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 168.14	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ernardino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Alanis, Eva	Financial Aid Specialist	$25.04	12.0	$ 300.48				
Arciero, Esther	Assistant Director, Financial Aid	$29.76	6.0	$ 178.56				
Muskavitch, John	Director, Financial Aid	$61.75	2.0	$ 123.50				
Sousa, Juana	Financial Aid Coordinator	$29.76	1.0	$ 29.76				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 632.30	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ernardino Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Technicians Various	$24.57	357.8	$ 8,791.15				
Receiving waiver applications Financial Aid Technicians Various	$24.57	442.0	$ 10,859.94				
Evaluating waiver applications and verifying application documents Financial Aid Technicians Various	$24.57	442.0	$ 10,859.94				
Er[illegible]g approved application information into district records; providing student award letter Financial Aid Technicians Various	$24.57	505.1	$ 12,410.31				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 42,921.34	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ernardino Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Arciero, Esther Assistant Director, Financial Aid	$29.76	10.0	$ 297.60				

(05) Total ☒ Subtotal ☐	Page 1 of 1	$ 297.60	$ -	$ -	$ -	$ -

New 04/06

San Bernardino Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	7,399.70	Admissions & Records Clerks	Various	$25.06	$185,436.48	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	5,217.50	Admissions & Records Clerks	Various	$25.06	$130,750.55	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	9,005.30	Admissions & Records Clerks	Various	$25.06	$225,672.82	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,412.50	Admissions & Records Clerks	Various	$25.06	$135,637.25	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	261.40	Admissions & Records Clerks	Various	$25.06	$6,550.68	Collecting delinquent enrollment fees, or turning over accounts to collection agen	Calculating and collecting enrollment fees
05-06	92.90	Admissions & Records Clerks	Various	$25.06	$2,328.07	Providing refund of enrollment fees paid to students establishing fee waiver after	Calculating and collecting enrollment fees
	27,389.30	**Admissions & Records Clerks Total**			$686,375.85		
05-06	12.00	Alanis, Eva	Financial Aid Specialist	$25.04	$300.48	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	12.00	**Alanis, Eva Total**			$300.48		
05-06	0.50	Arciero, Esther	Assistant Director, Financial Aid	$29.76	$14.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
05-06	6.00	Arciero, Esther	Assistant Director, Financial Aid	$29.76	$178.56	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
05-06	10.00	Arciero, Esther	Assistant Director, Financial Aid	$29.76	$297.60	Reporting to College Chancellor number of and amounts provided for BOG fee w	Reporting BOG fee waiver data to CCC
	16.50	**Arciero, Esther Total**			$491.04		
05-06	40.00	Cabrales, Joe	Director, Admissions and Recor	$50.48	$2,019.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
	40.00	**Cabrales, Joe Total**			$2,019.20		
05-06	357.80	Financial Aid Technicians	Various	$24.57	$8,791.15	Answering student's questions regarding enrollment fee waivers/referring to appr	Waiving student fees
05-06	442.00	Financial Aid Technicians	Various	$24.57	$10,859.94	Receiving waiver applications	Waiving student fees
05-06	442.00	Financial Aid Technicians	Various	$24.57	$10,859.94	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	505.10	Financial Aid Technicians	Various	$24.57	$12,410.31	Entering approved application information into district records; providing student	Waiving student fees
	1,746.90	**Financial Aid Technicians Total**			$42,921.34		
05-06	15.00	Johnson, Helena	Director, Admissions and Recor	$48.73	$730.95	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
05-06	10.00	Johnson, Helena	Director, Admissions and Recor	$48.73	$487.30	Train district staff or attend training to implement procedures for enrollment fees	Staff training - enrollment fee collection
	25.00	**Johnson, Helena Total**			$1,218.25		
05-06	2.00	Muskavitch, John	Director, Financial Aid	$61.75	$123.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
05-06	2.00	Muskavitch, John	Director, Financial Aid	$61.75	$123.50	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	4.00	**Muskavitch, John Total**			$247.00		
05-06	1.00	Sousa, Juana	Financial Aid Coordinator	$29.76	$29.76	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
05-06	1.00	Sousa, Juana	Financial Aid Coordinator	$29.76	$29.76	Train district staff or attend training to implement procedures for waiver eligibility	Staff training - enrollment fee waiver
	2.00	**Sousa, Juana Total**			$59.52		
	29,235.70	**Grand Total**			$733,632.68		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$30,847,776		$30,847,776	$997,462	$29,850,314
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	2,650,607		2,650,607	731,010	1,919,597
Course and Curriculum Development	6020	49,286		49,286	4,303	44,983
Academic/Faculty Senate	6030	31,106		31,106		31,106
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	566,239		566,239	145,013	421,226
Library	6120	1,885,852		1,885,852	168,333	1,717,519
Media	6130	259,997		259,997	60,133	199,864
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	38,277		38,277		38,277
Other Instructional Support Services	6190	372,883		372,883	43,964	328,919
Admissions and Records	6200	1,373,179		1,373,179	12,512	1,360,667
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,896,762		1,896,762	13,560	1,883,202
Matriculation and Student Assessment	6320	526,151		526,151	27,866	498,285
Transfer Programs	6330	184,376		184,376	1,875	182,501
Career Guidance	6340	1,620		1,620		1,620
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,178,947		1,178,947	401	1,178,546
Subtotal		$41,863,058	$0	$41,863,058	$2,206,432	$39,656,626

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$814,193		$814,193	$31,470	$782,723
Health Services	6440	504,779		504,779	16,434	488,345
Student Personnel Admin.	6450	704,498		704,498	6,149	698,349
Financial Aid Administration	6460	1,580,679		1,580,679	125,889	1,454,790
Job Placement Services	6470	562,059		562,059	30,742	531,317
Veterans Services	6480					
Miscellaneous Student Services	6490	568,037		568,037	12,128	555,909
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,272,314		1,272,314	1,272,314	0
Custodial Services	6530	1,549,264		1,549,264	1,549,264	0
Grounds Maintenance and Repairs	6550	800,432		800,432	800,432	0
Utilities	6570	2,315,324		2,315,324	2,315,324	0
Other	6590	730,935		730,935	730,935	0
Planning, Policy Making, and Coordination	6600	2,181,665		2,181,665	2,181,665	0
General Inst. Support Services	6700					
Community Relations	6710	563,195		563,195	563,195	0
Fiscal Operations	6720	1,383,899		1,383,899	1,383,899	0
Human Resources Management	6730	1,021,896		1,021,896	1,021,896	0
Noninstructional Staff Benefits & Incentives	6740	215,394		215,394	215,394	0
Staff Development	6750	99,065		99,065	99,065	0
Staff Diversity	6760	2,551		2,551	2,551	0
Logistical Services	6770	3,172,346		3,172,346	3,172,346	0
Management Information Systems	6780	2,247,328		2,247,328	2,247,328	0
Subtotal		$64,152,911	$0	$64,152,911	$19,984,852	$44,168,059

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,276,048		1,276,048	1,276,048	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	216,714		216,714	427	216,287
Community Use of Facilities	6830	69,404		69,404		69,404
Economic Development	6840	283,107		283,107	3,598	279,509
Other Community Services & Economic Development	6890	374,268		374,268	19,815	354,453
Ancillary Services	6900					
Bookstores	6910	43,371		43,371		43,371
Child Development Center	6920	166,775		166,775		166,775
Farm Operations	6930					
Food Services	6940	181,357		181,357		181,357
Parking	6950					
Student and Co-curricular Activities	6960	550,977		550,977	2,851	548,126
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	93,123		93,123		93,123
Other Auxiliary Operations	7090	90,003		90,003		90,003
Physical Property Acquisitions	7100	771,129		771,129	771,129	0
(05) Total		$68,269,187	$0	$68,269,187	$22,058,720	$46,210,467
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				47.74%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	21,854					21,854
Biological Sciences	0400	1,686,706	28,797	58,709	1,383		1,775,595
Business and Management	0500	1,352,096	395,963	94,070	31,314		1,873,443
Communications	0600	144,847	15,202	21,916	4,056		186,021
Computer and Information Science	0700	429,915	114,081	49,509	83,875		677,380
Education	0800	1,605,917	343,686	15,773	9,916		1,975,292
Engineering and Related Industrial Tech.	0900	1,773,255	426,351	163,709	147,976		2,511,291
Fine and Applied Arts	1000	1,235,043	41,615	36,383	48,914		1,361,955
Foreign Language	1100	714,304	5,554	382			720,240
Health	1200	3,086,618	361,100	132,509	54,726		3,634,953
Consumer Education and Home Economics	1300	856,768	207,065	69,175	6,793		1,139,801
Law	1400	10,123	3,241				13,364
Humanities (Letters)	1500	3,555,507	310,083	15,432	1,152		3,882,174
Library Science	1600	18,855					18,855
Mathematics	1700	1,995,291	19,353	2,333	706		2,017,683
Military Studies	1800						
Physical Sciences	1900	1,166,282	454,258	156,302	515,716		2,292,558
Psychology	2000	556,201	2,178	-200			558,179
Public Affairs and Services	2100	817,273	256,991	598,077	37,399		1,709,740
Social Sciences	2200	2,041,159	74,665	7,312	7,070		2,130,206
Commercial Services	3000	205,496	22,004	29,015	6,074		262,589
Interdisciplinary Studies	4900	1,438,928	292,835	179,766	40,392		1,951,921
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	132,682					132,682
Subtotal - Instructional Activities	**599**	24,845,120	3,375,022	1,630,172	997,462		30,847,776

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen..tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,672,980	246,617	731,010		2,650,607
Course and Curriculum Development	6020		19,321	25,662	4,303		49,286
Academic/Faculty Senate	6030		31,106				31,106
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		1,723,407	272,279	735,313		2,730,999
Instructional Support Services (6100)							
Learning Center	6110	242,763	164,295	14,168	145,013		566,239
Library	6120		1,492,902	224,617	168,333		1,885,852
Media	6130		194,889	4,975	60,133		259,997
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150			38,277			38,277
Other Instructional Support Services	6190		294,258	34,661	43,964		372,883
Subtotal - Instructional Support Services	**6100**	242,763	2,146,344	316,698	417,443		3,123,248
Admissions and Records	**6200**		1,319,056	41,611	12,512		1,373,179
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,873,957	9,245	13,560		1,896,762
Matriculation and Student Assessment	6320		394,925	103,360	27,866		526,151
Transfer Programs	6330		170,834	11,667	1,875		184,376
Career Guidance	6340		1,620				1,620
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,441,336	124,272	43,301		2,608,909

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expen..tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,102,975	75,571	401		1,178,947
Extended Opportunity Prgms. & Services (EOPS)	6430		695,587	87,136	31,470		814,193
Health Services	6440		429,329	59,016	16,434		504,779
Student Personnel Administration	6450		677,312	21,037	6,149		704,498
Financial Aid Administration	6460		832,907	621,883	125,889		1,580,679
Job Placement Services	6470		463,312	68,005	30,742		562,059
Veterans Services	6480						
Miscellaneous Student Services	6490		455,570	100,339	12,128		568,037
Subtotal - Other Student Services	**6400**		4,656,992	1,032,987	223,213		5,913,192
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		825,417	320,881	126,016		1,272,314
Custodial Services	6530		1,392,886	148,011	8,367		1,549,264
Grounds Maintenance and Repairs	6550		622,575	154,349	23,508		800,432
Utilities	6570			2,315,324			2,315,324
Other Operation and Maintenance of Plant	6590		491,127	233,186	6,622		730,935
Subtotal - Operation and Maintenance of Plant	**6500**		3,332,005	3,171,751	164,513		6,668,269
Planning, Policymaking, and Coordination	**6600**		1,438,360	724,189	19,116		2,181,665

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
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Exper ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		410,279	149,347	3,569		563,195
Fiscal Operations	6720		1,032,434	345,626	5,839		1,383,899
Human Resources Management	6730		919,744	77,021	25,131		1,021,896
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		215,394				215,394
Staff Development	6750		28,716	60,041	10,308		99,065
Staff Diversity	6760			2,551			2,551
Logistical Services	6770		1,846,752	1,232,163	93,431		3,172,346
Management Information Systems	6780		512,961	1,704,865	29,502		2,247,328
Other General Institutional Support Services	6790		1,252,229	13,870	9,949		1,276,048
Subtotal - General Institutional Support Services	**6700**		6,218,509	3,585,484	177,729		9,981,722
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		141,354	74,933	427		216,714
Community Use Facilities	6830		69,404				69,404
Economic Development	6840		114,301	165,208	3,598		283,107
Other Community Svcs. & Economic Development	6890		266,133	88,320	19,815		374,268
Subtotal - Community Services	**6800**		591,192	328,461	23,840		943,493

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910		43,371				43,371
Child Development Centers	6920		166,775				166,775
Farm Operations	6930						
Food Services	6940		181,357				181,357
Parking	6950						
Student and Co-curricular Activities	6960		317,354	230,772	2,851		550,977
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		708,857	230,772	2,851		942,480
Auxiliary Operations (7000)							
Contract Education	7010		63,173	29,950			93,123
Other Auxiliary Operations	7090		90,003				90,003
Subtotal - Auxiliary Operations	**7000**		153,176	29,950			183,126
Physical Property and Related Acquisitions (7100)	**7100**		156,426	37,248	577,455		771,129
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					4,450,465	4,450,465
Student Aid	7320					925,052	925,052
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					5,375,517	5,375,517
TOTAL EXPENDITURES and OTHER OUTGO	**391**	25,087,883	28,260,682	11,525,874	3,394,748	5,375,517	73,644,704

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

*EFC 1	41,885
Avg. time p/account	10.6
Total Time (in minutes)	443981
Per Hour	60
Hours Worked (** 11)	**7399.7**
*EFC 2	29,257
Avg. time p/student	10.7
Total Time (in minutes)	313050
Per Hour	60
Hours Worked (** 12)	**5217.5**
*EFC 1	41,885
Avg. time p/question	12.9
Total Time (in minutes)	540317
Per Hour	60
Hours Worked (** 13)	**9005.3**
*EFC 2	29,257
Avg. time p/file	11.1
Total Time (in minutes)	324753
Per Hour	60
Hours Worked (** 14)	**5412.5**
*EFC 4	1,634
Avg. time p/account	9.6
Total Time (in minutes)	15686
Per Hour	60
Hours Worked (** 15)	**261.4**
*EFC 5	656
Avg. time p/student	8.5
Total Time (in minutes)	5576
Per Hour	60
Hours Worked (** 16)	**92.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided, used *EFW 7)**	12,628
Avg. time p/question	1.7
Total Time (in minutes)	21468
Per Hour	60
Hours Worked **(** 21)**	**357.8**
***EFW 6 (Not provided, used *EFW 7)**	12,628
Avg. time p/application	2.1
Total Time (in minutes)	26519
Per Hour	60
Hours Worked **(** 22)**	**442.0**
***EFW 6 (Not provided, used *EFW 7)**	12,628
Avg. time p/evaluation	2.1
Total Time (in minutes)	26519
Per Hour	60
Hours Worked **(** 23)**	**442.0**
***EFW 8**	0
Avg. time p/application	3.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	12,628
Avg. time p/application	2.4
Total Time (in minutes)	30307
Per Hour	60
Hours Worked **(** 25)**	**505.1**
***EFW 8**	0
Avg. time p/application	2.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Aycock, Larry	Clerk III	2.0	5.0	10.0	2.0	2.0	1.0
Benjamin, Veada	Clerk III	10.2	9.0	8.0	10.0	10.0	
Cabrales, Joe	Director	20.0	20.0	30.0	20.0	20.0	20.0
Carmell, Melissa	Clerk I	10.2	10.0	10.0	12.0		
Diep, Lynn	Clerk II	10.2		10.0	12.0		
Galindo, Cecilia	Clerk I	11.0	10.0	15.0	11.0		
Im, Sophin	Clerk I	11.0	15.0	11.0	12.0	5.0	
Jaquez, Silvia	Clerk I	11.0		15.0	11.0		
Karr, Deborah	Clerk II	10.0	10.0	15.0	10.0	10.0	10.0
Molina, Herlinda	Clerk II	11.0	11.0	12.0	13.0	9.0	
Mullgrav, Brian	Clerk III	12.0	12.0	12.0	12.0	10.0	5.0
Ochoa, Virginia	Clerk III	10.2	10.0	12.0	11.0	10.0	12.0
Overturf, Kristin	Clerk I	10.0	10.0	15.0	10.0	10.0	10.0
Rubin, Cecile	Clerk II	11.0	10.0	15.0	11.0		
Ruiz, Kathryn	Clerk I	11.0	10.0	15.0	11.0		
Ulloa, Julie	Clerk II	11.0	10.0	15.0	11.0		
Villa, Raquel	Clerk I	10.2	10.0	10.0	12.0		5.0
Vines-Jackson, Yvonne	Clerk I	12.0	13.0	12.0	12.0		
Williams, Ruby	Clerk III	12.0	13.0	10.0	13.0		
Wood, Kathe	Coordinator	5.0	5.0	5.0	5.0	10.0	5.0
Average		**10.6**	**10.7**	**12.9**	**11.1**	**9.6**	**8.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Alanis, Eva	Financial Aid Specialist	2.0	2.0	1.0	3.0	1.0	2.0
Arciero, Esther	Assistant Director, Financial Aid	3.0	2.0	2.0	5.0	3.0	3.0
Berry, Patricia	Financial Aid Specialist I	2.0	2.0	5.0	3.0	2.0	3.0
Hall, Christinia	Clerical Assistant II	1.0	**0.08**	1.0	**0.5**	2.4	1.0
Perez-Santana, Maria	Financial Aid Specialist	2.5	2.0	3.0		2.5	2.5
Peterson, Cynthia	Clerical Assistant II	1.0	**0.08**	1.0	**0.5**	2.4	1.0
Roberts, Sandra	Financial Aid Specialist I	1.0	**0.08**	1.0	**0.5**	2.4	1.0
Scudder, Baybie F	Financial Aid Specialist I	2.0	2.0	3.0	3.0	2.0	3.0
Sharpe, Diedre	Clerical Assistant II	1.0	**0.08**	1.0	**0.5**	2.4	1.0
Soto, Margaret	Financial Aid Specialist I	2.0	2.0	3.0	2.0	4.0	3.0
Sousa, Juana	Financial Aid Coordinator	1.0	**0.08**	1.0	**0.5**	2.4	1.0
Trujillo, Maria	Financial Aid Specialist II	2.0	3.0	3.0	3.0	2.0	2.0
Average		**1.7**	**2.1**	**2.1**	**3.2**	**2.4**	**2.0**

Note: Times in **bold** were not included in the average for that specific Activity Code

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	42,007	42,041	44,445	46,239	48,992	39,431	43,030	41,885
EFC 2	1.8-1	2.	Paid Enrollment fees	24,895	24,713	28,989	28,563	26,891	19,591	20,623	29,257
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	17,112	17,328	15,456	17,676	22,101	19,840	22,407	12,628
EFC 4	1.8-2	1.	Delinquencies collections		2,246	527	802	658	2,118	1,299	1,634
EFC 5	1.8-2	2.	Refunds		326	468	448	602	755	880	656
EFW 6	1.8-3	1.	Waivers Requested	X							
EFW 7	1.8-3	2.	Waivers Approved	X -	8,684	10,466	11,798	12,870	11,849	12,975	12,628
EFW 8	1.8-3 (1-2)		Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Crafton Hills For 2005-2006

Data Current As Of June 20, 2012 09:41:02

Download The Result In Comma Delimited Format

Headcount
7,243

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For San Bernardino For 2005-2006

Data Current As Of June 20, 2012 09:41:16

Download The Result In Comma Delimited Format

Headcount
19,477

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bdno Community College

Eva Alanis — Employee Name

Financial Aid Specialist I — Exact Position Title

San Bdno Valley College — College/Department/Location

909384-8689 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
^ Enrollment Collection Process:								
(B) Enrollment Waiver Process:	12	12	12	12	12	12	12	12
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	12	12	12	12	12	12	12	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SBCCD

Esther Arciero — Employee Name

Assistant Dir. of Financial Aid — Exact Position Title

SBVC/Financial Aid — College/Department/Location

909 384 8687 — Telephone #

(12mo)/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities: ~~FISCAL YEARS Report time in hours~~

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2	.5	.5	.5	.5	.5	.5	.5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
(B.) Enrollment Waiver Process:	9	9	9	9	9	9	9	6
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0							
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	10	10	10	10	10	10	10	10
TOTALS:	21	19.5	19.5	19.5	19.5	19.5	19.5	16.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/16/05

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Joe Cabrales		Director, Admissions and Records
Employee Name		Exact Position Title
Crafton Hills College	909-389-3368	~~12 mo~~ Term/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					40	30	30	40 **
B. Enrollment Waiver Process: ** Info in Director's Ofc								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					40	30	30	0
Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:					80	60	60	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date June 6, 2006

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Helena Johnson — Employee Name

Director, Admissions and Records — Exact Position Title

San Bernardino Valley College — College/Department/Location

909-384-8204 — Telephone #

12M/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update polices and procedures								
A Enrollment Collection Process							15	15
B Enrollment Waiver Process								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate								
A Enrollment Collection Process							10	10
B Enrollment Waiver Process								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:							25	25

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you identify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Helena Johnson — Date: June 6, 2006

If you have any questions, please contact: _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO: _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

John Muskavitch — Employee Name

Director, Financial Aid — Exact Position Title

Crafton Hills College/Financial Aid — College/Department/Location

(909) 389-3269 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								2 hrs
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
3. Enrollment Waiver Process:								2 hrs
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10/31/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Bernardino Community College District

Juana Sousa — Employee Name

Financial Aid Coordinator — Exact Position Title

Crafton Hills College/Financial Aid — College/Department/Location

(909) 389-3224 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								1 hrs
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								1 hrs
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana Sousa Date 10-31-06

If you have any questions, please contact _____ at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R Clerk
Department/Location

Larry Aycock
Employee Name

Clerk III
Exact Position Title

289-3663
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~~#A~~ 1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Larry Aycock Date 5-16-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District — District

Admissions & Records/SBVC — Department/Location

Veada Benjamin — Employee Name

Clerk III — Exact Position Title

_____ Telephone #

(12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veada Benjamin Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Joe Cabrales
Employee Name

Director
Exact Position Title

389-3368
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joe Cabrales Date 5/18/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Melissa Carmell
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Carmell Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Lynn Diep
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynn Diep Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecilia Galindo
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecilia Galindo Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Sophin Im
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

(909) 384-8943
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	11					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/08/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Silvia Jaquez
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Jaquez Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Com College District — District
A:R — Department/Location
Deborah Karr — Employee Name
A:R Clerk II — Exact Position Title
389-3370 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Karr — Date 5/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Herlinda Molina/(Linda)
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	11					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Herlinda M. Molina Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Brian Mullgrav
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brian Mullgrav Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Virginia Ochoa/(Gina)
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Virginia Ochoa Date 5/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Comm. College
District

Admissions & Records
Department/Location

Kristin Overturf
Employee Name

A & R Clerk I
Exact Position Title

909 889-8367
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristin Overturf Date 5-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecile Rubin
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecile Rubin Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Kathryn Ruiz
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/ SBVC
Department/Location

Julie Ulloa
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie A. Ulloa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Raquel Villa
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raquel Villa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Yvonne Vines-Jackson
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvonne Vines-Jackson Date 5-9-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District
District

Admissions & Records/SBVC
Department/Location

Ruby Williams
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruby L. Williams Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD — District

A&R/CHC — Department/Location

Kathe Wood — Employee Name

Coordinator — Exact Position Title

389-3640 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K Wood Date 05/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community — District
Financial Aid SBVC — Department/Location
Eva Alanis — Employee Name
Financial Aid Specialist — Exact Position Title
(909) 384-8689 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis — Date 5/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid / SBVC
Department/Location

Esther Arciero
Employee Name

Assistant Director of Financial Aid
Exact Position Title

909 384 8687
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/10/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD — District

Financial Aid — Department/Location

Patricia Berry — Employee Name

Specialist I — Exact Position Title

909 384-8523 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Berry — Date 05/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Christina Hall
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	948
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SRCCD
District

Financial Aid Office / SBVC
Department/Location

Maria Perez-Santana
Employee Name

Financial Aid Specialist
Exact Position Title

(909) 384-8678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 1/2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Y Santana Date 05-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District
Financial Aid/Crafton Hills College — Department/Location

Cynthia Peterson — Employee Name
Clerical Assistant II — Exact Position Title

(909)389-3223 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	11.95
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Sandra Roberts
Employee Name

Financial Aid Specialist I
Exact Position Title

(909)389-3242
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.51
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Roberts Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN BERNARDINO COMMUNITY COLLEGE DISTRICT
District

FINANCIAL AID - SBVC
Department/Location

BAYRIE F SCHNEIDER
Employee Name

FINANCIAL AID SPECIALIST I
Exact Position Title

(909) 384-8696
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Diedre Sharpe
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.38
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 m 25 s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid SBVC
Department/Location

Margaret Soto
Employee Name

F.A. Spec I
Exact Position Title

(909) 384-8680
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Margaret Soto Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Juana Sousa
Employee Name

Financial Aid Coordinator
Exact Position Title

(909)389-3224
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	47
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with *eligibility* standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana M. Sousa Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Fin. Aid ISBVC
Department/Location

Maria Trujillo
Employee Name

Fin. Aid Spec. II
Exact Position Title

384-8688
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Trujillo Date 5-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R Clerk
Department/Location

Larry Aycock
Employee Name

Clerk III
Exact Position Title

389-3663
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	~~##~~ 1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Larry Aycock Date 5-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District — District
Admissions & Records/SBVC — Department/Location

Veada Benjamin — Employee Name
Clerk III — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veada Benjamin — Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Joe Cabrales
Employee Name

Director
Exact Position Title

389-3368
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joe Cabrales Date 5/18/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Melissa Carmell
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Carmell Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Lynn Diep
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynn Diep Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecilia Galindo
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecilia Galindo Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Sophin Im
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

(909) 384-8943
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
01-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	11					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/08/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Silvia Jaquez
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Jaquez Date 5/8/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Com College District — District
A:R — Department/Location
Deborah Karr — Employee Name
A:R Clerk II — Exact Position Title
389-3370 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Karr Date 5/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Herlinda Molina/(Linda)
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	11					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual date or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Herlinda M. Molina Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Brian Mullgrav
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brian Mullgrav Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Virginia Ochoa/(Gina)
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Virginia Ochoa Date 5/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Comm. College
District

Admissions & Records
Department/Location

Kristin Overturf
Employee Name

Adm R Clerk I
Exact Position Title

909 889-3367
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristin Overturf Date 5-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecile Rubin
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecile Rubin Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Kathryn Ruiz
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
01-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/ SBVC
Department/Location

Julie Ulloa
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Julie A. Ulloa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Raquel Villa
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raquel Villa Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Yvonne Vines-Jackson
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvonne Vines-Jackson Date 5-9-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District
District

Admissions & Records/SBVC
Department/Location

Ruby Williams
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruby L. Williams Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Kathy Wood
Employee Name

Coordinator
Exact Position Title

389-3640
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K. Wood Date 05/19/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community — District
Financial Aid SBVC — Department/Location
Eva Alanis — Employee Name
Financial Aid Specialist — Exact Position Title
(909) 384-8689 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis — Date 5/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid / SBVC
Department/Location

Esther Arciero
Employee Name

Assistant Director of Financial Aid
Exact Position Title

909 384 8687
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid
Department/Location

Patricia Berry
Employee Name

Specialist I
Exact Position Title

909 384-8523
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Berry Date 05/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Christina Hall
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	9 4 8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid Office / SBVC
Department/Location

Maria Perez-Santana
Employee Name

Financial Aid Specialist
Exact Position Title

(909) 384-8678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 1/2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Perez-Santana Date 05-15-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District
Financial Aid/Crafton Hills College — Department/Location

Cynthia Peterson — Employee Name
Clerical Assistant II — Exact Position Title

(909)389-3223 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	11.95
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Sandra Roberts
Employee Name

Financial Aid Specialist I
Exact Position Title

(909) 389-3242
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.51
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Roberts Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN BERNARDINO COMMUNITY COLLEGE DISTRICT — District

FINANCIAL AID - SBVC — Department/Location

BAYRIE F SCHNEIDER — Employee Name

FINANCIAL AID SPECIALIST I — Exact Position Title

(909) 384-8696 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Diedre Sharpe
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	12.38
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D Sharpe Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid SBVC
Department/Location

Margaret Soto
Employee Name

F.A. Spec I
Exact Position Title

(909) 384-8680
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Soto Date 5/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District

Financial Aid/Crafton Hills College — Department/Location

Juana Sousa — Employee Name

Financial Aid Coordinator — Exact Position Title

(909)389-3224 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	47
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25 s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana M. Sousa Date 5-4-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Fin. Aid ISB VC
Department/Location

Maria Trujillo
Employee Name

Fin. Aid Spec. II
Exact Position Title

384-8688
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Trujillo Date 5-15-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								7,258
Fall								17,508
Winter/ Intersession								
Spring								17,119
Total								41,885
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								29,257
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								12,628

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/24/06

Steven Sutorus
Employee Name: (print)

Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								143
Fall								676
Winter/Intersession								
Spring								815
Total								1,634
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								34
Fall								469
Winter/Intersession								
Spring								153
Total								656

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/24/06

S___en Sutorus
Employee Name: (print)

Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								12,628

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/24/06

Steven Sutorus
Employee Name: (print)

Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$ 4,903,694
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$ 98,074
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring ---- **Total Credits (4A/Enr Fee)**								188,604
TOTAL x $0.91 per credit								171,629

$26/unit

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10/24/06

Steven Sutorus
Employee Name: (print)

Director, Internal Audits, SBCCD
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Schedule 6
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Productive Hourly Rates

Purpose: To calculate the average Productive Hourly Rates for Mid-Level Financial Aide Specialist and Mid-Level Admissions and Records Clerk
Source: Productive Hourly Rates submitted by college
Findings:

Financial Aid Specialist------Codes 21,22,23,24,25,26

Staff	Title	05-06	04-05	03-04	02-03	01-02	00-01	99-00	98-99
Alanis	Financial Aid Sp.	25.04	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Arciero	Asst. Director, Financial Aic	29.76	28.24	27.04	25.08	24.50	22.96	21.50	20.67
Berry	Financial Aid Sp. I	20.60	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Hall	Clerical Assistant II	19.21							
Perez-Santana	Financial Aid Sp.	25.04	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Peterson	Clerical Assistant II								
Roberts	Financial Aid Sp. I	25.04	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Scudder	Financial Aid Sp. I	25.04	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Sharpe	Clerical Assistant II	21.06							
Soto	Financial Aid Sp. I	22.71	24.08	22.94	21.21	20.77	20.38	20.05	18.77
Sousa	Financial Aid Coordinator	29.76	28.13	27.04	25.08	24.40	22.37	20.63	21.61
Trujillo	Financial Aid Sp. II	26.96	24.08	22.94	21.21	20.77	20.38	20.05	18.77
		$24.57	$24.99	$23.85	$22.07	$21.59	$20.89	$20.28	$19.30

Admissions and Records Clerk----Codes 11,12,13,14,15,16

Staff	Title	05-06	04-05	03-04	02-03	01-02	00-01	99-00	98-99
Aycock	Clerk III	25.05	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Benjamin	Clerk III	26.30	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Cabrales	Director	50.48	43.70	42.06					
Carmell	Clerk I	23.24	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Diep	Clerk II	24.42	22.20	21.13	19.53	19.13			
Galindo	Clerk I	23.24	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Im	Clerk I	20.08	22.20						
Jaquez	Clerk I	23.24	22.20	21.13	19.53	19.13			
Karr	Clerk II	24.42	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Molina	Clerk II	24.42	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Mullgrav	Clerk III	26.30	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Ochoa	Clerk III	26.30	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Overturf	Clerk I	22.13	22.20	21.13	19.53				
Rubin	Clerk II	24.42	22.20	21.13	19.53				
Ruiz	Clerk I	21.08	22.20	21.13					
Ulloa	Clerk II	24.42	22.20	21.13	19.53	19.13	18.79		
Villa	Clerk I	11.04	22.20	21.13	19.53	19.13	18.79		
Vines-Jackson	Clerk I	23.24	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Williams	Clerk III	27.63	22.20	21.13	19.53	19.13	18.79	18.78	17.10
Wood	Coordinator	29.76	28.13	27.04	25.08	23.50	22.59	18.66	18.05
		$25.06	$23.57	$22.54	$19.86	$19.42	$19.08	$18.77	$17.19

Conclusion: Findings go forward to EFCW-2

05-06

5/15/06
Preliminary #5

BOG060

BOG SUMMARY FOR TERM 060

CRAFTON UNDUPLICATED BOG STUDENTS: 2288
CRAFTON UNDUPLICATED NON-ZERO BOG STUDENTS: 2178
CRAFTON TOTAL BOG DOLLARS AWARDED: 913480
CRAFTON 055 BOG DOLLARS AWARDED: 66152 SM
CRAFTON 063 BOG DOLLARS AWARDED: 407788 SP
CRAFTON 057 BOG DOLLARS AWARDED: 439540 FA

VALLEY UNDUPLICATED BOG STUDENTS: 10386
VALLEY UNDUPLICATED NON-ZERO BOG STUDENTS: 9945
VALLEY TOTAL BOG DOLLARS AWARDED: 3974592
VALLEY 055 BOG DOLLARS AWARDED: 457959
VALLEY 057 BOG DOLLARS AWARDED: 1775632
VALLEY 063 BOG DOLLARS AWARDED: 1741001

Schedule 5
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-2006
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 1,539,976	$ 1,951,296	$ 1,789,558	$ 1,788,078	$ 2,466,701	$ 3,464,286	$ 3,519,469
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 30,800	$ 39,026	$ 35,791	$ 35,762	$ 49,334	$ 69,286	$ 70,389
1.8-4 line 4A	Enrollment Fees Waived	$ 1,186,141	$ 1,228,981	$ 1,571,669	$ 2,136,440	$ 3,273,239	$ 5,095,842	$ 4,903,694
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917	$ 98,074
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,030	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		111,725	142,879	194,221	208,885	218,330	188,603
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680	$ 171,629
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917	$ 98,074
(Line 4A X 7%)	7% of Fees Waived (99-00	$ 83,030						
1.8-4 5.	Credit Units Waived		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680	$ 171,629
Total Enrollment Fee Waiver Offset	**Forward to Schedule 5A**	**$ 106,753**	**$ 126,250**	**$ 161,453**	**$ 219,470**	**$ 255,550**	**$ 300,597**	**$ 269,703**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: San Bernardino
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$43,065,999	$38,208,914	$1,420,273	$39,629,187
EQUALIZATION	341,248	313,949	27,299	341,248
ENROLL FEE ADMIN (2%)	101,838	93,691	8,147	101,838
APPRENTICE ALLOWANCE	5,006	3,622	1,384	5,006
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	427,214	393,037	34,177	427,214
S.F.A.A.	643,015	674,373	-31,358	643,015
E.O.P.S.	1,087,466	1,000,468	86,998	1,087,466
C.A.R.E.	180,761	166,300	14,461	180,761
D.S.P.S.	1,058,424	973,750	84,674	1,058,424
STATE HOSPITALS	0	0	0	0
CALWORKS	724,238	651,119	73,119	724,238
MATRICULATION (CREDIT)	800,523	736,482	64,041	800,523
MATRIC. (NONCREDIT)	3,219	2,963	256	3,219
FAC.& STAFF DIVERSITY	18,688	15,801	2,887	18,688
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	639,324	588,178	51,146	639,324
TELECOMMUNICATIONS	120,299	67,524	52,775	120,299
PLANT & INSTRUCTIONAL	337,869	310,841	27,028	337,869
ECON. DEVELOPMENT	331,375	278,355	0	278,355
TANF	163,733	150,635	13,098	163,733
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	605,984	0	509,027	509,027
VTEA TITLE I C	605,984	381,770	127,257	509,027
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	-255,883	-258,199	2,316	-255,883
TOTAL	$51,006,324	$44,753,573	$2,569,005	$47,322,578

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc. ..le 5A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 294.83	$ 116.97	$ 123.71	$ 129.34	$ 140.42	$ 149.43	$ 168.14
2	Staff Training	(04)(B)(1)(b)	$ 594.40	$ 617.44	$ 668.26	$ 672.28	$ 645.54	$ 1,212.90	$ 632.30
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)							
4	Waiving student fees	(04)(B)(2)(b)	$ 24,360.33	$ 30,242.46	$ 35,234.88	$ 39,295.65	$ 39,092.55	$ 44,852.05	$ 42,921.34
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 215.00	$ 229.60	$ 245.00	$ 250.80	$ 270.40	$ 282.40	$ 297.60
6	EFCW - Fee Waiver Costs	Total	$ 25,464.56	$ 31,206.47	$ 36,271.85	$ 40,348.07	$ 40,148.91	$ 46,496.78	$ 44,019.38
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 106,753.00	$ 126,250.00	$ 161,453.00	$ 219,470.00	$ 255,550.00	$ 300,597.00	$ 269,703.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (81,288.44)	$ (95,043.53)	$ (125,181.15)	$ (179,121.93)	$ (215,401.09)	$ (254,100.22)	$ (225,683.62)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 25,464.56**	**$ 31,206.47**	**$ 36,271.85**	**$ 40,348.07**	**$ 40,148.91**	**$ 46,496.78**	**$ 44,019.38**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Crafton Hills College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 10:22:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	45	13,079
BOGW - Part A-2 based on SSI recipient status	65	17,592
BOGW - Part A-3 based on general assistance recipient status	2	208
BOGW - Part B based on income standards	1,413	534,724
BOGW - Part C based on financial need	842	332,187

Total Amount = $ 897,790

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

San Bernardino College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 20, 2012 10:22:32

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	719	240,085
BOGW - Part A-2 based on SSI recipient status	487	158,893
BOGW - Part A-3 based on general assistance recipient status	19	4,459
BOGW - Part B based on income standards	7,957	2,898,705
BOGW - Part C based on financial need	1,833	640,133

Total Amount = $ 3,942,275

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Sixten and Associates
Mandate Reimbursement Services

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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

February 1, 2008

Claim File Copy

CERTIFIED MAIL # 7006 3450 0000 3941 8710

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
San Bernardino Community College District CC 36150

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for San Bernardino Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

Claimant Identification Number: CC36150

(02) Claimant Name: San Bernardino Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 114 South Del Rosa Drive

City: San Bernardino | State: CA | Zip Code: 92408

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 1,108,500	(13) $ 1,007,802
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,007,802
Due from State	(08) $ 1,108,500	(17) $ 1,007,802
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	754,256
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	41,175
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	45
(31) EFCW-1, (07)	360,330
(32) EFCW-1, (09)	106,784
(33) EFCW-1, (10)	41,175
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1-25-08

Robert Temple
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

Sixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) C nt:	(02) Type of Claim		Fiscal Year
an Bernardino Community College District	Reimbursement	X	2006-2007
	Estimated		

)3) Leave Blank

irect Costs	Object Accounts					
4) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 754,255.92	$ -	$ -	$ -	$ -	$ 754,255.92
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P ing district policies & procedures fo IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 41,174.69	$ -	$ -	$ -	$ -	$ 41,174.69
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
Total Direct Costs	$ 795,430.61	$ -	$ -	$ -	$ -	$ 795,430.61

rect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	45.30%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 360,330.07
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,155,760.68
Reduction		
Less: Enrollment Fee Revenue offset		$ 106,784.00
Less: Enrollment Fee Waiver offsets		$ 41,174.69
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,007,801.99

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions and Records Cler Various	$26.40	7,594.2	$ 200,486.88				
Calculating total enrollment fee to be collected Admissions and Records Cler Various	$26.40	5,614.1	$ 148,212.24				
Answering student's questions regarding enrollment fee collection Admissions and Records Cler Various	$26.40	9,242.0	$ 243,988.80				
Updating written and computer records for enrollment fee information Admissions and Records Cler Various	$26.40	5,824.0	$ 153,753.60				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions and Records Cler Various	$26.40	206.2	$ 5,443.68				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions and Records Cler Various	$26.40	89.8	$ 2,370.72				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 754,255.92	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$25.87	326.0	$ 8,433.62				
Receiving waiver applications							
Financial Aid Office Staff Various	$25.87	402.7	$ 10,417.85				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$25.87	402.7	$ 10,417.85				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$25.87	460.2	$ 11,905.37				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 41,174.69	$ -	$ -	$ -	$ -

New 04/06

San Bernardino Community College District
308/95 ENROLLME E COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	7,594.20	Admissions and Records Clerks	Various	$26.40	$200,486.88	Referencing student accounts and records	Calculating and collecting enrollment fe
06-07	5,614.10	Admissions and Records Clerks	Various	$26.40	$148,212.24	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
06-07	9,242.00	Admissions and Records Clerks	Various	$26.40	$243,988.80	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
06-07	5,824.00	Admissions and Records Clerks	Various	$26.40	$153,753.60	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
06-07	206.20	Admissions and Records Clerks	Various	$26.40	$5,443.68	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fe
06-07	89.80	Admissions and Records Clerks	Various	$26.40	$2,370.72	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fe
	28,570.30	**Admissions and Records Clerks Total**			$754,255.92		
06-07	326.00	Financial Aid Office Staff	Various	$25.87	$8,433.62	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	402.70	Financial Aid Office Staff	Various	$25.87	$10,417.85	Receiving waiver applications	Waiving student fees
06-07	402.70	Financial Aid Office Staff	Various	$25.87	$10,417.85	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	460.20	Financial Aid Office Staff	Various	$25.87	$11,905.37	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,591.60	**Financial Aid Office Staff Total**			$41,174.69		
	30,161.90	**Grand Total**			$795,430.61		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$30,237,358		$30,237,358	$305,550	$29,931,808
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,430,577		4,430,577	40,624	4,389,953
Course and Curriculum Development	6020	38,154		38,154	6,001	32,153
Academic/Faculty Senate	6030	10,418		10,418		10,418
Other Instructional Administration & Instructional Governance	6090	76,805		76,805		76,805
Instructional Support Services	6100					
Learning Center	6110	445,943		445,943	576	445,367
Library	6120	1,970,525		1,970,525	181,017	1,789,508
Media	6130	274,773		274,773	59,563	215,210
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	313,833		313,833	36,348	277,485
Other Instructional Support Services	6190	611,820		611,820	313,707	298,113
Admissions and Records	6200	1,425,330		1,425,330	2,973	1,422,357
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,695,613		1,695,613	30,562	1,665,051
Matriculation and Student Assessment	6320	656,670		656,670	72,133	584,537
Transfer Programs	6330	199,415		199,415	18,341	181,074
Career Guidance	6340	245		245		245
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,285,707		1,285,707	14,933	1,270,774
Subtotal		$43,673,186	$0	$43,673,186	$1,082,328	$42,590,858

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$874,725		$874,725	$8,295	$866,430
Health Services	6440	528,803		528,803	2,735	526,068
Student Personnel Admin.	6450	896,861		896,861	17,981	878,880
Financial Aid Administration	6460	1,266,873		1,266,873	45,711	1,221,162
Job Placement Services	6470	481,573		481,573	5,610	475,963
Veterans Services	6480					
Miscellaneous Student Services	6490	650,435		650,435	-1,883	652,318
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,519,197		1,519,197	1,519,197	0
Custodial Services	6530	1,553,908		1,553,908	1,553,908	0
Grounds Maintenance and Repairs	6550	893,787		893,787	893,787	0
Utilities	6570	2,194,384		2,194,384	2,194,384	0
Other	6590	710,877		710,877	710,877	0
Planning, Policy Making, and Coordination	6600	3,007,519		3,007,519	3,007,519	0
General Inst. Support Services	6700					
Community Relations	6710	674,729		674,729	674,729	0
Fiscal Operations	6720	1,634,736		1,634,736	1,634,736	0
Human Resources Management	6730	1,004,564		1,004,564	1,004,564	0
Noninstructional Staff Benefits & Incentives	6740	180,072		180,072	180,072	0
Staff Development	6750	129,677		129,677	129,677	0
Staff Diversity	6760	10,694		10,694	10,694	0
Logistical Services	6770	3,673,567		3,673,567	3,673,567	0
Management Information Systems	6780	2,573,158		2,573,158	2,573,158	0
Subtotal		$68,133,325	$0	$68,133,325	$20,921,646	$47,211,679

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,119,369		1,119,369	1,119,369	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	180,538		180,538		180,538
Community Use of Facilities	6830	90,680		90,680		90,680
Economic Development	6840	642,528		642,528	32,114	610,414
Other Community Services & Economic Development	6890	22,129		22,129		22,129
Ancillary Services	6900					
Bookstores	6910	48,647		48,647		48,647
Child Development Center	6920	195,654		195,654		195,654
Farm Operations	6930					
Food Services	6940	189,264		189,264		189,264
Parking	6950					
Student and Co-curricular Activities	6960	471,649		471,649	10,527	461,122
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	260,700		260,700		260,700
Other Auxiliary Operations	7090	95,830		95,830		95,830
Physical Property Acquisitions	7100	279,365		279,365	279,365	0
(05) Total		$71,729,678	$0	$71,729,678	$22,363,021	$49,366,657
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				45.30%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	27,044					27,044
Environmental Sciences and Technologies	0300	5,678					5,678
Biological Sciences	0400	1,804,620	27,439	58,477	7,590		1,898,126
Business and Management	0500	1,493,693	20,657	77,465	8,819		1,600,634
Communications	0600	154,382	4,039	13,069	25,797		197,287
Information Technology	0700	398,229	23,740	44,119	26,706		492,794
Education	0800	1,739,323	48,321	16,393	3,631		1,807,668
Engineering and Industrial Tech.	0900	1,993,435	56,300	124,021	75,911		2,249,667
Fine and Applied Arts	1000	1,400,723	17,981	34,690	13,426		1,466,820
Foreign Language	1100	737,475	6,070				743,545
Health	1200	3,253,813	56,455	142,263	88,173		3,540,704
Family and Consumer Sciences	1300	1,032,874	578,594	260,453	16,755		1,888,676
Law	1400	8,328	2,786				11,114
Humanities (Letters)	1500	3,670,198	19,940	1,770	292		3,692,200
Library Science	1600	16,462					16,462
Mathematics	1700	2,216,403	26,450	2,071			2,244,924
Military Studies	1800						
Physical Sciences	1900	1,296,857	46,680	35,652	9,648		1,388,837
Psychology	2000	701,698	2,174				703,872
Public and Protective Services	2100	901,461	114,103	1,042,596	25,579		2,083,739
Social Sciences	2200	2,194,679	37,769	9,596	343		2,242,387
Commercial Services	3000	25,793					25,793
Interdisciplinary Studies	4900	1,722,375	73,083	14,703	2,880		1,813,041
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	96,346					96,346
Subtotal - Instructional Activities	**599**	26,891,889	1,162,581	1,877,338	305,550		30,237,358

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,237,555	152,398	40,624		4,430,577
Course and Curriculum Development	6020		4,741	27,412	6,001		38,154
Academic/Faculty Senate	6030		10,418				10,418
Other Instruct. Admin. & Instruct. Governance	6090		76,805				76,805
Subtotal - Instructional Administration	**6000**		4,329,519	179,810	46,625		4,555,954
Instructional Support Services (6100)							
Learning Center	6110	222,613	220,581	2,173	576		445,943
Library	6120		1,598,487	191,021	181,017		1,970,525
Media	6130		206,291	8,919	59,563		274,773
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150			277,485	36,348		313,833
Other Instructional Support Services	6190		192,435	105,678	313,707		611,820
Subtotal - Instructional Support Services	**6100**	222,613	2,217,794	585,276	591,211		3,616,894
Admissions and Records	**6200**		1,377,361	44,996	2,973		1,425,330
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,646,405	18,646	30,562		1,695,613
Matriculation and Student Assessment	6320		511,554	72,983	72,133		656,670
Transfer Programs	6330		169,722	11,352	18,341		199,415
Career Guidance	6340		245				245
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,327,926	102,981	121,036		2,551,943

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,184,166	86,608	14,933		1,285,707
Extended Opportunity Prgms. & Services (EOPS)	6430		790,979	75,451	8,295		874,725
Health Services	6440		449,850	76,218	2,735		528,803
Student Personnel Administration	6450		863,767	15,113	17,981		896,861
Financial Aid Administration	6460		964,426	256,736	45,711		1,266,873
Job Placement Services	6470		426,706	49,257	5,610		481,573
Veterans Services	6480						
Miscellaneous Student Services	6490		549,489	102,829	(1,883)		650,435
Subtotal - Other Student Services	**6400**		5,229,383	662,212	93,382		5,984,977
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		926,298	514,536	78,363		1,519,197
Custodial Services	6530		1,373,194	174,136	6,578		1,553,908
Grounds Maintenance and Repairs	6550		645,911	217,620	30,256		893,787
Utilities	6570			2,194,384			2,194,384
Other Operation and Maintenance of Plant	6590		529,906	178,066	2,905		710,877
Subtotal - Operation and Maintenance of Plant	**6500**		3,475,309	3,278,742	118,102		6,872,153
Planning, Policymaking, and Coordination	**6600**		1,831,763	1,140,001	35,755		3,007,519

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		422,065	245,163	7,501		674,729
Fiscal Operations	6720		1,210,964	412,535	11,237		1,634,736
Human Resources Management	6730		810,139	174,474	19,951		1,004,564
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		180,072				180,072
Staff Development	6750		48,024	76,360	5,293		129,677
Staff Diversity	6760			10,694			10,694
Logistical Services	6770		2,056,180	1,327,285	290,102		3,673,567
Management Information Systems	6780		545,886	1,806,916	220,356		2,573,158
Other General Institutional Support Services	6790		1,092,678	23,520	3,171		1,119,369
Subtotal - General Institutional Support Services	**6700**		6,366,008	4,076,947	557,611		11,000,566
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		114,758	65,780			180,538
Community Use Facilities	6830		90,680				90,680
Economic Development	6840		197,413	413,001	32,114		642,528
Other Community Svcs. & Economic Development	6890		13,322	8,807			22,129
Subtotal - Community Services	**6800**		416,173	487,588	32,114		935,875

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		48,647				48,647
Child Development Centers	6920		195,654				195,654
Farm Operations	6930						
Food Services	6940		189,264				189,264
Parking	6950						
Student and Co-curricular Activities	6960		283,252	177,870	10,527		471,649
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		716,517	177,870	10,527		905,214
Auxiliary Operations (7000)							
Contract Education	7010	2,575	229,711	28,414			260,700
Other Auxiliary Operations	7090		95,830				95,830
Subtotal - Auxiliary Operations	**7000**	2,575	325,541	28,414			356,530
Physical Property and Related Acquisitions (7100)	**7100**		181,473	2,843	95,049		279,365
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					8,635,599	8,635,599
Other Outgo	7330					951,878	951,878
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	27,117,077	29,957,648	12,645,018	2,009,935	9,587,477	81,317,155

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 3.
Findings:

***EFC 1**	42,986
Avg. time p/account	10.6
Total Time (in minutes)	455652
Per Hour	60
Hours Worked (** **11**)	**7594.2**
***EFC 2**	31,481
Avg. time p/student	10.7
Total Time (in minutes)	336847
Per Hour	60
Hours Worked (** **12**)	**5614.1**
***EFC 1**	42,986
Avg. time p/question	12.9
Total Time (in minutes)	554519
Per Hour	60
Hours Worked (** **13**)	**9242.0**
***EFC 2**	31,481
Avg. time p/file	11.1
Total Time (in minutes)	349439
Per Hour	60
Hours Worked (** **14**)	**5824.0**
***EFC 4**	1,289
Avg. time p/account	9.6
Total Time (in minutes)	12374
Per Hour	60
Hours Worked (** **15**)	**206.2**
***EFC 5**	634
Avg. time p/student	8.5
Total Time (in minutes)	5389
Per Hour	60
Hours Worked (** **16**)	**89.8**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
- Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided, used *EFW 7)**	11,505
Avg. time p/question	1.7
Total Time (in minutes)	19559
Per Hour	60
Hours Worked **(** 21)**	**326.0**
***EFW 6 (Not provided, used *EFW 7)**	11,505
Avg. time p/application	2.1
Total Time (in minutes)	24161
Per Hour	60
Hours Worked **(** 22)**	**402.7**
***EFW 6 (Not provided, used *EFW 7)**	11,505
Avg. time p/evaluation	2.1
Total Time (in minutes)	24161
Per Hour	60
Hours Worked **(** 23)**	**402.7**
***EFW 8**	
Avg. time p/application	3.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	11,505
Avg. time p/application	2.4
Total Time (in minutes)	27612
Per Hour	60
Hours Worked **(** 25)**	**460.2**
***EFW 8**	
Avg. time p/application	2.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 04-05 timestudy.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Aycock, Larry	Clerk III	2.0	5.0	10.0	2.0	2.0	1.0
Benjamin, Veada	Clerk III	10.2	9.0	8.0	10.0	10.0	
Cabrales, Joe	Director	20.0	20.0	30.0	20.0	20.0	20.0
Carmeli, Melissa	Clerk I	10.2	10.0	10.0	12.0		
Diep, Lynn	Clerk II	10.2		10.0	12.0		
Galindo, Cecilia	Clerk I	11.0	10.0	15.0	11.0		
Im, Sophin	Clerk I	11.0	15.0	11.0	12.0	5.0	
Jaquez, Silvia	Clerk I	11.0		15.0	11.0		
Karr, Deborah	Clerk II	10.0	10.0	15.0	10.0	10.0	10.0
Molina, Herlinda	Clerk II	11.0	11.0	12.0	13.0	9.0	
Mulligrav, Brian	Clerk III	12.0	12.0	12.0	12.0	10.0	5.0
Ochoa, Virginia	Clerk III	10.2	10.0	12.0	11.0	10.0	12.0
Overturf, Kristin	Clerk I	10.0	10.0	15.0	10.0	10.0	10.0
Rubin, Cecile	Clerk II	11.0	10.0	15.0	11.0		
Ruiz, Kathryn	Clerk I	11.0	10.0	15.0	11.0		
Ulloa, Julie	Clerk II	11.0	10.0	15.0	11.0		
Villa, Raquel	Clerk I	10.2	10.0	10.0	12.0		5.0
Vines-Jackson, Yvonne	Clerk I	12.0	13.0	12.0	12.0		
Williams, Ruby	Clerk III	12.0	13.0	10.0	13.0		
Wood, Kathe	Coordinator	5.0	5.0	5.0	5.0	10.0	5.0
Average		**10.6**	**10.7**	**12.9**	**11.1**	**9.6**	**8.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 206-2007
Average PHR

Purpose: To calculate the average PHR for enrollment fee collection office staff.
Source: San Bernardino CCD PHR's.
Findings:

Staff	Title	2006-07
Aycock, Larry	Clerk III	$ 27.38
Benjamin, Veada	Clerk III	$ 27.38
Cabrales, Joe	Director	$ 56.27
Carmell, Melissa	Clerk I	$ 24.18
Diep, Lynn	Clerk II	$ 25.41
Galindo, Cecilia	Clerk I	$ 24.18
Im, Sophin	Clerk I	$ 21.93
Jaquez, Silvia	Clerk I	$ 24.18
Karr, Deborah	Clerk II	$ 26.76
Molina, Herlinda	Clerk II	$ 25.41
Mullgrav, Brian	Clerk III	$ 27.38
Ochoa, Virginia	Clerk III	$ 27.38
Overturf, Kristin	Clerk I	$ 25.41
Rubin, Cecile	Clerk II	$ 25.41
Ruiz, Kathryn	Clerk I	$ 23.02
Ulloa, Julie	Clerk II	$ 25.41
Villa, Raquel	Clerk I	$ 11.48
Vines-Jackson, Yvonne	Clerk I	$ 24.18
Williams, Ruby	Clerk III	$ 24.18
Wood, Kathe	Coordinator	$ 30.97
Average		**$ 26.40**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 Through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: 2005-2006 EFCW 1.7-3. Used 04-05 timestudy.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Alanis, Eva	Financial Aid Specialist	2.0	2.0	1.0	3.0	1.0	2.0
Arciero, Esther	Assistant Director, Financial Aid	3.0	2.0	2.0	5.0	3.0	3.0
Berry, Patricia	Financial Aid Specialist I	2.0	2.0	5.0	3.0	2.0	3.0
Hall, Christinia	Clerical Assistant II	1.0	*0.08	1.0	*0.5	2.4	1.0
Perez-Santana, Maria	Financial Aid Specialist	2.5	2.0	3.0		2.5	2.5
Peterson, Cynthia	Clerical Assistant II	1.0	*0.08	1.0	*0.5	2.4	1.0
Roberts, Sandra	Financial Aid Specialist I	1.0	*0.08	1.0	*0.5	2.4	1.0
Scudder, Baybie F	Financial Aid Specialist I	2.0	2.0	3.0	3.0	2.0	3.0
Sharpe, Diedre	Clerical Assistant II	1.0	*0.08	1.0	*0.5	2.4	1.0
Soto, Margaret	Financial Aid Specialist I	2.0	2.0	3.0	2.0	4.0	3.0
Sousa, Juana	Financial Aid Coordinator	1.0	*0.08	1.0	*0.5	2.4	1.0
Trujillo, Maria	Financial Aid Specialist II	2.0	3.0	3.0	3.0	2.0	2.0
Average		**1.7**	**2.1**	**2.1**	**3.2**	**2.4**	**2.0**

Note: * times were not included in the average for that specific Activity Code

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Average PHR

Purpose: To calculate the average PHR for Financial Aifd Office staff.
Source: San Bernardino CCD PHR list.
Findings:

Staff	Title	2006-07
Alanis, Eva	Financial Aid Specialist	$ 26.07
Arciero, Esther	Assistant Director, Financial Aid	$ 32.91
Berry, Patricia	Financial Aid Specialist I	$ 22.51
Hall, Christinia	Clerical Assistant II	$ 23.06
Perez-Santana, Maria	Financial Aid Specialist	$ 26.07
Peterson, Cynthia	Clerical Assistant II	$ 23.06
Roberts, Sandra	Financial Aid Specialist I	$ 26.07
Scudder, Baybie F	Financial Aid Specialist I	$ 26.07
Sharpe, Diedre	Clerical Assistant II	$ 21.90
Soto, Margaret	Financial Aid Specialist I	$ 23.64
Sousa, Juana	Financial Aid Coordinator	$ 30.97
Trujillo, Maria	Financial Aid Specialist II	$ 28.06
Average		**$ 25.87**

Conclusion: findings go forward to EFCW-2.

Schedule 4
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1. Enrolled Students	42,007	42,041	44,445	46,239	48,992	39,431	43,030	41,885	42,986
EFC 2	1.8-1	2. Paid Enrollment fees	24,895	24,713	28,989	28,563	26,891	19,591	20,623	29,257	31,481
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	17,112	17,328	15,456	17,676	22,101	19,840	22,407	12,628	11,505
EFC 4	1.8-2	1. Delinquencies collections		2,246	527	802	658	2,118	1,299	1,634	1,289
EFC 5	1.8-2	2. Refunds		326	468	448	602	755	880	656	634
EFW 6	1.8-3	1. Waivers Requested	X								
EFW 7	1.8-3	2. Waivers Approved	X -	8,684	10,466	11,798	12,870	11,849	12,975	12,628	11,505
EFW 8	1.8-3 (1-2)	Waivers Denied	X								

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Crafton Hills
For 2006 Summer Term

Data Current As Of January 18, 2008 02:11:18

Total Headcount	1,775

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	CRAFTON	SBC
Summer	1,775	5,101
Fall	5,155	12,340
Spring	6,033	12,582
total	12,963	30,023

total
42,986

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Bernardino
For 2006 Summer Term

Data Current As Of January 18, 2008 02:11:36

Total Headcount	5,101

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Crafton Hills For 2006 Fall Term

Data Current As Of January 18, 2008 02:11:08

Total Headcount	5,155

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Bernardino
For 2006 Fall Term

Data Current As Of January 18, 2008 02:11:47

Total Headcount	12,340

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Crafton Hills
For 2007 Spring Semester

Data Current As Of January 18, 2008 02:10:51

Total Headcount	6,033

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Bernardino For 2007 Spring Semester

Data Current As Of January 18, 2008 02:12:02

Total Headcount	12,582

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R Clerk
Department/Location

Larry Aycock
Employee Name

Clerk STS
Exact Position Title

389-3663
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-16-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District — District
Admissions & Records/SBVC — Department/Location

Veada Benjamin — Employee Name
Clerk III — Exact Position Title

Telephone # — (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veada Benjamin — Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Joe Cabrales
Employee Name

Director
Exact Position Title

389-3368
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	30					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joe Cabrales Date 5/18/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Melissa Carmell
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Carmell Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Lynn Diep
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lynn Diep Date 5/8/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS; ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecilia Galindo
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Cecilia Galindo Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Sophin Im
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

(909) 384-8943
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
01-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	11					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature _____ Date 05/08/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Silvia Jaquez
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Salto-Jaquez Date 5/8/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Com College District — District
A:R — Department/Location
Deborah Karr — Employee Name
A:R Clerk II — Exact Position Title
389-3370 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Deborah Karr Date 5/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District

Admissions & Records/SBVC Department/Location

Herlinda Molina/(Linda) Employee Name

Admissions/Records/Registration Clerk II Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	11					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	9					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Herlinda M. Molina Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Brian Mullgrav
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	12					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

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Employee Signature Brian Mullgrav Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Virginia Ochoa/(Gina)
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	12					

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Employee Signature Virginia Ochoa Date 5/9/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Comm College
District

Admissions & Records
Department/Location

Kristin Overturf
Employee Name

A & R Clerk I
Exact Position Title

909 889-3367 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristin Overturf Date 5-17-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Cecile Rubin
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS)	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cecile Rubin Date 5-8-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Kathryn Ruiz
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/ SBVC
Department/Location

Julie Ulloa
Employee Name

Admissions/Records/Registration Clerk II
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	11					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	11					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Julie A. Ulloa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Raquel Villa
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
01-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10.2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raquel Villa Date 5-8-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College
District

Admissions & Records/SBVC
Department/Location

Yvonne Vines-Jackson
Employee Name

Admissions/Records/Registration Clerk I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	12					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yvonne L. Vines-Jackson Date 5-9-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community District
District

Admissions & Records/SBVC
Department/Location

Ruby Williams
Employee Name

Admissions/Records/Registration Clerk III
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	12					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	13					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	13					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruby L. Williams Date 5/8/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

A&R / CHC
Department/Location

Kathy Wood
Employee Name

Coordinator
Exact Position Title

389-3640
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature K Wood Date 05/17/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community — District

Financial Aid SBVC — Department/Location

Eva Alanis — Employee Name

Financial Aid Specialist — Exact Position Title

(909) 384-8689 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Eva M Alanis — Date 5/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid / SBVC
Department/Location

Esther Arciero
Employee Name

Assistant Director of Financial Aid
Exact Position Title

909 384 8687
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00 00-01 01-02 02-03 03-04 04-05 05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Esther Arciero Date 5/16/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid
Department/Location

Patricia Berry
Employee Name

Specialist I
Exact Position Title

909 384-8523
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Berry Date 05/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District
Financial Aid/Crafton Hills College — Department/Location
Christina Hall — Employee Name
Clerical Assistant II — Exact Position Title
(909)389-3223 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	9
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid Office / SBVC
Department/Location

Maria Perez-Santana
Employee Name

Financial Aid Specialist
Exact Position Title

909) 384-8678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 1/2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 1/2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 1/2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Santana Date 05-15-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District
Financial Aid/Crafton Hills College — Department/Location

Cynthia Peterson — Employee Name
Clerical Assistant II — Exact Position Title

(909)389-3223 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	11.95
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m 25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Sandra Roberts
Employee Name

Financial Aid Specialist I
Exact Position Title

(909) 389-3242
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	10.5
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .05				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Roberts Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN BERNARDINO COMMUNITY COLLEGE DISTRICT
District

FINANCIAL AID - SBVC
Department/Location

RAYBIE F SCHNADER
Employee Name

FINANCIAL AID SPECIALIST I
Exact Position Title

(909) 384-8696
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/25/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District
District

Financial Aid/Crafton Hills College
Department/Location

Diedre Sharpe
Employee Name

Clerical Assistant II
Exact Position Title

(909)389-3223
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	12.38
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

"If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Financial Aid SBVC
Department/Location

Margaret Soto
Employee Name

F.A. Spec I
Exact Position Title

(909) 384-8680
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margaret Soto Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Bernardino Community College District — District

Financial Aid/Crafton Hills College — Department/Location

Juana Sousa — Employee Name

Financial Aid Coordinator — Exact Position Title

(909)389-3224 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	47
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 sec .08				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	30 sec .50				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2m25s 2.42				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juana M. Sousa Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SBCCD
District

Fin. Aid SBVC
Department/Location

Maria Trujillo
Employee Name

Fin. Aid Spec. II
Exact Position Title

384-8688
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Trujillo Date 5-15-06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		6,876	
Fall		17,495	
Winter/ Intersession			
Spring		18,615	
Total		42,986	
2. Number of students who paid enrollment fees:			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		31,481	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		11,505	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11/28/2007

Steven Sutorus
Employee Name: (print)

Director, Internal Audits
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

RECEIVED
NOV 30 2007
BY: _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		xx	
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		37	
Fall		401	
Winter/Intersession			
Spring		196	
Total		634	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11/28/2007

Steven Sutorus
Employee Name: (print)

Director, Internal Audits
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Subj: **FW: EFCW Data 06-07 (SBCCD)**
Date: 12/5/2007 11:14:53 A.M. Pacific Standard Time
From: ssutorus@sbccd.cc.ca.us
To: Smpsixten@aol.com

ergio,

lere's an update to the 1.8 form:

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

istrict: San Bernardino Community College District

he following cost accounting statistics will be used to calculate your reimbursement.
lease report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
Number of enrollment fee accounts receivable requiring collection			
ummer		55	
all		818	
/inter/intersession			
pring		416	
otal		1,289	

1.8-7
FY

ber

ve Sutorus
ctor, Internal Audits
Bernardino Community College District
S. Del Rosa Dr.
Bernardino, CA 92408
(909) 382-4081
(909) 382-0116
orus@sbccd.cc.ca.us

---

m: Sutorus, Steven
t: Friday, November 30, 2007 3:57 PM
'Smpsixten@aol.com'
ject: EFCW Data 06-07 (SBCCD)

gio,

ched is our data so far. Thanks for your help.

erely,

erely,

e Sutorus
ctor, Internal Audits
Bernardino Community College District
S. Del Rosa Dr.
Bernardino, CA 92408
909) 382-4081
909) 382-0116
oru sbccd.cc.ca.us

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			11,505

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11/28/2007

Steven Sutorus
Employee Name: (print)

Director, Internal Audits
Position or Title

If you have any questions, please contact _____, at _____.

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BY: _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: San Bernardino Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$4,009,151	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$80,183	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer (4A/enr fee) 62,513+406,422=468,935/$26		18,036	
B. Fall 398,473+1,602,713=2,001,186/$26		76,969	
C. Winter/Intersession			
D. Spring 313,250+1,225,780=1,539,030/$20		76,951	
TOTAL x $0.91 per credit		156,480	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11/28/2007

Steven Sutorus
Employee Name: (print)

Director, Internal Audits
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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San B rdino CCD
Prod Hourly Rates

NAME	Monthly	04/05	BEN	S+B	Hours	04/05 PHR	Monthly	05/06	BEN	S+B	Hours	05/06 PHR	Monthly	06/07	BEN	S+B	Hours	06/07 PHR
Avg Adm Asst		$50,052	$10,511	$60,563	1800	**$33.65**	$4,565	$54,780	$11,504	$66,284	1800	**$36.82**	$4,749	$56,988	$11,967	$68,955	1800	**$38.31**
Avg Dean		$93,711	$19,679	$113,390	1800	**$62.99**	$8,343	$100,116	$21,024	$121,140	1800	**$67.30**	$8,904	$106,848	$22,438	$129,286	1800	**$71.83**
Avg Dir		$65,581	$13,772	$79,353	1800	**$44.09**	$6,041	$72,492	$15,223	$87,715	1800	**$48.73**	$6,644	$79,728	$16,743	$96,471	1800	**$53.59**
Avg Sec		$37,572	$7,890	$45,462	1800	**$25.26**	$3,263	$39,156	$8,223	$47,379	1800	**$26.32**	$3,396	$40,752	$8,558	$49,310	1800	**$27.39**
Avg Pres		$132,923	$27,914	$160,837	1800	**$89.35**	$11,914	$142,968	$30,023	$172,991	1800	**$96.11**	$12,528	$150,336	$31,571	$181,907	1800	**$101.06**
Avg V.P.		$115,589	$24,274	$139,863	1800	**$77.70**	$10,637	$127,644	$26,805	$154,449	1800	**$85.81**	$10,822	$129,864	$27,271	$157,135	1800	**$87.30**
Alanis		$35,736	$7,505	$43,241	1800	**$24.02**	$3,104	$37,248	$7,822	$45,070	1800	**$25.04**	$3,232	$38,784	$8,145	$46,929	1800	**$26.07**
Angelo, D.													$7,325	$87,900	$18,459	$106,359	1800	**$59.09**
Arciero		$42,468	$8,918	$51,386	1800	**$28.55**	$3,689	$44,268	$9,296	$53,564	1800	**$29.76**	$4,080	$48,960	$10,282	$59,242	1800	**$32.91**
Averill		$183,541	$38,544	$222,085	1800	**$123.38**	$15,906	$190,872	$40,083	$230,955	1800	**$128.31**	$17,583	$210,999	$44,310	$255,309	1800	**$141.84**
Aycock		$34,044	$7,149	$41,193	1800	**$22.89**	$3,105	$37,260	$7,825	$45,085	1800	**$25.05**	$3,394	$40,728	$8,553	$49,281	1800	**$27.38**
Baltz (retired)		$47,112	$9,894	$57,006	1800	**$31.67**	$4,083	$48,996	$10,289	$59,285	1800	**$32.94**		$0	$0	$0	1800	**$0**
Battle		$35,772	$7,512	$43,284	1800	**$24.05**	$3,262	$39,144	$8,220	$47,364	1800	**$26.31**	$3,565	$42,780	$8,984	$51,764	1800	**$28**
Benjamin		$35,748	$7,507	$43,255	1800	**$24.03**	$3,260	$39,120	$8,215	$47,335	1800	**$26.30**	$3,394	$40,728	$8,553	$49,281	1800	**$27.38**
Berry		$27,252	$5,723	$32,975	1800	**$18.32**	$2,554	$30,648	$6,436	$37,084	1800	**$20.60**	$2,791	$33,492	$7,033	$40,525	1800	**$22.51**
Boatman													$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Briseno													$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Bryson													$2,784	$33,408	$7,016	$40,424	1800	**$22.46**
Cabrales		$69,999	$14,700	$84,699	1800	**$47.05**	$6,258	$75,096	$15,770	$90,866	1800	**$50.48**	$6,976	$83,712	$17,580	$101,292	1800	**$56.27**
Calote (Resigned)		$113,528	$23,841	$137,369	1800	**$76.32**		$0	$0	$0	1800	**$80.12**		$0	$0	$0	1800	**$0.00**
Carmell		$33,168	$6,965	$40,133	1800	**$22.30**	$2,881	$34,572	$7,260	$41,832	1800	**$23.24**	$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Contreras		$113,991	$23,938	$137,929	1800	**$76.63**	$10,361	$124,332	$26,110	$150,442	1800	**$83.58**	$11,363	$136,356	$28,635	$164,991	1800	**$91.66**
Covino (retired)		$51,180	$10,748	$61,928	1800	**$34.40**	$4,436	$53,232	$11,179	$64,411	1800	**$35.78**		$0	$0	$0	1800	**$0.00**
Cox		$57,942	$12,168	$70,110	1800	**$38.95**	$5,033	$60,396	$12,683	$73,079	1800	**$40.60**	$5,235	$62,820	$13,192	$76,012	1800	**$42.23**
Cross		$37,572	$7,890	$45,462	1800	**$25.26**	$3,427	$41,124	$8,636	$49,760	1800	**$27.64**	$3,744	$44,928	$9,435	$54,363	1800	**$30.20**
Davila						**n/a**						**n/a**	$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Davis													$7,691	$92,292	$19,381	$111,673		**$62.04**
Diep		$34,848	$7,318	$42,166	1800	**$23.43**	$3,027	$36,324	$7,628	$43,952	1800	**$24.42**	$3,150	$37,800	$7,938	$45,738	1800	**$25.41**
Diggle		$45,744	$9,606	$55,350	1800	**$30.75**	$3,973	$47,676	$10,012	$57,688	1800	**$32.05**	$4,136	$49,632	$10,423	$60,055	1800	**$33.36**
Eberhard (retired)		$113,991	$23,938	$137,929	1800	**$76.63**		$0	$0	$0	1800	**$80.46**		$0	$0	$0	1800	**$0.00**
Fisher		$102,498	$21,525	$124,023	1800	**$68.90**	$8,883	$106,599	$22,386	$128,985	1800	**$71.66**	$9,816	$117,792	$24,736	$142,528	1800	**$79.18**
Galindo		$33,168	$6,965	$40,133	1800	**$22.30**	$2,881	$34,572	$7,260	$41,832	1800	**$23.24**	$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Garcia		$34,008	$7,142	$41,150	1800	**$22.86**	$2,954	$35,448	$7,444	$42,892	1800	**$23.83**	$3,073	$36,876	$7,744	$44,620	1800	**$24.79**
Gerhard		$57,108	$11,993	$69,101	1800	**$38.39**	$8,313	$99,756	$20,949	$120,705	1800	**$67.06**	$9,349	$112,188	$23,559	$135,747	1800	**$75.42**
Giacona		$80,160	$16,834	$96,994	1800	**$53.89**	$7,243	$86,916	$18,252	$105,168	1800	**$58.43**	$7,538	$90,456	$18,996	$109,452	1800	**$6**
Goines		$57,942	$12,168	$70,110	1800	**$38.95**	$5,033	$60,396	$12,683	$73,079	1800	**$40.60**	$5,235	$62,820	$13,192	$76,012	1800	**$4.**
Green (n/a)		$66,610	$13,988	$80,598	1800	**$44.78**		$0	$0	$0	1800	**$47.01**	$0	$0	$0	$0	1800	**$0.00**
Guerrero (n/a)		$91,502	$19,215	$110,717	1800	**$61.51**		$0	$0	$0	1800	**$64.58**		$0	$0	$0	1800	**$0.00**
Gutierrez (n/a)		$41,484	$8,712	$50,196	1800	**$27.89**		$0	$0	$0	1800	**$29.28**		$0	$0	$0	1800	**$0.00**
Hall (n/a)		$27,252	$5,723	$32,975	1800	**$18.32**		$0	$0	$0	1800	**$19.21**		$0	$0	$0	1800	**$0.00**
Hamilton		$102,498	$21,525	$124,023	1800	**$68.90**	$8,883	$106,596	$22,385	$128,981	1800	**$71.66**	$9,816	$117,792	$24,736	$142,528	1800	**$79.18**
Harris			$0	$0	1800	**n/a**		$0	$0	$0	1800	**n/a**		$0	$0	$0	1800	**$0.00**
Harrison		$129,792	$27,256	$157,048	1800	**$87.25**	$12,371	$148,452	$31,175	$179,627	1800	**$99.79**	$13,812	$165,744	$34,806	$200,550	1800	**$111.42**
Hughes			$0	$0	1800	**n/a**		$0	$0	$0	1800	**n/a**		$0	$0	$0	1800	**$0.00**
Im		$29,868	$6,272	$36,140	1800	**$20.08**	$2,489	$29,868	$6,272	$36,140	1800	**$20.08**	$2,718	$32,616	$6,849	$39,465	1800	**$21.93**
Jaquez		$31,584	$6,633	$38,217	1800	**$21.23**	$2,881	$34,572	$7,260	$41,832	1800	**$23.24**	$2,997	$35,964	$7,552	$43,516	1800	**$24.18**
Johnson		$63,396	$13,313	$76,709	1800	**$42.62**	$6,041	$72,492	$15,223	$87,715	1800	**$48.73**	$6,328	$75,936	$15,947	$91,883	1800	**$51.05**
Juarez						**n/a**						**n/a**	$3,310	$39,720	$8,341	$48,061	1800	**$26.70**
Kuck													$10,822	$129,864	$27,271	$157,135	1800	**$87.30**
Largent													$13,154	$157,848	$33,148	$190,996	1800	**$106.11**
Lee, R.								$43,236	$9,080	$52,316	1800	**$29.06**	$4,136	$49,632	$10,423	$60,055	1800	**$33.36**

RECEIVED
NOV 30 2007
BY:

San P[illegible]rdino CCD
Prod[illegible] Hourly Rates

NAME	Monthly	04/05	BEN	S+B	Hours	04/05 PHR	Monthly	05/06	BEN	S+B	Hours	05/06 PHR	Monthly	06/07	BEN	S+B	Hours	06/07 PHR
Karr		$34,848	$7,318	$42,166	1800	$23.43	$3,027	$36,324	$7,628	$43,952	1800	$24.42	$3,317	$39,804	$8,359	$48,163	1800	$26.76
Kirkhart													$3,152	$37,824	$7,943	$45,767	1800	$25.43
Molina	$2,904	$34,848	$7,318	$42,166	1800	$23.43	$3,027	$36,324	$7,628	$43,952	1800	$24.42	$3,150	$37,800	$7,938	$45,738	1800	$25.41
Mulgrav	$3,128	$37,536	$7,883	$45,419	1800	$25.23	$3,260	$39,120	$8,215	$47,335	1800	$26.30	$3,394	$40,728	$8,553	$49,281	1800	$27.38
Muskavitch	$7,291	$87,492	$18,373	$105,865	1800	$58.81	$7,655	$91,860	$19,291	$111,151	1800	$61.75	$7,691	$92,292	$19,381	$111,673	1800	$62.04
Nemnich	$7,498	$89,976	$18,895	$108,871	1800	$60.48	$7,989	$95,868	$20,132	$116,000	1800	$64.44	$8,904	$106,848	$22,438	$129,286	1800	$71.83
Ng	$9,632	$115,584	$24,273	$139,857	1800	$77.70	$9,879	$118,548	$24,895	$143,443	1800	$79.69	$10,822	$129,864	$27,271	$157,135	1800	$87.30
Norton	$4,828	$57,936	$12,167	$70,103	1800	$38.95	$5,033	$60,396	$12,683	$73,079	1800	$40.60	$5,235	$62,820	$13,192	$76,012	1800	$42.23
Ochoa	$3,128	$37,536	$7,883	$45,419	1800	$25.23	$3,260	$39,120	$8,215	$47,335	1800	$26.30	$3,394	$40,728	$8,553	$49,281	1800	$27.38
Ongoco	$6,880	$82,560	$17,338	$99,898	1800	$55.50	$7,154	$85,848	$18,028	$103,876	1800	$57.71	$8,480	$101,760	$21,370	$123,130	1800	$68.41
Ontiveros	$5,328	$63,936	$13,427	$77,363	1800	$42.98	$5,541	$66,492	$13,963	$80,455	1800	$44.70	$6,027	$72,324	$15,188	$87,512	1800	$48.62
Orr (retired)		$0	$0	$0	1800	n/a		$0	$0	$0	1800	n/a		$0	$0	$0	1800	$0
Overturf	$2,507	$30,084	$6,318	$36,402	1800	$20.22	$2,743	$32,916	$6,912	$39,828	1800	$22.13	$3,150	$37,800	$7,938	$45,738	1800	$25.
Perez	$2,978	$35,736	$7,505	$43,241	1800	$24.02	$3,104	$37,248	$7,822	$45,070	1800	$25.04	$3,232	$38,784	$8,145	$46,929	1800	$26.07
Peterson (n/a)		$0	$0	$0	1800	n/a		$0	$0	$0	1800	n/a		$0	$0	$0	1800	$0.00
Roberts	$2,978	$35,736	$7,505	$43,241	1800	$24.02	$3,104	$37,248	$7,822	$45,070	1800	$25.04	$3,232	$38,784	$8,145	$46,929	1800	$26.07
Rubin	$2,904	$34,848	$7,318	$42,166	1800	$23.43	$3,027	$36,324	$7,628	$43,952	1800	$24.42	$3,150	$37,800	$7,938	$45,738	1800	$25.41
Ruiz	$2,388	$28,656	$6,018	$34,674	1800	$19.26	$2,613	$31,356	$6,585	$37,941	1800	$21.08	$2,854	$34,248	$7,192	$41,440	1800	$23.02
Ryckevik	$3,812	$45,744	$9,606	$55,350	1800	$30.75	$3,973	$47,676	$10,012	$57,688	1800	$32.05	$4,136	$49,632	$10,423	$60,055	1800	$33.36
Sanger (resigned)	$4,717	$56,604	$11,887	$68,491	1800	$38.05	$5,692	$68,304	$14,344	$82,648	1800	$45.92		$0	$0	$0	1800	$0.00
Scudder	$2,978	$35,736	$7,505	$43,241	1800	$24.02	$3,104	$37,248	$7,822	$45,070	1800	$25.04	$3,232	$38,784	$8,145	$46,929	1800	$26.07
Sharpe		$30,060	$6,313	$36,373	1800	$20.21	$2,611	$31,332	$6,580	$37,912	1800	$21.06	$2,715	$32,580	$6,842	$39,422	1800	$21.90
Shipp													$8,904	$106,848	$22,438	$129,286	1800	$71.83
Shodahl	$9,632	$115,584	$24,273	$139,857	1800	$77.70	$10,361	$124,332	$26,110	$150,442	1800	$83.58	$11,363	$136,356	$28,635	$164,991	1800	$91.66
Sifford	$5,328	$63,936	$13,427	$77,363	1800	$42.98	$5,541	$66,492	$13,963	$80,455	1800	$44.70	$6,027	$72,324	$15,188	$87,512	1800	$48.62
Soto	$2,978	$35,736	$7,505	$43,241	1800	$24.02	$2,815	$33,780	$7,094	$40,874	1800	$22.71	$2,931	$35,172	$7,386	$42,558	1800	$23.64
Sousa	$3,539	$42,468	$8,918	$51,386	1800	$28.55	$3,689	$44,268	$9,296	$53,564	1800	$29.76	$3,839	$46,068	$9,674	$55,742	1800	$30.97
Sutorus						$52.26						$54.35	$7,691	$92,292	$19,381	$111,673	1800	$62.04
Takano	$4,828	$57,936	$12,167	$70,103	1800	$38.95	$5,033	$60,396	$12,683	$73,079	1800	$40.60	$5,235	$62,820	$13,192	$76,012	1800	$42.23
Temple	$10,680	$128,160	$26,914	$155,074	1800	$86.15	$12,371	$148,452	$31,175	$179,627	1800	$99.79	$13,812	$165,744	$34,806	$200,550	1800	$111.42
Thurman	$8,776	$105,312	$22,116	$127,428	1800	$70.79	$9,908	$118,896	$24,968	$143,864	1800	$79.92	$9,816	$117,792	$24,736	$142,528	1800	$79.18
Trujillo	$3,206	$38,472	$8,079	$46,551	1800	$25.86	$3,342	$40,104	$8,422	$48,526	1800	$26.96	$3,479	$41,748	$8,767	$50,515	1800	$28.06
Ulloa	$2,904	$34,848	$7,318	$42,166	1800	$23.43	$3,027	$36,324	$7,628	$43,952	1800	$24.42	$3,150	$37,800	$7,938	$45,738	1800	$25.41
Villa	$1,312	$15,744	$3,306	$19,050	1800	$10.58	$1,368	$16,416	$3,447	$19,863	1800	$11.04	$1,423	$17,076	$3,586	$20,662	1800	$11.48
Vines	$2,764	$33,168	$6,965	$40,133	1800	$22.30	$2,881	$34,572	$7,260	$41,832	1800	$23.24	$2,997	$35,964	$7,552	$43,516	1800	$24
Whiteside (retired)	$10,680	$128,160	$26,914	$155,074	1800	$86.15		$0	$0	$0	1800	$90.45		$0	$0	$0	1800	$0
Williams, c	$3,286	$39,432	$8,281	$47,713	1800	$26.51	$3,425	$41,100	$8,631	$49,731	1800	$27.63	$3,565	$42,780	$8,984	$51,764	1800	$28.76
Williams, r	$2,764	$33,168	$6,965	$40,133	1800	$22.30	$2,881	$34,572	$7,260	$41,832	1800	$23.24	$2,997	$35,964	$7,552	$43,516	1800	$24.18
Wood	$3,539	$42,468	$8,918	$51,386	1800	$28.55	$3,689	$44,268	$9,296	$53,564	1800	$29.76	$3,839	$46,068	$9,674	$55,742	1800	$30.97
Yamamoto	$8,176	$98,112	$20,604	$118,716	1800	$65.95	$8,692	$104,304	$21,904	$126,208	1800	$70.12	$9,816	$117,792	$24,736	$142,528	1800	$79.18

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for 05-06.

COMMUNITY COLLEGE DISTRICT NAME: San Bernardino Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 36.82	$ 38.31
	AVERAGE CLERICAL ASSISTANT		$ 23.06
	AVERAGE DEAN	$ 67.30	$ 71.83
	AVERAGE DIRECTOR	$ 48.73	$ 53.59
	AVERAGE SECRETARY	$ 26.32	$ 27.39
	AVERAGE PRESIDENT	$ 96.11	$ 101.06
	AVERAGE VICE PRESIDENT	$ 85.81	$ 87.30
ALANIS, EVA	FINANCIAL AID SPECIALIST	$ 25.04	$ 26.07
ANGELO, D		'--	$ 59.09
ARCIERO, ESTHER	ASSISTANT DIRECTOR, FINANCIAL AID	$ 29.76	$ 32.91
AVERILL, DONALD	CHANCELLOR	$ 128.31	$ 141.84
AYCOCK, LARRY	CLERK III	$ 25.05	$ 27.38
BALTZ, STEVE	CUSTODIAL SUPERVISOR (Retired)	$ 32.94	RETIRED
BATTLE, YENDIS	ACCOUNTANT	$ 26.31	$ 28.76
BENJAMIN, VEADA	CLERK III	$ 26.30	$ 27.38

Schedule 5
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 1,539,976	$ 1,951,296	$ 1,789,558	$ 1,788,078	$ 2,466,701	$ 3,464,286	$ 3,519,469	
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 30,800	$ 39,026	$ 35,791	$ 35,762	$ 49,334	$ 69,286	$ 70,389	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 1,186,141	$ 1,228,981	$ 1,571,669	$ 2,136,440	$ 3,273,239	$ 5,095,842	$ 4,903,694	$ 4,009,151
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917	$ 98,074	$ 80,183
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,030							
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		For 00-01 through 06-07 - unit fee						
			$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 24.00
Total # of credits	Line 4A divided by unit fee		111,725	142,879	194,221	208,885	218,330	188,603	167,047
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680	$ 171,629	$ 152,013
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 23,723	$ 24,580	$ 31,433	$ 42,729	$ 65,465	$ 101,917	$ 98,074	$ 80,183
(Line 4A X 7%)	7% of Fees Waived (99-00	$ 83,030							
1.8-4 5.	Credit Units Waived		$ 101,670	$ 130,020	$ 176,741	$ 190,085	$ 198,680	$ 171,629	$ 152,013
Total Enrollment Fee Waiver Offset	**Forward to Schedule 5A**	**$ 106,753**	**$ 126,250**	**$ 161,453**	**$ 219,470**	**$ 255,550**	**$ 300,597**	**$ 269,703**	**$ 232,196**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 06-07: Summer and fall $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: San Bernardino
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$50,059,633	$42,375,616	$4,526,476	$46,902,092
ENROLL FEE ADMIN (2%)	106,784	98,242	8,542	106,784
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	233,880	0	233,880	233,880
S.F.A.A.	750,007	690,007	60,000	750,007
E.O.P.S.	1,192,613	1,097,204	95,409	1,192,613
C.A.R.E.	206,207	189,711	16,496	206,207
D.S.P.S.	1,107,550	1,018,946	88,604	1,107,550
STATE HOSPITALS	0	0	0	0
CALWORKS	935,309	860,485	74,824	935,309
MATRICULATION (CREDIT)	899,442	827,486	71,956	899,442
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	16,785	15,443	1,342	16,785
PART-TIME FAC. ALLO.	639,324	588,178	51,146	639,324
PART-TIME FAC. OFF. HRS	29,059	0	29,059	29,059
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	104,511	67,523	36,988	104,511
PLANT & INSTRUCTIONAL	151,284	139,182	12,102	151,284
SCHDL. MAINT. & REPAIR	151,297	139,194	12,103	151,297
TANF	169,969	156,372	13,597	169,969
ECON. DEVELOPMENT	616,500	308,700	209,160	517,860
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	-127,236	-127,236	0	-127,236
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	268,572	268,572	0	268,572
BASIC SKILLS -REAPPROP	199,631	199,631	0	199,631
CAR. TECH. TRAILER BIL	478,295	478,295	0	478,295
GEN. PUR. TRAILER BILL	935,715	935,715	0	935,715
INST. MATERIAL TRAILER	564,632	564,632	0	564,632
SCHLD.MAINT. TRAILER B	564,632	564,632	0	564,632
FACULTY STAFF DEV	60,105	60,105	0	60,105
TOTAL	$60,324,500	$51,526,635	$5,541,684	$57,068,319

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
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Sc ule 5A
San Bernardino Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	n	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	.icies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 294.83	$ 116.97	$ 123.71	$ 129.34	$ 140.42	$ 149.43	$ 168.14	
2	aff Training	(04)(B)(1)(b)	$ 594.40	$ 617.44	$ 668.26	$ 672.28	$ 645.54	$ 1,212.90	$ 632.30	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)								
4	Waiving student fees	(04)(B)(2)(b)	$ 24,360.33	$ 30,242.46	$ 35,234.88	$ 39,295.65	$ 39,092.55	$ 44,852.05	$ 42,921.34	$ 41,174.69
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 215.00	$ 229.60	$ 245.00	$ 250.80	$ 270.40	$ 282.40	$ 297.60	
6	EFCW - Fee Waiver Costs	Total	$ 25,464.56	$ 31,206.47	$ 36,271.85	$ 40,348.07	$ 40,148.91	$ 46,496.78	$ 44,019.38	$ 41,174.69
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 106,753.00	$ 126,250.00	$ 161,453.00	$ 219,470.00	$ 255,550.00	$ 300,597.00	$ 269,703.00	$ 232,196.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (81,288.44)	$ (95,043.53)	$ (125,181.15)	$ (179,121.93)	$ (215,401.09)	$ (254,100.22)	$ (225,683.62)	$ (191,021.31)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 25,464.56**	**$ 31,206.47**	**$ 36,271.85**	**$ 40,348.07**	**$ 40,148.91**	**$ 46,496.78**	**$ 44,019.38**	**$ 41,174.69**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Crafton Hills College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 18, 2008 02:13:02

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	19	1,755
BOGW - Part A-2 based on SSI recipient status	27	4,765
BOGW - Part A-3 based on general assistance recipient status	29	9,472
BOGW - Part B based on income standards	15	4,546
BOGW - Part C based on financial need	7	2,079

97

Total Amount = $ 22,617

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Head Count

$

CRAFTON HILLS 97 22,617

SBC 680 158,537

Total 777 181,154

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

San Bernardino College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 18, 2008 02:13:29

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	245	52,715
BOGW - Part A-2 based on SSI recipient status	251	48,436
BOGW - Part A-3 based on general assistance recipient status	56	16,747
BOGW - Part B based on income standards	123	39,401
BOGW - Part C based on financial need	5	1,238

680

Total Amount = $ 158,537

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SixTen and Associates
Mandate Reimbursement Services

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Telephone: (916) 565-6104
Fax: (916) 564-6103

CLIENT'S COPY

January 29, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8895

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
San Bernardino Community College District CC 36150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for San Bernardino Community College District's reimbursement claim listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007
764/99	Integrated Waste Management	2007-2008

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC36150

(02) Claimant Name: San Bernardino Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 114 South Del Rosa Drive

City: San Bernardino | State: CA | Zip Code: 92408

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,076,448
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,066,448
Due from State	(08)	(17) $ 1,066,448
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	754,256
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	41,175
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	54
(31) EFCW-1, (07)	428,976
(32) EFCW-1, (09)	106,784
(33) EFCW-1, (10)	41,175
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 11/28/09

Robert Temple
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

Kbpsixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

Clair

Bernardino Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

Leave Blank

ct Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 754,255.92	$ -	$ -	$ -	$ -	$ 754,255.92
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Prepa[illegible]n district policies & procedures for §	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
Waiving student fees	$ 41,174.69	$ -	$ -	$ -	$ -	$ 41,174.69
Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
al Direct Costs	$ 795,430.61	$ -	$ -	$ -	$ -	$ 795,430.61

Costs		
irect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	53.93%
al Indirect Costs	[Line (06) x line (05)(a)]	$ 428,975.73
al Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,224,406.34
duction		
: Enrollment Fee Revenue offset		$ 106,784.00
: Enrollment Fee Waiver offsets		$ 41,174.69
l Cl[illegible] Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,076,447.65

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Bernardino Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions and Records Cle Various	$26.40	7,594.2	$ 200,486.88				
Calculating total enrollment fee to be collected Admissions and Records Cle Various	$26.40	5,614.1	$ 148,212.24				
Answering student's questions regarding enrollment fee collection Admissions and Records Cle Various	$26.40	9,242.0	$ 243,988.80				
Updating written and computer records for enrollment fee information Admissions and Records Cle Various	$26.40	5,824.0	$ 153,753.60				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions and Records Cle Various	$26.40	206.2	$ 5,443.68				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Admissions and Records Cle Various	$26.40	89.8	$ 2,370.72				
5) Total ☒ Subtotal ☐		Page 1 of 1	$ 754,255.92	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: San Bernardino Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$25.87	326.0	$ 8,433.62				
Receiving waiver applications Financial Aid Office Staff Various	$25.87	402.7	$ 10,417.85				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$25.87	402.7	$ 10,417.85				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$25.87	460.2	$ 11,905.37				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 41,174.69	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2006-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	7,594.20	Admissions and Records Clerks	Various	$26.40	$200,486.88	Referencing student accounts and records	Calculating and collecting enrollme
06-07	5,614.10	Admissions and Records Clerks	Various	$26.40	$148,212.24	Calculating total enrollment fee to be collected	Calculating and collecting enrollme
06-07	9,242.00	Admissions and Records Clerks	Various	$26.40	$243,988.80	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollme
06-07	5,824.00	Admissions and Records Clerks	Various	$26.40	$153,753.60	Updating written and computer records for enrollment fee information	Calculating and collecting enrollme
06-07	206.20	Admissions and Records Clerks	Various	$26.40	$5,443.68	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollme
06-07	89.80	Admissions and Records Clerks	Various	$26.40	$2,370.72	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollme
	28,570.30	**Admissions and Records Clerks Total**			$754,255.92		
06-07	326.00	Financial Aid Office Staff	Various	$25.87	$8,433.62	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	402.70	Financial Aid Office Staff	Various	$25.87	$10,417.85	Receiving waiver applications	Waiving student fees
06-07	402.70	Financial Aid Office Staff	Various	$25.87	$10,417.85	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	460.20	Financial Aid Office Staff	Various	$25.87	$11,905.37	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,591.60	**Financial Aid Office Staff Total**			$41,174.69		
	30,161.90	**Grand Total**			$795,430.61		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$33,151,539		$33,151,539	$812,289	$32,339,250
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,414,700		5,414,700	347,614	5,067,086
Course and Curriculum Development	6020	51,258		51,258	3,828	47,430
Academic/Faculty Senate	6030	5,306		5,306		5,306
Other Instructional Administration & Instructional Governance	6090	137,048		137,048		137,048
Instructional Support Services	6100					
Learning Center	6110	384,271		384,271	621	383,650
Library	6120	1,991,125		1,991,125	197,232	1,793,893
Media	6130	277,909		277,909	61,658	216,251
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	355,142		355,142	50,273	304,869
Other Instructional Support Services	6190	863,904		863,904	126,081	737,823
Admissions and Records	6200	1,656,347		1,656,347	22,196	1,634,151
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	1,728,230		1,728,230	14,288	1,713,942
Matriculation and Student Assessment	6320	705,020		705,020	43,719	661,301
Transfer Programs	6330	170,021		170,021	4,198	165,823
Career Guidance	6340	4,117		4,117		4,117
Other Student Counseling and Guidance	6390	11,696		11,696		11,696
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,341,872		1,341,872	59,204	1,282,668
Subtotal		$48,249,505	$0	$48,249,505	$1,743,201	$46,506,304

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,051,885		$1,051,885	$8,660	$1,043,225
Health Services	6440	567,215		567,215	2,665	564,550
Student Personnel Admin.	6450	1,074,980		1,074,980	22,004	1,052,976
Financial Aid Administration	6460	1,357,018		1,357,018	40,216	1,316,802
Job Placement Services	6470	596,240		596,240	29,962	566,278
Veterans Services	6480					
Miscellaneous Student Services	6490	648,307		648,307	3,754	644,553
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,531,360		1,531,360	1,531,360	0
Custodial Services	6530	1,807,101		1,807,101	1,807,101	0
Grounds Maintenance and Repairs	6550	926,648		926,648	926,648	0
Utilities	6570	2,719,528		2,719,528	2,719,528	0
Other	6590	880,444		880,444	880,444	0
Planning, Policy Making, and Coordination	6600	3,734,981		3,734,981	3,734,981	0
General Inst. Support Services	6700					
Community Relations	6710	787,656		787,656	787,656	0
Fiscal Operations	6720	2,236,562		2,236,562	2,236,562	0
Human Resources Management	6730	1,114,674		1,114,674	1,114,674	0
Noninstructional Staff Benefits & Incentives	6740	227,242		227,242	227,242	0
Staff Development	6750	251,819		251,819	251,819	0
Staff Diversity	6760	21,495		21,495	21,495	0
Logistical Services	6770	3,607,961		3,607,961	3,607,961	0
Management Information Systems	6780	2,949,428		2,949,428	2,949,428	0
Subtotal		$76,342,049	$0	$76,342,049	$24,647,361	$51,694,688

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant San Bernardino Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	989,292		989,292	989,292	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	237,184		237,184	1,200	235,984
Community Use of Facilities	6830	46,140		46,140		46,140
Economic Development	6840	1,136,282		1,136,282	22,997	1,113,285
Other Community Services & Economic Development	6890	7,049		7,049		7,049
Ancillary Services	6900					
Bookstores	6910	55,334		55,334		55,334
Child Development Center	6920	235,279		235,279		235,279
Farm Operations	6930					
Food Services	6940	171,167		171,167		171,167
Parking	6950					
Student and Co-curricular Activities	6960	503,013		503,013	26,694	476,319
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	248,852		248,852	1,037	247,815
Other Auxiliary Operations	7090	11,976		11,976	37,260	49,236
Depreciation or Use Allowance - Building				(a)	2,441,914	
Depreciation or Use Allowance - Equipment					1,208,081	
(05) Total		$79,983,617	$0	$79,983,617	$29,301,316	$54,332,296
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				53.93%		
(07) Notes						

San Bernardino Community College District

Capital Asset Report for District 72, FY 2007

Capital asset activity for the year ended June 30, 2007 was as follows:

	Primary Government			
	Beg. Balance	Additions	Retirements	Ending Balance
Governmental activities:				
Totals at historical cost	0	0	0	0
Less accumulated depreciation for:				
Total accumulated depreciation	0	0	0	0
Governmental activites capital assets, net	0	0	0	0
Business-type activities:				
Building Improvements	18,396,159	2,408,912	0	20,805,070
Buildings	78,895,282	44,506,413	(1,962,000)	121,439,695
Computer Software	212,578	340,334	0	552,913
Construction in Progress	52,364,314	13,865,414	(46,393,780)	19,835,947
Furniture & Equipment	11,495,656	3,276,922	(128,965)	14,643,614
Land	3,084,176	192,783	0	3,276,959
Land Improvements	0	0	0	0
Site Improvements	7,876,414	100,130	0	7,976,544
hicle	477,382	131,289	0	608,671
Totals at historical cost	172,801,961	64,822,197	(48,484,745)	189,139,413
Less accumulated depreciation for:				
Building Improvements	(5,250,765)	(302,255)	0	(5,553,020)
Buildings	(16,977,018)	(2,139,659)	1,781,043	(17,335,633)
Computer Software	(190,829)	(18,438)	0	(209,267)
Furniture & Equipment	(6,296,796)	(1,208,081)	132,500	(7,372,376)
Site Improvements	(1,068,336)	(686,758)	0	(1,755,094)
Vehicle	(210,277)	(56,858)	0	(267,135)
Total accumulated depreciation	(29,994,021)	(4,412,049)	1,913,543	(32,492,525)
Business-type activites capital assets, net	142,807,940	60,410,148	(46,571,202)	156,646,888

302,255
2,139,659
$2,441,914 (a)

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	104,416		7,518	9,600		121,534
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300	2,829					2,829
Biological Sciences	0400	1,905,646	44,623	73,560	49,398		2,073,227
Business and Management	0500	1,582,108	32,016	84,235	5,491		1,703,850
Communications	0600	156,821		3,756	24,952		185,529
Information Technology	0700	411,168	28,008	38,591	95,414		573,181
Education	0800	1,793,820	93,226	24,137	2,764		1,913,947
Engineering and Industrial Tech.	0900	2,001,775	76,070	143,221	235,659		2,456,725
Fine and Applied Arts	1000	1,485,421	39,799	22,994	99,558		1,647,772
Foreign Language	1100	760,895	10,894	298			772,087
Health	1200	3,419,120	58,224	126,134	156,427		3,759,905
Family and Consumer Sciences	1300	1,051,439	660,310	293,861	27,587		2,033,197
Law	1400	5,714	2,294				8,008
Humanities (Letters)	1500	3,981,036	56,452	5,652	3,316		4,046,456
Library Science	1600	21,525					21,525
[illegible]matics	1700	2,519,176	46,590	4,445	2,975		2,573,186
Military Studies	1800						
Physical Sciences	1900	1,342,917	57,319	36,779	43,518		1,480,533
Psychology	2000	741,446	18,500	172			760,118
Public and Protective Services	2100	933,619	69,196	1,369,223	49,244		2,421,282
Social Sciences	2200	2,353,637	48,022	11,593	1,564		2,414,816
Commercial Services	3000	13,234					13,234
Interdisciplinary Studies	4900	1,954,084	100,935	7,526	4,822		2,067,367
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	101,231					101,231
Subtotal - Instructional Activities	**599**	28,643,077	1,442,478	2,253,695	842,289		33,151,539

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

San Bernardino Community College District 980 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,863,082	204,004	[illegible]		5,414,700
Course and Curriculum Development	6020		34,893	12,537	[illegible]		51,258
Academic/Faculty Senate	6030		5,306				5,306
Other Instruct. Admin. & Instruct. Governance	6090		137,048				137,048
Subtotal - Instructional Administration	**6000**		5,040,329	216,541	351,442		5,608,312
Instructional Support Services (6100)							
Learning Center	6110	253,690	128,438	1,522	[illegible]		384,271
Library	6120		1,640,606	153,287	[illegible]		1,991,125
Media	6130		212,246	4,005	[illegible]		277,909
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150			304,869	[illegible]		355,142
Other Instructional Support Services	6190		490,778	247,045	[illegible]		863,904
Subtotal - Instructional Support Services	**6100**	253,690	2,472,068	710,728	435,865		3,872,351
Admissions and Records	**6200**		1,405,945	228,206	[illegible]		1,656,347
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,700,004	13,938	[illegible]		1,728,230
Matriculation and Student Assessment	6320		603,619	57,682	[illegible]		705,020
Transfer Programs	6330		131,556	34,267	[illegible]		170,021
Career Guidance	6340			4,117			4,117
Other Student Counseling and Guidance	6390		602	11,094			11,696
Subtotal - Student Counseling and Guidance	**6300**		2,435,781	121,098	62,205		2,619,084

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

San Bernardino Community College District | **980** | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,173,774	108,894	[illegible]		1,341,872
Extended Opportunity Prgms. & Services (EOPS)	6430		975,082	68,143	[illegible]		1,051,885
Health Services	6440		481,432	83,118	[illegible]		567,215
Student Personnel Administration	6450		1,038,390	14,586	[illegible]		1,074,980
Financial Aid Administration	6460		1,060,881	255,921	[illegible]		1,357,018
Job Placement Services	6470		436,884	129,394	[illegible]		596,240
Veterans Services	6480						
Miscellaneous Student Services	6490		538,460	106,093	[illegible]		648,307
Subtotal - Other Student Services	**6400**		5,704,903	766,149	166,465		6,637,517
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,062,070	452,559	16,731		1,531,360
Custodial Services	6530		1,601,871	207,338	(2,108)		1,807,101
Grounds Maintenance and Repairs	6550		668,464	216,088	42,096		926,648
Utilities	6570			2,719,528			2,719,528
Other Operation and Maintenance of Plant	6590		585,460	269,551	25,433		880,444
Total - Operation and Maintenance of Plant	**6500**		3,917,865	3,865,064	82,152		7,865,081
Planning, Policymaking, and Coordination	**6600**		2,307,921	1,201,804	225,256		3,734,981

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

San Bernardino Community College District **980** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		405,176	380,186	2,294		787,656
Fiscal Operations	6720		1,345,062	855,235	36,265		2,236,562
Human Resources Management	6730		763,017	320,868	30,789		1,114,674
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		227,242				227,242
Staff Development	6750		79,887	171,932			251,819
Staff Diversity	6760			21,495			21,495
Logistical Services	6770		2,379,623	994,388	233,950		3,607,961
Management Information Systems	6780		552,483	2,298,474	98,471		2,949,428
Other General Institutional Support Services	6790		843,961	20,071	125,260		989,292
Subtotal - General Institutional Support Services	**6700**		6,596,451	5,062,649	527,029		12,186,129
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		151,087	84,897	1,200		237,184
Community Use Facilities	6830		46,140				46,140
Economic Development	6840		309,701	803,584	22,997		1,136,282
Other Community Svcs. & Economic Development	6890		4,672	2,377			7,049
Subtotal - Community Services	**6800**		511,600	890,858	24,197		1,426,655

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

San Bernardino Community College District **980** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		55,334				55,334
Child Development Centers	6920		235,279				235,279
Farm Operations	6930						
Food Services	6940		171,167				171,167
Parking	6950						
Student and Co-curricular Activities	6960		294,723	181,596	26,694		503,013
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		756,503	181,596	26,694		964,793
Auxiliary Operations (7000)							
Contract Education	7010		236,679	11,136	(1,037)		248,852
Other Auxiliary Operations	7090		49,236		(37,260)		11,976
Subtotal - Auxiliary Operations	**7000**		285,915	11,136	(36,223)		260,828
Physical Property and Related Acquisitions (7100)	**7100**		199,016	14,473	61,495		274,984
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					4,017,556	4,017,556
Student Aid	7320					979,954	979,954
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					4,997,510	4,997,510
TOTAL EXPENDITURES and OTHER OUTGO	**391**	28,896,767	33,076,775	15,523,997	2,761,062	4,997,510	85,256,111

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

San Bernardino Community College District **980** District Code No.

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
San Mateo Community College District CC41100

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for San Mateo Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

State Controller's Office — Claim File Copy — Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

AFFIX LABEL HERE

(01) Claimant Identification Number: CC41100

(02) Claimant Name: San Mateo County Community College District
County of Location: San Mateo
Street Address or P.O. Box: 3401 CSM Drive
City: San Mateo | State: CA | Zip Code: 94402

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 1,107,400	(13) $ 1,006,747
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,006,747
Due from State	(08) $ 1,107,400	(17) $ 1,006,747
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	2,676
(23) EFCW-1, (04)(A)(1)(b)(f)	9,908
(24) EFCW-1, (04)(A)(2)(a)(f)	692,505
(25) EFCW-1, (04)(B)(1)(a)(f)	1,404
(26) EFCW-1, (04)(B)(1)(b)(f)	3,790
(27) EFCW-1, (04)(B)(2)(a)(f)	118,577
(28) EFCW-1, (04)(B)(2)(b)(f)	173,752
(29) EFCW-1, (04)(B)(2)(c)(f)	4,475
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	291,924
(32) EFCW-1, (09)	75,866
(33) EFCW-1, (10)	216,397
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

Kathy Blackwood — Chief Financial Officer
Type or Print Name — Title

(38) Name of Contact Person for Claim

Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

1) Claimant:

an Mateo County Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2004-2005

3) Leave Blank

rect Costs	Object Accounts					
l) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 2,676.29	$ -	$ -	$ -	$ -	$ 2,676.29
b. Staff training (One time per employee)	$ 9,907.69	$ -	$ -	$ -	$ -	$ 9,907.69
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 692,504.74	$ -	$ -	$ -	$ -	$ 692,504.74
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P[illegible]ng district policies & procedures fo[illegible].B.	$ 1,404.23	$ -	$ -	$ -	$ -	$ 1,404.23
). Staff training (One time per employee)	$ 3,789.54	$ -	$ -	$ -	$ -	$ 3,789.54
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
. Adopting procedures, recording, and maintaining records	$ 118,576.66	$ -	$ -	$ -	$ -	$ 118,576.66
. Waiving student fees	$ 139,745.53	$ -	$ 34,006.34	$ -	$ -	$ 173,751.87
. Reporting BOG fee waiver data to CCC	$ 4,474.96	$ -	$ -	$ -	$ -	$ 4,474.96
Total Direct Costs	$ 973,079.64	$ -	$ 34,006.34	$ -	$ -	$ 1,007,085.98

ect Costs		
ndirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	30.00%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 291,923.89
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,299,009.87
Reduction		
ess: Enrollment Fee Revenue offset		$ 75,866.00
ess: Enrollment Fee Waiver offsets		$ 216,397.00
tal [illegible]ed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,006,746.87

1/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Corrales, Rachel	Operations	$40.27	1.0	$ 40.27				
Hancock, Sherri	Dean of Enrollment Services	$79.25	20.0	$ 1,585.00				
Miller, Ruth	Assistant Registrar	$57.21	8.0	$ 457.68				
Raby, Melissa	Dean of Enrollment Services	$75.45	4.0	$ 301.80				
Villareal, Henry	Dean of Admin. & Records	$83.01	3.0	$ 249.03				
Wong, Jane	Sr. Accounting Coordinator	$42.51	1.0	$ 42.51				
Total [X]	Subtotal [ ]	Page 1 of 1		$ 2,676.29	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Benjamin, Eric	Operations Assistant II	$37.64	90.0	$ 3,387.60				
Corrales, Rachel	Operations	$40.27	9.0	$ 362.43				
Escobar-Mora, Marcella	Accounting Technician	$32.39	75.0	$ 2,429.25				
Hancock, Sherri	Dean of Enrollment Services	$79.25	5.0	$ 396.25				
Intendencia, Neil	Operations Assistant I	$32.39	15.0	$ 485.85				
Rosario-Argarin, Nancy	Operations Assistant I	$32.39	75.0	$ 2,429.25				
Villareal, Henry	Dean of Admin. & Records	$83.01	4.0	$ 332.04				
Wong, Jane	Sr. Accounting Coordinator	$42.51	2.0	$ 85.02				
) Total ☒ Subtotal ☐			Page 1 of 1	$ 9,907.69	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office Staff Collecting Fees	$38.34	3,970.8	$ 152,240.47				
Calculating total enrollment fee to be collected Various Enrollment Office Staff Collecting Fees	$38.34	4,067.5	$ 155,947.95				
Answering student's questions regarding enrollment fee collection Various Enrollment Office Staff Collecting Fees	$38.34	3,419.3	$ 131,095.96				
Updating written and computer records for enrollment fee information Various Enrollment Office Staff Collecting Fees	$38.34	3,075.5	$ 117,914.67				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office Staff Collecting Fees	$38.34	3,406.3	$ 130,597.54				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office Staff Collecting Fees	$38.34	122.8	$ 4,708.15				
Total ☒ Subtotal ☐	Page 1 of 1		$ 692,504.74	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Carrington, Margie	Director, Financial Aid Services	$58.09	4.0	$ 232.36				
Corrales, Rachel	Operations	$40.27	1.0	$ 40.27				
Hancock, Sherri	Dean of Enrollment Services	$79.25	10.0	$ 792.50				
Morrison Regina	Financial Aid Technician	$40.11	2.5	$ 100.28				
Nolasco, Lucy	Financial Aid Technician	$38.45	2.0	$ 76.90				
Villegas, Rosa	Financial Aid Technician	$38.45	2.0	$ 76.90				
Wong, Jane	Sr. Accounting Coordinator	$42.51	2.0	$ 85.02				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,404.23	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Corrales, Rachel	Operations	$40.27	2.0	$ 80.54				
Garcia, Doreen	Financial Aid Technician	$38.45	8.0	$ 307.60				
Hancock, Sherri	Dean of Enrollment Services	$79.25	5.0	$ 396.25				
Nolasco, Lucy	Financial Aid Technician	$38.45	37.5	$ 1,441.88				
Soler, Faye	Financial Aid Technician	$39.42	37.5	$ 1,478.25				
Wong, Jane	Sr. Accounting Coordinator	$42.51	2.0	$ 85.02				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,789.54	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Garcia, Doreen	Financial Aid Technician	$38.45	1,022.8	$ 39,326.66				
Hancock, Sherri	Dean of Enrollment Services	$79.25	1,000.0	$ 79,250.00				
) Total ☒	Subtotal ☐	Page 1 of 1		$ 118,576.66	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staff Waiving Enrollment Fees	$39.01	1,005.9	$ 39,240.16				
Receiving waiver applications							
Various Financial Office Staff Waiving Enrollment Fees	$39.01	794.1	$ 30,977.84				
Prestige Graphics Contractor	$100.00	340.1			$ 34,006.34		
Evaluating waiver applications and verifying application documents							
Various Financial Office Staff Waiving Enrollment Fees	$39.01	723.5	$ 28,223.74				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staff Waiving Enrollment Fees	$39.01	1,058.8	$ 41,303.79				
) Total ☒ Subtotal ☐		Page 1 of 1	$ 139,745.53	$ -	$ 34,006.34	$ -	$ -

04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Hancock, Sherri	Dean of Enrollment Services	$79.25	50.0	$ 3,962.50				
Soler, Faye	Financial Aid Technician	$39.42	13.0	$ 512.46				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 4,474.96	$ -	$ -	$ -	$ -

v 04/06

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	90.00	Benjamin, Eric	Operations Assistant II	$37.64	$3,387.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	90.00	**Benjamin, Eric Total**			$3,387.60		
04-05	4.00	Carrington, Margie	Director, Financial Aid Services	$58.09	$232.36	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	4.00	**Carrington, Margie Total**			$232.36		
04-05	9.00	Corrales, Rachel	Operations	$40.27	$362.43	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Corrales, Rachel	Operations	$40.27	$80.54	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	1.00	Corrales, Rachel	Operations	$40.27	$40.27	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Corrales, Rachel	Operations	$40.27	$40.27	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	13.00	**Corrales, Rachel Total**			$523.51		
04-05	75.00	Escobar-Mora, Marcella	Accounting Technician	$32.39	$2,429.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	75.00	**Escobar-Mora, Marcella Total**			$2,429.25		
04-05	8.00	Garcia, Doreen	Financial Aid Technician	$38.45	$307.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	1,022.80	Garcia, Doreen	Financial Aid Technician	$38.45	$39,326.66	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
	1,030.80	**Garcia, Doreen Total**			$39,634.26		
04-05	20.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$1,585.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	10.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$792.50	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	5.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$396.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	5.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$396.25	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	1,000.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$79,250.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
04-05	50.00	Hancock, Sherri	Dean of Enrollment Services	$79.25	$3,962.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,090.00	**Hancock, Sherri Total**			$86,382.50		
04-05	15.00	Intendencia, Neil	Operations Assistant I	$32.39	$485.85	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	15.00	**Intendencia, Neil Total**			$485.85		
04-05	8.00	Miller, Ruth	Assistant Registrar	$57.21	$457.68	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	8.00	**Miller, Ruth Total**			$457.68		
04-05	2.50	Morrison Regina	Financial Aid Technician	$40.11	$100.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	2.50	**Morrison Regina Total**			$100.28		
04-05	2.00	Nolasco, Lucy	Financial Aid Technician	$38.45	$76.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	37.50	Nolasco, Lucy	Financial Aid Technician	$38.45	$1,441.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	39.50	**Nolasco, Lucy Total**			$1,518.78		
04-05	340.06	Prestige Graphics	Contractor	$100.00	$34,006.34	Receiving waiver applications	Waiving student fees
	340.06	**Prestige Graphics Total**			$34,006.34		
04-05	4.00	Raby, Melissa	Dean of Enrollment Services	$75.45	$301.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	4.00	**Raby, Melissa Total**			$301.80		
04-05	75.00	Rosario-Argarin, Nancy	Operations Assistant I	$32.39	$2,429.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	75.00	**Rosario-Argarin, Nancy Total**			$2,429.25		
04-05	37.50	Soler, Faye	Financial Aid Technician	$39.42	$1,478.25	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	13.00	Soler, Faye	Financial Aid Technician	$39.42	$512.46	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.50	**Soler, Faye Total**			$1,990.71		

San Mateo County Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

4-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	3,970.80	Various Enrollment Office Sta	Collecting Fees	$38.34	$152,240.47	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	4,067.50	Various Enrollment Office Sta	Collecting Fees	$38.34	$155,947.95	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,419.30	Various Enrollment Office Sta	Collecting Fees	$38.34	$131,095.96	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	3,075.50	Various Enrollment Office Sta	Collecting Fees	$38.34	$117,914.67	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	3,406.30	Various Enrollment Office Sta	Collecting Fees	$38.34	$130,597.54	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	122.80	Various Enrollment Office Sta	Collecting Fees	$38.34	$4,708.15	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	18,062.20	**Various Enrollment Office Staff Total**			$692,504.74		
04-05	1,005.90	Various Financial Office Staff	Waiving Enrollment Fees	$39.01	$39,240.16	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	794.10	Various Financial Office Staff	Waiving Enrollment Fees	$39.01	$30,977.84	Receiving waiver applications	Waiving student fees
04-05	723.50	Various Financial Office Staff	Waiving Enrollment Fees	$39.01	$28,223.74	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,058.80	Various Financial Office Staff	Waiving Enrollment Fees	$39.01	$41,303.79	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,582.30	**Various Financial Office Staff Total**			$139,745.53		
04-05	4.00	Villareal, Henry	Dean of Admin. & Records	$83.01	$332.04	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	3.00	Villareal, Henry	Dean of Admin. & Records	$83.01	$249.03	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	7.00	**Villareal, Henry Total**			$581.07		
04-05	2.00	Villegas, Rosa	Financial Aid Technician	$38.45	$76.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	2.00	**Villegas, Rosa Total**			$76.90		
04-05	1.00	Wong, Jane	Sr. Accounting Coordinator	$42.51	$42.51	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	2.00	Wong, Jane	Sr. Accounting Coordinator	$42.51	$85.02	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Wong, Jane	Sr. Accounting Coordinator	$42.51	$85.02	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	2.00	Wong, Jane	Sr. Accounting Coordinator	$42.51	$85.02	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	7.00	**Wong, Jane Total**			$297.57		
	24,497.86	**Grand Total**			$1,007,085.98		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: March 11, 2003

INSTITUTION:
San Mateo County Community College District
3401 CSM Drive

FILING REF.: The preceding Agreement was dated February 4, 1999

San Mateo CA 94402

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/03	06/30/08	30.0	On-Campus	All Programs

INACTIVE:
BEGINNING 07/01/08 THIS ORGANIZATION DOES NOT HAVE AWARDS WITH THE FEDERAL GOVERNMENT THAT REIMBURSE FULL INDIRECT COSTS. IF IN THE FUTURE, AN AWARD IS RECEIVED WHICH PROVIDES FOR THE FULL REIMBURSEMENT OF ACTUAL INDIRECT COST, A PROVISIONAL RATE WILL BE ESTABLISHED AT THAT TIME.

*BASE:
Direct salaries and wages including all fringe benefits.

U70213

Schedule 1A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 3 and 4
Findings:

***EFC 1**	66180
Avg. time p/account	3.6
Total Time (in minutes)	238248
Per Hour	60
Hours Worked (** **11**)	**3970.8**
***EFC 2**	59525
Avg. time p/student	4.1
Total Time (in minutes)	244053
Per Hour	60
Hours Worked (** **12**)	**4067.5**
***EFC 1**	66180
Avg. time p/question	3.1
Total Time (in minutes)	205158
Per Hour	60
Hours Worked (** **13**)	**3419.3**
***EFC 2**	59525
Avg. time p/file	3.1
Total Time (in minutes)	184528
Per Hour	60
Hours Worked (** **14**)	**3075.5**
***EFC 4**	51094
Avg. time p/account	4.0
Total Time (in minutes)	204376
Per Hour	60
Hours Worked (** **15**)	**3406.3**
***EFC 5**	1992
Avg. time p/student	3.7
Total Time (in minutes)	7370
Per Hour	60
Hours Worked (** **16**)	**122.8**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 2 and 4
Findings:

***EFW 6**	10588
Avg. time p/question	5.7
Total Time (in minutes)	60352
Per Hour	60
Hours Worked (** **21**)	**1005.9**

***EFW 6**	10588
Avg. time p/application	4.5
Total Time (in minutes)	47646
Per Hour	60
Hours Worked (** **22**)	**794.1**

***EFW 6**	10588
Avg. time p/evaluation	4.1
Total Time (in minutes)	43411
Per Hour	60
Hours Worked (** **23**)	**723.5**

***EFW 8**	NOT SUPPLIED
Avg. time p/application	5.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**

***EFW 7**	10588
Avg. time p/application	6.0
Total Time (in minutes)	63528
Per Hour	60
Hours Worked (** **25**)	**1058.8**

***EFW 8**	NOT SUPPLIED
Avg. time p/application	4.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

		Multiplier						
		1	2	1	2	4	5	
		*Activity Codes						
Staff	Title	11	12	13	14	15	16	PHR'S
Austen, Olivia	Operations Asst. I	4	4	2	4	2	4	38.61
Beeber, Avelina	A&R Assistant II	2	2	2	3	1	1	34.03
Benjamin, Eric	Operations Asst. II	9	10	8	6	10	8	37.64
Berghoff, Joyce	Accounting Technician	3	4	3	2	1	2	38.67
Berwick, Natalie	Operations Asst. II	9	10	8	6	10	8	40.47
Bianchi, Sandra	Operations Asst. I	9	10	8	6		8	38.61
Corrales, Rachel	Operations II	9	10	8	6	12	8	40.27
Castello, Domenica	Accounting Technician	3	4	3	3	5	3	40.27
Dillman, Isabel	A&R Assistant II	2	2	2	3	1	1	34.57
Escobar-Mora, Marcella	Accounting Technician	2	4	2	2	10	5	32.39
Fajardo, Arlene	Assistant Registrar	2	2	2	3	1	1	53.18
Flores, Edith	A&R Assistant II	2	2	1	1	3		19.40
Gamiao, Elaine G.	A&R Assistant II	2	2	2	3	1	1	34.03
Hamilton, Arden	Operations Asst. I	9	10	8	6		8	38.45
Hancock, Sherri	Dean of Enrollment Serv.	2	2	1	1			79.25
Huynh, Vivien	A&R Assistant II	2	2	1	1	3		28.60
Intendencia, Neil	Operations Asst. I	2	5	3	2		5	32.39
King-Sultana, Joyce	Operations Asst. I	9	10	8	6	10	8	38.61
Lara, Maria	A&R Assistant III	2	2	1	1			38.65
Martinez, Ulalia	Student Assistant	9	10	8	6	12	8	38.27
Mileo, Jeremy	A&R Assistant II	2	2	2	3	1	1	34.47
Miller, Ruth	Assistant Registrar	2	2	1	1			57.21
Moresco, Renee	A&R Assistant II	2	2	1	1			36.44
Navarrete, Cheryl	Accounting Technician	2	3	3	2	2	3	38.61
Nguyen, Jeanne	Accounting Technician	2	3	2	2	1	2	40.27
Pena, Mario	Accounting Technician	3	4	3	3	5	3	40.27
Rabb, Kay	A&R Assistant II	2	2	2	3	1	1	34.03
Rosario-Argarin, Nancy	Operations Asst. I	2	5	3	3	10	5	32.39
Sartor, Gertrude	A&R Assistant II	2	2	2	3	1	1	34.30
Shiloh, Dorothy	A&R Assistant II	2	2	1	1			34.94
Skaff, Margaret	A&R Assistant II	2	2	2	3	1	1	34.11
Sohrabi, Soraya	A&R Assistant III	2	2	1	1	3		37.18
Swinson, Adela	A&R Assistant III	2	2	2	3	1	1	31.60
Trevaskis, Geraldine	A&R Assistant II	2	2	2	3	1	1	36.85
Wong, Jane	Sr. Accounting Coordinator	3	3	2	3	2	3	42.51
Zan, Emma	Operations Asst. I	4	4	2	4	2	3	38.61
Average		**3.6**	**4.1**	**3.1**	**3.1**	**4.0**	**3.7**	**38.34**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier						PHR'S
		6	6	6	8	7	8	
		**Activity Codes						
		21	22	23	24	25	26	
Carrington, Margie	Director, Fin. Aid Serv.	4.5	5	6	6	5	5	58.09
Chadwick-White, Karen	Financial Aid Asst.	6	7	5	7	7	5	34.94
del Mundo, Lorena	Program Service Coord.	5	4	4	6			32.80
Garcia, Doreen	Financial Aid Technician	5	4	4	6	7	5	38.45
Menjivar, Claudia	Financial Aid Technician	5	4	4	6	7	5	43.76
Minchez, Wendy	Staff Assistant	12	2	2	2	3	1	38.27
Morrison, Regina	Financial Aid Assistant II	6	7	5	7	8	5	40.11
Nolasco, Lucy	Financial Aid Technician	5	4	4	6	7	5	38.45
Pitetta, Thanh	Financial Aid Technician	5	4	4	6	7	5	39.42
Quintero, Juanita	Office Assistant II	6	7	5	7	7	5	26.01
Soler, Faye	Financial Aid Technician	6	4	4	4	5	4	39.42
Villegas, Rosa	Financial Aid Technician	3	2	2	2	3	1	38.45
Average		**5.7**	**4.5**	**4.1**	**5.4**	**6.0**	**4.2**	**39.01**

***EFC Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1.	Enrolled Students	68,260	67,897	66,681	71,035	76,184	68,686	66,180
EFC 2	1.8-1	2.	Paid Enrollment fees	62,959	62,613	60,516	62,923	67,036	61,072	59,525
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	X	4,687	5,450	6,973	7,564	9,369	11,100
EFC 4	1.8-2	1.	Delinquencies collections	45,174	46,032	46,368	41,449	49,350	51,985	51,094
EFC 5	1.8-2	2.	Refunds	1,181	1,127	1,146	1,381	1,359	2,178	1,992
6	1.8-3	1.	Waivers Requested	X	4,946	5,441	6,701	6,725	9,257	10,588
EFW 7	1.8-3	2.	Waivers Approved (from Chancellor's website)	X	4,946	5,441	6,701	6,725	9,257	10,588
EFW 8	1.8-3	1-2	Waivers Denied	X	District does not have these numbers.					

Conclusion: Findings go forward to Schedules 1A and 1B.

EFC/EFW ***Workload Multiplier***
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Canada For 2004-2005

Data Current As Of June 20, 2012 11:27:23

Download The Result In Comma Delimited Format

Headcount
9,842

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For San Mateo For 2004-2005

Data Current As Of June 20, 2012 11:27:42

Download The Result In Comma Delimited Format

Headcount
18,893

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Skyline For 2004-2005

Data Current As Of June 20, 2012 11:29:49

Download The Result In Comma Delimited Format

Headcount
14,096

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Clear Form

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Eric Benjamin — Employee Name

Operations Asst. II — Exact Position Title

Skyline College/Cashier — College/Department/Location

(650) 738-4432 — Telephone #

(12mo) / 11mo / 10mo / hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	(04-05)	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: 75 hours - new hire Nancy + Marcy
15 hours - new hire Neil

90

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 04-05

Margie Carrington (Employee Name) Director, Financial Aid Services (Exact Position Title)

Financial Aid/Cañada (Department/Location) 650-306-3174 (Telephone #) 12mo / 11mo / 10mo / hrly (Work year length)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/26/05	1A (1B) 2A 2B 3 4	05-06 WEBBOGG update session	2.0
	1A 1B 2A 2B 3 4	with ITS & other colleges	
4/29/05	1A (1B) 2A 2B 3 4	Joint Meeting w/cashiers	2.0
	1A 1B 2A 2B 3 4	to outline process between	
	1A 1B 2A 2B 3 4	Financial Aid & Cashiers	
	1A 1B 2A 2B 3 4	in applying BOGFW	
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Margie Carrington Date 4/21/2006

If you have any questions, please contact Raymond Chow at 5742

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Rachel Corrales		Operations II
Employee Name		Exact Position Title
Canada/Operations/Redwood	650-306-3271	12mo / 11mo / 10mo / hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05 ✓	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 9 hours

B. Enrollment Waiver Process: 2 hours

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 04-05

Rachel Corrales (Employee Name) Operations II (Exact Position Title)

Operations/Canada (Department/Location) 650-306-3271 (Telephone #) 12mo / 11mo / 10mo / hrly (Work year length)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/11/05	1A 1B 2A 2B 3 4	Update Procedures for enrollment fees	1
04/11/05	1A 1B 2A 2B 3 4	Update Procedures for waivers for enrollment fees	1
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 04-05

Marcella Escobar Wilson Acctng Tech
Employee Name Exact Position Title

Business/Cashier/Skyline x t 4434 12mo / 11mo / 10mo / hrly
Department/Location Telephone # Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/7/05	1A 1B (2A) 2B 3 4	Training w/ Eric (new hire)	7.5
3/8/05	1A 1B (2A) 2B 3 4	"	"
3/9/05	1A 1B (2A) 2B 3 4	"	"
3/10/05	1A 1B (2A) 2B 3 4	"	"
3/14/05	1A 1B (2A) 2B 3 4	"	"
3/15/05	1A 1B (2A) 2B 3 4	"	"
3/16/05	1A 1B (2A) 2B 3 4	"	"
3/17/05	1A 1B (2A) 2B 3 4	"	"
3/18/05	1A 1B (2A) 2B 3 4	"	"
3/11/05	1A 1B (2A) 2B 3 4	"	"
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

7.5 HRS

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-06

If you have any questions, please contact Raymond Chow, at 8742

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

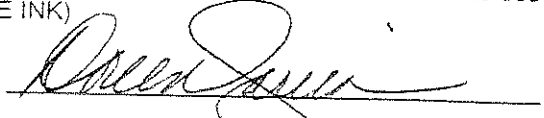
District: San Mateo County Community College District

Doreen Garcia		Financial Aid Technician
Employee Name		Exact Position Title
CSM/Financial Aid/SMCCCD	574-6146	12mo / 11mo / 10mo / hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					n/a	n/a	n/a	n/a
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					8	8	8	8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					680	875.25	1022.75	1049.75
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					n/a	n/a	n/a	n/a
TOTALS:					688	883.25	1030.75	1057.75

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature  Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SAN MATEO CA DIST

SHERRI HANCOCK — Employee Name

DEAN OF ENROLLMENT SERVICES — Exact Position Title

SKYLINE / A+R — College/Department/Location

738-4238 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	20hrs	20	20	20	20	20	20	20
B. Enrollment Waiver Process:	10	10	10	10	40	40	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	5	5	5	5	5	5	5	5
Enrollment Waiver Process:	5	5	5	5	5	5	5	5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
In hours.	1000	1000	1000	1000	1000	1000	1000	1000
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	50	50	50	50	50	50	50	50
TOTALS:	1090	1090	1090	1090	1090	1090	1090	1090

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherri Hancock Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Neil Intendancia — Employee Name

Operations Asst. I — Exact Position Title

Skyline College/Cashier — College/Department/Location

(650) 738-4101 — Telephone #

12mo / 11mo / 10mo / hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99 | 99-00 | 00-01 | 01-02 | 02-03 | 03-04 | (04-05) | 05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: 15 hours : training new hire

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 07/01/04

Ruth Miller
Employee Name

Assistant Registrar
Exact Position Title

A&R--Cañada College
Department/Location

X3125
Telephone #

12mo / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
08/01/04	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
01/01/05	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Miller Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 04/05

Regina Morrison
Employee Name

Financial Aid Technician
Exact Position Title

Financial Aid/Skyline
Department/Location

(650)738-4350
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/26/05	1A (1B) 2A 2B 3 4	Wanmart Book Mtg.	2.5
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Regina R. Morrison Date 4.20.06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SMCCD Fiscal Year: 04-05

Employee Name: Lucy Nolasco Exact Position Title: Fin Aid Tech

Department/Location: Fin Aid / 8-211 Telephone #: 316-3307 (12mo/11mo/10mo/hrly) Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4 8/05	1A (1B) 2A 2B 3 4	Joint mtg w/Cashiering re: BOG Processing	2.0
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Nolasco Date 4-21-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Sm Coast Fiscal Year: 04-05

Employee Name: Lucy Nolasco Exact Position Title: Fin. Aid Tech

Department/Location: Fin. Aid / 8-211 Telephone #: 306-3307 Work year length(circle): 12mo/11mo/10mo/hrly

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/04	1A 1B 2A (2B) 3 4	Trained staff, FWS, Hourly Personnel	37.5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Nolasco Date 7-21-04

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 07/01/04

Melissa Raby — Employee Name
Dean of Enrollment Services — Exact Position Title

A&R Cañada College — Department/Location
650-306-3310 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived. .

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
01/10/05	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY April 24, 2006 ; TO Suki Chang @ District Office

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 2004 - 2005

Nancy Rosario Argarin — Employee Name

Operations Asst. I — Exact Position Title

Cashier / Skyline College — Department/Location

(650) 738-4432 — Telephone #

(12mo) / 11mo / 10mo / hrly — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/7/05	1A 1B (2A) 2B 3 4	training w/Eric (Nancy new hire)	7.50
3/8/05	1A 1B (2A) 2B 3 4	"	
3/9/05	1A 1B (2A) 2B 3 4	"	
3/10/05	1A 1B (2A) 2B 3 4	"	
3/11/05	1A 1B (2A) 2B 3 4	"	
3/14/05	1A 1B (2A) 2B 3 4	training w/Eric, Sandy, Arden (Nancy new hire)	7.50
3/15/05	1A 1B (2A) 2B 3 4	"	
3/16/05	1A 1B (2A) 2B 3 4	"	
3/17/05	1A 1B (2A) 2B 3 4	"	
3/18/05	1A 1B (2A) 2B 3 4	"	
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

7.5 hrs

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N/A Argarin — Date 4/12/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.8A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SMCCCD

Fiscal Year: 04-05

Sofer Fane
Employee Name

Financial Aid Technician
Exact Position Title

Financial Aid 8-211
Department/Location

306-3307
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/04	1A 1B 2A (2B) 3 4	Train Staff, Student work	37.5
/ /	1A 1B 2A 2B 3 4	Hourly Employees	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
7/1/04	1A 1B 2A 2B 3 (4)	Reconciliation and correction	13.0
/ /	1A 1B 2A 2B 3 4	of MIS Data in preparation	
/ /	1A 1B 2A 2B 3 4	for State submission	
/ /	1A 1B 2A 2B 3 4	(1 hr per month + 2 hours	
/ /	1A 1B 2A 2B 3 4	final review at year end	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sofer Fane Date 4-17-06

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 07/01/04

Henry B. Villareal — Employee Name

Dean, Enrollment Services — Exact Position Title

A&R/CSM — Department/Location

650 574-6590 — Telephone #

12mo / 11mo / 10mo / hrly — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
08/04	1A 1B 2A 2B 3 4	Staff Meeting to discuss fee collections	1
01/05	1A 1B 2A 2B 3 4	Staff Meeting to discuss fee collections	1
08/04	1A 1B 2A 2B 3 4	Review Process for paying fees online via WebSMART	1
08/04	1A 1B 2A 2B 3 4	Train staff on collecting fees online via WebSMART	1
01/05	1A 1B 2A 2B 3 4	Develop receipt for collecting fees form	2
01/05	1A 1B 2A 2B 3 4	Staff Meeting to review receipt form with staff	1
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

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Employee Signature — Date

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Fiscal Year: 04-05

Rosa Villegas
Employee Name

FA Tech.
Exact Position Title

Fin Aid | 8-211
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/24/06	1A (1B) 2A 2B 3 4	Joint meeting with Cashiers re. AR6 Process	2.0
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosa Villegas Date 4-24-06

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

JANE H. WONG — Employee Name

SR. ACCOUNTING COORDINATOR — Exact Position Title

CSM - BUSINESS SER 358-6865 — College/Department/Location Telephone #

12mo / 11mo / 10mo / hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: 1

B. Enrollment Waiver Process: 2

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 2

B. Enrollment Waiver Process: 2

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4-18-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES / CSM — Department/Location
OLIVIA AUSTEN — Employee Name
R. RETIRED EMPLOYEE - OPERATIONS ASSTS I — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly (12mo circled) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (04-05 circled)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Avelina Beeber — Employee Name
A&R Assistant II/4C0018 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Tajardo Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashier / Skyline College — Department/Location

Eric Benjamin — Employee Name

Operations Asst. II — Exact Position Title

(650) 738-4432 — Telephone #

12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUSINESS SERVICES — Department/Location
JOYCE BERGHOFF — Employee Name
ACCTG TECH — Exact Position Title
574-6220 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3 MIN					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 MIN					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3 MIN					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 MIN					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 MIN					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 MIN					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Berghoff Date 4/17/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Nathalie Berwick — Employee Name
Operations Asst. II — Exact Position Title
(650) 738-4432 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Sandra Bianchi — Employee Name
Operations Asst. I — Exact Position Title
(650) 738-4101 — Telephone #
12mo / 11mo / 10mo (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	na					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Operations/Canada College — Department/Location
Rachel Corrales, G00055001 — Employee Name
Operations II — Exact Position Title
650-306-3271 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 Minutes					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6 Minutes					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8 Minutes					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

BUSINESS OPERATIONS / CAÑADA COLLEGE — Department/Location

DOMENICA CASTELLO — Employee Name

ACCOUNTING TECHNICIAN — Exact Position Title

650 306 3270 — Telephone #

12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D CASTELLO Date 04/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Isabel Dillman — Employee Name
A&R Assistant II/4C0015 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Fajardo Date 4-25-06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline — Department/Location
Marcella Escobar Moran — Employee Name
Acctng Technician — Exact Position Title
650-738-4434 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-12-06

If you have any questions, please contact Raymond Chow, at 574-6102

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Student Financial Services Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Arlene Fajardo — Employee Name
Assistant Registrar/4C0024 — Exact Position Title
Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Fajardo Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Admissions and Records / Cañada College
Department/Location

Edith Flores
Employee Name

Admissions and Records Assistant II
Exact Position Title

650-306-3492
Telephone #

12mo / 11mo / 10mo / hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Edith Flores Date 4/24/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Elaine Grace Gamiao — Employee Name
A&R Assistant II/4C0274 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Arden Hamilton — Employee Name
Operations Asst. I — Exact Position Title
(650)738-4101 — Telephone #
12mo / 11mo / 10mo /(hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	na					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN MATEO CC DIST
District

A+R / SKYLINE COLLEGE
Department/Location

SHERRI HANCOCK
Employee Name

DEAN OF ENROLLMENT SERVICES
Exact Position Title

738-4238
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." *This information is used for cost accounting purposes only.* PLEASE USE BLUE INK

Employee Signature Sherri Hancock Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location
Vivien Huynh — Employee Name
Admissions and Records Assistant II — Exact Position Title
650-306-3395 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minute					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vivien N Huynh Date 04-24-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Neil Intendencia — Employee Name
Operations Asst. I — Exact Position Title
(650) 738-4101 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	na					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier/Skyline College — Department/Location
Joyce King-Sultana — Employee Name
Operations Asst. I — Exact Position Title
(650)738-4434 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location
Maria Lara — Employee Name
Admissions and Records Assistant III — Exact Position Title
650-306-3122 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lara Date 04/25/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Operations/Canada College — Department/Location
Ulalia Martinez, G00599727 — Employee Name
Student Assistant — Exact Position Title
650-306-3270 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	9 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 Minutes					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6 Minutes					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	12 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8 Minutes					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ulalia Martinez Date 4/24/06

If you have any questions, please contact Raymond Chow (ext 12e), at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Jeremy Mileo — Employee Name
A&R Assistant II/4C0014 — Exact Position Title
Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeremy Mileo Date 4/25/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location
Ruth Miller — Employee Name
Assistant Registrar — Exact Position Title
650-306-3125 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 11-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location
Renee Moresco — Employee Name
Admissions and Records Assistant II — Exact Position Title
650-306-3123 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renee Moresco Date 4-24-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashiers Office / CSM — Department/Location

Cheryl Navarrete — Employee Name

Accounting Technician — Exact Position Title

574-6408 — Telephone #

(12mo) / 11mo / 10mc / hrly — ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl Navarrete Date 4/18/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Services — Department/Location
Nguyen, Jeanne — Employee Name
Accounting Technician — Exact Position Title
574-6411 — Telephone #
(12mo) / 11mo / 10mc / hrly — ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 mn					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeanne Nguyen Date 4-18-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Business Operations / Cañada College
Department/Location

Mario Peña
Employee Name

Accounting Technician
Exact Position Title

650 306 3272
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/20/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Kay Rabb — Employee Name
A&R Assistant II/4C0017 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Rabb Date 4/25/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashier / Skyline College — Department/Location

Nancy Rosario Argarin — Employee Name

Operations Asst. II — Exact Position Title

(650) 738-4432 — Telephone #

~~12mo~~ / 11mo / 10mc / hrly — ~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N Argarin — Date 4/12/06

If you have any questions, please contact Raymond Chow, at 4342

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Jan Sasaki @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Gertrude Sartor — Employee Name
A&R Assistant II/4C0255 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gertrude Sartor Date April 25, 2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location
Dorothy Shiloh — Employee Name
Admissions and Records Assistant II — Exact Position Title
650-306-3124 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/20/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Magaret Skaff — Employee Name
A&R Assistant II/4C0012 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 *Updating Student File* for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Magaret A. Skaff Date 4-25-2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records / Cañada College — Department/Location

Soraya Sohrabi — Employee Name
Admissions and Records Assistant III — Exact Position Title

650-306-3494 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minute					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Soraya Sohrabi Date 4/24/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Adela Swinson — Employee Name
Admissions and Records III/4C0020 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Adela Swinson Date 04-25-06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 , TO Suki Chang @ District Office

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Geraldine Trevaskis — Employee Name
Admissions and Records II/4C0342 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have *reported actual data or have provided a good faith estimate* which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Geraldine Trevaskis Date _____

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
CSM - Business Ser. — Department/Location
Jane H. Wong — Employee Name
Sr. Accounting Coordinator — Exact Position Title
358-6865 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-18-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District (District) — BUS. SERVICES / CSM (Department/Location)

EMMA ZAN (Employee Name) — SHORT TERM HOURLY / OP. ASSISTANT I. (Exact Position Title)

Telephone # — 12mo / 11mo / 10mo / hrly (Work year length(circle)) — Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6742

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Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid / Canada
Department/Location

Margie Carrington
Employee Name

Director, Financial Aid Services
Exact Position Title

(650) 306-3174
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for ~~which~~ you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Margie Carrington Date 4/20/2006

If you have any questions, please contact Raymond Chow, at 5742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid - Skyline College
Department/Location

Karen Chadwick-White
Employee Name

Financial Aid Assistant
Exact Position Title

650-738-4236
Telephone #

12/mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04/05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 04/21/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006; TO SUKI CHANG AT DISTRICT OFFICE.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

EOPS/ College of San Mateo
Department/Location

Lorena del Mundo
Employee Name

Program Services Coordinator
Exact Position Title

(650) 574-6154
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04/05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Lorena del Mundo Date 4/24/06

If you have any questions, please contact Raymond Crow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Doreen Garcia
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6148
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Doreen Garcia Date 4/21/06

If you have any questions, please contact Raymond Chow, at 5742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Claudia Menjivar
Employee Name

Financial Aid Technician
Exact Position Title

(650) 378-7233
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04✓05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date

If you have any questions, please contact Raymond Chow, at 5742

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006 TO SUKI CHANG AT DISTRICT OFFICE.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Wendy Mininzo
Employee Name

Student Assistant
Exact Position Title

(650) 306-3307
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	12 min	Outreach			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date April 17, 2006

If you have any questions, please contact Suanne Chow, at 8742

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006 TO SUANNE CHANG AT DISTRICT OFFICE

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January 2006

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/Skyline College
Department/Location

Regina Morrison
Employee Name

Financial Aid Technician
Exact Position Title

(650) 738-4350
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6 minutes	553			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7 minutes	618			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 minutes				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7 minutes		431		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 minutes		292		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 minutes				

- Reconciliation
- Cashiers Report

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Regina Morrison Date 4-20-06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Fin. Aid / Cañada College
Department/Location

Lucy Nolasco
Employee Name

Fin. Aid Tech
Exact Position Title

306-3307
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

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Employee Signature Lucy Nolasco Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Thanh Pitetta
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6146
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1.

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/21/06

If you have any questions, please contact Raymond Crow, at 6742

PLEASE SUBMIT THIS INFORMATION BY APRIL 14, 2006 TO SUKI DHANOA AT DISTRICT OFFICE

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SMCCD — District

Financial Aid — Department/Location

Juanita Quintero — Employee Name

Financial Aid Tech — Exact Position Title

650-738-4466 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	Hrly
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6 minutes				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7 minutes				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 minutes				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7 minutes				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7 minutes				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 minutes				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juanita Quintero Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid - Cañada College
Department/Location

Soler, Faye
Employee Name

Financial Aid Technician
Exact Position Title

306-3307
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4.0				

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Employee Signature Faye Soler Date 4-17-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Rosa V. Negas
Employee Name

Exact Position Title

306-3172
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min.				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2 min.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 min.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min.				

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Employee Signature Rosa Negas Date 4-13-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	13452	14773	14587	15232	17052	13108	13202	13325
Fall	27191	26137	25375	27037	29384	27802	25591	25265
Winter/ Intersession								
Spring	22617	26987	26519	28766	29748	27776	22387	22424
Total			66681			83284		
2. Number of students who paid enrollment fees:								
Summer	11872	13057	12673	12760	13856	10946	11685	11641
Fall	25816	24808	23941	24399	26635	24872	23458	22249
Winter/ Intersession								
Spring	25271	24748	23902	25764	26545	25254	24422	20853
Total			60516			61072		
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	4761	4687	5450	6973	7564	9368	11100	10661

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/31/06

Raymond Chow — Controller

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Multipler

TERM	EFC 1*	EFC 2**	EFC 4**	EFC 5**
Summer 1998	13,452	11,872	7,851	106
Fall 1998	27,191	25,816	19,080	782
Spring 1999	27,617	25,271	18,243	293
Summer 1999	14,773	13,057	8,646	103
Fall 1999	26,137	24,808	19,620	690
Spring 2000	26,987	24,748	17,766	334
Summer 2000	14,567	12,673	10,910	71
Fall 2000	25,595	23,941	19,072	799
Spring 2001	26,519	23,902	16,386	276
Summer 2001	15,232	12,760	7,509	111
Fall 2001	27,037	24,399	16,131	834
Spring 2002	28,766	25,764	17,809	436
Summer 2002	17,052	13,856	8,829	118
Fall 2002	29,384	26,635	20,671	767
Spring 2003	29,748	26,545	19,850	474
Summer 2003	13,108	10,946	7,951	253
Fall 2003	27,802	24,872	23,890	1,368
Spring 2004	27,776	25,254	20,144	557
Summer 2004	13,202	11,645	10,329	159
Fall 2004	25,591	23,458	22,990	1,326
Spring 2005	27,387	24,422	17,775	507
Summer 2005	13,325	11,644	7,231	128
Fall 2005	25,265	22,249	18,164	785
Spring 2006	22,424	20,853	13,936	339

*Source: CCCCO Data Mart
**Source: Banner

AY	EFC 3**
1998-1999	4,761
1999-2000	4,687
2000-2001	5,450
2001-2002	6,973
2002-2003	7,564
2003-2004	9,369
2004-2005	11,100
2005-2006	10,661

Note: AY = (Fall+Spring+Summer). For eg: 2005-2006 (Fall 2005+Spring 2006+Summer 2006)

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	7851	8696	10910	7509	8829	7951	10329	2231
Fall	19080	19620	19072	16131	20671	23890	22990	18164
Winter/Intersession								
Spring	18243	12766	16386	17809	19850	20144	19775	13936
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	166	103	71	111	118	253	159	128
Fall	782	690	789	834	767	1368	1326	785
Winter/Intersession								
Spring	293	334	276	436	474	557	507	339
Total								

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Employee Signature: _____ Date 5/30/06

Raymond Chan — Employee Name: (print)

Controller — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		428	546	497	754	956	11,190	10,66

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: San Mateo County Community College District

he following cost accounting statistics will be used to calculate your reimbursement. Please report the equired information in the spaces provided.

Statistical Data	FISCAL YEARS							
	'98-9	'99-0	'00-1	'01-2	'02-3	'03-4	'04-5	'05-6
. Enrollment Fees Collected								
. Enrollment Fees Refunded								
. Enrollment Fee Revenue - Net ine 1 subtract line 2)	$	$	$	$	$	$	$	
A. Total Enrollment Fees /aived (BOGG, etc.)		$ 819,600	$ 870,276	$ 1,032,746	$ 1,205,259	$ 2,317,981	$ 3,668,449	
3. 2% Enrollment Fees Waived (Line 4A x 2%)		$ 16,392	$ 17,406	$ 20,655	$ 24,105	$ 46,360	$ 73,369	
C. . % Enrollment Fees Waived (Line 4A x 7%)		$ 57,307						
Number of credit units for which rollment fees were waived.								
ummer								
all								
inter/Intersession								
pring								
TOTAL x $0.91 per credit			$ 71,996	$ 85,436	$ 99,708	$ 134,612	$ 143,029	$

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in er for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature: _____ Date _____

loyee Name:(print) _____ Position or Title

u have any questions, please contact _____, at _____.

AS[illegible]UBMIT THIS INFORMATION BY _____; TO _____.

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San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

SMCCCD PRODUCTIVE HOURLY RATE UPDATE

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Adamson, Elaine	A&R Assistant	$26.83	$28.35	$29.77					
Arevalo, Mariza	A&R Assistant	$21.70	$21.70						
Argarin, Nancy	Operations Assistant I							$32.39	
Argarin, Nancy	Sr. Accounting Coordinator								$36.61
Austen, Olivia	A&R Assistant	$25.16	$27.06	$28.41					
Austen, Olivia	Operations Assistant I						#VALUE!	38.61 #VALUE!	
Azadeh Jorgensen	HR Rep.							$33.19	$39.12
Beeber, Avelina	A&R Assistant			$24.04	$26.95	$29.26	$33.20	$34.03	
Benjamin, Eric	Operations Assistant II							$37.64	$37.64
Benjamin, Eric	Operations Assistant I						$33.20		
Benjamin, Eric	Office Assistant II					$30.68			
Berghoff, Joyce	Accounting Technician							$38.67	
Berghoff, Joyce	Operations Assistant I						$35.90		
Berwick Natalie	Operations Assistant II	$30.73	$31.66	$34.80	$38.15	$39.30	$40.47	$40.47	
Bianchi, Gloria	A&R Assistant	$26.37							
Bianchi, Sandra	Operations Assistant I							38.61	
Cabeza, Genevieve	A&R Assistant	$21.70	$22.35						
Carbajal, Faviola	A&R Assistant	$25.01	$26.90						
Carlson, Virginia (Staff Asst for 00-01)	A&R Assistant	$27.10	$28.63	$30.75					

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Jerez, Brenda			$21.81						
Karen Chadwick-White	Financial Aide Assistant		$11.52	$12.14	$31.30	$29.25	$33.92	$34.94	$35.81
Kathy Blackwood	Chief Financial Officer							$89.67	$96.52
King-Suttana, Joyce	Operations Assistant I	$27.80	$30.12	$31.62	$33.83	$34.85	$36.77	#VALUE!	
Knoebel, Lori	Operations Assistant I	$25.75	$27.86	$30.77	$32.93	$33.92		38.61	
Landon, Sally	Operations Assistant I	$25.73							
Lara, Maria	A&R Assistant	$26.06	$26.70	$30.11	$33.23	$36.55	$37.73	$38.65	$39.61
McClure, Thomas	A&R Assistant						$26.49		
Mendez, Maria	Operations Assistant I						$36.77		
Menjivar, Claudia	Financial Aid Tech		#VALUE!	$29.25	$30.77	$35.65	$38.45	$43.76	$48.98
Mileo, Jeremy	A&R Assistant			$24.35	$27.30	$29.64	$33.63	$34.47	$34.47
Miller, Ruth	Assistant Registrar	$41.82	$43.97	$47.45	$43.01	$54.92	$56.56	$57.21	$54.09
Minchez, Wendy	Staff Assistant					#VALUE!	#VALUE!	58.27 #VALUE!	$9.27
Minoo Aram	Benefit Manager	$27.06	$29.10	$4.80	$4.88	$4.92	$4.92	$59.55	$59.55
Moore, Walter	A&R Assistant			$24.04					
Mora, Marcella	Accounting Technician							$32.39	$34.03
Moresco, Renee	A&R Assistant							$36.44	$37.34
Morrison, Regina	Financial Aide Assistant II		$27.86	$27.96	$29.31	$39.45	$33.87	$40.11	$40.11
Navarette, Chreryl	Operations Assistant I			$32.39	$34.66	$35.70	$37.38	38.61	
Ng, Joseph	A&R Assistant	$25.79							
Nguyen, Jeanne	Accounting Technician							$40.27	$40.27
Nolasco, Lucy	Financial Aid Tech		$28.45	$30.81	$32.35	$37.34	$38.45	$38.45	$37.90

San ..ateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Piscitello, Marie	Operations Assistant I								
Pitetta, Thanh	Financial Aid Tech							39.07 #VALUE!	$33.20
Pugh, Valerie	A&R Assistant	$23.79							
Pulido, Yanely	Financial Aid Tech								$35.93
Quintero, Juanita	Office Assistant II			#VALUE!	#VALUE!	#VALUE!	#VALUE!	$26.01	$26.66
Rabb, Kay	A&R Assistant			$24.04	$26.95	$29.26	$33.20	$34.03	$34.03
Raby, Melissa	Dean of Enrollment Services							$75.45	$79.25
Raymond Chow	Controller	$45.23	$45.23	$52.15	$54.75	$60.35	$62.15	$62.15	$69.73
Reppond, Meghan	Staff Assistant			$27.66	$28.49				
Romero, Jose	A&R Assistant	$28.45	$29.46	$31.19	$32.75				
Sarto, Gertrude	A&R Assistant	$22.92	$25.49	$28.07	$31.55	$32.49	$35.16	$34.30	$35.51
Shiloh, Dorothy	A&R Assistant	$26.06	$26.70	$28.21	$27.05	$33.12	$34.11	$34.94	$35.81
Skaff, Margaret	A&R Assistant	$26.06	$26.70	$28.21	$30.06	$33.12	$34.11	$34.11	$2.98
Skaff, Margaret	Progran Coordinator								$35.32
Sohrabi, Soraya	A&R Assistant	$25.79	$26.37	$27.86	$29.62	$34.34	$37.18	$37.18	$38.67
Soler, Faye	Financial Aid Tech		$30.82	$33.87	$36.25	$37.34	$38.45	$39.42	$37.90
Srinivasan, Niruba	A&R Assistant		$1.97	$5.96	$20.60	$27.05			
Suki Chang	Executive Secretary	$31.08	$35.36	$35.36	$39.74	$40.93	$42.15	$42.15	$43.21
Swinson, Adela	A&R Assistant					$26.49	$29.26	$31.60	$34.03
Swinson, Adela	Admissions and Records III			#VALUE!	#VALUE!				
Taeko Forrest	HR Rep.				$29.93	$34.68	$41.37	$43.21	$43.21
Tong, Susie	A&R Assistant	$24.52	$26.37	$27.86	$29.25				
Trevaskis, Geraldine	A&R Assistant	$25.65	$26.24	$27.76	$29.14	$32.12	$36.85	$36.85	$37.77
Trinh, Annie	Accounting Technician								$35.81

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Tubbs, Gail	Financial Aid Tech			$32.35	$33.87	$37.34	$38.45		
Urena, Javier	A&R Assistant						$35.72		
Villareal, Henry	Dean, Admission & Record				$65.93	$71.47	$77.31	$83.01	$83.01
Villegas, Rosa	Financial Aid Tech				#VALUE!	#VALUE!	#VALUE!	38.45 #VALUE!	$32.39
Viviani, Angela	A&R Assistant	$27.34	$30.28	$24.62					
Walker, Wikima	A&R Assistant	$3.62	$10.17						
William-Cox, Chequitq	A&R Assistant								$9.90
Wong, Jane	Operations Assistant II	$28.95	$31.35	$34.80	$37.24	$38.36	$39.51		
Wong, Jane	Sr. Accounting Coordinator							$42.51	
Young, Lai H	Operations Assistant I	$4.89	#VALUE!						
Zan, Emma	Operations Assistant I	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	38.61 #VALUE!	
Zebergs, Nancy	Staff Assistant	$27.70	$28.43	$30.00	$31.50	$34.71			
	A&R Assistant II					$30.68			
	Accounting Tech.							$40.27	$40.27
	Operations Assistant I		$28.63	$31.62	$33.83	$34.85	$36.77		

San Mateo County Community College PHR'S

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Bergsteadt, Stacey	Operations I		---	---	---	---	---	---
Benecourt, Olivia	Operations I						---	---
Castillo, Domenica	Account Tech.	---	---	---	---	---		40.27
Corrales, Rachel	Operations II							40.27
Diaz, Blanca	Staff Assistant	---	---			---	---	---
Grafe, Jennifer	Operations II				---	---	---	---
Gacutan, Golda	Operations Asst. I	---	---	---	---		---	---
Kelly, Charlotte	Operations I			---	---	---	---	---
Lleras, Natalia	Staff Assistant	---	---	---			---	---
Martinez, Ulalia	Staff Assistant	---	---	---				38.27
Pena, Mario	Account Tech.	---	---					40.27
Stetson, David	A& R Assistant II	---					---	---

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

SMCCCD PRODUCTIVE HOURLY RATE UPDATE

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Adamson, Elaine	A&R Assistant	$26.83	$28.35	$29.77					
Arevalo, Mariza	A&R Assistant	$21.70	$21.70						
Argarin, Nancy	Operations Assistant I							$32.39	
Argarin, Nancy	Sr. Accounting Coordinator								$36.61
Austen, Olivia	A&R Assistant	$25.16	$27.06	$28.41					
Austen, Olivia	Operations Assistant I						#VALUE!	#VALUE! 38.61	
Azadeh Jorgensen	HR Rep.							$33.19	$39.12
Beeber, Avelina	A&R Assistant			$24.04	$26.95	$29.26	$33.20	$34.03	
Benjamin, Eric	Operations Assistant II							$37.64	$37.64
Benjamin, Eric	Operations Assistant I						$33.20		
Benjamin, Eric	Office Assistant II					$30.68			
Berghoff, Joyce	Accounting Technician							$38.67	
Berghoff, Joyce	Operations Assistant I						$35.90		
Berwick Natalie	Operations Assistant II	$30.73	$31.66	$34.80	$38.15	$39.30	$40.47	$40.47	
Bianchi, Gloria	A&R Assistant	$26.37							
Bianchi, Sandra	Operations Assistant I				33.83	34.85	36.77	38.61 4-1-05	
Cabeza, Genevieve	A&R Assistant	$21.70	$22.35	23.41					
Carbajal, Faviola	A&R Assistant	$25.01	$26.90						
Carlson, Virginia (Staff Asst for 00-01)	A&R Assistant	$27.10	$28.63	$30.75					

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Carrington, Margie	Director, FA					$45.48	$55.33	$58.09	$62.67
Claros, Randy	Financial Aid Tech								$34.04
Cody Pelletier	Employment Manager							$59.55	$59.55
David Feune	HR Rep.	$25.23	$30.30	$30.30	$33.67	$34.68	$37.88	$43.21	$43.21
Degree, Elizabeth	A&R Assistant		$22.89	$24.04					
del Mundo, Lorena	Progran Services Coordinator		$21.98	$23.75	$26.23	$30.38	$32.80	$32.80	$33.62
Dillman, Isabel	A&R Assistant	$22.05	$24.37	$26.98			$35.44	$34.57	$35.17
Dillman, Isabel	A&R Assistant			$25.29	$28.40	$32.88			
Dunbar, Joanne	Assistant Registrar	$45.61	$47.99	$50.39	$53.93	$55.54			
Escobar, Maria	Director, FA								$69.73
Fajardo, Arlene	A&R Assistant	$28.22	$30.58	$32.11	$37.98			39.57	
Fajardo, Arlene	Assistant Registrar					$45.18	$49.40	$53.18	$55.83
Flores, Edith	A&R Assistant	$14.69	$15.06	$15.91	$16.71	$18.84	$19.40	$19.40	$20.20
Gacutan, Golda	Operations Assistant I					34.85 #VALUE!			
Gamiao, Elaime Grance	A&R Assistant		$22.89	$25.19	$28.41	$30.68	$31.16	$34.03	$34.03
Garcia, Doreen	Financial Aid Tech		$32.35	$33.87	$37.34	$37.34	$38.45	$38.45	$38.45
Hamilton, Arden					#VALUE! 32.55	#VALUE! 37.34	#VALUE! 38.45	#VALUE! 38.45	
Hamilton, Arden	Accounting Technician I								$30.90
Hamlin, Jessica	Financial Aid Tech								$25.91
from H. Hathaway Hancock, Sherri	Dean of Enrollment Services 1.05	56.95	69.80	62.29	55.93	71.47	$73.62	$79.25	
Huynh, Vivien	A&R Assistant					$15.45	$27.28	$28.60	$30.90
Intendencia, Neil	Operations Assistant I							32.39	

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Jerez, Brenda			$21.81						
Karen Chadwick-White	Financial Aide Assistant		$11.52	$12.14	$31.30	$29.25	$33.92	$34.94	$35.81
Kathy Blackwood	Chief Financial Officer							$89.67	$96.52
King-Suttana, Joyce	Operations Assistant I	$27.80	$30.12	$31.62	$33.83	$34.85	$36.77	#VALUE!	
Knoebel, Lori	Operations Assistant I	$25.75	$27.86	$30.77	$32.93	$33.92			
Landon, Sally	Operations Assistant I	$25.73							
Lara, Maria	A&R Assistant	$26.06	$26.70	$30.11	$33.23	$36.55	$37.73	$38.65	$39.61
McClure, Thomas	A&R Assistant						$26.49		
Mendez, Maria	Operations Assistant I						$36.77		
Menjivar, Claudia	Financial Aid Tech		#VALUE!	$29.25	$30.77	$35.65	$38.45	$43.76	$48.98
Mileo, Jeremy	A&R Assistant			$24.35	$27.30	$29.64	$33.63	$34.47	$34.47
Miller, Ruth	Assistant Registrar	$41.82	$43.97	$47.45	$43.01	$54.92	$56.56	$57.21	$54.09
Minchez, Wendy	Staff Assistant					#VALUE!	#VALUE!	#VALUE!	$9.27
Minoo Aram	Benefit Manager	$27.06	$29.10	$4.80	$4.88	$4.92	$4.92	$59.55	$59.55
Moore, Walter	A&R Assistant			$24.04					
Mora, Marcella	Accounting Technician							$32.39	$34.03
Moresco, Renee	A&R Assistant							$36.44	$37.34
Morrison, Regina	Financial Aide Assistant II		$27.86	$27.96	$29.31	$39.45	$33.87	$40.11	$40.11
Navarette, Chreryl	Operations Assistant I			$32.39	$34.66	$35.70	$37.38		
Ng, Joseph	A&R Assistant	$25.79							
Nguyen, Jeanne	Accounting Technician							$40.27	$40.27
Nolasco, Lucy	Financial Aid Tech		$28.45	$30.81	$32.35	$37.34	$38.45	$38.45	$37.90

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Piscitello, Marie	Operations Assistant I	27.80	28.63	31.62	33.83				
Pitetta, Thanh	Financial Aid Tech							39.42 #VALUE!	$33.20
Pugh, Valerie	A&R Assistant	$23.79							
Pulido, Yanely	Financial Aid Tech								$35.93
Quintero, Juanita	Office Assistant II		15.06	15.91 #VALUE!	16.71 #VALUE!	18.84 #VALUE!	17.40 #VALUE!	$26.01	$26.66
Rabb, Kay	A&R Assistant			$24.04	$26.95	$29.26	$33.20	$34.03	$34.03
Raby, Melissa	Dean of Enrollment Services							$75.45	$79.25
Raymond Chow	Controller	$45.23	$45.23	$52.15	$54.75	$60.35	$62.15	$62.15	$69.73
Reppond, Meghan	Staff Assistant			$27.66	$28.49	39.71			
Romero, Jose	A&R Assistant	$28.45	$29.46	$31.19	$32.75				
Sarto, Gertrude	A&R Assistant	$22.92	$25.49	$28.07	$31.55	$32.49	$35.16	$34.30	$35.51
Shiloh, Dorothy	A&R Assistant	$26.06	$26.70	$28.21	$27.05	$33.12	$34.11	$34.94	$35.81
Skaff, Margaret	A&R Assistant	$26.06	$26.70	$28.21	$30.06	$33.12	$34.11	$34.11	$2.98
Skaff, Margaret	Progran Coordinator								$35.32
Sohrabi, Soraya	A&R Assistant	$25.79	$26.37	$27.86	$29.62	$34.34	$37.18	$37.18	$38.67
Soler, Faye	Financial Aid Tech		$30.82	$33.87	$36.25	$37.34	$38.45	$39.42	$37.90
Srinivasan, Niruba	A&R Assistant		$1.97	2-16 $5.96	$20.60	$27.05			
Suki Chang	Executive Secretary	$31.08	$35.36	$35.36	$39.74	$40.93	$42.15	$42.15	$43.21
Swinson, Adela	A&R Assistant					$26.49	$29.26	$31.60	$34.03
Swinson, Adela	Admissions and Records III			27.86 #VALUE!	27.67 #VALUE!				
Taeko Forrest	HR Rep.				$29.93	$34.68	$41.37	$43.21	$43.21
Tong, Susie	A&R Assistant	$24.52	$26.37	$27.86	$29.25				
Trevaskis, Geraldine	A&R Assistant	$25.65	$26.24	$27.76	$29.14	$32.12	$36.85	$36.85	$37.77
Trinh, Annie	Accounting Technician								$35.81

San Mateo CCD
Enrollment Fee Collections Waivers
Productive Hourly Rates
F/Y: 1998-99 to 2004-05

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Tubbs, Gail	Financial Aid Tech			$32.35	$33.87	$37.34	$38.45		
Urena, Javier	A&R Assistant						$35.72		
Villareal, Henry	Dean, Admission & Record				$65.93	$71.47	$77.31	$83.01	$83.01
Villegas, Rosa	Financial Aid Tech				32.55 / #VALUE!	37.24 / #VALUE!	38.43 / #VALUE!	38.43 / #VALUE!	$32.39
Viviani, Angela	A&R Assistant	$27.34	$30.28	$24.62					
Walker, Wikima	A&R Assistant	~~$3.62~~	~~$10.17~~						
William-Cox, Chequitq	A&R Assistant	27.59	30.28						
Wong, Jane	Operations Assistant II	$28.95	$31.35	$34.80	$37.24	$38.36	$39.51		$9.90
Wong, Jane	Sr. Accounting Coordinator							$42.51	
Young, Lai H	Operations Assistant I	$4.89	28.63 / #VALUE!						
Zan, Emma	Operations Assistant I	27.80 / #VALUE!	#VALUE! / 28.63	#VALUE! / 31.62	#VALUE! / 33.83	#VALUE!	#VALUE! / 36.77	#VALUE! / 38.61	
Zebergs, Nancy	Staff Assistant	$27.70	$28.43	$30.00	$31.50	$34.71			
	A&R Assistant II					$30.68			
	Accounting Tech.								
	Operations Assistant I		$28.63	$31.62	$33.83	$34.85	$36.77	$40.27	$40.27

Corrale, [illegible] Operations II
Martinez, Ulalia Staff Asst.
Carrillo, Domenica Acct Tech,

[illegible], Olivia Operations
[illegible], Natalia Staff Asst.
[illegible]

5-05-06

San Mateo County Community College PHR'S

Name	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Bergsteadt, Stacey	Operations I	27.80	---	---	---	---	---	---
Benecourt, Olivia	Operations I	27.80	30.12	31.62	33.83	34.85	---	---
Castillo, Domenica	Account Tech.	---	---	---	---	---	38.45	40.27
Corrales, Rachel	Operations II	30.73	31.66	34.80	38.15	39.30	40.47	40.47
Diaz, Blanca	Staff Assistant	---	---	30.00	31.50	---	---	---
Grafe, Jennifer	Operations II	30.73	31.66	34.80	---	---	---	---
Gacutan, Golda	Operations Asst. I	---	---	---	---	35.70	---	---
Kelly, Charlotte	Operations I	27.80	30.12	---	---	---	---	---
Lleras, Natalia	Staff Assistant	---	---	---	31.50	34.71	---	---
Martinez, Ulalia	Staff Assistant	---	---	---	31.50	34.71	36.45	38.27
Pena, Mario	Account Tech.	---	---	30.81	32.35	37.84	38.45	---
Stetson, David	A& R Assistant II	---	26.06	26.76	28.21	30.06	---	---

Schedule 6
San Mateo Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Contracted Services

Purpose: To calculate the total contracted services fees.
Source: Invoices from Prestige Graphics, inc.
Findings:

Page	Date	Amount	
1	July 27, 2004	$	7,800.00
2	August 13, 2004	$	4,963.34
3	August 19, 2004	$	6,580.50
4	September 8, 2004	$	1,995.52
5	January 13, 2005	$	4,770.33
6	February 4, 2005	$	3,208.64
7	June 15, 2005	$	4,688.01
	Total	**$**	**34,006.34**

Conclusion: Findings go forward to the EFCW-2.

Mandated Cost Reimbursement - SMCCCD - ITS

Tip to Forms		$17,259.16	Screen prints of Purchase Orders, Invoices and Check Information provided.
plus postage		$39,047.00	Postage cost limited to what could be documented.
Vanier Graphics		$7,576.68	Screen prints of Purchase Orders, Invoices and Check Information provided.
Reynolds & Reynolds		$24,839.12	Screen prints of Purchase Orders, Invoices and Check Information provided.
Standard Register	July 2000 - Oct 2003	$353,939.90	Screen prints of Purchase Orders, Invoices and Check Information provided.
Prestige Graphics	Jan 2004 - Feb 2006	$91,083.60	Copies of Invoices and Checks provided.
Total		$533,745.46	

SAN MATEO JUNIOR COLLEGE
DISTRICT
AUG 3 6 54 AM '04

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 • Fax (858) 560-1473

July 27, 2004

I0500786

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 209.04.05

P0500365
PO: ~~400906~~

Registration Statement Postage Invoice
Mailing Date August 8, 2004

Postage First Class – Quantity 26,000 @ $ .30ea. $ 7,800.00

Postage Amount Due: $ 7,800.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 7,800.00	-0-	-0-	$ 7,800.00

Due Prior To Mailing Date

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

SAN MATEO JUNIOR COLLEGE DISTRICT
AUG 18 9 48 AM '04

August 13, 2004

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 226.8.04.SM

PO:P0500365

Fall 2004
Registration Statements

Records Processed: 21,935

Canada College:	4,813 Records @ $ .21 ea.	$ 1,010.73
College Of San Mateo:	9,375 Records @ $ .21 ea.	$ 1,968.75
Skyline College:	7,747 Records @ $ .21 ea.	$ 1,626.87
TOTALS:	21,935 Records @ $ .21 ea.	$ 4,606.35

	Freight	Tax	Total Due
$ 4,606.35	-0-	356.99	$ 4,963.34

TERMS – NET 20

Approved
Please Pay. Item
8/18/04

SAN MATEO JUNIOR COLLEGE DISTRICT
AUG 19 1 05 PM '04

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 • Fax (858) 560-1473

August 19, 2004

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 232.04.04 I0501190 **PO: 500365**

Registration Statement Postage Invoice
Mailing Date September 3, 2004

Postage First Class – Quantity 26,000 @ $ .30ea.	**$ 7,800.00**
Postage Account Credit Balance: 08.13.04	**($ 1,219.50)**
Amount Due:	**$ 6,580.50**

Postage Amount Due: $ 6,580.50
(Postage is non-taxable)

approved
please pay
PO500365
Item 4-10

	Freight	Tax	Total Due
$ 6,580.50	-0-	-0-	$ 6,580.50

8/19/04

Due Prior To Mailing Date

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

September 8, 2004

SAN MATEO JUNIOR COLLEGE DISTRICT
SEP 20 7 29 AM '04

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

S-Tax 7.75

I 0502989

Invoice No: 252.9.04.SM

PO:P0500365

Fall 2004
Registration Statements

Records Processed: 8,819

Skyline College:	8,819 Records @ $ .21 ea.	$ 1,851.99
TOTALS:	8,819 Records @ $ .21 ea.	$ 1,851.99

	Freight	Tax	Total Due
$ 1,851.99	-0-	143.53	$ 1,995.52

Please charge account
10002 2335 5690 62000

TERMS – NET 20

approved please pay
PO500365, Item 1

9/17/04

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

SAN MATEO COMMUNITY COLLEGE DISTRICT
JAN 20 11 56 AM '05

January 13, 2005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 352.05.1SM

PO:P0500365

Spring 2005
Registration Statements

Records Processed: 21,082

Canada College:	4,665 Records @ $ .21 ea.	$ 979.65	
College Of San Mateo:	8,864 Records @ $ .21 ea.	$ 1,861.44	
Skyline College:	7,553 Records @ $ .21 ea.	$ 1,586.13	
TOTALS:	21,082 Records @ $ .21 ea.	$ 4,427.22	

	Freight	Tax	Total Due
$ 4,427.22	-0-	343.11	$ 4,770.33

TERMS – NET 20

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

February 4, 2005

Vickie Nunes
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

S-4x 215

Invoice No: 330.05.SM1 E0508729

PO:500365

Spring 2005
Registration Statements

Please Chg Item 9 + following accts!

Records Processed: 6,833

Skyline College:	✓6,833 Records @ $ .21 ea.	$ 1,434.93 10002 2333 5690 621000
TOTALS:	6,833 Records @ $ .21 ea.	$ 1,434.93

Postage Due

First Class Postage	Debit Balance Due *(Non-Taxable)*	$ 1,662.50

Postage: 10002 2227 5820 673005 4)

	Postage	Tax	Total Due
$ 1,434.93	1,662.50	111.21	$ 3,208.64

TERMS – NET 20

OK to pay
Jayne Harris
02/10/05

2/10/05

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

June 15, 2005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 166.05.SM

PO:500365

Summer 2005
Registration Statements

Records Processed: 13,802

chg item 1

Canada College:	2,377 Records @ $ .21 ea.	$ 499.17 10003 3333 5690 621000
College Of San Mateo:	5,769 Records @ $ .21 ea.	$ 1,211.49 10004 4333 5690 621000
Skyline College:	5,656 Records @ $ .21 ea.	$ 1,187.76 10002 2333 5690 621000
TOTALS:	13,802 Records @ $ .21 ea.	$ 2,898.42

Additional Postage Due To Zero Postage Account: $ 1,564.96
(Non-Taxable) *See Statement Of Postage As of June 15, 2005*

	Freight	Tax	Total Due
$ 4,463.38	-0-	224.63	$ 4,688.01

chg 10003 3333 5820 621000 #270.74
10002 2227 5820 673005 #640.07
10004 4333 5820 621000 #654.15

TERMS – NET 20

OK to pay, PO500365

6/20/05

SAN MATEO JUNIOR COLLEGE DISTRICT

AUG 3 6 54 AM '04

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 • Fax (858) 560-1473

July 27, 2004

IO 500786

[redacted]

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 209.04.05

PO: ~~400906~~

Registration Statement Postage Invoice
Mailing Date August 8, 2004

Postage First Class – Quantity 26,000 @ $ .30ea. $ 7,800.00

Postage Amount Due: $ 7,800.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 7,800.00	-0-	-0-	$ 7,800.00

Due Prior To Mailing Date

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

322567 1849 1210

NON-NEGOTIABLE UNTIL ISSUE DATE

ISSUE DATE
08/09/2004

CHECK AMOUNT
$*****7,800.00

Seven Thousand Eight Hundred & 00/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
350 California Street
San Francisco, CA 94104

VOID
FILE COPY

C3453322567C A121000497A 7020010074C

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION DISTRIBUTION	AMOUNT	DISCOUNT	TAX	ADDL CHARGES	TOTAL
209.04.05	P0500365	10500786	10002-2227-5820-673005	2652.00	.00	.00	.00	7,800.00
			10003-3333-5820-621000	1716.00				
			10004-4333-5820-621000	3432.00				

CHECK NUMBER	PAYMENT DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL	TOTAL AMOUNT
322567	08/05/04	330314956	.00	.00	.00	*****7,800.00

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9381
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

SAN MATEO JUNIOR COLLEGE DISTRICT
AUG 18 9 48 AM '04

August 13, 2004

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 226.8.04.SM

PO:P0500365

Fall 2004
Registration Statements

Records Processed: 21,935

Canada College:	4,813 Records @ $ .21 ea.	$ 1,010.73
College Of San Mateo:	9,375 Records @ $ .21 ea.	$ 1,968.75
Skyline College:	7,747 Records @ $ .21 ea.	$ 1,626.87
TOTALS:	21,935 Records @ $ .21 ea.	$ 4,606.35

	Freight	Tax	Total Due
$ 4,606.35	-0-	356.99	$ 4,963.34

TERMS – NET 20

Approved
Please pay. Item 1
8/18/04

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 U Fax (858) 560-1473

SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Fall 2004 Registration Statement Summary Statement of Activity
August 13, 2004

Site	Quantity Processed	Quantity Mailed	Postage Expense
Canada	4,813	4,813	$ 1,443.90
San Mateo	9,375	9,375	$ 2,812.50
Skyline	7,747	7,747	$ 2,324.10
TOTALS:	21,935	21,935	$ 6,580.50

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

323439 1149/1210

NON-NEGOTIABLE
UNTIL ISSUE DATE

ISSUE DATE
08/25/2004

CHECK AMOUNT
$*****4,963.35

Four Thousand Nine Hundred Sixty Three & 35/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

VOID
FILE COPY

Union Bank
350 California Street
San Francisco, CA 94104

C3453323439C A121000497A 7020010074C

VENDOR NUMBER	INVOICE NUMBER			INVOICE AMOUNT	DISCOUNT	TAX	ADDL CHG	NET AMOUNT
226.8.04.SM	P0500365	10501132	10002-2333-5690-621000	1626.87	.00	357.00	.00	4,963.35
			10003-3333-5690-621000	1010.73				
			10004-4333-5690-621000	1968.75				

CHECK NUMBER	PAYMENT DATE			TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHG	TOTAL AMOUNT
323439	08/23/04	330314956		.00	357.00	.00	*****4,963.35

SAN MATEO JUNIOR COLLEGE DISTRICT

AUG 19 1 05 PM '04

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 ● Fax (858) 560-1473

August 19, 2004

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 232.04.04 E0501190 **PO: 500365**

Registration Statement Postage Invoice
Mailing Date September 3, 2004

Postage First Class – Quantity 26,000 @ $ .30ea.	**$ 7,800.00**
Postage Account Credit Balance: 08.13.04	**($ 1,219.50)**
Amount Due:	**$ 6,580.50**

Postage Amount Due: $ 6,580.50
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 6,580.50	-0-	-0-	$ 6,580.50

Due Prior To Mailing Date

approved
Please Pay
PO 500365
Item 4-90

8/19/04

San Mateo County Community College District

Statement Of Postage Account Balance As Of August 13, 2004

Date	Reference	Description	Amount	Balance
08-11-04	CK Deposit # 322567	Postage Deposit	7,800.00	7,800.00
08-13-04	Registration Statements	Fall 04'	(6,580.50)	1,219.50
Account Balance as of August 13, 2004				$ 1,219.50

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

NON-NEGOTIABLE
UNTIL ISSUE DATE

ISSUE DATE
08/25/2004

323438 1149
1210

CHECK AMOUNT
$*****6,580.50

Six Thousand Five Hundred Eighty & 50/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
350 California Street
San Francisco, CA 94104

VOID
FILE COPY

C3453323438C A121000497A 7020010074C

VENDOR			DISTRIBUTION					
232.04.04	P0500365	I0501190	10002-2227-5820-673005	2237.37	.00	.00	.00	6,580.50
			10003-3333-5820-621000	1447.71				
			10004-4333-5820-621000	2895.42				

CHECK NUMBER	CHECK DATE		VENDOR NUMBER				TOTAL ADJ.	TOTAL AMOUNT
323438	08/23/04		330314956			.00	.00	.00 *****6,580.50

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

September 8, 2004

SAN MATEO JUNIOR COLLEGE DISTRICT
SEP 20 7 29 AM '04

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

S-Tax 0.75

I0502989

Invoice No: 252.9.04.SM

PO:P0500365

Fall 2004
Registration Statements

Records Processed: 8,819

Skyline College:	8,819 Records @ $ .21 ea.	$ 1,851.99
TOTALS:	8,819 Records @ $ .21 ea.	$ 1,851.99

	Freight	Tax	~~Total Due~~
$ 1,851.99	-0-	143.53	$ 1,995.52

Please charge account
10002 23330 2345-5690 621000

TERMS – NET 20

approved please pay
PO500365, Item 1

9/17/04

SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Fall 2004 Registration Statement Summary Statement of Activity
September 9, 2004

Site	Quantity Processed	Quantity Mailed	Postage Expense
Skyline	8,819	8,819	$ 2,645.70
TOTALS:	8,819	8,819	$ 2,645.70

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

326697 1149/1210

NON-NEGOTIABLE
UNTIL ISSUE DATE
ISSUE DATE
09/24/2004

CHECK AMOUNT
$*****1,995.52

One Thousand Nine Hundred Ninety Five & 52/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
350 California Street
San Francisco, CA 94104

VOID
FILE COPY

C3453326697C A121000497A 7020010074C

VENDOR INVOICE NUMBER	PO NUMBER	INVOICE NUMBER	ACCOUNTING INFORMATION DISTRIBUTION	AMOUNT	DISCOUNT	TAX	MISC CHARGES	TOTAL
252.9.04.SM	P0500365	I0502989	10002-2333-5690-621000	1851.99	.00	143.53	.00	1,995.52
			10003-3333-5690-621000	.00				
			10004-4333-5690-621000	.00				

CHECK NUMBER	PAYMENT DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL MISC	TOTAL AMOUNT
326697	09/22/04	330314956	.00	143.53	.00	*****1,995.52

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

SAN MATEO-FOSTER COMMUNITY COLLEGE DISTRICT
JAN 20 11 56 AM '05

January 13, 2005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 352.05.1SM

PO:P0500365

Spring 2005
Registration Statements

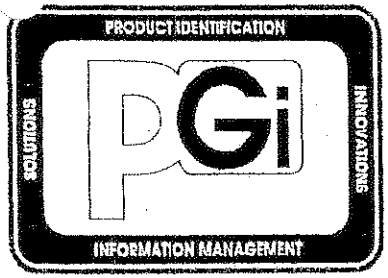
Records Processed: 21,082

Canada College:	4,665 Records @ $ .21 ea.	$ 979.65	chg 1000 3333 5690 621000
College Of San Mateo:	8,864 Records @ $ .21 ea.	$ 1,861.44	10004 4333 5690 621000
Skyline College:	7,553 Records @ $ .21 ea.	$ 1,586.13	10002 2333 5690 621000
TOTALS:	21,082 Records @ $ .21 ea.	$ 4,427.22	

	Freight	Tax	Total Due
$ 4,427.22	-0-	343.11	$ 4,770.33

1/20/05

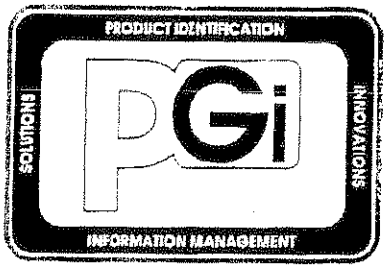
TERMS – NET 20



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Spring 2005 Registration Statement Summary Statement of Activity

Site	Quantity Processed	Quantity Mailed	Postage Expense
Canada	4,665	4,665	$ 1,399.50
San Mateo	8,864	8,864	$ 2,659.20
Skyline	7,553	7,553	$ 2,265.90
TOTALS:	21,082	21,082	$ 6,324.60



San Mateo County Community College District

Statement Of Postage Account Balance As Of January 13, 2005

Date	Reference	Description	Amount	Balance
08-11-04	CK Deposit # 322567	Postage Deposit	7,800.00	7,800.00
08-13-04	Registration Statements	Fall 04'	(6,580.50)	1,219.50
08-25-04	CK Deposit # 323438	Postage Deposit	6,580.50	7,800.00
08-26-04	Dean Letters	Summer 04'	(78.00)	7,722.00
09-08-04	Registration Statements	Fall 04'	(2,645.70)	5,076.30
09-29-04	CK Deposit # 326788	Postage Deposit	11,020.00	16,096.30
10-18-04	Appointment Postcards	Spring 05'	(8,772.30)	7,324.00
01-12-05	Registration Statement	Spring 05'	(6,324.60)	999.40

Account Balance as of January 13, 2005	$ 999.40

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

NON-NEGOTIABLE
UNTIL ISSUE DATE

332723 1149/1210

ISSUE DATE
01/24/2005

CHECK AMOUNT
$*****4,770.33

Four Thousand Seven Hundred Seventy & 33/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

VOID
FILE COPY

Union Bank
350 California Street
San Francisco, CA 94104

C3453332723C A121000497A 7020010074C

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
352.05.1SM	P0500365	I0508095	10002-2333-5690-621000	1586.13	.00	343.11	.00	4,770.33
			10003-3333-5690-621000	979.65				
			10004-4333-5690-621000	1861.44				

CHECK NUMBER	PAYMENT DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL	TOTAL AMOUNT
332723	01/24/05	330314956	.00	343.11	.00	*****4,770.33

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

February 4, 2005

Vickie Nunes
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 330.05.SM1 20508779

PO:500365

Spring 2005
Registration Statements

Please Chg Item 9 + following accts!

Records Processed: 6,833

Skyline College:	✓6,833 Records @ $ .21 ea.	$ 1,434.93	10002 2333 5690 62100
TOTALS:	6,833 Records @ $ .21 ea.	$ 1,434.93	

Postage Due

First Class Postage	Debit Balance Due *(Non-Taxable)*	$ 1,662.50

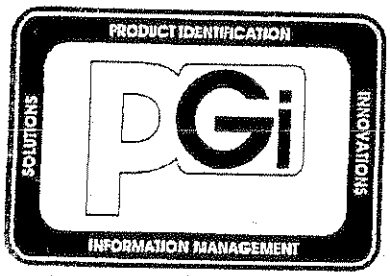
Postage: 10002 2227 5820 673005 ij

	Postage	Tax	Total Due
$ 1,434.93	1,662.50	111.21	$ 3,208.64

TERMS – NET 20

OK to pay
[signature] 02/10/05

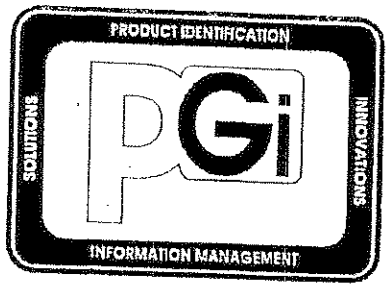
[signature]
2/10/05



San Mateo County Community College District

Statement Of Postage Account Balance As Of February 3, 2005

Date	Reference	Description	Amount	Balance
08-11-04	CK Deposit # 322567	Postage Deposit	7,800.00	7,800.00
08-13-04	Registration Statements	Fall 04'	(6,580.50)	1,219.50
08-25-04	CK Deposit # 323438	Postage Deposit	6,580.50	7,800.00
08-26-04	Dean Letters	Summer 04'	(78.00)	7,722.00
09-08-04	Registration Statements	Fall 04'	(2,645.70)	5,076.30
09-29-04	CK Deposit # 326788	Postage Deposit	11,020.00	16,096.30
10-18-04	Appointment Postcards	Spring 05'	(8,772.30)	7,324.00
01-12-05	Registration Statement	Spring 05'	(6,324.60)	999.40
01-27-05	Dean Letters	Fall 04'	(612.00)	387.40
02-03-05	Registration Statement	Spring 05'	(2,049.90)	(1,662.50)
Account Balance as of February 3, 2005				$ (1,662.50)



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Spring 2005 Registration Statement Summary Statement of Activity
February 3, 2005

Site	Quantity Processed	Quantity Mailed	Postage Expense
Skyline	6,833	6,833	$ 2,049.90
TOTALS:	6,833	6,833	$ 2,049.90

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

335189

NON-NEGOTIABLE
UNTIL ISSUE DATE

ISSUE DATE
02/16/2005

CHECK AMOUNT
$*****3,208.64

Three Thousand Two Hundred Eight & 64/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

VOID
FILE COPY

Union Bank
350 California Street
San Francisco, CA 94104

C3453335189C A121000497A 7020010074C

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION DISTRIBUTION	AMOUNT	DISCOUNT	TAX	ADDL CHARGES	TOTAL
330.05.SM1	P0500365	10508779	10002-2227-5820-673005	1662.50	.00	111.21	.00	3,208.64
			10002-2333-5690-621000	1434.93				
			10003-3333-5690-621000	.00				
			10003-3333-5820-621000	.00				
			10004-4333-5690-621000	.00				
			10004-4333-5820-621000	.00				

CHECK NUMBER	PAYMENT DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL	TOTAL AMOUNT
335189	02/16/05	330314956	.00	111.21	.00	*****3,208.64

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

June 15, 2005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 166.05.SM

PO:500365

Summer 2005
Registration Statements

Records Processed: 13,802

chg item 1

Canada College:	2,377 Records @ $ .21 ea.	$ 499.17	10003 3333 5690 1) 621000
College Of San Mateo:	5,769 Records @ $ .21 ea.	$ 1,211.49	10004 4333 5690 3) 621000
Skyline College:	5,656 Records @ $ .21 ea.	$ 1,187.76	10002 2333 5690 1) 621000
TOTALS:	13,802 Records @ $ .21 ea.	$ 2,898.42	

Additional Postage Due To Zero Postage Account: $ 1,564.96
(Non-Taxable) See Statement Of Postage As of June 15, 2005

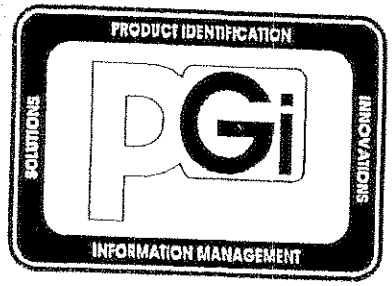
	Freight	Tax	Total Due
$ 4,463.38	-0-	224.63	$ 4,688.01

chg 10003 3333 5820 621000 #270.74
10002 2227 5820 673005 #640.07
10004 4333 5820 621000 #654.15

TERMS – NET 20

OK to pay, PO500365

6/20/05



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Summer 2005 Registration Statement Summary Statement of Activity

Site	Quantity Processed	Quantity Mailed	Postage Expense
Canada	2,377	2,377	$ 713.10
San Mateo	5,769	5,769	$ 1,730.70
Skyline	5,656	5,656	$ 1,696.80
TOTALS:	13,802	13,802	$ 4,140.60

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

NON-NEGOTIABLE
UNTIL ISSUE DATE

341032

ISSUE DATE
06/23/2005

CHECK AMOUNT
$*****4,688.00

Four Thousand Six Hundred Eighty Eight & 00/100

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

VOID
FILE COPY

Union Bank
350 California Street
San Francisco, CA 94104

C3453341032C A121000497A 7020010074C

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
166.05.SM	P0500365	10515336	10002-2227-5820-673005	640.07	.00	224.62	.00	4,688.00
			10002-2333-5690-621000	1187.76				
			10003-3333-5690-621000	499.17				
			10003-3333-5820-621000	270.74				
			10004-4333-5690-621000	1211.49				
			10004-4333-5820-621000	654.15				

CHECK NUMBER	PAYMENT DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL	TOTAL AMOUNT
341032	06/22/05	330314956	.00	224.62	.00	*****4,688.00

PRESTIGE GRAPHICS

Federal Tax ID 330314956

Vendor Invoice	District Invoice	Amount	Due Date	Check Date	Have Copy of Invoice	Have Copy of Check	Check #	Description	
01.14.03.5S	I0410144	$ 5,085.71	23-Jan-04	23-Jan-04	X	X	11293119	Registration Statements	P0400906
4004.01	I0410716	$ 6,302.70	12-Feb-04	12-Feb-04	X	X	11295325	Registration Statements	P0400906
02.049.04	I0411142	$ 5,373.28	1-Mar-04	1-Mar-04	X	X	11295814	Registration Statements	P0400906
134.04.05	I0414034	$ 2,041.28	19-May-04	19-May-04	X	X	11298915	Registration Statements	P0400906
06.160.04.S	I0415579	$ 3,451.87	16-Jun-04	16-Jun-04	X	X	11299973	Registration Statements	P0400906
170.04.01	I04L2001	$ 1,200.00	1-Jul-04	1-Jul-04	X	X	11301069	Registration Statements	P0400906
173.21.04.SM3	I04L2002	$ 909.30	1-Jul-04	1-Jul-04	X	X	11301070	Registration Statements	P0400906
0198.04SM	I04L2297	$ 555.36	15-Jul-04	15-Jul-04	X	X	11322119	Registration Statements	P0400906
0198-04SM BAL.	I04L2298	$ 732.90	15-Jul-04	15-Jul-04	X	X	11322119	Registration Statements	P0400906
209.04.05	I0500786	$ 7,800.00	5-Aug-04	5-Aug-04	X	X	11322567	Registration Statements	P0500365
226.8.04.SM	I0501132	$ 4,986.37	23-Aug-04	23-Aug-04	X	X	11323439	Registration Statements	P0500365
232.04.04	I0501190	$ 6,580.50	23-Aug-04	23-Aug-04	X	X	11323438	Registration Statements	P0500365
252.9.04.SM	I0502989	$ 2,004.78	22-Sep-04	22-Sep-04	X	X	11326697	Registration Statements	P0500365
352.05.1SM	I0508095	$ 4,792.47	24-Jan-05	24-Jan-05	X	X	11332723	Registration Statements	P0500365
330.05.SM1	I0508779	$ 3,215.81	16-Feb-05	16-Feb-05	X	X	11335189	Registration Statements	P0500365
166.05.SM	I0515336	$ 4,702.50	22-Jun-05	22-Jun-05	X	X	11341032	Registration Statements	P0500365
18905.SM PART	I05L2403	$ 1,260.51	20-Jul-05	20-Jul-05	X	X	11342664	Registration Statements	P0500365
18905.SM BAL.	I05L2404	$ 1,663.50	20-Jul-05	20-Jul-05	X	X	11342664	Registration Statements	P0500365
157-05.SM	I0600642	$ 7,800.00	1-Aug-05	1-Aug-05	X	X	11342966	Registration Postage	P0600182
224.05.1	I0601161	$ 4,745.41	22-Aug-05	22-Aug-05	X	X	11344056	Registration Statements	P0600182
245.05.6	I0602000	$ 1,965.52	15-Sep-05	15-Sep-05	X	X	11346504	Registration Statements	P0600182
361.05.SM.1	I0607145	$ 7,457.03	10-Jan-06	10-Jan-06	X	X	11351970	Registration Statements	P0600182
354.06.1SM	I0607694	$ 4,551.27	20-Jan-06	20-Jan-06	X	X	11353745	Registration Statements	P0600182
032.06.09	I0608350	$ 1,905.53	8-Feb-06	8-Feb-06	X	X	11354720	Registration Statements	P0600182

Total $ 91,083.60

306/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	District did not supply					
p/E.C. 76300 (c)	2% of Revenue Rec'd.	Will use Chancellor's website numbers			$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 819,600	$ 870,276	$ 1,032,746	$ 1,205,259	$ 2,317,981	$ 3,668,449
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,392	$ 17,406	$ 20,655	$ 24,105	$ 46,360	$ 73,369
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 57,307					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee	16,392	79,116	93,886	109,569	147,924	157,174
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 71,996	$ 85,436	$ 99,708	$ 134,611	$ 143,028

For 00-01 through 04-05 - unit fee

Summary

2% of line 3	2% of Revenue Rec'd.	Will use Chancellor's website numbers			$ -	$ -	$ -
1.8-4 line 4B.	2% of Fees Waived	$ 16,392	$ 17,406	$ 20,655	$ 24,105	$ 46,360	$ 73,369
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 57,307					
1.8-4 5.	Credit Units Waived		$ 71,996	$ 85,436	$ 99,708	$ 134,611	$ 143,028
Total Offset Savings	**Forward to Schedule 5A**	**$ 73,699**	**$ 89,402**	**$ 106,091**	**$ 123,813**	**$ 180,971**	**$ 216,397**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: San Mateo
COUNTY: San Mateo

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$13,887,851	$9,865,833	$2,689,631	$12,555,464
ENROLL FEE ADMIN (2%)	75,866	65,244	10,622	75,866
APPRENTICE ALLOWANCE	356,680	306,799	49,881	356,680
BASIC SKILLS	0	399,738	-399,738	0
PARTNERSHIP FOR EXCEL.	3,535,569	3,040,589	494,980	3,535,569
S.F.A.A.	745,553	637,305	108,248	745,553
E.O.P.S.	1,494,501	1,285,271	209,230	1,494,501
C.A.R.E.	109,773	94,404	15,369	109,773
D.S.P.S.	1,487,620	1,273,099	214,521	1,487,620
STATE HOSPITALS	0	0	0	0
CALWORKS	171,573	146,262	25,311	171,573
MATRICULATION (CREDIT)	960,648	820,137	140,511	960,648
MATRIC. (NONCREDIT)	0	0	0	0
FAC. & STAFF DIVERSITY	21,289	15,134	6,155	21,289
PART-TIME FACULTY INS.	12,236	0	12,236	12,236
PART-TIME FACULTY OFFIC	269,694	0	269,694	269,694
PART-TIME FACULTY ALLOC	938,479	807,092	131,387	938,479
BLOCK GRANT (ONE-TIME)	429,744	369,580	60,164	429,744
ECON. DEVELOPMENT	916,165	732,916	36,663	769,579
TELECOMMUNICATIONS	175,715	94,678	81,037	175,715
TANF	38,871	33,429	5,442	38,871
VTEA LEADERSHIP	222,080	86,611	99,936	186,547
VTEA TECH. PREP.	103,200	80,496	6,192	86,688
VTEA TITLE I C	291,015	151,328	93,125	244,453
PLANT & INSTRUCTIONAL	482,026	414,543	67,483	482,026
PRIOR YEAR CORRECTION	471,435	454,218	17,217	471,435
TOTAL	$27,197,583	$21,174,706	$4,445,297	$25,620,003

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

San Mateo County Community College District
308/95 Enrollment F[illegible]ollection and Waivers
Fiscal Years: 19[illegible]000 to 2004-2005
Enrollment Fee Waivers Offsets

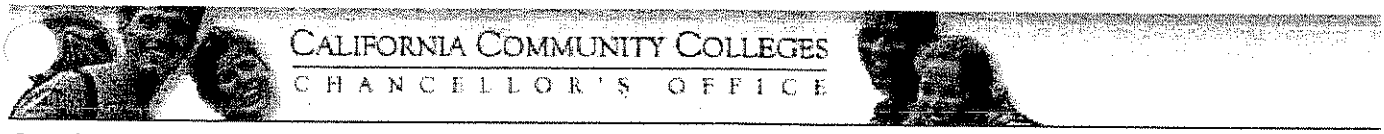
Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 5,137.61	$ 3,157.81	$ 2,127.54	$ 3,543.32	$ 3,728.25	$ 1,404.23
2	Staff Training	(04)(B)(1)(b)	$ 2,935.05	$ 3,332.26	$ 3,463.59	$ 3,611.89	$ 2,277.54	$ 3,789.54
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 74,167.25	$ 77,622.78	$ 83,509.47	$ 96,861.20	$ 107,275.29	$ 118,576.66
4	Waiving student fees	(04)(B)(2)(b)	$ 49,395.79	$ 58,512.04	$ 79,158.11	$ 84,397.34	$ 156,524.63	$ 173,751.87
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 3,390.66	$ 3,579.81	$ 3,767.75	$ 4,058.92	$ 4,180.85	$ 4,474.96
6	EFCW - Fee Waiver Costs	Total	$ 135,026.36	$ 146,204.70	$ 172,026.46	$ 192,472.67	$ 273,986.56	$ 301,997.26
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 73,669.00	$ 89,402.00	$ 106,091.00	$ 123,813.00	$ 180,971.00	$ 216,397.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 61,357.36	$ 56,802.70	$ 65,935.46	$ 68,659.67	$ 93,015.56	$ 85,600.26
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 73,669.00**	**$ 89,402.00**	**$ 106,091.00**	**$ 123,813.00**	**$ 180,971.00**	**$ 216,397.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Mon



Student Financial Aid Awards

Canada College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 05, 2006 02:16:13

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	84	19,105
BOGW - Part A-2 based on SSI recipient status	3	115
BOGW - Part B based on income standards	2,828	868,340
BOGW - Part C based on financial need	454	146,956

Total Unduplicated Count = 3,299
Total Amount = $ 1,034,516

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California Home

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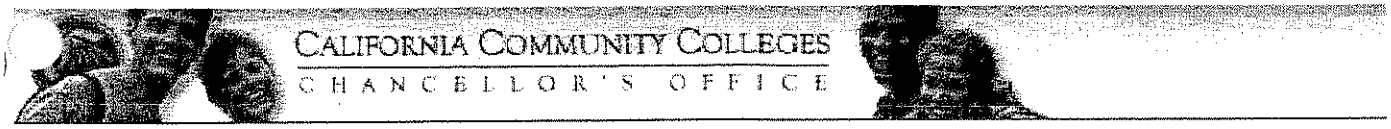

Student Financial Aid Awards

San Mateo College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 05, 2006 02:06:04

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	200	46,026
BOGW - Part A-3 based on general assistance recipient status	1	108
BOGW - Part B based on income standards	2,869	991,909
BOGW - Part C based on financial need	953	347,947

Total Unduplicated Count = 3,855
Total Amount = $ 1,385,990

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California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Skyline College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 05, 2006 02:11:03

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	262	61,870
BOGW - Part A-2 based on SSI recipient status	1	36
BOGW - Part B based on income standards	2,188	746,599
BOGW - Part C based on financial need	1,162	439,438

Total Unduplicated Count = 3,434
Total Amount = $ 1,247,943

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

December 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4877

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
San Mateo Community College District CC41100

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for San Mateo Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection Waiver	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D.J. Branwell

for Keith B. Petersen, President

Claim File Co

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC41100

(02) Claimant Name: San Mateo County Community College District

County of Location: San Mateo

Street Address or P.O. Box: 3401 CSM Drive

City: San Mateo | State: CA | Zip Code: 94402

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 1,114,500	(13) $ 1,013,241
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,013,241
Due from State	(08) $ 1,114,500	(17) $ 1,013,241
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	3,499
(23) EFCW-1, (04)(A)(1)(b)(f)	21,081
(24) EFCW-1, (04)(A)(2)(a)(f)	646,091
(25) EFCW-1, (04)(B)(1)(a)(f)	1,524
(26) EFCW-1, (04)(B)(1)(b)(f)	5,235
(27) EFCW-1, (04)(B)(2)(a)(f)	134,928
(28) EFCW-1, (04)(B)(2)(b)(f)	190,235
(29) EFCW-1, (04)(B)(2)(c)(f)	5,040
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	291,953
(32) EFCW-1, (09)	72,111
(33) EFCW-1, (10)	214,235
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

Kathy Blackwood — Type or Print Name

Chief Financial Officer — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

State Controller's Office

Community College Mandated Cost Manual

Program 67	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:
San Mateo County Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 3,499.43	$ -	$ -	$ -	$ -	$ 3,499.43
b. Staff training (One time per employee)	$ 21,080.85	$ -	$ -	$ -	$ -	$ 21,080.85
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 646,090.65	$ -	$ -	$ -	$ -	$ 646,090.65
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 1,523.68	$ -	$ -	$ -	$ -	$ 1,523.68
b. Staff training (One time per employee)	$ 5,235.39	$ -	$ -	$ -	$ -	$ 5,235.39
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 134,928.25	$ -	$ -	$ -	$ -	$ 134,928.25
b. Waiving student fees	$ 155,778.78	$ -	$ 34,455.96	$ -	$ -	$ 190,234.74
c. Reporting BOG fee waiver data to CCC	$ 5,040.31	$ -	$ -	$ -	$ -	$ 5,040.31
05) Total Direct Costs	$ 973,177.34	$ -	$ 34,455.96	$ -	$ -	$ 1,007,633.30
ndirect Costs						
06) Indirect Cost Rate				[From OMB A-21, FAM-29C, or 7%]		30.00%
07) Total Indirect Costs				[Line (06) x line (05)(a)]		$ 291,953.20
08) Total Direct and Indirect Costs				[Line (05)(f) + line (07)]		$ 1,299,586.50
ost Reduction						
09) Less: Enrollment Fee Revenue offset						$ 72,111.00
0) L Enrollment Fee Waiver offsets						$ 214,235.00
1) Total Claimed Amount				[Line (08) - {Line (09) + Line (10)}]		$ 1,013,240.50

ew 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Mateo County Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Corrales, Rachel	Operations Assistant II	$34.95	1.0	$ 34.95				
Hancock, Sherri	Dean, Enrollment Services	$89.01	20.0	$ 1,780.20				
Lara, Maria	A&R Assistant III	$41.09	4.0	$ 164.36				
Miller, Ruth	Assistant Registrar	$54.09	16.0	$ 865.44				
Raby, Melissa	Dean, Counseling & Enrollment Svcs.	$81.81	8.0	$ 654.48				
(05) Total [X] Subtotal [ ]			Page 1 of 1	$ 3,499.43	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: San Mateo County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Benjamin, Eric	Operations Assistant II	$37.64	94.5	$ 3,556.98				
Corrales, Rachel	Operations Assistant II	$34.95	9.0	$ 314.55				
Escobar Mora, Marcella	Accounting Technician	$35.19	155.0	$ 5,454.45				
Hancock, Sherri	Dean, Enrollment Services	$89.01	5.0	$ 445.05				
Pena, Mario	Accounting Technician	$40.12	20.0	$ 802.40				
Trinh, Annie	Accounting Technician	$35.81	85.5	$ 3,061.76				
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	$37.79	184.5	$ 6,972.26				
Zan, Emma	Operations Assistant II	$21.04	22.5	$ 473.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 21,080.85	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: San Mateo County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$39.23	3,868.9	$ 151,776.95				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$39.23	3,741.0	$ 146,759.43				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$39.23	3,331.6	$ 130,698.67				
ng written and computer records for enrollment fee information Enrollment Office Staff Various	$39.23	2,828.5	$ 110,962.06				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Various	$39.23	2,622.1	$ 102,864.98				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$39.23	77.2	$ 3,028.56				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 646,090.65	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: San Mateo County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Chadwick-White, Karen	Financial Aid Assistant	$37.80	2.0	$ 75.60				
Claros, Randy	Financial Aid Technician	$34.04	1.0	$ 34.04				
Corrales, Rachel	Operations Assistant II	$34.95	1.0	$ 34.95				
Hancock, Sherri	Dean, Enrollment Services	$89.01	10.0	$ 890.10				
Villareal, Henry B.	Dean, Enrollment Services	$85.69	2.0	$ 171.38				
Villegas, Rosa	Financial Aid Technician	$35.30	2.0	$ 70.60				
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	$37.79	2.0	$ 75.58				
Menjivar, Claudia	Financial Aid Technician	$48.98	3.5	$ 171.43				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,523.68	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant
San Mateo County Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Chadwick-White, Karen	Financial Aid Assistant	$37.80	3.5	$ 132.30				
Corrales, Rachel	Operations Assistant II	$34.95	2.0	$ 69.90				
Garcia, Doreen	Financial Aid Technician	$43.74	8.0	$ 349.92				
Hancock, Sherri	Dean, Enrollment Services	$89.01	5.0	$ 445.05				
Morrison, Regina	Financial Aid Technician	$41.61	9.0	$ 374.49				
Nolasco, Lucy	Financial Aid Technician	$42.18	37.5	$ 1,581.75				
Quintero, Juanita	Office Assistant II	$29.04	6.5	$ 188.76				
Soler, Faye	Financial Aid Technician	$45.37	37.5	$ 1,701.38				
Menjivar, Claudia	Financial Aid Technician	$48.98	8.0	$ 391.84				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,235.39	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Garcia, Doreen Financial Aid Technician	$43.74	1,049.8	$ 45,918.25				
Hancock, Sherri Dean, Enrollment Services	$89.01	1,000.0	$ 89,010.00				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 134,928.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person								
Financial Office Staff	Various	$40.56	1,078.4	$ 43,739.90				
Receiving waiver applications								
Prestige Graphics, Inc.	Contractor	$100.00	344.6			$ 34,455.96		
Financial Office Staff	Various	$40.56	851.4	$ 34,532.78				
Evaluating waiver applications and verifying application documents								
Financial Office Staff	Various	$40.56	775.7	$ 31,462.39				
Entering approved application information into district records; providing student award letter								
Financial Office Staff	Various	$40.56	1,135.2	$ 46,043.71				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 155,778.78	$ -	$ 34,455.96	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

Claimant: San Mateo County Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Hancock, Sherri — Dean, Enrollment Services	$89.01	50.0	$ 4,450.50				
Soler, Faye — Financial Aid Technician	$45.37	13.0	$ 589.81				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 5,040.31	$ -	$ -	$ -	$ -

New 04/06

San Mateo County Community College District
308/95 ENROLLMENT FE LECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	94.50	Benjamin, Eric	Operations Assistant II	$37.64	$3,556.98	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	94.50	**Benjamin, Eric Total**			$3,556.98		
05-06	3.50	Chadwick-White, Karen	Financial Aid Assistant	$37.80	$132.30	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	2.00	Chadwick-White, Karen	Financial Aid Assistant	$37.80	$75.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	5.50	**Chadwick-White, Karen Total**			$207.90		
05-06	1.00	Claros, Randy	Financial Aid Technician	$34.04	$34.04	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	1.00	**Claros, Randy Total**			$34.04		
05-06	9.00	Corrales, Rachel	Operations Assistant II	$34.95	$314.55	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	2.00	Corrales, Rachel	Operations Assistant II	$34.95	$69.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	1.00	Corrales, Rachel	Operations Assistant II	$34.95	$34.95	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Corrales, Rachel	Operations Assistant II	$34.95	$34.95	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	13.00	**Corrales, Rachel Total**			$454.35		
05-06	3,868.90	Enrollment Office Staff	Various	$39.23	$151,776.95	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,741.00	Enrollment Office Staff	Various	$39.23	$146,759.43	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	3,331.60	Enrollment Office Staff	Various	$39.23	$130,698.67	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,828.50	Enrollment Office Staff	Various	$39.23	$110,962.06	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	2,622.10	Enrollment Office Staff	Various	$39.23	$102,864.98	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	77.20	Enrollment Office Staff	Various	$39.23	$3,028.56	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	16,469.30	**Enrollment Office Staff Total**			$646,090.65		
05-06	155.00	Escobar Mora, Marcella	Accounting Technician	$35.19	$5,454.45	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	155.00	**Escobar Mora, Marcella Total**			$5,454.45		
05-06	1,078.40	Financial Office Staff	Various	$40.56	$43,739.90	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	851.40	Financial Office Staff	Various	$40.56	$34,532.78	Receiving waiver applications	Waiving student fees
05-06	775.70	Financial Office Staff	Various	$40.56	$31,462.39	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	1,135.20	Financial Office Staff	Various	$40.56	$46,043.71	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,840.70	**Financial Office Staff Total**			$155,778.78		
05-06	8.00	Garcia, Doreen	Financial Aid Technician	$43.74	$349.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	1,049.80	Garcia, Doreen	Financial Aid Technician	$43.74	$45,918.25	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	1,057.80	**Garcia, Doreen Total**			$46,268.17		
05-06	20.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$1,780.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
05-06	10.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$890.10	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$445.05	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	5.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$445.05	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	1,000.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$89,010.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	50.00	Hancock, Sherri	Dean, Enrollment Services	$89.01	$4,450.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,090.00	**Hancock, Sherri Total**			$97,020.90		
05-06	4.00	Lara, Maria	A&R Assistant III	$41.09	$164.36	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	4.00	**Lara, Maria Total**			$164.36		
05-06	3.50	Menjivar, Claudia	Financial Aid Technician	$48.98	$171.43	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	8.00	Menjivar, Claudia	Financial Aid Technician	$48.98	$391.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	11.50	**Menjivar, Claudia Total**			$563.27		
05-06	16.00	Miller, Ruth	Assistant Registrar	$54.09	$865.44	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	16.00	**Miller, Ruth Total**			$865.44		
05-06	9.00	Morrison, Regina	Financial Aid Technician	$41.61	$374.49	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	9.00	**Morrison, Regina Total**			$374.49		
05-06	37.50	Nolasco, Lucy	Financial Aid Technician	$42.18	$1,581.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver

San Mateo County Community College District

308/95 ENROLLMENT FI .LECTIONS/WAIVERS

2005-2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	37.50	**Nolasco, Lucy Total**			$1,581.75		
05-06	20.00	Pena, Mario	Accounting Technician	$40.12	$802.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	20.00	**Pena, Mario Total**			$802.40		
05-06	344.56	Prestige Graphics, Inc.	Contractor	$100.00	$34,455.96	Receiving waiver applications	Waiving student fees
	344.56	**Prestige Graphics, Inc. Total**			$34,455.96		
05-06	6.50	Quintero, Juanita	Office Assistant II	$29.04	$188.76	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.50	**Quintero, Juanita Total**			$188.76		
05-06	8.00	Raby, Melissa	Dean, Counseling & Enrollment Svcs.	$81.81	$654.48	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	8.00	**Raby, Melissa Total**			$654.48		
05-06	2.00	Rosario-Argarin, Nancy	Sr. Accounting Coordinator	$37.79	$75.58	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	184.50	Rosario-Argarin, Nancy	Sr. Accounting Coordinator	$37.79	$6,972.26	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	186.50	**Rosario-Argarin, Nancy Total**			$7,047.84		
05-06	37.50	Soler, Faye	Financial Aid Technician	$45.37	$1,701.38	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	13.00	Soler, Faye	Financial Aid Technician	$45.37	$589.81	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.50	**Soler, Faye Total**			$2,291.19		
05-06	85.50	Trinh, Annie	Accounting Technician	$35.81	$3,061.76	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	85.50	**Trinh, Annie Total**			$3,061.76		
05-06	2.00	Villareal, Henry B.	Dean, Enrollment Services	$85.69	$171.38	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	2.00	**Villareal, Henry B. Total**			$171.38		
05-06	2.00	Villegas, Rosa	Financial Aid Technician	$35.30	$70.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	2.00	**Villegas, Rosa Total**			$70.60		
05-06	22.50	Zan, Emma	Operations Assistant II	$21.04	$473.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	22.50	**Zan, Emma Total**			$473.40		
	23,532.86	**Grand Total**			$1,007,633.30		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: March 11, 2003

INSTITUTION:
San Mateo County Community College District
3401 CSM Drive

FILING REF.: The preceding Agreement was dated February 4, 1999

San Mateo CA 94402

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE (%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/03	06/30/08	30.0	On-Campus	All Programs

INACTIVE:
BEGINNING 07/01/08 THIS ORGANIZATION DOES NOT HAVE AWARDS WITH THE FEDERAL GOVERNMENT THAT REIMBURSE FULL INDIRECT COSTS. IF IN THE FUTURE, AN AWARD IS RECEIVED WHICH PROVIDES FOR THE FULL REIMBURSEMENT OF ACTUAL INDIRECT COST, A PROVISIONAL RATE WILL BE ESTABLISHED AT THAT TIME.

*BASE:
Direct salaries and wages including all fringe benefits.

U70213

Schedule 1A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 3 and 4
Findings:

***EFC 1**	64482
Avg. time p/account	3.6
Total Time (in minutes)	232135
Per Hour	60
Hours Worked (** **11**)	**3868.9**
***EFC 2**	54746
Avg. time p/student	4.1
Total Time (in minutes)	224459
Per Hour	60
Hours Worked (** **12**)	**3741.0**
***EFC 1**	64482
Avg. time p/question	3.1
Total Time (in minutes)	199894
Per Hour	60
Hours Worked (** **13**)	**3331.6**
***EFC 2**	54746
Avg. time p/file	3.1
Total Time (in minutes)	169713
Per Hour	60
Hours Worked (** **14**)	**2828.5**
***EFC 4**	39331
Avg. time p/account	4.0
Total Time (in minutes)	157324
Per Hour	60
Hours Worked (** **15**)	**2622.1**
***EFC 5**	1252
Avg. time p/student	3.7
Total Time (in minutes)	4632
Per Hour	60
Hours Worked (** **16**)	**77.2**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 2 and 4
Findings:

***EFW 6**	11352
Avg. time p/question	5.7
Total Time (in minutes)	64706
Per Hour	60
Hours Worked (** **21**)	**1078.4**
***EFW 6**	11352
Avg. time p/application	4.5
Total Time (in minutes)	51084
Per Hour	60
Hours Worked (** **22**)	**851.4**
***EFW 6**	11352
Avg. time p/evaluation	4.1
Total Time (in minutes)	46543
Per Hour	60
Hours Worked (** **23**)	**775.7**
***EFW 8**	NOT SUPPLIED
Avg. time p/application	5.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	11352
Avg. time p/application	6.0
Total Time (in minutes)	68112
Per Hour	60
Hours Worked (** **25**)	**1135.2**
***EFW 8**	NOT SUPPLIED
Avg. time p/application	4.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

		Multiplier					
		1	2	1	2	4	5
		*Activity Codes					
Staff	Title	11	12	13	14	15	16
Austen, Olivia	Operations Asst. I	4	4	2	4	2	4
Beeber, Avelina	A&R Assistant II	2	2	2	3	1	1
Benjamin, Eric	Operations Asst. II	9	10	8	6	10	8
Berghoff, Joyce	Accounting Technician	3	4	3	2	1	2
Berwick, Natalie	Operations Asst. II	9	10	8	6	10	8
Bianchi, Sandra	Operations Asst. I	9	10	8	6		8
Corrales, Rachel	Operations II	9	10	8	6	12	8
Castello, Domenica	Accounting Technician	3	4	3	3	5	3
Dillman, Isabel	A&R Assistant II	2	2	2	3	1	1
Escobar-Mora, Marcella	Accounting Technician	2	4	2	2	10	5
Fajardo, Ariene	Assistant Registrar	2	2	2	3	1	1
Flores, Edith	A&R Assistant II	2	2	1	1	3	
Gamiao, Elaine G.	A&R Assistant II	2	2	2	3	1	1
Hamilton, Arden	Operations Asst. I	9	10	8	6		8
Hancock, Sherri	Dean of Enrollment Serv.	2	2	1	1		
Huynh, Vivien	A&R Assistant II	2	2	1	1	3	
Intendencia, Neil	Operations Asst. I	2	5	3	2		5
King-Sultana, Joyce	Operations Asst. I	9	10	8	6	10	8
Lara, Maria	A&R Assistant III	2	2	1	1		
Martinez, Ulalia	Student Assistant	9	10	8	6	12	8
Mileo, Jeremy	A&R Assistant II	2	2	2	3	1	1
Miller, Ruth	Assistant Registrar	2	2	1	1		
Moresco, Renee	A&R Assistant II	2	2	1	1		
Navarrete, Cheryl	Accounting Technician	2	3	3	2	2	3
Nguyen, Jeanne	Accounting Technician	2	3	2	2	1	2
Pena, Mario	Accounting Technician	3	4	3	3	5	3
Rabb, Kay	A&R Assistant II	2	2	2	3	1	1
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	2	5	3	3	10	5
Sartor, Gertrude	A&R Assistant II	2	2	2	3	1	1
Shiloh, Dorothy	A&R Assistant II	2	2	1	1		
Skaff, Margaret	A&R Assistant II	2	2	2	3	1	1
Sohrabi, Soraya	A&R Assistant III	2	2	1	1	3	
Swinson, Adela	A&R Assistant III	2	2	2	3	1	1
Trevaskis, Geraldine	A&R Assistant II	2	2	2	3	1	1
Wong, Jane	Sr. Accounting Coordinator	3	3	2	3	2	3
Zan, Emma	Operations Asst. I	4	4	2	4	2	3
Average		**3.6**	**4.1**	**3.1**	**3.1**	**4.0**	**3.7**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out *receipt/course list/other report*.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

		Multiplier							
		1	2	1	2	4	5		
		*Activity Codes						04-05	05-06
Staff	Title	11	12	13	14	15	16	PHR'S	PHR's
Austen, Olivia	Operations Asst. I	4	4	2	4	2	4	38.61	38.61
Beeber, Avelina	A&R Assistant II	2	2	2	3	1	1	34.03	34.03
Benjamin, Eric	Operations Asst. II	9	10	8	6	10	8	37.64	37.64
Berghoff, Joyce	Accounting Technician	3	4	3	2	1	2	38.67	41.09
Berwick, Natalie	Operations Asst. II	9	10	8	6	10	8	40.47	40.47
Bianchi, Sandra	Operations Asst. I	9	10	8	6		8	38.61	21.04
Castello, Domenica	Accounting Technician	3	4	3	3	5	3	40.27	40.27
Corrales, Rachel	Operations II	9	10	8	6	12	8	40.27	34.95
Dillman, Isabel	A&R Assistant II	2	2	2	3	1	1	34.57	35.17
Escobar-Mora, Marcella	Accounting Technician	2	4	2	2	10	5	32.39	35.19
Fajardo, Arlene	Assistant Registrar	2	2	2	3	1	1	53.18	57.90
Flores, Edith	A&R Assistant II	2	2	1	1	3		19.40	20.94
Gamiao, Elaine G.	A&R Assistant II	2	2	2	3	1	1	34.03	35.13
Hamilton, Arden	Operations Asst. I	9	10	8	6		8	38.45	30.90
Hancock, Sherri	Dean of Enrollment Serv.	2	2	1	1			79.25	89.01
Huynh, Vivien	A&R Assistant II	2	2	1	1	3		28.60	33.44
Intendencia, Neil	Operations Asst. I	2	5	3	2		5	32.39	32.39
King-Sultana, Joyce	Operations Asst. I	9	10	8	6	10	8	38.61	38.61
Lara, Maria	A&R Assistant III	2	2	1	1			38.65	41.09
Martinez, Ulalia	Student Assistant	9	10	8	6	12	8	38.27	38.27
Mileo, Jeremy	A&R Assistant II	2	2	2	3	1	1	34.47	35.58
Miller, Ruth	Assistant Registrar	2	2	1	1			57.21	54.09
Moresco, Renee	A&R Assistant II	2	2	1	1			36.44	38.73
Navarrete, Cheryl	Accounting Technician	2	3	3	2	2	3	38.61	42.84
Nguyen, Jeanne	Accounting Technician	2	3	2	2	1	2	40.27	41.77
Pena, Mario	Accounting Technician	3	4	3	3	5	3	40.27	40.12
Phan, Charles	Sr. Accounting Coordinator								43.00
Rabb, Kay	A&R Assistant II	2	2	2	3	1	1	34.03	34.03
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	2	5	3	3	10	5	32.39	37.79
Sartor, Gertrude	A&R Assistant II	2	2	2	3	1	1	34.30	36.20
Shiloh, Dorothy	A&R Assistant II	2	2	1	1			34.94	37.15
Skaff, Margaret	A&R Assistant II	2	2	2	3	1	1	34.11	39.96
Sohrabi, Soraya	A&R Assistant III	2	2	1	1	3		37.18	46.38
Swinson, Adela	A&R Assistant III	2	2	2	3	1	1	31.60	34.03
Trevaskis, Geraldine	A&R Assistant II	2	2	2	3	1	1	36.85	39.17
Trinh, Annie	Accounting Technician								35.81
Urena, Javier	Program Scvs. Coordinator								43.69
Wong, Jane	Sr. Accounting Coordinator	3	3	2	3	2	3	42.51	52.42
Zan, Emma	Operations Asst. I	4	4	2	4	2	3	38.61	21.04
Average		**3.6**	**4.1**	**3.1**	**3.1**	**4.0**	**3.7**	**38.34**	**39.23**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Carrington, Margie	Director, Fin. Aid Serv.	4.5	5	6	6	5	5
Chadwick-White, Karen	Financial Aid Asst.	6	7	5	7	7	5
del Mundo, Lorena	Program Service Coord.	5	4	4	6		
Garcia, Doreen	Financial Aid Technician	5	4	4	6	7	5
Menjivar, Claudia	Financial Aid Technician	5	4	4	6	7	5
Minchez, Wendy	Staff Assistant	12	2	2	2	3	1
Morrison, Regina	Financial Aid Assistant II	6	7	5	7	8	5
Nolasco, Lucy	Financial Aid Technician	5	4	4	6	7	5
Pitetta, Thanh	Financial Aid Technician	5	4	4	6	7	5
Quintero, Juanita	Office Assistant II	6	7	5	7	7	5
Soler, Faye	Financial Aid Technician	6	4	4	4	5	4
Villegas, Rosa	Financial Aid Technician	3	2	2	2	3	1
Average		**5.7**	**4.5**	**4.1**	**5.4**	**6.0**	**4.2**

***EFC Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

		*Multiplier							
		6	6	6	8	7	8		
		**Activity Codes						04-05	05-06
Staff	Title	21	22	23	24	25	26	PHR'S	PHR's
Carrington, Margie	Director, Fin. Aid Serv.	4.5	5	6	6	5	5	58.09	62.67
Chadwick-White, Karen	Financial Aid Asst.	6	7	5	7	7	5	34.94	37.80
Claros, Randy	Financial Aid Technician								34.04
del Mundo, Lorena	Program Service Coord.	5	4	4	6			32.80	33.62
Garcia, Doreen	Financial Aid Technician	5	4	4	6	7	5	38.45	43.74
Menjivar, Claudia	Financial Aid Technician	5	4	4	6	7	5	43.76	48.98
Minchez, Wendy	Staff Assistant	12	2	2	2	3	1	38.27	
Morrison, Regina	Financial Aid Assistant II	6	7	5	7	8	5	40.11	41.61
Nolasco, Lucy	Financial Aid Technician	5	4	4	6	7	5	38.45	42.18
Pitetta, Thanh	Financial Aid Technician	5	4	4	6	7	5	39.42	36.96
Pulido, Yanely	Financial Aid Technician								35.93
Quintero, Juanita	Office Assistant II	6	7	5	7	7	5	26.01	29.04
Soler, Faye	Financial Aid Technician	6	4	4	4	5	4	39.42	45.37
Villegas, Rosa	Financial Aid Technician	3	2	2	2	3	1	38.45	35.30
Average		**5.7**	**4.5**	**4.1**	**5.4**	**6.0**	**4.2**	**39.01**	**40.56**

***EFC Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	68,260	67,897	66,681	71,035	76,184	68,686	66,180	64,482
EFC 2	1.8-1	2.	Paid Enrollment fees	62,959	62,613	60,516	62,923	67,036	61,072	59,525	54,746
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	X	4,687	5,450	6,973	7,564	9,369	11,100	11,352
EFC 4	1.8-2	1.	Delinquencies collections	45,174	46,032	46,368	41,449	49,350	51,985	51,094	39,331
EFC 5	1.8-2	2.	Refunds	1,181	1,127	1,146	1,381	1,359	2,178	1,992	1,252
EFW 6	1.8-3	1.	Waivers Requested	X	4,946	5,441	6,701	6,725	9,257	10,588	11,352
EFW 7	1.8-3	2.	Waivers Approved (from Chancellor's website)	X	4,946	5,441	6,701	6,725	9,257	10,588	11,352
EFW 8	1.8-3	1-2	Waivers Denied	X	District does not have these numbers.						

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 8
san Mateo County Community College
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Student Headcount Summary

Purpose: To calculate the total number of students..
Source: California Community Colleges Chancellor's Office website.
Findings:

College	Term	Headcount
Canada	Summer	2,196
	Fall	6,273
	Spring	6,343
San Mateo	Summer	5,844
	Fall	10,758
	Spring	11,190
Skyline	Summer	5,285
	Fall	8,234
	Spring	8,359
		64,482

Conclusion: Findings go forward to Schedule 1A.

California Home

Wednesday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2005 Summer Term

Data Current As Of November 01, 2006 01:18:13

Total Headcount	2,196

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2005 Fall Term

Data Current As Of November 01, 2006 01:18:31

Total Headcount	6,273

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2006 Spring Semester

Data Current As Of November 01, 2006 01:18:52

Total Headcount	6,343

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo
For 2005 Summer Term

Data Current As Of November 01, 2006 01:19:21

Total Headcount	5,844

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo
For 2005 Fall Term

Data Current As Of November 01, 2006 01:19:37

Total Headcount	10,758

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo
For 2006 Spring Semester

Data Current As Of November 01, 2006 01:19:56

Total Headcount	11,190

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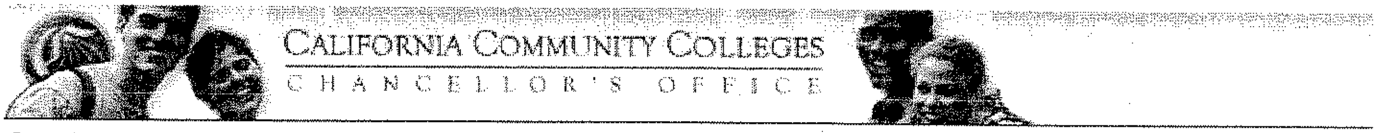

Student Demographics

Student Total Headcount For Skyline
For 2005 Summer Term

Data Current As Of November 01, 2006 01:20:43

Total Headcount	5,285

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Skyline
For 2005 Fall Term

Data Current As Of November 01, 2006 01:20:56

Total Headcount	8,234

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Skyline
For 2006 Spring Semester

Data Current As Of November 01, 2006 01:21:13

Total Headcount	8,359

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Clear Form

EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Fiscal Year: 2005 - 2006

Eric Benjamin $17.64
Employee Name

Operations Asst. II
Exact Position Title

Cashier/Skyline College (650) 738-4432
Department/Location Telephone #

12mo / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4	Please see attached	
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY April 24, 2006; TO Sue Chang @ District Office

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Clear Form

EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: _____

Karen Chadwick-White (37.50) Financial Aid Assistant
Employee Name Exact Position Title

Financial Aid - Skyline Coll 650-738-4236 12✓mo / 11mo / 10mo / hrly
Department/Location Telephone # Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/03/06	1A 1B 2A ✓2B 3 4	Financial Aid Office Meeting	1
04/20/06	1A 1B 2A ✓2B 3 4	Mandated Reporting Meeting	2.5
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

3.5 HR +40=40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen White Date 04/21/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: _____

Karen Chadwick-White (Employee Name) Financial Aid Assistant (Exact Position Title)

Financial Aid - Skyline Coll (Department/Location) 650-738-4236 (Telephone #) 12mo / 11mo / 10mo / hrly (Work year length)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/26/05	1A 1B 2A 2B 3 4	Websmart BOGG Training	2
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen White Date 04/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 05/06/00

Randy Claros 34.04
Employee Name

Financial Aid Technician
Exact Position Title

Financial Aid/Skyline Coll (650) 738-4236
Department/Location Telephone #

12mo / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/3/06	1A (1B) 2A 2B 3 4	OFFICE MEETING	1
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/19/06

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Rachel Corrales 34.95 — Operations II

Employee Name — Exact Position Title

Canada/Operations/Redwood — 650-306-3271 — 12mo / 11mo / 10mo / hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06 ✔

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:

B. Enrollment Waiver Process:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 9 hours

B. Enrollment Waiver Process: 2 hours

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 05-06

Rachel Corrales
Employee Name

Operations II
Exact Position Title

Operations/Canada
Department/Location

650-306-3271
Telephone #

12mo / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/13/06	1A 1B 2A 2B 3 4	Update Procedures for enrollment fees	1
04/13/06	1A 1B 2A 2B 3 4	Update Procedures for waivers for enrollment fees	1
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rachel Corrales Date _____

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs 308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District   Fiscal Year: 05-06

Marcella Escobar Mora #35.1?   Accounting Technician
Employee Name   Exact Position Title

Cashiers / Skyline   650-738-4434   (12mo) / 11mo / 10mo / hrly
Department/Location   Telephone #   Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection   B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection   B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line. See attached

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature]   Date 4-12-06

If you have any questions, please contact Raymond Chow, at 5742

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Revised January 2006

08/01/05	2A	training with Eric (Eric leaving)	7.50
08/02/05	2A	training with Eric (Eric leaving)	7.50
08/03/06	2A	training with Eric (Eric leaving)	7.50
08/04/05	2A	training with Eric (Eric leaving)	7.50
08/05/05	2A	training with Eric (Eric leaving)	7.50
08/08/05	2A	training with Eric (Eric leaving)	7.50
08/09/05	2A	training with Eric (Eric leaving)	7.50
08/10/05	2A	training with Eric (Eric leaving)	7.50
08/11/05	2A	training with Eric (Eric leaving)	7.50
08/12/05	2A	training with Eric (Eric leaving)	7.50
09/26/05	2A	training with Narcy (Nancy maternity)	7.50
09/27/05	2A	training with Narcy (Nancy maternity)	7.50
09/28/05	2A	training with Narcy (Nancy maternity)	7.50
09/29/05	2A	training with Narcy (Nancy maternity)	7.50
09/30/05	2A	training with Narcy (Nancy maternity)	7.50
02/27/06	2A	training new employee (Annie)	7.50
02/28/06	2A	training new employee (Annie)	7.50
03/01/06	2A	training new employee (Annie)	7.50
03/02/06	2A	training new employee (Annie)	7.50
03/03/06	2A	training new employee (Annie)	7.50
03/22/06	2A	Mandated Cost Training with Nancy	0.50
03/31/06	2A	Mandated Cost w/ Eloisa	0.50
04/10/06	2A	Mandated Cost (Cashier)	2.00
04/12/06	2A	Mandated Cost (paper work)	2.00
		TOTAL	**155.00**

Marcella Escobar Flores

2005 - 2006

4-12-06

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Doreen Garcia 43.74 — Financial Aid Technician

Employee Name — Exact Position Title

CSM/Financial Aid/SMCCCD — 574-6146 — 12mo / 11mo / 10mo / hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					n/a	n/a	n/a	n/a
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					8	8	8	8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.					680	875.25	1022.75	1049.75
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.					n/a	n/a	n/a	n/a
TOTALS:					688	883.25	1030.75	1057.75

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/21/06

If you have any questions, please contact Reginald Chow, at 6742

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SAN MATEO CC DIST

SHERRI HANCOCK — Employee Name

DEAN OF ENROLLMENT SERVICES — Exact Position Title

SKYLINE/ A+R — College/Department/Location

738-4238 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	20 hrs	20	20	20	20	20	20	20
B. Enrollment Waiver Process:	10	10	10	10	40	40	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	5	5	5	5	5	5	5	5
B. Enrollment Waiver Process:	5	5	5	5	5	5	5	5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
In hours.	1000	1000	1000	1000	1000	1000	1000	1000
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	50	50	50	50	50	50	50	50
TOTALS:	1090	1090	1090	1090	1090	1090	1090	1090

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Employee Signature Sherri Hancock Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 07/01/05

Maria Lara $41.09 — Admissions and Records Assistant III
Employee Name — Exact Position Title

A&R Enrollment Services — X3122 — 12mo / 11mo / 10mo / hrly
Department/Location — Telephone # — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/02/05	1A 1B 2A 2B 3 4	Staff training for fee collection	4 Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lara — Date 10/17/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Claudia Menjivar		Financial Aid Director
Employee Name		Exact Position Title
CSM/Financial Aid/SMCCCD	574-6146	12/mo / 11mo / 10mo / hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	--	--	--	--	--	--	--	3.5
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	--	--	--	--	--	--	--	8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	--	--	--	--	--	--	--	--
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	--	--	--	--	--	--	--	--
TOTALS:								11.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 9/14/06

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 07/01/05

Ruth Miller 54.09 Assistant Registrar
Employee Name Exact Position Title

A&R--Cañada College X3125 12mo / 11mo / 10mo / hrly
Department/Location Telephone # Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
08/01/05	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
09/01/06	1A 1B 2A 2B 3 4	Plan and implement SARS calls & post cards	4 Hours
01/01/06	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
02/01/06	1A 1B 2A 2B 3 4	Plan and implement SARS calls & post cards	4 Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

10 hrs > 4 hours

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Miller Date 10/17/06

If you have any questions, please contact Raymond Chow at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 05/06

Regina Morrison 4/21/06
Employee Name Exact Position Title: Financial Aid Technician

Financial Aid/Skyline (650)738-4350
Department/Location Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/22/06	1A 1B 2A (2B) 3 4	District Mtg. (Mandated claim cost)	1.5
3/29/06	1A 1B 2A (2B) 3 4	Financial Aid Staff Mtg " "	3.5
4/3/06	1A 1B 2A (2B) 3 4	Office Mtg. " "	1.5
4/20/06	1A 1B 2A (2B) 3 4	Financial Aid Staff Mtg. " "	2.5
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Regina Morrison Date 4-21-06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SMCCCD

Fiscal Year: 05-06

Lucy Nolasco 4218
Employee Name

Fin Aid Tech
Exact Position Title

Fin Aid / 8-211
Department/Location

306-3307
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/05	1A 1B 2A (2B) 3 4	Trained Staff, FWS, Hourly Personnel	37.5
[illegible]	1A (1B) 2A 2B 3 4	[illegible]	[illegible]
3/9/06	1A (1B) 2A 2B 3 4	mtg to discuss mandated claims	2 hrs
4/20/06	1A (1B) 2A 2B 3 4	" " discuss mandated claims	1.5 hrs
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

copy to MAP

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucy Nolasco Date 4/21/06

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 07/01/05

Mario Peña — Acounting Technician
Employee Name — Exact Position Title

Cashiers/Cañada — 650 306 3272 — 12mo / 11mo / 10mo / hrly
Department/Location — Telephone # — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
07/05/05	1A 1B 2A 2B 3 4	Trained S. Hamilton on enrollment fee processing	4
07/06/05	1A 1B 2A 2B 3 4	Trained S. Hamilton on enrollment fee processing	4
07/07/05	1A 1B 2A 2B 3 4	Trained S. Hamilton on enrollment fee processing	4
07/08/05	1A 1B 2A 2B 3 4	Trained S. Hamilton on enrollment fee processing	4
7/11/05	1A 1B 2A 2B 3 4	Trained S. Hamilton on enrollment fee processing	4
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/24/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: _____

Juanita Quintero 2904 — Employee Name

Office Assistan II — Exact Position Title

Skyline College/Fin. Aid — Department/Location

650-738-4236 — Telephone #

12mo / 11mo / 10mo / hrly — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03/29/06	1A 1B 2A ✓2B 3 4	Mandated reporting meeting	3
04/03/06	1A 1B 2A ✓2B 3 4	Staff Meeting	1
04/20/06	1A 1B 2A ✓2B 3 4	Mandated reporting meeting	2.5
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

6.5 HF

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juanita Quintero Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 07/01/05

Melissa Raby 34-2 — Dean of Counseling & Enrollment Ser
Employee Name — Exact Position Title

A&R Enrollment Services — X3310 — 12mo / 11mo / 10mo / hrly
Department/Location — Telephone # — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
08/01/05	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
01/01/06	1A 1B 2A 2B 3 4	Planning and implementing fee collection	4 Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

8 HRS total

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10/17/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District

Fiscal Year: 2005 - 2006

Nancy Rosario P. Argarin
Employee Name

Sr. Accts. Coordinator
Exact Position Title

Cashier / Skyline College (650) 738-4432
Department/Location Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4	Please see attached	
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

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Employee Signature NPArgarin Date 4/12/06

If you have any questions, please contact Raymond Chow, at 5742

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08/01/05	2A	training with Eric (Eric leaving)	7.50
08/02/05	2A	training with Eric (Eric leaving)	7.50
08/03/06	2A	training with Eric (Eric leaving)	7.50
08/04/05	2A	training with Eric (Eric leaving)	7.50
08/05/05	2A	training with Eric (Eric leaving)	7.50
08/08/05	2A	training with Eric (Eric leaving)	7.50
08/09/05	2A	training with Eric (Eric leaving)	7.50
08/10/05	2A	training with Eric (Eric leaving)	7.50
08/11/05	2A	training with Eric (Eric leaving)	7.50
08/12/05	2A	training with Eric (Eric leaving)	7.50
08/24/05	2A	training with Eric (Eric leaving)	4.50
08/25/05	2A	training with Eric (Eric leaving)	7.50
08/26/05	2A	training with Eric (Eric leaving)	7.50
09/26/05	2A	training with Marcy (Nancy maternity)	7.50
09/27/05	2A	training with Marcy (Nancy maternity)	7.50
09/28/05	2A	training with Marcy (Nancy maternity)	7.50
09/29/05	2A	training with Marcy (Nancy maternity)	7.50
09/30/05	2A	training with Marcy (Nancy maternity)	7.50
12/15/05	1B	reversal of VA dependent for Fall 2006	1.00
02/15/06	2A	training new employee (Annie)	7.50
02/16/06	2A	training new employee (Annie)	7.50
02/21/06	2A	training new employee (Annie)	7.50
02/22/06	2A	training new employee (Annie)	7.50
02/23/06	2A	training new employee (Annie)	7.50
02/24/06	2A	training new employee (Annie)	7.50
03/22/06	2A	Mandated Cost Training D.O. & Marcy	2.50
03/23/06	2A	Mandated Cost Training with Annie	0.50
03/31/06	2A	Mandated Cost w/ Eloisa	0.50
04/10/06	2A	Mandated Cost (Cashier)	2.00
04/12/06	2A	Mandated Cost (paper work)	2.00
04/12/06	1B	reversal of VA dependent for Spring 2006	1.00
		TOTAL	**186.50**

1B = 2 HRS TO ZERO
2A = 184.5 TO ZERO HOURS

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SMCCCD

Fiscal Year: 05-06

Salen Faye 45.37
Employee Name

Financial Aid Technician
Exact Position Title

Financial Aid 8211
Department/Location

306-3307
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
7/1/05	1A 1B 2A (2B) 3 4	Train staff, Student Asst, &	37.5
/ /	1A 1B 2A 2B 3 4	Hourly Employees	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
7/1/05	1A 1B 2A 2B 3 (4)	Reconciliation and correction	13.0
/ /	1A 1B 2A 2B 3 4	of MIS data in preparation	
/ /	1A 1B 2A 2B 3 4	for annual submission to	
/ /	1A 1B 2A 2B 3 4	State (.1 hr per month +	
/ /	1A 1B 2A 2B 3 4	final review 2hrs)	
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Salen Faye Date 4-17-06

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 2005-2006

Annie Trinh 3581 Accg Technician

Employee Name Exact Position Title

Cashier/Skyline 650-738-4431 12mo / 11mo / 10mo / hrly

Department/Location Telephone # ~~Work~~ year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
	1A 1B 2A 2B 3 4	See ~~Ed~~ Attached	
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/12/06

If you have any questions, please contact Raymond Chow, at 5742

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08/01/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/02/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/03/06	2A	train Nancy & Marcy (Eric leaving)	7.50
08/04/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/05/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/08/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/09/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/10/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/11/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/12/05	2A	train Nancy & Marcy (Eric leaving)	7.50
08/24/05	2A	train Nancy (Eric leaving)	4.50
08/25/05	2A	train Nancy (Eric leaving)	7.50
08/26/05	2A	train Nancy (Eric leaving)	7.50
		TOTAL	**94.50**

02/15/06	2A	training new employee (Annie)	7.50
02/16/06	2A	training new employee (Annie)	7.50
02/21/06	2A	training new employee (Annie)	7.50
02/22/06	2A	training new employee (Annie)	7.50
02/23/06	2A	training new employee (Annie)	7.50
02/24/06	2A	training new employee (Annie)	7.50
02/27/06	2A	training new employee (Annie)	7.50
02/28/06	2A	training new employee (Annie)	7.50
03/01/06	2A	training new employee (Annie)	7.50
03/02/06	2A	training new employee (Annie)	7.50
03/03/06	2A	training new employee (Annie)	7.50
03/23/06	2A	Mandated Cost Training with Nancy	0.50
03/31/06	2A	Mandated Cost w/ Eloisa	0.50
04/12/06	2A	Mandated Cost (paper work)	2.00
		TOTAL	**85.50**

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District — Fiscal Year: 07/01/05

Henry B. Villareal — Employee Name

Dean, Enrollment Services — Exact Position Title

A&R/CSM — Department/Location

605 574-6590 — Telephone #

12mo / 11mo / 10mo / hrly — Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
08/05	1A 1B 2A 2B 3 4	Staff Meeting to discuss fee collections	1
01/06	1A 1B 2A 2B 3 4	Staff Meeting to discuss fee collections	1
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Henry B. Villareal Date 4-24-06

If you have any questions, please contact Raymond Chow, at 6742

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SMCCD Fiscal Year: 05-06

Rosa Villegas 3530 FA Tech.

Employee Name / Exact Position Title

Financial Aid 8-211 (650) 306-3172 12mo/11mo/10mo/hrly

Department/Location / Telephone # / Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/29/06	1A (1B) 2A 2B 3 4	Meeting to discuss mandated claim	2 hrs.
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rosa Villegas Date 4-24-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: San Mateo County Community College District Fiscal Year: 05-06

EMMA ZAN SHORT TERM HOURLY - ACCT. TECH.
Employee Name Exact Position Title

BUS. SERVICES
Department/Location Telephone # 12mo / 11mo / 10mo / hrly Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/8/06	1A 1B (2A) 2B 3 4	NEW EMPLOYEE TRAINING	7.5
3/9/06	1A 1B (2A) 2B 3 4	"	7.5
3/10/06	1A 1B (2A) 2B 3 4	"	7.5
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		
	1A 1B 2A 2B 3 4		

total 22.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Emma Zan Date 6-28-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY April 24, 2006; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES — Department/Location
OLIVIA AUSTEN — Employee Name
SHORT-TERM HOURLY – ACCT. TECH — Exact Position Title
_____ Telephone #
12mo / 11mo / 10mo / hrly (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

Suki,
OLLIE WORKS ONLY DURING OPENING DAYS.
FY 05/06 SHE WORKED FOR 18 DAYS.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivia R. Austen Date 08-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Eric Benjamin — Employee Name
Operations Asst. II — Exact Position Title
(650) 738-4432 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6744

PLEASE SUBMIT THIS INFORMATION BY 4-24-06 ; TO Susi Crane @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUSINESS SERVICES — Department/Location
JOYCE BERGHOFF — Employee Name (574)
ACCT. TECHNICIAN — Exact Position Title
X 6220 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

SUKI,
FYI - JOYCE IS REG. EMPLOYEE WHO WORKS EVENING SCHEDULE (5PM - 7:30 PM). FOR FY05/06 SHE WORKED 19 DAYS.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Berghoff Date 6/29/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Sandy Bianchi — Employee Name
Acct. Tech. I — Exact Position Title
(650) 738-4101 — Telephone #
12mo / 11mo / 10mc / hrly (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	na					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Penelope Dow, at 4763

PLEASE SUBMIT THIS INFORMATION BY ASAP; TO [illegible]

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUSINESS OPERATIONS / CAÑADA COLLEGE — Department/Location
DOMENICA CASTELLO — Employee Name
ACCOUNTING TECHNICIAN — Exact Position Title
650 306 3270 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/2/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Operations/Canada College — Department/Location
Rachel Corrales, G00055001 — Employee Name
Operations II — Exact Position Title
650-306-3271 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.5 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4 Minutes					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 Minutes					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4 Minutes					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Isabel Dillman — Employee Name
A&R Assistant II/4C0015 — Exact Position Title
Telephone #
12✓mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), expiain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Tajardo Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashier/Skyline College — Department/Location

Marcella Escobar Mora — Employee Name

Acctng Technician — Exact Position Title

738-4434 — Telephone #

12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-20-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/28/06; TO Suki Sharp @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Arlene Fajardo — Employee Name
Assistant Registrar/4C0024 — Exact Position Title
_____ — Telephone #
12✓mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Fajardo Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Edith Flores — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3492 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Elaine Grace Gamiao — Employee Name
A&R Assistant II/4C0274 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Arden Hamilton — Employee Name
Acta. Tech. I — Exact Position Title
(650) 738-4101 — Telephone #
12mo / 11mo / 10mc / (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Operations / Cañada College — Department/Location
Sydney Hamilton — Employee Name
Accounting Technician — Exact Position Title
650 306 3173 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sydney Hamilton Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN MATEO CC DIST
District

A+R / SKYLINE COLLEGE
Department/Location

SHERRI HANCOCK
Employee Name

DEAN of ENROLLMENT SERVICES
Exact Position Title

738-4238
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-98~~ ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherri Hancock Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

COPYRIGHT 2006 SixTen and Associates

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Vivien Huynh — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3395 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minute					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vivien N Huynh Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Maria Lara — Employee Name
Admissions and Records Assistant III — Exact Position Title
X3122 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lara Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Jeremy Mileo — Employee Name
A&R Assistant II/4C0014 — Exact Position Title
_____ — Telephone #
12✓mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeremy Mileo Date 4/25/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Ruth Miller — Employee Name
Assistant Registrar — Exact Position Title
X3125 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Miller Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Renee Moresco — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3123 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renee Moresco Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier's Office / CSM — Department/Location
Cheryl Navarrete — Employee Name
Accounting Technician — Exact Position Title
574-6408 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl Navarrete Date 6/29/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY ~~4/24/06~~ ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Services — Department/Location
Nguyen, Jeanne — Employee Name
Accounting Technician — Exact Position Title
574-6411 — Telephone #
(12mo) / 11mo / 10mc / hrly — ~~Work~~ year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 Min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeanne Nguyen Date 6 29 06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office.

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Operations / Cañada College — Department/Location
Mario Peña — Employee Name
Accounting Technician — Exact Position Title
650 306 3272 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES — Department/Location
CHARLES PHAN — Employee Name
SR. ACCTG. COORDINATOR — Exact Position Title
X6589 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

Suki,
FYI - I WORKED ONLY WHEN BUSY OR SHORT OF STAFF - NOT A REGULAR LIKE JEANNE OR CHERYL

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 8/16/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Kay Rabb — Employee Name
A&R Assistant II/4C0017 — Exact Position Title
Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Rabb Date 4/25/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Nancy Rosario Argarin — Employee Name
Sr. Acctg. Coordinator — Exact Position Title
(650) 738-4432 — Telephone #
(12mo) / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N Argarin Date 4/12/06

If you have any questions, please contact Raymond Chow, at 5282

PLEASE SUBMIT THIS INFORMATION BY 4/21/06 ; TO Suki Chang (c/o Debbie Sims)

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Gertrude Sartor — Employee Name
A&R Assistant II/4C0255 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gertrude Sartor Date April 25, 2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Dorothy Shiloh — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3124 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Magaret Skaff — Employee Name
Program Services Coordinator/4C0367 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 ✓
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Magaret Skaff Date 4-25-2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Soraya Sohrabi — Employee Name
Program Services Coordinator — Exact Position Title
X3494 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Soraya Sohrabi Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Adela Swinson — Employee Name
Admissions and Records III/4C0020 — Exact Position Title
Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Adela Swinson Date 04-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Geraldine Trevaskis — Employee Name
Admissions and Records II/4C0342 — Exact Position Title
Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Geraldine Trevaskis Date

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 : TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline — Department/Location
Annie Trinh TRINH — Employee Name
Acctg Technician — Exact Position Title
650-738-4431 — Telephone #
(12mo) / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/12/06

If you have any questions, please contact Raymond Chow, at 574-2

PLEASE SUBMIT THIS INFORMATION BY 4/13/06; TO Staci Crane @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Javier Urena — Employee Name
Program Services Coordinator/February through June — Exact Position Title
X3494 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Chequitq Williams-Cox — Employee Name
A&R Assistant II/4C0018 — Exact Position Title
_____ — Telephone #
12✓mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chequitq Williams-Cox Date 4/25/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 : TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES — Department/Location
EMMA ZAN — Employee Name
SHORT TERM HOURLY - ACCTG. TECH — Exact Position Title
Telephone #
12mo / 11mo / 10mo / mriv (circle) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

Suki,
FYI - EMMA WORKS ONLY DURING OPENING DAYS. FOR FY 05/06 SHE WORKED @ CASHIER/BUS SERV. FOR 34 DAYS.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Emma Zan Date 6-29-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office.

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Finanaal Aid/Canada
Department/Location

Margie Carrington
Employee Name

Director, Financial Aid Services
Exact Position Title

(650)306-3174
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Margie Carrington Date 4/20/2006

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid - Skyline College
Department/Location

Karen Chadwick-White
Employee Name

Financial Aid Assistant
Exact Position Title

650-738-4236
Telephone #

12✓mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 04/21/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/Skyline College
Department/Location

Randy Ciaros
Employee Name

Financial Aid Technician
Exact Position Title

650.738.4236
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05/06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.					
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 MIN	—	155	—	1,240 MIN
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/19/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

EOPS/ College of San Mateo
Department/Location

Lorena del Mundo
Employee Name

Program Services Coordinator
Exact Position Title

(650) 574-6154
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Lorena del Mundo Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Doreen Garcia
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6148
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 9-14-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid / Cañada College
Department/Location

Jessica Hamlin
Employee Name

Financial Aid Assistant
Exact Position Title

(650)306-3307
Telephone #

12mo / 11mo / 10mo / hrly (circle)
Work year length

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4.29				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.43				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.41				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.02				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.87				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/13/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Claudia Menjivar
Employee Name

Financial Aid Director
Exact Position Title

(650) 378-7233
Telephone #

12✓mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature C. Menjivar Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Wendy Mancha
Employee Name

Student Assistant
Exact Position Title

650-306-3307
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 Hr				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.19 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date April 17, 06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006, TO RAY CHOW AT DISTRICT OFFICE

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/Skyline College
Department/Location

Regina Morrison
Employee Name

Financial Aid Technician
Exact Position Title

(650) 738-4350
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6 minutes	288			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7 minutes	319			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 minutes				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7 minutes				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 minutes		155		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 minutes				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature [signature] Date 4.21.06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Fin. Aid - Cañada College
Department/Location

Lucy Nolasco
Employee Name

Fin Aid Tech
Exact Position Title

306-3307
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	40				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	40				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	70				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	50				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	50				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Lucy Nolasco Date 4-21-06

If you have any questions, please contact Raymond Chow, at 6742

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January 2006

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Thanh Pitetta
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6146
Telephone #

12/mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05/06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Thanh Pitetta Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Yanely Pulido
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6514
Telephone #

12✓mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Ypulido Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid / Canada College
Department/Location

Soler Faye
Employee Name

Financial Aid Technician
Exact Position Title

366-3279
Telephone #

(2mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Faye Soler Date 4-17-06

If you have any questions, please contact Raymond Chow, at 6732

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006 TO SUKI CHANG AT DISTRICT OFFICE

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Clear Form

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Rosa Villegas
Employee Name

FA Technician
Exact Position Title

306-3172
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2 min.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Rosa Villegas Date 4-13-06

If you have any questions, please contact Raymond Crow, at 2742

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Clear Form

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	13452	14773	14567	15232	17052	13108	13202	13325
Fall	27191	26137	25575	27037	29384	27862	25591	25265
Winter/ Intersession								
Spring	27617	26987	26519	28766	29748	27776	22387	22924
Total			66681			68686		
2. Number of students who paid enrollment fees:								
Summer	11872	13057	12673	12760	13856	10946	11645	11644
Fall	25816	24808	23941	24399	26635	24872	23458	22249
Winter/ Intersession								
Spring	25271	24748	23902	25764	26545	25254	24422	20853
Total			60516			61072		
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	4761	4687	5490	6973	7564	9369	11100	10661

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/30/06

Raymond Chow — Employee Name: (print)

Controller — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised January 2006

Multipler

TERM	EFC 1*	EFC 2**	EFC 4**	EFC 5**
Summer 1998	13,452	11,872	7,851	106
Fall 1998	27,191	25,816	19,080	782
Spring 1999	27,617	25,271	18,243	293
Summer 1999	14,773	13,057	8,646	103
Fall 1999	26,137	24,808	19,620	690
Spring 2000	26,987	24,748	17,766	334
Summer 2000	14,567	12,673	10,910	71
Fall 2000	25,595	23,941	19,072	799
Spring 2001	26,519	23,902	16,386	276
Summer 2001	15,232	12,760	7,509	111
Fall 2001	27,037	24,399	16,131	834
Spring 2002	28,766	25,764	17,809	436
Summer 2002	17,052	13,856	8,829	118
Fall 2002	29,384	26,635	20,671	767
Spring 2003	29,748	26,545	19,850	474
Summer 2003	13,108	10,946	7,951	253
Fall 2003	27,802	24,872	23,890	1,368
Spring 2004	27,776	25,254	20,144	557
Summer 2004	13,202	11,645	10,329	159
Fall 2004	25,591	23,458	22,990	1,326
Spring 2005	27,387	24,422	17,775	507
Summer 2005	13,325	11,644	7,231	128
Fall 2005	25,265	22,249	18,164	785
ing 2006	22,424	20,853	13,936	339

*Source: CCCCO Data Mart
**Source: Banner

AY	EFC 3**
1998-1999	4,761
1999-2000	4,687
2000-2001	5,450
2001-2002	6,973
2002-2003	7,564
2003-2004	9,369
2004-2005	11,100
2005-2006	10,661

Note: AY = (Fall+Spring+Summer). For eg: 2005-2006 (Fall 2005+Spring 2006+Summer 2006)

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	13452	14773	14587	15232	17052	13108	13202	13325
Fall	27191	26137	25595	27037	29384	27862	25591	25265
Winter/ Intersession								
Spring	27617	26987	26519	28766	29748	27776	27387	22424
Total	68260	67897	66681	71035	76184	68686	66180	61014
2. Number of students who paid enrollment fees:								
Summer	11872	13057	12673	12760	13856	10946	11625	11644
Fall	25816	24808	23941	24399	26635	24872	23458	22249
Winter/ Intersession								
Spring	25271	24748	23902	25764	26545	25254	24422	20853
Total	62959	62613	60516	62923	67036	61072	59525	54746
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	4761	4687	5450	6973	7564	9269	11100	10661

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Employee Signature: _____ Date _____

_____ _____

ployee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	7851	8696	10910	7509	8829	7951	10329	7231
Fall	19080	19620	19072	16131	20671	23890	22990	18164
Winter/Intersession								
Spring	18243	17766	16386	17809	19850	20144	17775	13936
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	166	103	71	111	118	253	159	128
Fall	782	690	799	834	767	1368	1326	785
Winter/Intersession								
Spring	293	334	276	436	474	557	507	339
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 5/31/06

Employee Name: (print) Raymond Chan Position or Title Controller

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: SAN MATEO COUNTY CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	7851	8646	10910	7509	8829	7951	10329	7231
Fall	19080	19620	19072	16131	20671	23890	22990	18164
Winter/Intersession								
Spring	18243	17766	16386	17809	19850	20144	17775	13936
Total	45174	46032	46368	41449	49350	51985	51094	39331
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	166	103	71	111	118	253	159	128
Fall	782	690	799	834	767	1368	1326	785
Winter/Intersession								
Spring	293	334	276	436	474	557	507	339
Total	1181	1127	1146	1381	1359	2178	1992	1252

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Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
0 Page(s) attachment

FAX TRANSMITTAL

DATE: November 2, 2006

FAX TO: Suki Chang
San Mateo County CCD
(650) 574-6574

CC: John Hendrickson

FROM: Keith Petersen KBP

SUBJECT: DOCUMENT REQUEST
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006

PLEASE RESPOND BY: November 16, 2006

In order to process the above claim, we need the following PHR's:

Name	Title	2005-2006 PHR
Hamilton, Sydney	Accounting Technician	$ Temp Employee
Hancock, Sherri	Dean, Enrollment Services	$ 89.01
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	$ 37.79
Urena, Javier	Program Services Coordinator	$ ~~[illegible]~~ 43.69

Thank You.

te

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
ACENA, ALBERT	DEAN, SOC SCI	$ 80.35	$ 85.69
ANDERSON, PAULA	DEAN SPECIAL PROJECT	$ 80.35	
ARAM, MINOO	BENEFIT MANAGER	$ 61.18	$ 65.01
ARGARIN, NANCY	SR. ACCOUNTING COORDINATOR	$ 32.39	$ 37.79
AUSTEN, OLIVIA	OPERATIONS ASSISTANT I		
AVAKIAN, JOHN	DIR ED NET MULTIMEDIA	$ 83.01	$ 85.69
AVELAR, LINDA	DEAN BUS/IND RELATION	$ 83.01	$ 85.69
AZADEH, JORGENSEN	HR REP	$ 38.61	$ 39.12
AZEVEDO, JILL	KCSM BUS MANAGER		
BARRALES-RAMIREZ, LORRAINE	PROG SUPERVISOR	$ 47.30	
BEEBER, AVELINA	A&R ASSISTANT II	$ 34.03	
BENJAMIN, ERIC	OPERATIONS ASSISTANT II	$ 37.64	$ 37.64
BENNETT, RICK	DIRECTOR, GENERAL SERVICES	$ 69.73	$ 85.69
BERGHOFF, JOYCE	ACCOUNTING TECHNICIAN	$ 38.67	$ 41.09
BERWICK, NATALIE	OPERATIONS ASSISTANT II	$ 40.47	
BESTOCK, DONNA	DEAN, SOC SCI/CREATIVE	$ 83.01	$ 85.69
BIANCHI, SANDRA	OPERATIONS ASSISTANT I		$ 21.04
BLACKMAN, BERNIE	DIR PLAN AND RESEARCH		
BLACKWOOD, KATHY	CHIEF FINANCIAL OFFICER	$ 96.52	$ 104.62

Name	Title	04-05	05-06
BRENNER, ERIC	INSTR LANG ART/LEARN		$ 73.29
BRIONES, ELOISA	COLLEGE BUSINESS OFFICER	$ 64.82	$ 71.98
BUTTERFIELD, JAMES	GRANT ANALYST	$ 56.92	$ 58.75
CALIBO, ARLENE	ADM ANALYST	$ 56.92	$ 58.75
CARLOS, IGNACIO	SUPERV COLLEGE BUS SVC		$ 46.96
CARRINGTON, DEBBIE	DISTRICT BUDGET OFFICER	$ 77.40	$ 80.26
CARRINGTON, MARGIE	DIRECTOR, FINANCIAL AID SERVICES	$ 58.09	$ 62.67
CASIDO, CONSTANCIA	SENIOR ACCOUNTING TECHNICIAN	$ 49.17	$ 49.17
CASTELLO, DOMENICA	ACCOUNTING TECHNICIAN		
CHADWICK-WHITE, KAREN	FINANCIAL AID ASSISTANT	$ 34.39	$ 37.80
CHANDLER, CAMERON (LIZ)	INSTR PE		$ 61.90
CHANG, SUKI	EXECUTIVE SECRETARY	$ 44.40	$ 46.06
CHIAKA, KATHY	SENIOR ACCOUNTING TECHNICIAN	$ 42.18	$ 45.95
CHOW, RAYMOND	CONTROLLER	$ 74.61	$ 77.38
CHRISTENSEN, BARBARA	DIR, COMMUNITY & GOVT RELATIONS	$ 83.01	$ 85.69
CLAIRE, MICHAEL	VICE PRESIDENT, INSTRUCTION	$ 91.92	$ 99.64
CLAROS, RANDY	FINANCIAL AID TECHNICIAN		$ 34.04
CLINTON, VICTORIA	PART TIME INSTRUCTOR		$ 78.10
CORRALES, RACHEL	OPERATIONS	$ 40.27	$ 34.95

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
DaSILVA, LINDA	DIR, MAINTENANCE & OPERATIONS	$ 67.50	$ 71.98
DEAMER, PAT	INSTRUCTOR /SCI.-MATH		$ 60.96
DEANNE, WILKES	ADMINISTRATIVE ASSISTANT		
DEDO, BARBARA	SENIOR PROGRAMMER II	$ 65.46	$ 67.90
del MUNDO, LORENA	PROGRAM SERVICE COORDINATOR	$ 32.80	$ 33.62
DILLEY, GARY	DEAN, PHYSICAL EDUCATION	$ 83.01	$ 8.57
DILLMAN, ISABEL	A&R ASSISTANT II	$ 34.57	$ 35.17
DIMOND, PAT	SUPERV COLLEGE BUS SVC		
DUNBAR, JOANNE	ASSISTANT REGISTRAR (Retired 7/02)		
EMMONS, PAMELA	STAFF ASSISTANT	$ 34.82	$ 35.95
ESCOBAR, MARIA	DIRECTOR, FA		$ 69.73
ESCOBAR-MORA, MARCELLA	ACCOUNTING TECHNICIAN	$ 32.39	$ 35.19
ESTES, SUSAN	DEAN, LANGUAGE/ARTS	$ 83.01	$ 85.69
FAJARDO, ARLENE	ASSISTANT REGISTRAR	$ 55.83	$ 57.90
FEIMER, JOYCE (VORIS)		$ 63.71	$ 66.08
FLORES, EDITH	A&R ASSISTANT II	$ 18.03	$ 20.94
FORREST, TAEKO	HUMAN RESOURCE REPRESENTATIVE		$ 35.48
FUENE, DAVID	HUMAN RESOURCES REPRESENTATIVE	$ 43.21	$ 43.21
GAMIAO, ELAINE G.	A&R ASSISTANT II	$ 34.03	$ 35.13

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
GARCIA, DOREEN	FINANCIAL AID TECHNICIAN	$ 38.45	$ 43.74
GLASS, DANNY	FACILITIES/OPERATIONS MGR	$ 64.91	$ 70.70
GOTELLI, AL	ENGINEER	$ 43.17	$ 44.79
GOTH, GEORGE	INST. SCI/MATH		
GREEN, CAROL	DIRECTOR OF PERSONNEL		
GRIFFIN, PAT	VICE PRESIDENT, STUDENT SERVICES	$ 101.35	
GULLI, TONY	CHIEF ENGINEER	$ 54.61	$ 56.63
HAMILTON, ARDEN	OPERATIONS ASSISTANT I		$ 30.90
HAMLIN, JESSICA	FINANCIAL AID TECHNICIAN		$ 25.91
HAMPTON, KAREN	CORP ED PROG. COORD (Term. 2/03)		
HANCOCK, SHERRI	DEAN, ENROLLMENT SERVICES	$ 79.25	
HARER, KATHRINE	INSTR. LANG ART/LEARN		
HARRISON, SUE	ADMINISTRATIVE ASSISTANT	$ 40.40	
HART, MICHAEL	NETWORK MANAGER	$ 67.05	$ 69.55
HAUSMAN, SHELLEY	PROJECT DIRECTOR		$ 46.01
HAY, KUNI	DEAN HUMANITIES	$ 80.35	
HAYES, LINDA	DEAN, BUSINESS & SOCIAL SCIENCE	$ 83.01	$ 85.69
HECHIM, PHYLLIS	ADM ASSISTANT	$ 53.30	$ 55.27
HERNANDEZ, INGRID (SEE MELGOZA)	HUMAN RESOURCES REPRESENTATIVE	$ 37.87	

Name	Title	04-05	05-06
HERNANDEZ, LUIS	CUSTODIAN	$ 29.55	$ 33.78
HEWITT, THOMAS	DIRECTOR, LIBRARY SERVICES	$ 69.73	$ 71.98
HOO, BOB	ACCOUNTANT PAYROLL (Retired 1/03)		
HUGHES, JENNIFER	DEAN, COUNSELING	$ 83.01	$ 85.69
HUYNH, VIVIEN	A&R ASSISTANT II	$ 30.90	$ 33.44
IBER, SANDY	DIRECTOR, COLLEGE DEVELOPMENT	$ 69.73	$ 71.98
INOKUCHI, RICHARD	FACILITIES/OPERATIONS MGR	$ 63.71	$ 65.76
INTENDENCIA, NEIL	OPERATIONS ASSISTANT I	$ 32.39	
JOEL, HARRY	VICE CHANCELLOR, HR & EMP RELATIONS	$ 114.66	$ 118.37
JOLLY, RICHARD	LEAD GROUNDSKEEPER (Resigned 3/04)		
JONES, CHARLES	COMPUTER SUPPORT	$ 43.51	$ 47.03
JORGENSEN, AZADEH	STAFF ASSISTANT	$ 35.50	$ 40.38
KELLER, JAMES	EXECUTIVE VICE CHANCELLOR	$ 124.33	$ 128.35
KELLY, SHIRLEY	COLLEGE PRESIDENT	$ 120.35	
KELLY, SHIRLEY	PRESIDENT		$ 114.59
KING-SULTANA, JOYCE	OPERATIONS ASSISTANT I		
KIRK, JOHN	INST. SOC SCI		$ 63.45
KO, MAGGIE	ACCOUNTANT	$ 66.10	$ 68.54
KOENIG, JOANN	ASSISTANT REGISTRAR		

Name	Title	04-05	05-06
KOWERSKI, BOB	DEAN MATH & SCI	$ 83.01	$ 66.57
LARA, MARIA	A&R ASSISTANT III	$ 37.64	$ 41.09
LAWRENCE, MARILYN	GENERAL MANAGER		$ 118.37
LEACH, ELLEN	ADM ASSISTANT	$ 46.33	
LEE, ELLEN	PAYROLL CLERK I	$ 38.21	$ 40.75
LEONG, ANITA	ACCOUNTANT	$ 61.18	$ 63.47
LUCAS-WOODS, PHILLIPS	INTERIM VP, STUDENT SERVICES	$ 93.43	$ 104.62
LY, PHEN	CUSTODIAN	$ 32.03	
MARTINEZ, ANITA	SUPERVISOR OF CAMPUS FACILITIES		
MARTINEZ, DIANE	FACILITIES/OPERATIONS MGR	$ 60.66	$ 65.76
MARTINEZ, JOHN	BROADCAST ENG II	$ 50.65	
MARTINEZ, ULALIA	STUDENT ASSISTANT		
McBRIDE, MARILYN	VP INSTRUCTIONS	$ 83.01	$ 85.69
MELGOZA (HERNANDEZ), INGRID	HR REPRESENTATIVE		$ 42.42
MELLOR, SANDRA	DEAN CORP/COMM ED	$ 83.01	$ 85.69
MENJIVAR, CLAUDIA	FINANCIAL AID TECHNICIAN	$ 43.76	$ 48.98
MILEO, JEREMY	A&R ASSISTANT II	$ 34.03	$ 35.58
MILLER, RUTH	ASSISTANT REGISTRAR	$ 57.21	$ 54.09
MINCHEZ, WENDY	STAFF ASSISTANT		$ 9.27

Name	Title	04-05	05-06
MITCHELL, TERRIE	ADM. ANALYST (retired 1/04)		
MORA, MARCELLA	ACCOUNTING TECHNICIAN	$ 32.39	$ 34.03
MORAN, PATRICIA	PART TIME INSTRUCTOR		
MORESCO, RENEE	A&R ASSISTANT II	$ 34.03	$ 38.73
MORRISON, REGINA	FINANCIAL AID ASSISTANT	$ 40.11	$ 41.61
MORROW, VICTORIA	COLLEGE PRESIDENT	$ 117.21	$ 125.61
MUNSON, STEPHANIE	PURCHASING TECHNICIAN		
NAVARETTE, CHERYL	ACCOUNTING TECHNICIAN	$ 40.27	$ 42.84
NGUYEN, JEANNE	ACCOUNTING TECHNICIAN	$ 37.64	$ 41.77
NICHOLIS, ANNIE	INSTR. BUSINESS		
NOLASCO, LUCY	FINANCIAL AID TECHNICIAN	$ 38.45	$ 42.18
NUNES, VICTORIA	ADMINISTRATIVE ASSISTANT	$ 47.76	
NUNEZ, JOSE	EXEC DIRECTOR FACILITIES	$ 98.10	
PANG, STEVE	ACCOUNTANT	$ 57.70	$ 62.86
PELLETIER, CODY	EMPLOYMENT MANAGER	$ 59.55	$ 59.55
PENA, MARIO	ACCOUNTING TECHNICIAN	$ 37.64	$ 40.12
PEREZ, ROSA	COLLEGE PRESIDENT	$ 120.35	
PETTERSEN, KATHLEEN	ADM ASSISTANT		
PHAN, CHARLES	SENIIOR ACCOUNTANT		$ 43.00

Name	Title	04-05	05-06
PITETTA, THANH	FINANCIAL AID TECHNICIAN	$ 34.03	$ 36.96
PONTACQ, LYNN	CFO (Retired 4/04)		
POST, ROBERT	CUSTODIAN		
PULIDO, YANELY	FINANCIAL AID TECHNICIAN		$ 35.93
QUINTERO, JUANITA	OFFICE ASSISTANT II	$ 26.66	$ 29.04
RABB, KAY	A&R ASSISTANT II	$ 34.03	$ 34.03
RABY, MELISSA	DEAN, ENROLLMENT SERVICES	$ 75.45	$ 81.81
RANDLE, AUDREY	CUSTODIAN		
REED, CAROL	GROUNDKEEPER		
RICO, JUAN	CUSTODIAN	$ 32.82	
RIVAS, JOEL	LEAD GROUNDSKEEPER	$ 38.50	$ 41.24
RIVERA, CONTRERA	INSTR SCI/MATH		
ROSARIO-ARGARIN, NANCY	OPERATIONS ASSISTANT I	$ 32.39	
ROSARIO-ARGARIN, NANCY	OPERATIONS ASSISTANT I		
SAMUELSON, STEPHANIE	PURCHASING TECHNICIAN	$ 38.27	$ 47.50
SARTO, GERTRUDE	A&R ASSISTANT II	$ 34.03	$ 36.20
SCHULTZ, SABRINA	PAYROLL SUPERVISOR	$ 61.67	
SEARLE, JOHN	INSTRUCTOR /SCI.-MATH		
SERNA, IRENE	ACTING DEAN EOPS 9Resigned 3/03)		

Name	Title	04-05	05-06
SHILOH, DOROTHY	A&R ASSISTANT II	$ 34.94	$ 37.15
SIGUENZA, OSCAR	SUPR CUSTODIAL (Retired 8/02)		
SKAFF, MARGARET	A&R ASSISTANT II	$ 34.11	$ 39.96
SOHRABI, SORAYA	A&R ASSISTANT III	$ 38.67	$ 46.38
SOLER, FAYE	FINANCIAL AID TECHNICIAN	$ 39.42	$ 45.37
SONNER, GRACE	DEAN, DIVISION - VP		
SWETT, DENISE	VICE PRESIDENT		
SWINSON, ADELA	A&R ASSISTANT III	$ 31.60	$ 34.03
TAEKO, FORREST	HR REPRESENTATIVE	$ 43.21	$ 43.21
THIELE, ROMELIA	INSTRUCTOR/BUS		
THOMAS, TOM	GROUNDSKEEPER		
TIDD, RICHARD	ELECT TECH	$ 43.51	$ 51.29
TINDELL, TERRY	CUSTODIAN - UTILITY ENG	$ 36.24	$ 41.24
TREVASKIS, GERALDINE	A&R ASSISTANT II	$ 34.03	$ 39.17
TRINH, ANNIE	ACCOUNTING TECHNICIAN		$ 35.81
TROTT, JOANNE	SR PROGRAMMER	$ 63.71	$ 72.50
VERES, JOZSEF	CHIEF ENGINEER	$ 52.86	$ 56.63
VILLAREAL, HENRY	DEAN ADM/RECORD	$ 83.01	$ 85.69
VILLEGAS, ROSA	FINANCIAL AID TECHNICIAN	$ 38.45	$ 35.30

Name	Title	04-05	05-06
VORIS, JOYCE (SEE FEIMER)	SUP OP/PRODUCTION	$ 63.71	
WALSH, MICHAEL	THEATER DESIGN		
WARSHAWER, LINDA	SR HUMAN RES (Retired 12/03)		
WATSON, TERRY	FINANCIAL ANALYST	$ 54.61	$ 56.55
WELCH, CATHRINE	ADM RECORDS ASSN II		
WHITE, DAWN	SR HUMAN RES (Resigned 3/03)		
WHITE, FRANCIS	PRESIDENT		
WILCOX, PHYLLIS	ADM ASSISTANT (Rtetired 8/03)		
WILKES O'ROURKE, DEANNE	ADMINISTRATIVE ASSISTANT	$ 50.54	$ 52.42
WILLIAM-COX, CHEQUITQ	A&R ASSISTANT		$ 9.90
WILLIAMSON, MICHAEL	DEAN SCI/MATH/TECH	$ 83.01	$ 85.69
WINCHESTER, BECKY	ADMINISTRATIVE ASSISTANT		$ 43.71
WITHAM, BRADLEY	TECH SUPPORT SERVICES MANAGER	$ 53.95	$ 61.47
WITHAM, JASMINE	WEB SUPPORT ANALYST	$ 59.55	$ 61.47
WOLF, ANDREAS	DEAN, PE	$ 83.01	$ 85.69
WONG, JANE	SENIOR ACCOUNTING COORDINATOR	$ 42.51	$ 52.42
YANCEY, ALLISON	ADM ASSISTANT		
ZAN, EMMA	OPERATIONS ASSISTANT I		$ 21.04

Schedule 6
San Mateo Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Contracted Services

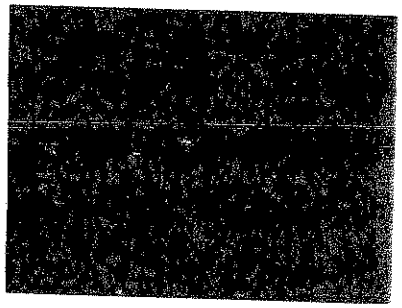
Purpose: To calculate the total contracted services fees.
Source: Invoices from Prestige Graphics, inc.
Findings:

Page	Date	Amount	
1	July 8, 2005	$	2,918.19
2	July 27, 2005	$	7,800.00
3	August 12, 2005	$	4,723.49
4	September 2, 2005	$	1,958.54
5	December 27, 2005	$	7,457.03
6	January 11, 2006	$	4,530.25
7	February 1, 2006	$	1,898.36
8	June 14, 2006	$	3,170.10
	Total	**$**	**34,455.96**

Conclusion: Findings go forward to the EFCW-2.

SAN MATEO COMMUNITY COLLEGE DISTRICT
JUL 18 6 08 AM '05

July 8, 2005



Vickie Nunes
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 18905.SM E05L2403 Bal
E05L2404 Bal.

PO:500365

Fall 2005
Registration Statements
2nd Cycle

Please chg Acct#
(1) E05L2403
Records Processed: 5,545

Skyline College:	5,545 Records @ $ .21 ea.	$ 1,164.45 10002 2333 5690 601000
TOTALS:	5,545 Records @ $ .21 ea.	$ 1,164.45

Additional Postage Due To Zero Postage Account: $ 1,663.50 chg
(Non-Taxable) *See Statement Of Postage As Of July 8, 2005* 10002 2227 5820 673005

770-31-4956 E05L2404

	Freight	Tax	Total Due
$ 2,827.95	-0-	90.25	$ 2,918.20

TERMS – NET 20

Pam please do a direct payment + Ref PO500365.
Leg. 1
Thankyou
7/15/05

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
18905.SM PART	P0500365	I05L2403	10002-2333-5690-621000	1164.45	.00	96.06	.00	1260.51
18905.SM BAL.		I05L2404	10002-2227-5820-673005	1663.50	.00	.00	.00	1663.50

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
342664	07/20/05	330314956	.00	96.06	.00	2,918.19

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Prestige Graphics, Inc.
Name on box should match payee name below

342664

Check Date
07/20/05

Check Amount
$*****2,918.19

This Check Void After 180 Days

Two Thousand Nine Hundred Eighteen & 19/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE REQUIRED

⑈000342664⑈ ⑆122000497⑆ 70 200 24903⑈

SAN MATEO COUNTY COMM COLL DIST
JUL 18 6 08 AM '05

July 8, 2005

Vickie Nunes
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

330-71-4956

Invoice No: 18905.SM I05L2403 Bal
I05L2404 Bal.

PO:500365

Fall 2005
Registration Statements
2nd Cycle

Please chg Acct#

Records Processed: 5,545

(1) I05L2403

Skyline College:	5,545 Records @ $ .21 ea.	$ 1,164.45 10002 2333 5690 621000
TOTALS:	5,545 Records @ $ .21 ea.	$ 1,164.45

Additional Postage Due To Zero Postage Account: $ 1,663.50 chg
(Non-Taxable) *See Statement Of Postage As Of July 8, 2005* 10002 2227 5820 673005

330-71-4956 I05L2404

	Freight	Tax	Total Due
$ 2,827.95	-0-	90.25	$ 2,918.20

TERMS – NET 20

Pam please do a direct payment + Ref PO500365. Leg. 1
Thank you
7/15/05

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
18905.SM PART	P0500365	105L2403	10002-2333-5690-621000	1164.45	.00	96.06	.00	1260.51
18905.SM BAL.		105L2404	10002-2227-5820-673005	1663.50	.00	.00	.00	1663.50

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
342664	07/20/05	330314956	.00	96.06	.00	2,918.19

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name on box should match payee name below

342664

Check Date
07/20/05

Check Amount
$*****2,918.19

This Check Void After 180 Days

Two Thousand Nine Hundred Eighteen & 19/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE REQUIRED

⑈000034266⑈ ⑆122000497⑆ 70200 24903⑈

Jul 2? 9 17 AM '05

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 ● Fax (858) 560-1473

July 27, 2005

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 157.05.SM P0600642

PO: 600182

Registration Statement Postage Invoice Fall 2005
Mailing Dates – August 15th & August 30

Postage First Class – Anticipated Quantity 26,000	@ $ .30ea.	$ 7,800.00

Postage Amount Due: $ 7,800.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 7,800.00	-0-	-0-	$ 7,800.00

Due Prior To Mailing Date

Please Pay
PO600182
Item 4

7/28/05

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
157-05.SM	P0600182	10600642	10002-2227-5820-673005	2652.00	.00	.00	.00	2652.00
			10003-3340-5820-621000	1716.00	.00	.00	.00	1716.00
			10004-4333-5820-621000	3432.00	.00	.00	.00	3432.00

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
342966	08/01/05	330314956	.00	.00	.00	7,800.00

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name in box should match payee name below

342966

Check Date
08/01/05

Check Amount
$*****7,800.00

This Check Void After 180 Days

Seven Thousand Eight Hundred & 00/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE REQUIRED

⑈000034966⑈ ⑆121000497⑆ 70200249 03⑈

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

August 12, 2005

AUG 18 1 00 PM '05

S. Tax 8.75

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

E0601161

Invoice No: 224.05.1

PO:600182

OK to pay
PO600182
Item 1
8/18/05

Fall 2005
Registration Statements

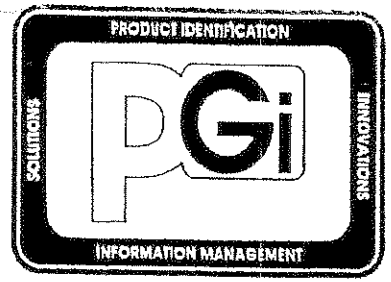
Records Processed: 20,875

Pls Chg

Canada College:	4,643 Records @ $ .21 ea.	$ 975.03 10003 3340 5690 621000
College Of San Mateo:	8,944 Records @ $ .21 ea.	$ 1,878.24 10004 4333 5650 621000
Skyline College:	7,288 Records @ $ .21 ea.	$ 1,530.48 10002 2333 5600 621000
TOTALS:	20,875 Records @ $ .21 ea.	$ 4,383.75

	Freight	Tax	Total Due
$ 4,383.75	-0-	339.74	$ 4,723.49

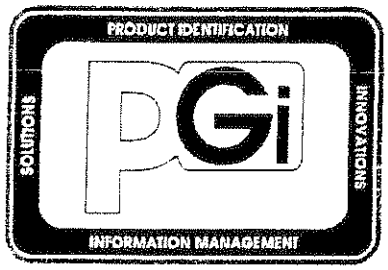
TERMS – NET 20



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Fall 2005 Registration Statement Summary Statement of Activity

Site	Quantity Processed	Quantity Mailed	Postage Expense
Canada	4,643	4,643	$ 1,392.90
San Mateo	8,944	8,944	$ 2,683.20
Skyline	7,288	7,288	$ 2,186.40
TOTALS:	20,875	20,875	$ 6,262.50



San Mateo County Community College District

Statement Of Postage Account Balance As Of August 12, 2005

Date	Reference	Description	Amount	Balance
01-27-05	Dean Letters	Fall 04'	(612.00)	387.40
02-03-05	Registration Statements	Spring 05'	(2,049.90)	(1,662.50)
02-28-05	Funds Received	Spring 05'	1,662.50	0.00
04-20-05	Appointment Postcards	Summer 05'	(8,634.36)	(8,634.36)
05-02-05	CK Deposit # 337804	Postage Deposit	11,210.00	2,575.64
06-15-05	Registration Statements	Summer 05'	(4,140.60)	(1,564.96)
06-27-05	CK Deposit # 341032	Postage Due	1,564.96	0.00
07-06-05	Dean's Letters	Spring 05'	(622.80)	(622.80)
07-08-05	Registration Statements	Summer 05'	(1,663.50)	(2,286.30)
08-01-05	CK Deposit	Previous Balance	2,286.30	0.00
08-08-05	CK Deposit # 342966	Postage Deposit	7,800.00	7,800.00
08-12-05	Registration Statements	Fall 05'	(6,262.50)	1,537.50

Account Balance as of August 12, 2005	$ 1,537.50

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
224.05.1	P0600182	10601161	10002-2333-5690-621000	1530.48	.00	126.26	.00	1656.74
			10003-3340-5690-621000	975.03	.00	80.44	.00	1055.47
			10004-4333-5690-621000	1878.24	.00	154.96	.00	2033.20

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
344056	08/22/05	330314956	.00	361.66	.00	4,723.49

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name in box should match payee name below

344056

Check Date
08/22/05

Check Amount
$******4,723.49

This Check Void After 180 Days

Four Thousand Seven Hundred Twenty Three & 49/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

** FILE COPY ** ** FILE COPY **

C0 0 0 0 3 4 4 0 5 6 C A1 2 1 0 0 0 4 9 7 A 7 0 2 0 0 2 4 9 0 3 C

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pglsd.com
Email: info@pglsd.com

SEP 14 6 31 AM '05

September 2, 2005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 245.05.6

PO:600182

Fall 2005
Registration Statements
Final Cycle

Records Processed: 6,643

Skyline College:	6,643 Records @ $ .21 ea.	$ 1,395.03
TOTALS:	6,643 Records @ $ .21 ea.	$ 1,395.03

Additional Postage Due To Zero Postage Account: $ 455.40
(Non-Taxable) *See Statement Of Postage As of August 31, 2005*

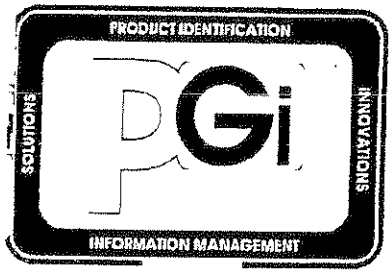
	Postage	Tax	Total Due
$ 1,395.03	455.40	108.12	$ 1,958.55

TERMS – NET 20

SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Fall 2005 Registration Statement Summary Statement of Activity
August 31, 2005 Final Cycle

Site	Quantity Processed	Quantity Mailed	Postage Expense
Skyline	6,643	6,643	$ 1,992.90
TOTALS:	6,643	6,643	$ 1,992.90



San Mateo County Community College District

Statement Of Postage Account Balance As Of August 31, 2005

Date	Reference	Description	Amount	Balance
01-27-05	Dean Letters	Fall 04'	(612.00)	387.40
02-03-05	Registration Statements	Spring 05'	(2,049.90)	(1,662.50)
02-28-05	Funds Received	Spring 05'	1,662.50	0.00
04-20-05	Appointment Postcards	Summer 05'	(8,634.36)	(8,634.36)
05-02-05	CK Deposit # 337804	Postage Deposit	11,210.00	2,575.64
06-15-05	Registration Statements	Summer 05'	(4,140.60)	(1,564.96)
06-27-05	CK Deposit # 341032	Postage Due	1,564.96	0.00
07-06-05	Dean's Letters	Spring 05'	(622.80)	(622.80)
07-08-05	Registration Statements	Summer 05'	(1,663.50)	(2,286.30)
08-01-05	CK Deposit	Previous Balance	2,286.30	0.00
08-08-05	CK Deposit # 342966	Postage Deposit	7,800.00	7,800.00
08-12-05	Registration Statements	Fall 05'	(6,262.50)	1,537.50
08-31-05	Registration Statements	Fall 05'	(1,992.90)	(455.40)
Account Balance as of August 31, 2005				$(455.40)

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION DISTRIBUTION	AMOUNT	DISCOUNT	TAX	ADDL CHARGES	TOTAL
245.05.6	P0600182	10602000	10002-2333-5690-621000	1395.03	.00	115.09	.00	1510.12
			10003-3340-5690-621000	.00	.00	.00	.00	.00
			10004-4333-5690-621000	.00	.00	.00	.00	.00
			10002-2227-5820-673005	154.84	.00	.00	.00	154.84
			10003-3340-5820-621000	100.19	.00	.00	.00	100.19
			10004-4333-5820-621000	200.37	.00	.00	.00	200.37

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
346504	09/15/05	330314956	.00	115.09	.00	1,958.54

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name in box should match payee name below

346504

Check Date
09/15/05

Check Amount
$*****1,958.54

This Check Void After 180 Days

One Thousand Nine Hundred Fifty Eight & 54/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

** FILE COPY ** ** FILE COPY **

C0000346504C A121000497A 7020024903C

SAN MATEO JUNIOR COLLEGE
DISTRICT
JAN 4 5 31 AM '85

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 • Fax (858) 560-1473

December 27, 2005

E060714 S

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 361.05.SM.1

PO:600182

Postage Invoice Spring 06'
Registration Statements
Mailing Dates January 9th & 30th 2006

Postage First Class – Quantity 28,000 @ $ .30ea.	$ 8,400.00
Less Current Postage Balance:	($ 942.97)
Balance Due:	$ 7,457.03 — Item 4

Postage Amount Due: $ 7,457.03
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 7,457.03	-0-	-0-	$ 7,457.03

OK to pay
Becky Manchester
PO600182
1/3/06

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
361.05.SM.1	P0600182	10607145	10002-2227-5820-673005	2535.39	.00	.00	.00	2535.39
			10003-3340-5820-621000	1640.55	.00	.00	.00	1640.55
			10004-4333-5820-621000	3281.09	.00	.00	.00	3281.09

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
351970	01/10/06	330314956	.00	.00	.00	7,457.03

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name in box should match payee name below

Check Date
01/10/06

351970

Check Amount
$*****7,457.03

This Check Void After 180 Days

Seven Thousand Four Hundred Fifty Seven & 03/100 Dollars********
PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

** FILE COPY ** ** FILE COPY **

C00003519 70C A121000497A 702002490 3C

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

January 11, 2006

SAN MATEO JUNIOR COLLEGE DISTRICT
JAN 20 5 35 AM '06

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

S-INV 175
I-0607694

Invoice No: 354.06.1SM

PO:600182

Spring 2006
Registration Statements

Records Processed: 20,021

all Item #1

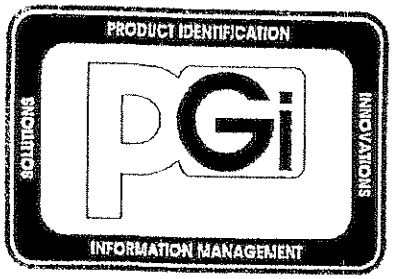
Canada College:	4,387 Records @ $ .21 ea.	$ 921.27	seq 2 (10063 3346 5690 621000)
College Of San Mateo:	8,498 Records @ $ .21 ea.	$ 1,784.58	3 (10004 4333 5690621000)
Skyline College:	7,136 Records @ $ .21 ea.	$ 1,498.56	1 (10002 2333 5690 621000)
TOTALS:	20,021 Records @ $ .21 ea.	$ 4,204.41	

	Freight	Tax	Total Due
$ 4,204.41	-0-	325.84	$ 4,530.25

PO600182
Becky Ducheneaux

TERMS – NET 20

"To pay"
Joyce Lemmon
01/19/2006



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Spring 2006 Registration Statement Summary Statement of Activity
January 11, 2006

Site	Quantity Processed	Quantity Mailed	Postage Expense
Canada	4,387	4,387	$ 1,316.10
San Mateo	8,498	8,498	$ 2,549.40
Skyline	7,136	7,136	$ 2,140.80
TOTALS:	20,021	20,021	$ 6,006.30

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
354.06.1SM	P0600182	I0607694	10002-2333-5690-621000	1498.56	.00	123.63	.00	1622.19
			10003-3340-5690-621000	921.27	.00	76.00	.00	997.27
			10004-4333-5690-621000	1784.58	.00	147.23	.00	1931.81

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
353745	01/20/06	330314956	.00	346.86	.00	4,530.25

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Prestige Graphics, Inc.
Name in box should match payee name below

353745

Check Date
01/20/06

Check Amount
$******4,530.25

This Check Void After 180 Days

Four Thousand Five Hundred Thirty & 25/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

**** FILE COPY ** ** FILE COPY ****

C0000353745C A121000497A 7020024903C

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

SAN MATEO JUNIOR COLLEGE DISTRICT
FEB 7 12 46 PM '06

February 1, 2006

Becky Winchester
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 032.06.09

PO:600182

Spring 2006
Registration Statements
Final Cycle

Records Processed: 6,822

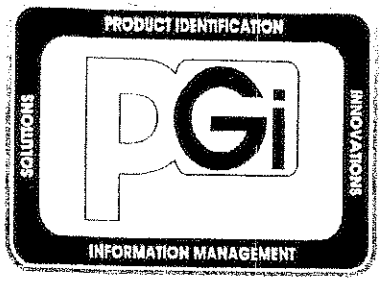
Skyline College:	6,830 Records @ $ .21 ea.	$ 1,434.30
TOTALS:	6,830 Records @ $ .21 ea.	$ 1,434.30

Additional Postage Due To Zero Postage Account: *(Non-Taxable)* *See Statement Of Postage As of February1,2006*	$ 352.90

	Postage	Tax	Total Due
$ 1,434.30	352.90	111.15	$ 1,898.35

TERMS – NET 20

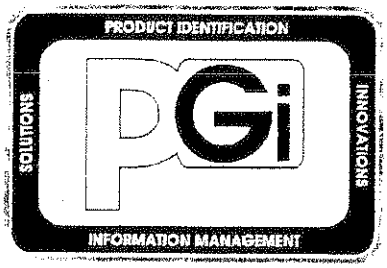
OK to pay
Dave Rhoades
2/7/06
PO600182
Item # 1



SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT

Spring 2006 Registration Statement Summary Statement of Activity
February 1, 2006 Final Cycle

Site	Quantity Processed	Quantity Mailed	Postage Expense
Skyline	6,830	6,830	$ 2,117.30
TOTALS:	6,830	6,830	$ 2,117.30



San Mateo County Community College District

Statement Of Postage Account Balance As Of February 1, 2006

Date	Reference	Description	Amount	Balance
05-02-05	CK Deposit # 337804	Postage Deposit	11,210.00	2,575.64
06-15-05	Registration Statements	Summer 05'	(4,140.60)	(1,564.96)
06-27-05	CK Deposit # 341032	Postage Due	1,564.96	0.00
07-06-05	Dean's Letters	Spring 05'	(622.80)	(622.80)
07-08-05	Registration Statements	Summer 05'	(1,663.50)	(2,286.30)
08-01-05	CK Deposit	Previous Balance	2,286.30	0.00
08-08-05	CK Deposit # 342966	Postage Deposit	7,800.00	7,800.00
08-12-05	Registration Statements	Fall 05'	(6,262.50)	1,537.50
08-31-05	Registration Statements	Fall 05'	(1,992.90)	(455.40)
09-12-05	Dean's Letters	Summer 05'	(69.90)	(525.30)
09-30-05	Ck. Deposit Balance Due	Registration/Dean	525.30	0.00
10-04-05	Ck Deposit # 347505	Postage Deposit	9,690.00	9,690.00
10-21-05	Appt. Reg. Postcards	Spring 06'	(8,747.03)	942.97
01-11-06	Registration Statements	Spring 06'	(6,006.30)	(5,063.33)
10-04-05	Ck Deposit # 351970	Postage Deposit	7,457.03	2,393.70
01-31-06	Dean's Letters	Fall 05'	(629.30)	1,764.40
02-01-06	Registration Statements	Spring 06'	(2,117.30)	(352.90)

Account Balance as of February 1, 2006	$	(352.90)

VENDOR INVOICE NUMBER	PO NUMBER	SMCCCD INVOICE NUMBER	ACCOUNTING INFORMATION		DISCOUNT	TAX	ADDL CHARGES	TOTAL
			DISTRIBUTION	AMOUNT				
032.06.09	P0600182	10608350	10002-2333-5690-621000	1434.30	.00	118.33	352.90	1905.53
			10003-3340-5690-621000	.00	.00	.00	.00	.00
			10004-4333-5690-621000	.00	.00	.00	.00	.00

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	TOTAL DISCOUNT	TOTAL TAX	TOTAL ADDL CHARGES	TOTAL AMOUNT
354720	02/08/06	330314956	.00	118.33	352.90	1,898.36

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name on box should match payee name below

354720

Check Date
02/08/06

Check Amount
$*****1,898.36

This Check Void After 180 Days

One Thousand Eight Hundred Ninety Eight & 36/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

** FILE COPY ** ** FILE COPY **

C0000354720C A121000497A 7020024903C

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

February 1, 2006

Becky Winchester
SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 032.06.09

PO:600182

Spring 2006
Registration Statements
Final Cycle

Records Processed: 6,822

Skyline College:	6,830 Records @ $ .21 ea.	$ 1,434.30
TOTALS:	6,830 Records @ $ .21 ea.	$ 1,434.30

Additional Postage Due To Zero Postage Account: *(Non-Taxable)* *See Statement Of Postage As of February1,2006*	$ 352.90

	Postage	Tax	Total Due
$ 1,434.30	352.90	111.15	$ 1,898.35

TERMS – NET 20

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

June 14, 2006

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 166.06.01

PO:600182

Summer 2006
Registration Statements

Records Processed:

Canada College:	2,217 Records @ $ .21 ea.	$ 465.57
College Of San Mateo:	5,245 Records @ $ .21 ea.	$ 1,101.45
Skyline College:		
◆ Cycle 1 06/06/06:	969 Records @ $ .21 ea.	$ 203.49
◆ Cycle 2 06/13/06:	5,579 Records @ $ .21 ea.	$ 1,171.59
TOTALS: 14,010	Records @ $ .21 ea.	$ 2,942.10

	Freight	Tax	Total Due
$ 2,942.10	-0-	$ 228.01	$ 3,170.11

TERMS – NET 20

OK to pay
Joyce Fermen
06/26/06

166.06.01	P0600182 10614472	10002-2333-5690-621000	1375.08	.00	113.44	.00	1488.52
		10003-3340-5690-621000	465.57	.00	38.41	.00	503.98
		10004-4333-5690-621000	1101.45	.00	90.87	.00	1192.32

362341	06/28/06	330314956	.00	242.72	.00	3,170.10

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Name in box should match payee name below.

362341

Check Date
06/28/06

Check Amount
$*****3,170.10

This Check Void After 180 Days

Three Thousand One Hundred Seventy & 10/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

** FILE COPY ** ** FILE COPY **

C0000362341C A121000497A 7020024903C

PRESTIGE GRAPHICS									
Federal Tax ID	330314956								
Vendor Invoice	District Invoice	Amount	Due Date	Check Date	Have Copy of Invoice	Have Copy of Check	Check #	Description	
166.06.01	I0614472	$ 3,170.10	28-Jun-06	28-Jun-06	X	X	11362341	Registration Statements	P0600182
191.06.02	106L2222	$ 717.97	17-Jul-06	17-Jul-06	X	X	11363524	Registration Statements	P0600182
	Total	$ 3,888.07							

San Mateo County Community College District
308/95 Enrollment Fee [illegible]lection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	District did not supply						
p/E.C. 76300 (c)	2% of Revenue Rec'd.	Will use Chancellor's website numbers			$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 819,600	$ 870,276	$ 1,032,746	$ 1,205,259	$ 2,317,981	$ 3,668,449	$ 3,895,177
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,392	$ 17,406	$ 20,655	$ 24,105	$ 46,360	$ 73,369	$ 77,904
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 57,307	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee	16,392	79,116	93,886	109,569	147,924	157,174	149,814
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 71,996	$ 85,436	$ 99,708	$ 134,611	$ 143,028	$ 136,331
Summary								
2% of line 3	2% of Revenue Rec'd.	Will use Chancellor's website numbers			$ -	$ -	$ -	$ -
1.8-4 line 4B.	2% of Fees Waived	$ 16,392	$ 17,406	$ 20,655	$ 24,105	$ 46,360	$ 73,369	$ 77,904
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 57,307						
1.8-4 5.	Credit Units Waived		$ 71,996	$ 85,436	$ 99,708	$ 134,611	$ 143,028	$ 136,331
Total Offset Savings	**Forward to Schedule 5A**	**$ 73,699**	**$ 89,402**	**$ 106,091**	**$ 123,813**	**$ 180,971**	**$ 216,397**	**$ 214,235**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: San Mateo
COUNTY: San Mateo

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$28,483,173	$24,081,070	$2,129,050	$26,210,120
EQUALIZATION	298,250	274,390	23,860	298,250
ENROLL FEE ADMIN (2%)	72,111	66,342	5,769	72,111
APPRENTICE ALLOWANCE	345,050	309,301	35,749	345,050
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	593,281	545,817	47,464	593,281
S.F.A.A.	767,156	703,636	63,520	767,156
E.O.P.S.	1,585,258	1,458,438	126,820	1,585,258
C.A.R.E.	123,337	113,470	9,867	123,337
D.S.P.S.	1,580,549	1,454,105	126,444	1,580,549
STATE HOSPITALS	0	0	0	0
CALWORKS	170,073	156,468	13,605	170,073
MATRICULATION (CREDIT)	1,006,720	918,134	88,586	1,006,720
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	23,361	19,753	3,608	23,361
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	938,479	863,400	75,079	938,479
TELECOMMUNICATIONS	172,631	101,283	71,348	172,631
PLANT & INSTRUCTIONAL	517,177	475,802	41,375	517,177
ECON. DEVELOPMENT	1,055,641	886,738	0	886,738
TANF	38,871	35,762	3,109	38,871
VTEA LEADERSHIP	225,624	94,762	94,762	189,524
VTEA TECH. PREP.	169,312	94,815	47,407	142,222
VTEA TITLE I C	221,785	148,409	37,890	186,299
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	5,271,710	5,272,096	-386	5,271,710
TOTAL	$43,659,549	$38,073,991	$3,044,926	$41,118,917

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Scher A
San Mateo County Con. nity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 5,137.61	$ 3,157.81	$ 2,127.54	$ 3,543.32	$ 3,728.25	$ 1,404.23	$ 1,523.68
2	Staff Training	(04)(B)(1)(b)	$ 2,935.05	$ 3,332.26	$ 3,463.59	$ 3,611.89	$ 2,277.54	$ 3,789.54	$ 5,235.39
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 74,167.25	$ 77,622.78	$ 83,509.47	$ 96,861.20	$ 107,275.29	$ 118,576.66	$ 134,928.25
4	Waiving student fees	(04)(B)(2)(b)	$ 49,395.79	$ 58,512.04	$ 79,158.11	$ 84,397.34	$ 156,524.63	$ 173,751.87	$ 190,234.74
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 3,390.66	$ 3,579.81	$ 3,767.75	$ 4,058.92	$ 4,180.85	$ 4,474.96	$ 5,040.31
6	EFCW - Fee Waiver Costs	Total	$ 135,026.36	$ 146,204.70	$ 172,026.46	$ 192,472.67	$ 273,986.56	$ 301,997.26	$ 336,962.37
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 73,669.00	$ 89,402.00	$ 106,091.00	$ 123,813.00	$ 180,971.00	$ 216,397.00	$ 214,235.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 61,357.36	$ 56,802.70	$ 65,935.46	$ 68,659.67	$ 93,015.56	$ 85,600.26	$ 122,727.37
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 73,669.00**	**$ 89,402.00**	**$ 106,091.00**	**$ 123,813.00**	**$ 180,971.00**	**$ 216,397.00**	**$ 214,235.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Canada College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 01:16:25

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	80	15,938
BOGW - Part A-2 based on SSI recipient status	1	312
BOGW - Part B based on income standards	3,088	910,585
BOGW - Part C based on financial need	495	155,116

Total Unduplicated Count = 3,589
Total Amount = $ 1,081,951

Back to Top of Page

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Headcount

Canada 3589

San Mateo 4059

Skyline 3704

11,352

Amount

$ 1,081,951

1,425,640

1,360,580

$ 3,895,177

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

San Mateo College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 01:16:56

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	250	58,448
BOGW - Part B based on income standards	2,993	1,014,911
BOGW - Part C based on financial need	1,013	352,287

Total Unduplicated Count = 4,059
Total Amount = $ 1,425,646

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Skyline College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 01:17:13

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	248	64,025
BOGW - Part B based on income standards	2,357	806,195
BOGW - Part C based on financial need	1,279	490,360

Total Unduplicated Count = 3,704
Total Amount = $ 1,360,580

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 29, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8895

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
San Mateo County Community College District CC41100

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for San Mateo County Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

State Controller's Office

Claim File Copy

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

Claimant Identification Number: CC41100

(02) Claimant Name: San Mateo County Community College District

County of Location: San Mateo

Street Address or P.O. Box: 3401 CSM Drive

City: San Mateo | State: CA | Zip Code: 94402

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement X
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 610,888
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 600,888
Due from State	(08)	(17) $ 600,888
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	542,963
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	171,545
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	30
(31) EFCW-1, (07)	144,798
(32) EFCW-1, (09)	76,873
(33) EFCW-1, (10)	171,545
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**

Kathy Blackwood — 1/28/09

Kathy Blackwood
Type or Print Name

Chief Financial Officer
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:
n Mateo County Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2006-2007

(03) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 311,115.76	$ -	$ 231,847.35	$ -	$ -	$ 542,963.11
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Pr g district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
Waiving student fees	$ 171,544.61	$ -	$ -	$ -	$ -	$ 171,544.61
Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
otal Direct Costs	$ 482,660.37	$ -	$ 231,847.35	$ -	$ -	$ 714,507.72

ct Costs		
ndirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	30.00%
otal Indirect Costs	[Line (06) x line (05)(a)]	$ 144,798.11
otal Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 859,305.83
eduction		
ss: Enrollment Fee Revenue offset		$ 76,873.00
ss: Enrollment Fee Waiver offsets		$ 171,544.61
al Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 610,888.22

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: San Mateo County Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee collection							
Enrollment Staff Collecting Fees	$43.85	2,257.5	$ 98,991.38				
Calculating total enrollment fee to be collected							
Sungard SCT, Inc. Contractor	$100.00	1,371.7			$ 137,167.00		
Referencing student accounts and records							
Enrollment Staff Collecting Fees	$43.85	2,365.0	$ 103,705.25				
Prestige Graphics, Inc. Contractor	$100.00	715.2			$ 71,521.59		
Updating written and computer records for enrollment fee information							
Enrollment Staff Collecting Fees	$43.85	2,472.5	$ 108,419.13				
Vangent, Inc. Contractor	$100.00	231.6			$ 23,158.76		
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 311,115.76	$ -	$ 231,847.35	$ -	$ -

ew-04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San Mateo County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Staff Waiving Fees	$46.81	891.9	$ 41,749.84				
Entering approved application information into district records; providing student award letter							
Financial Aid Staff Waiving Fees	$46.81	1,047.1	$ 49,014.75				
Evaluating waiver applications and verifying application documents							
Financial Aid Staff Waiving Fees	$46.81	950.1	$ 44,474.18				
Receiving waiver applications							
Financial Aid Staff Waiving Fees	$46.81	775.6	$ 36,305.84				
(05) Total ☒ Subtotal ☐			$ 171,544.61	$ -	$ -	$ -	$ -

San Mateo County Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

6-2007

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	2,365.00	Enrollment Staff	Collecting Fees	$43.85	$103,705.25	Referencing student accounts and records	Calculating and collecting enrollment f
06-07	2,257.50	Enrollment Staff	Collecting Fees	$43.85	$98,991.38	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment f
06-07	2,472.50	Enrollment Staff	Collecting Fees	$43.85	$108,419.13	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment f
	7,095.00	**Enrollment Staff Total**			$311,115.76		
06-07	891.90	Financial Aid Staff	Waiving Fees	$46.81	$41,749.84	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	775.60	Financial Aid Staff	Waiving Fees	$46.81	$36,305.84	Receiving waiver applications	Waiving student fees
06-07	950.10	Financial Aid Staff	Waiving Fees	$46.81	$44,474.18	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,047.10	Financial Aid Staff	Waiving Fees	$46.81	$49,014.75	Entering approved application information into district records; providing student award letter	Waiving student fees
	3,664.70	**Financial Aid Staff Total**			$171,544.61		
06-07	715.22	Prestige Graphics, Inc.	Contractor	$100.00	$71,521.59	Referencing student accounts and records	Calculating and collecting enrollment fe
	715.22	**Prestige Graphics, Inc. Total**			$71,521.59		
06-07	1,371.67	Sungard SCT, Inc.	Contractor	$100.00	$137,167.00	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
	1,371.67	**Sungard SCT, Inc. Total**			$137,167.00		
06-07	231.59	Vangent, Inc.	Contractor	$100.00	$23,158.76	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
	231.59	**Vangent, Inc. Total**			$23,158.76		
	13,078.17	**Grand Total**			$714,507.72		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: March 11, 2003

...STITUTION:
San Mateo County Community College District
3401 CSM Drive

FILING REF.: The preceding Agreement was dated February 4, 1999

San Mateo CA 94402

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV.(PROVISIONAL) PRED.(PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/03	06/30/08	30.0	On-Campus	All Programs

INACTIVE:
BEGINNING 07/01/08 THIS ORGANIZATION DOES NOT HAVE AWARDS WITH THE FEDERAL GOVERNMENT THAT REIMBURSE FULL INDIRECT COSTS. IF IN THE FUTURE, AN AWARD IS RECEIVED WHICH PROVIDES FOR THE FULL REIMBURSEMENT OF ACTUAL INDIRECT COST, A PROVISIONAL RATE WILL BE ESTABLISHED AT THAT TIME.

*BASE:
Direct salaries and wages including all fringe benefits.

U70213

Schedule 1A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 3 and 4
Findings:

***EFC 1**	64501
Avg. time p/account	2.2
Total Time (in minutes)	141902
Per Hour	60
Hours Worked **(** 11)**	**2365.0**

***EFC 2**	NOT SUPPLIED
Avg. time p/student	3.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 12)**	**0.0**

***EFC 1**	64501
Avg. time p/question	2.1
Total Time (in minutes)	135452
Per Hour	60
Hours Worked **(** 13)**	**2257.5**

***EFC 1**	64501
Avg. time p/file	2.3
Total Time (in minutes)	148352
Per Hour	60
Hours Worked **(** 14)**	**2472.5**

***EFC 4**	NOT SUPPLIED
Avg. time p/account	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 15)**	**0.0**

***EFC 5**	NOT SUPPLIED
Avg. time p/student	2.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 2 and 4
Findings:

***EFW 6**	11634
Avg. time p/question	4.6
Total Time (in minutes)	53516
Per Hour	60
Hours Worked (** **21**)	**891.9**
***EFW 6**	11634
Avg. time p/application	4.0
Total Time (in minutes)	46536
Per Hour	60
Hours Worked (** **22**)	**775.6**
***EFW 6**	11634
Avg. time p/evaluation	4.9
Total Time (in minutes)	57007
Per Hour	60
Hours Worked (** **23**)	**950.1**
***EFW 8**	NOT SUPPLIED
Avg. time p/application	5.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	11634
Avg. time p/application	5.4
Total Time (in minutes)	62824
Per Hour	60
Hours Worked (** **25**)	**1047.1**
***EFW 8**	NOT SUPPLIED
Avg. time p/application	4.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	Multiplier					
		1	2	1	1	4	5
		*Activity Codes					
		11	12	13	14	15	16
Austen, Olivia	Short-Term Hourly Accounting Technician	2.0	3.0	2.0	3.0	2.0	3.0
Benjamin, Eric	Operations Asst. II	2.0	5.0	3.0	2.0	10.0	5.0
Berghoff, Joyce	Accounting Technician	3.0	4.0	3.0	2.0	1.0	2.0
Bianchi, Sandra	Accounting Technician I	2.0	5.0	3.0	2.0		5.0
Castello, Domenica	Accounting Technician	3.0	4.0	3.0	3.0	5.0	3.0
Corrales, Rachel	Operations II	4.5	5.0	4.0	3.0	6.0	4.0
Dillman, Isabel	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Escobar-Mora, Marcella	Accounting Technician	2.0	4.0	2.0	2.0	10.0	5.0
Fajardo, Arlene	Assistant Registrar	2.0	2.0	2.0	3.0	1.0	1.0
Flores, Edith	A&R Assistant II	2.0	2.0	1.0	1.0	3.0	
Gamiao, Elaine G.	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Hamilton, Arden	Accounting Technician I	2.0	5.0	3.0	2.0		5.0
Hamilton, Sydney	Accounting Technician	4.0	5.0	4.0	4.0	6.0	4.0
Hancock, Sherri	Dean of Enrollment Serv.	2.0	2.0	1.0	1.0		
Huynh, Vivien	A&R Assistant II	2.0	2.0	1.0	1.0	3.0	
Lara, Maria	A&R Assistant III	2.0	2.0	1.0	1.0		
Mileo, Jeremy	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Miller, Ruth	Assistant Registrar	2.0	2.0	1.0	1.0		
Moresco, Renee	A&R Assistant II	2.0	2.0	1.0	1.0	1.0	
Navarrete, Cheryl	Accounting Technician	2.0	3.0	3.0	2.0	2.0	3.0
Nguyen, Jeanne	Accounting Technician	2.0	3.0	2.0	2.0	1.0	2.0
Pena, Mario	Accounting Technician	3.0	4.0	3.0	3.0	5.0	3.0
Phan, Charles	Sr. Accounting Coordinator	3.0	3.0	3.0	2.0	2.0	3.0
Rabb, Kay	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	2.0	5.0	3.0	3.0	10.0	5.0
Sartor, Gertrude	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Shiloh, Dorothy	A&R Assistant II	2.0	2.0	1.0	1.0		
Skaff, Margaret	Program Services Coordinator	2.0	2.0	2.0	3.0	1.0	1.0
Sohrabi, Soraya	Program Services Coordinator	2.0	2.0	1.0	1.0	3.0	
Swinson, Adela	A&R Assistant III	2.0	2.0	2.0	3.0	1.0	1.0
Trevaskis, Geraldine	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Trinh, Annie	Accounting Technician	2.0	5.0	3.0	2.0	10.0	6.0
Urena, Javier	Program Services Coordinator	2.0	2.0	1.0	1.0	3.0	
Williams-Cox, Chequita	A&R Assistant II	2.0	2.0	2.0	3.0	1.0	1.0
Zan, Emma	Short-Term Hourly Accounting Technician	2.0	3.0	2.0	3.0	4.0	3.0
Average		**2.2**	**3.0**	**2.1**	**2.3**	**3.3**	**2.7**

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To calculate an average productive hourly rate for Enrollment Fee Collection staff.
Source: San Mateo PHR list.
Findings:

Staff	Title	06-07 PHR	
Austen, Olivia	Short-Term Hourly Accounting Technician	42.25	A
Benjamin, Eric	Operations Asst. II	43.50	A
Berghoff, Joyce	Accounting Technician	43.11	
Bianchi, Sandra	Accounting Technician I	42.25	A
Castello, Domenica	Accounting Technician	42.25	A
Corrales, Rachel	Operations II	42.05	
Dillman, Isabel	A&R Assistant II	37.65	A
Escobar-Mora, Marcella	Accounting Technician	38.78	
Fajardo, Arlene	Assistant Registrar	62.81	
Flores, Edith	A&R Assistant II	21.97	
Gamiao, Elaine G.	A&R Assistant II	36.99	
Hamilton, Arden	Accounting Technician I	42.25	A
Hamilton, Sydney	Accounting Technician	42.25	A
Hancock, Sherri	Dean of Enrollment Serv.	89.91	
Huynh, Vivien	A&R Assistant II	36.26	
Lara, Maria	A&R Assistant III	43.46	
Mileo, Jeremy	A&R Assistant II	37.81	
Miller, Ruth	Assistant Registrar	63.80	
Moresco, Renee	A&R Assistant II	40.79	
Navarrete, Cheryl	Accounting Technician	44.94	
Nguyen, Jeanne	Accounting Technician	43.82	
Pena, Mario	Accounting Technician	42.09	
Phan, Charles	Sr. Accounting Coordinator	45.88	
Rabb, Kay	A&R Assistant II	38.60	
Rosario-Argarin, Nancy	Sr. Accounting Coordinator	41.68	A
Sartor, Gertrude	A&R Assistant II	38.57	
Shiloh, Dorothy	A&R Assistant II	38.97	
Skaff, Margaret	Program Scvs. Coordinator	43.71	
Sohrabi, Soraya	Program Scvs. Coordinator	49.49	
Swinson, Adela	A&R Assistant III	37.65	A
Trevaskis, Geraldine	A&R Assistant II	41.09	
Trinh, Annie	Accounting Technician	39.61	
Urena, Javier	Program Scvs. Coordinator	43.69	
Williams-Cox,Chequita	A&R Assistant II	33.53	
Zan, Emma	Short-Term Hourly Accounting Technician	42.25	A
Average		**$43.31**	

A: Average PHR used.

Conclusion: Findings go forward to EFCW-2.

Schedule 3
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

		*Multiplier					
		6	6	6	8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Carrington, Margie	Director, Fin. Aid Serv.	4.5	5.0	6.0	6.0	5.0	5.0
Chadwick-White, Karen	Financial Aid Asst.	6.0	7.0	5.0	7.0	7.0	5.0
Claros, Randy	Financial Aid Technician					8,0	
del Mundo, Lorena	Program Service Coord.	5.0	4.0	7.0	6.0		
Garcia, Doreen	Financial Aid Technician	5.0	4.0	7.0	6.0	6.0	5.0
Hamlin, Jessica	Financial Aid Assistant	4.3	1.4	4.4	2.0	2.9	5.0
Menjivar, Claudia	Financial Aid Director	4.0	4.0	7.0	6.0	5.0	5.0
Minchez, Wendy	Student Assistant	2.5	1.0	1.0		1.2	
Morrison, Regina	Financial Aid Technician	6.0	7.0	5.0	7.0	8.0	5.0
Nolasco, Lucy	Financial Aid Technician	4.0	4.0	7.0	6.0	5.0	5.0
Pitetta, Thanh	Financial Aid Technician	5.0	4.0	4.0	6.0	7.0	5.0
Pulido, Yanley	Financial Aid Technician	5.0	4.0	4.0	6.0	7.0	5.0
Soler, Faye	Financial Aid Technician	5.0	4.0	4.0	4.0	5.0	6.0
Villegas, Rosa	Financial Aid Technician	3.0	2.0	2.0	2.0	3.0	1.0
Average		**4.6**	**4.0**	**4.9**	**5.3**	**5.4**	**4.7**

***EFC Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To calculate an average productive hourly rate for Enrollment Fee Waiver staff.
Source: EFCW 1.7-3.
Findings:

Staff	Title	06-07 PHR	
Carrington, Margie	Director, Fin. Aid Serv.	69.24	
Chadwick-White, Karen	Financial Aid Asst.	39.65	
Claros, Randy	Financial Aid Technician	47.09	A
del Mundo, Lorena	Program Service Coord.	37.23	
Garcia, Doreen	Financial Aid Technician	45.89	
Hamlin, Jessica	Financial Aid Assistant	41.65	A
Menjivar, Claudia	Financial Aid Director	57.75	
Minchez, Wendy	Student Assistant	42.08	
Morrison, Regina	Financial Aid Technician	43.65	
Nolasco, Lucy	Financial Aid Technician	44.25	
Pitetta, Thanh	Financial Aid Technician	39.94	
Pulido, Yanely	Financial Aid Technician	47.09	A
Soler, Faye	Financial Aid Technician	47.60	
Villegas, Rosa	Financial Aid Technician	47.09	A
Average		**46.44**	

A: Average PHR used.

Conclusion: Findings go forward to EFCW-2.

Schedule 4
San Mateo County C[illegible]munity College District
308/95 Enrollment F[illegible]Collection and Waivers
Fiscal Years: 2005-2006 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: Chancellor's website.
Findings:

*Workload Multiplier	Source		Totals 05-06	Totals 06-07
EFC 1	1.8-1 1.	Enrolled Students	64,482	64,501
EFC 2	1.8-1 2.	Paid Enrollment fees	54,746	
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	11,352	11,634
EFC 4	1.8-2 1.	Delinquencies collections	39,331	
EFC 5	1.8-2 2.	Refunds	1,252	
EFW 6	1.8-3 1.	Waivers Requested	11,352	11,634
EFW 7	1.8-3 2.	Waivers Approved (from Chancellor's website)	11,352	11,634
EFW 8	1.8-3 1-2	Waivers Denied		

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 8
San Mateo County Community College
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Student Headcount Summary

Purpose: To calculate the total number of students..
Source: California Community Colleges Chancellor's Office website.
Findings:

College	Term	Headcount
Canada	Summer	2,215
	Fall	6,352
	Spring	6,589
San Mateo	Summer	5,267
	Fall	10,906
	Spring	11,153
Skyline	Summer	5,137
	Fall	8,281
	Spring	8,601
Total		**64,501**

Conclusion: Findings go forward to Schedule 4.

California Home

Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2006 Summer Term

Data Current As Of January 09, 2009 01:24:50

Total Headcount	2,215

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California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2006 Fall Term

Data Current As Of January 09, 2009 01:24:58

Total Headcount	6,352

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Canada
For 2007 Spring Semester

Data Current As Of January 09, 2009 01:25:11

Total Headcount	6,589

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Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo For 2006 Summer Term

Data Current As Of January 09, 2009 01:25:30

Total Headcount	5,267

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Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo For 2006 Fall Term

Data Current As Of January 09, 2009 01:25:36

Total Headcount	10,906

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Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For San Mateo
For 2007 Spring Semester

Data Current As Of January 09, 2009 01:25:47

Total Headcount	11,153

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California Home

Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Skyline For 2006 Summer Term

Data Current As Of January 09, 2009 01:25:58

Total Headcount	5,137

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California Home

Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Skyline For 2006 Fall Term

Data Current As Of January 09, 2009 01:26:04

Total Headcount	8,281

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Friday

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Skyline
For 2007 Spring Semester

Data Current As Of January 09, 2009 01:26:13

Total Headcount	8,601

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES — Department/Location
OLIVIA AUSTEN — Employee Name
SHORT-TERM HOURLY - ACCT. TECH — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / (mrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

SUKI,
OLLIE WORKS ONLY DURING OPENING DAYS.
FY 05/06 SHE WORKED FOR 18 DAYS.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Olivia R. Austen Date 08-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Eric Benjamin — Employee Name
Operations Asst. II — Exact Position Title
(650) 738-4432 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6744

PLEASE SUBMIT THIS INFORMATION BY 1/24/06 ; TO Shirley Morrow, Controller

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUSINESS SERVICES — Department/Location
JOYCE BERGHOFF — Employee Name
ACCT. TECHNICIAN — Exact Position Title
X 6220 (574) — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

SUKI,
FYI - JOYCE IS REG. EMPLOYEE WHO WORKS EVENING SCHEDULE (5PM - 7:30 PM). FOR FY05/06 SHE WORKED 19 DAYS

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Berghoff Date 6/29/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Sandy Bianchi — Employee Name
Acts. Tech. I — Exact Position Title
(650) 738-4101 — Telephone #
12mo / 11mo / 10mc / hrly (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	na					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

BUSINESS OPERATIONS / CAÑADA COLLEGE
Department/Location

DOMENICA CASTELLO
Employee Name

ACCOUNTING TECHNICIAN
Exact Position Title

650 306 3270
Telephone #

12mo / 11mo / 10mc / hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/4/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Operations/Canada College — Department/Location
Rachel Corrales, G00055001 — Employee Name
Operations II — Exact Position Title
650-306-3271 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.5 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4 Minutes					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 Minutes					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4 Minutes					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rachel Corrales Date 4/21/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Isabel Dillman — Employee Name
A&R Assistant II/4C0015 — Exact Position Title
_____ — Telephone #
12✓mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Tapia Date 4-25-06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 : TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashier/Skyline College — Department/Location

Marcella Escobar Moru — Employee Name

Acctng Technician — Exact Position Title

738-4434 — Telephone #

1/2mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4-29-96

If you have any questions, please contact Raymond Chow, at 5742

PLEASE SUBMIT THIS INFORMATION BY 4/30/96 ; TO Sally Smith - District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Admissions and Records/CSM — Department/Location

Arlene Fajardo — Employee Name

Assistant Registrar/4C0024 — Exact Position Title

_____ — Telephone #

12mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Arlene Fajardo Date 4-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Edith Flores — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3492 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Elaine Grace Gamiao — Employee Name
A&R Assistant II/4C0274 — Exact Position Title
Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier / Skyline College — Department/Location
Arden Hamilton — Employee Name
Acct. Tech. I — Exact Position Title
(650) 738-4101 — Telephone #
12mo / 11mo / 10mo / hrly (hrly) — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Operations / Cañada College — Department/Location
Sydney Hamilton — Employee Name
Accounting Technician — Exact Position Title
650 306 3173 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sydney Hamilton Date 7/21/06

If you have any questions, please contact Raymond Chow, at 6712

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 : TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SAN MATEO CC DIST
District

A+R / SKYLINE COLLEGE
Department/Location

SHERRI HANCOCK
Employee Name

DEAN of ENROLLMENT SERVICES
Exact Position Title

738-4238
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherri Hancock Date 4/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Vivien Huynh — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3395 — Telephone #
~~12mo~~ / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minute					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Vivien N Huynh Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Maria Lara — Employee Name
Admissions and Records Assistant III — Exact Position Title
X3122 — Telephone #
12/mo / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05/06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lara Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office.

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Jeremy Mileo — Employee Name
A&R Assistant II/4C0014 — Exact Position Title
_____ — Telephone #
12✓mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

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Employee Signature Jeremy Mileo Date 4/25/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Ruth Miller — Employee Name
Assistant Registrar — Exact Position Title
X3125 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ruth Miller Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Renee Moresco — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3123 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Renee Moresco Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Cashier's Office / CSM — Department/Location
Cheryl Navarrete — Employee Name
Accounting Technician — Exact Position Title
574-6408 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cheryl Navarrete Date 6/29/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY ~~4/24/06~~ ; TO Suki Chang @ District Office

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Business Services — Department/Location
Nguyen, Jeanne — Employee Name
Accounting Technician — Exact Position Title
574-6411 — Telephone #
(12mo) / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2 Min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeanne Nguyen Date 6 29 06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Business Operations / Cañada College — Department/Location

Mario Peña — Employee Name

Accounting Technician — Exact Position Title

650 306 3272 — Telephone #

12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/24/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
BUS. SERVICES — Department/Location
CHARLES PHAN — Employee Name
SR. ACCTG. COORDINATOR — Exact Position Title
X6584 — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one) 1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

SUKI,
FYI - I WORKED ONLY WHEN BUSY OR SHORT OF STAFF - NOT A REGULAR LIKE JEANNE OR CHERYL

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 8/16/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Kay Rabb — Employee Name
A&R Assistant II/4C0017 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kay Rabb Date 4/25/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Cashier / Skyline College
Department/Location

Nancy Rosario Argarin
Employee Name

Sr. Accts. Coordinator
Exact Position Title

(650) 738-4432
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N Argarin Date 4/12/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Gertrude Sartor — Employee Name
A&R Assistant II/4C0255 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gertrude Sartor Date April 25 2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Dorothy Shiloh — Employee Name
Admissions and Records Assistant II — Exact Position Title
X3124 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Magaret Skaff — Employee Name
Program Services Coordinator/4C0367 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Soraya Sohrabi — Employee Name
Program Services Coordinator — Exact Position Title
X3494 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 *Minutes*					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature Soraya Sohrabi Date 10/17/2006

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Adela Swinson — Employee Name
Admissions and Records III/4C0020 — Exact Position Title
Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Adela Swinson Date 04-25-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/CSM — Department/Location
Geraldine Trevaskis — Employee Name
Admissions and Records II/4C0342 — Exact Position Title
_____ — Telephone #
12mo / 11mo / 10mc / hrly — Work year length(circle)
Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Geraldine Trevaskis Date _____

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District

Cashier / Skyline — Department/Location

Annie Trinh TRINH — Employee Name

Accts Technician — Exact Position Title

650-738-4431 — Telephone #

(12mo) / 11mo / 10mo / hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/12/06

If you have any questions, please contact Raymond Chow, at x7-2

PLEASE SUBMIT THIS INFORMATION BY ASAP ; TO Skyline & District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District — District
Admissions and Records/Cañada College — Department/Location
Javier Urena — Employee Name
Program Services Coordinator/February through June — Exact Position Title
X3494 — Telephone #
12mo / 11mo / 10mo / hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2 Minutes					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 Minutes					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1 Minute					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 Minute					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 Minutes					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/17/2006

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06, TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Admissions and Records/CSM
Department/Location

Chequitq Williams-Cox
Employee Name

A&R Assistant II/4C0018
Exact Position Title

Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chequitq Williams-Cox Date 4/25/06

If you have any questions, please contact Raymond Chow at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 TO Suki Chang @ District Office

Clear Form

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District (District) — BUS. SERVICES (Department/Location)

EMMA ZAN (Employee Name) — SHORT TERM HOURLY - ACCTG. TECH (Exact Position Title)

_____ (Telephone #) — 12mo / 11mo / 10mc / hrly (Work year length(circle)) — Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

Suki,
FYI - EMMA WORKS ONLY DURING OPENING DAYS. FOR FY 05/06 SHE WORKED @ CASHIER/BUS SERV. FOR 34 DAYS.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Emma Zan Date 6-29-06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY 4/24/06 ; TO Suki Chang @ District Office

Clear Form

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Finanaal Aid/Canada
Department/Location

Margie Carrington
Employee Name

Director, Financial Aid Services
Exact Position Title

(650)306-3174
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you ~~are~~ responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	6.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Margie Carrington Date 4/27/2006

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid - Skyline College
Department/Location

Karen Chadwick-White
Employee Name

Financial Aid Assistant
Exact Position Title

650-738-4236
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature [signature] Date 04/21/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/Skyline College
Department/Location

Randy Claros
Employee Name

Financial Aid Technician
Exact Position Title

650.738.4236
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.					
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 MIN	—	155	—	1,240 MIN
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/9/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

EOPS/ College of San Mateo
Department/Location

Lorena del Mundo
Employee Name

Program Services Coordinator
Exact Position Title

(650) 574-6154
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05✓06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Lorena del Mundo Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Doreen Garcia
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6148
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05/06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Doreen Garcia Date 9-14-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid / Cañada College
Department/Location

Jessica Hamlin
Employee Name

Financial Aid Assistant
Exact Position Title

(650)306-3307
Telephone #

12mo / 11mo / 10mo / (hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4.29				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1.43				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.41				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2.02				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2.87				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date 4/13/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006, TO SUKI CHANG AT DISTRICT OFFICE

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Claudia Menjivar
Employee Name

Financial Aid Director
Exact Position Title

(650) 378-7233
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature C. Menjivar Date 9/19/06

If you have any questions, please contact Raymond Chow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Wendi Menchaca
Employee Name

Student Assistant
Exact Position Title

650-306-3307
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 46				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1.19 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature _____ Date April 17, 06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY APRIL 24, 2006 TO YOUR DISTRICT'S CONTACT OFFICE

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/Skyline College
Department/Location

Regina Morrison
Employee Name

Financial Aid Technician
Exact Position Title

(650) 738-4350
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6 minutes	288			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	7 minutes	319			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 minutes				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7 minutes				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 minutes		155		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 minutes				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature [signature] Date 4/21/06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Fin. Aid - Cañada College
Department/Location

Lucy Nolasco
Employee Name

Fin Aid Tech
Exact Position Title

306-3307
Telephone #

(12mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	40				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	40				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	70				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	50				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Lucy Nolasco Date 4.21.06

If you have any questions, please contact Raymond Crow, at 6742

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Thanh Pitetta
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6146
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Thanh Pitetta Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY September 15, 2006; TO SUKI CHANG AT DISTRICT OFFICE.

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Clear Form

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid/ College of San Mateo
Department/Location

Yanely Pulido
Employee Name

Financial Aid Technician
Exact Position Title

(650) 574-6514
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	7				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Ypulido Date 9/14/06

If you have any questions, please contact Raymond Chow, at 6742

PLEASE SUBMIT THIS INFORMATION BY September 15, 2006; TO SUKI CHANG AT DISTRICT OFFICE.

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Clear Form

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid / Canada College
Department/Location

Soler, Faye
Employee Name

Financial Aid Technician
Exact Position Title

366-3279
Telephone #

(2mo) / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4.0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4.0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4.0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5.0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6.0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Faye Soler Date 4-17-06

If you have any questions, please contact Raymond Chow, at 6742

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

San Mateo County Community College District
District

Financial Aid
Department/Location

Rosa Villegas
Employee Name

FA Technician
Exact Position Title

306-3172
Telephone #

12mo / 11mo / 10mo / hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)
(Circle the years for which you are responding.)

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2 min.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2 min.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1 min.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. (PLEASE USE BLUE INK)

Employee Signature Rosa Villegas Date 4-13-06

If you have any questions, please contact Ruth Gail Crow, at 5342

PLEASE SUBMIT THIS INFORMATION BY APRIL 21, 2006 TO SUKI CHANG AT DISTRICT OFFICE

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Clear Form

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Skyline College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer	1740	1969	
Fall	2718	2804	3042
Winter/Intersession			
Spring	2751	3031	2609
Total	7209	7804	5651
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer	1437	1427	1608
Fall	2432	2497	2726
Winter/Intersession			
Spring	2440	2698	2394
Total	6309	6422	6728

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date Jan 21, 2009

Maria D. Esobar
Employee Name: (print)

Director
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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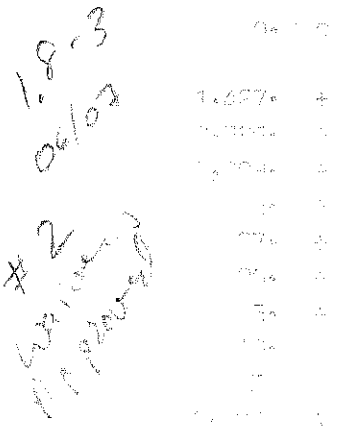
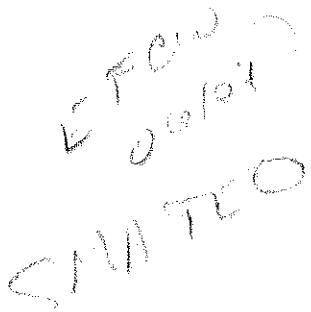
Mandated Costs Fee Waivers

BOG Approved counts for Skyline

Number of enrollment fee waivers approved	Fiscal Years 2006-2007	2007-2008	2008-2009
BOGG2 *Board of Governor's Fee Waiver*			
Summer	1427	1396	1577
Fall	2386	2437	2675
Spring	2398	2643	2357
	6211	6476	6609
BWS2 *Fee waivers for veterans and dependants*			
Summer	5	24	27
Fall	27	41	34
Spring	29	34	23
	61	99	84
BRH2 *Department of Rehabilitation fee waivers*			
Summer	5	7	4
Fall	19	19	17
Spring	13	21	14
	37	47	35
TOTAL fee waivers approved	6309	6622	6728



Detail	SF21	Description	SKY Tot Amt/Cnt		CAN Tot Amt/Cnt		CSM Tot Amt/Cnt		Dist Tot Amt/Cnt	
BWB	B	BOGW - Method B based on income	711,013	2361	771,987	2983	862,060	2934	2,345,060	7380
BWC + BWD	BC	BOGW - Method C based on need (	406,520	1274	143,493	515	334,488	1024	884,501	2433
BWA	B1	BOGW - Method A-1 based on TANF	54,258	213	19,180	73	41,408	201	114,846	450
BWS	B4	BOGW - Method A-4 based on Vet,	11,894	41	2,549	8	4,847	23	19,290	63
CALB	GB	Cal Grant B	231,312	180	83,635	71	195,626	153	510,573	404
CALC	GC	Cal Grant C	4,464	10	7,116	16	7,632	20	19,212	46
EOPS + EOPSG	GE	EOPS Grant	2,966	9	8,875	35	49,050	147	60,891	191
CARE	GF	CARE Grant	8,284	6	7,000	8	14,975	5	30,259	19
PELL	GP	Pell Grant	2,154,096	900	1,079,874	478	1,802,430	762	5,036,400	2140
ACG	GA	Academic Competitiveness Grant	2,250	3	750	1	750	1	3,750	5
SEOG	GS	SEOG (Supplmt Eductional Opport	146,626	360	82,175	197	224,744	586	453,545	1143
TRIO	GV	Other grant: non-institutional	22,800	46	13,600	34			36,400	80
CHAFG	GG	Chafee Grant	30,532	10			24,456	7	54,988	17
STAFF	LG	Stafford Loan, subsidized	80,018	31			106,047	44	186,065	75
USTAF + UNSUB	LH	Stafford Loan, unsubsidized	67,855	21			11,689	4	79,544	25
PLUS	LP	PLUS loan: parent loan for unde					14,311	2	14,311	2
FWS + FCWS	WF	College Work Study (CWS) (Feder	290,923	99	103,174	31	112,218	35	506,315	165
CWS + CALWK	WU	Other Work Study (need based)					64,755	17	64,755	17
		Unduplicated Total Counts	4,225,811	3721	2,323,408	3502	3,871,486	4020	420,705	9909
		Unduplicated BOGG Counts	1,183,685	3689	937,209	3487	1,242,803	3986	3,363,697	9835



308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: San Mateo County CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	06-7	07-8	08-9
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$5,837,870	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$3,359,282	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 07-08 and the missing rates for 06-07.

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
	AVERAGE A&R ASSISTANT	$ 37.65	$ 39.58
	AVERAGE ACCOUNTING TECH	$ 42.25	$ 43.92
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 54.17	$ 48.77
	AVERAGE ASSISTANT REGISTRAR	$ 63.31	$ 65.71
	AVERAGE CHANCELLOR		$ 198.42
	AVERAGE COUNSELOR		$ 63.13
	AVERAGE CUSTODIAN	$ 40.16	$ 31.35
	AVERAGE DEAN	$ 89.75	$ 92.42
	AVERAGE DIRECTOR	$ 79.40	$ 77.8[illegible]
	AVERAGE EXECUTIVE SECRETARY		$ 43.85
	AVERAGE FACULTY MEMBER		$ 63.13
	AVERAGE FINANCIAL AID ASSISTANT	$ 41.65	$ 45.00
	AVERAGE FINANCIAL AID TECHNICIAN	$ 47.09	$ 49.52
	AVERAGE MANAGER		$ 79.55

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
	AVERAGE OFFICE MANAGER		$ 64.78
	AVERAGE OPERATIONS ASSISTANT	$ 43.50	$ 44.96
	AVERAGE PRESIDENT		$ 133.33
	AVERAGE PROGRAM SERVICE COORDINATOR	$ 40.46	$ 41.9[illegible]
	AVERAGE SR. ACCOUNTING COORDINATOR	$ 41.68	$ 45.00
	AVERAGE STAFF ASSISTANT	$ 42.08	$ 38.85
	AVERAGE VICE CHANCELLOR		$ 114.39
	AVERAGE VICE PRESIDENT	$ 109.76	$ 109.09
ACENA, ALBERT	DEAN, SOCIAL SCIENCE	$ 89.91	$ 92.61
ADRIAN, LORETTA	VPSS		$ 103.63
ANDERSON, VALERIE	ADMINISTRATIVE ASSISTANT	$ 51.28	$ 57.13
ARAM, MINOO	BENEFIT MANAGER	$ 68.21	$ 75.16
ARGARIN, NANCY	SR. ACCOUNTING COORDINATOR	$ 41.68	$ 45.00
AVAKIAN, JOHN	DIRECTOR, ED NET/MULTI MEDIA	$ 89.91	$ 92.61
AVELAR, LINDA	DEAN BUS/IND RELATIONS	$ 89.91	$ 92.61
BENNETT, RICK	DIRECTOR, GENERAL SERVICES	$ 89.91	$ 119.75
BERGHOFF, JOYCE	ACCOUNTING TECHNICIAN	$ 43.11	
BESTOCK, DONNA	DEAN, SOCIAL SCIENCE	$ 89.91	$ 92.61

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
BLACKWOOD, KATHY	CHIEF FINANCIAL OFFICER	$ 108.91	$ 113.05
BRENNER, ERIC	LIBRARIAN	$ 68.72	$ 71.44
BRIONES, ELOISA	BUSINESS OFFICER	$ 75.53	$ 77.79
BROOKS, VIRGINIA	ADMINISTRATIVE ASSISTANT		$ 45.6[illegible]
BUTTERFIELD, JAMES	GRANT ANALYST	$ 61.65	$ 63.49
CALIBO, ARLENE	ADMINISTRATIVE ANALYST	$ 61.65	$ 64.32
CARLOS, IGNACIO	CUSTODIAL & GROUNDS OPR.	$ 52.22	$ 56.52
CARRINGTON, DEBBIE	BUDGET DIRECTOR	$ 84.21	$ 86.74
CARRINGTON, MARGIE	DIRECTOR, FINANCIAL AID SERVICES	$ 69.24	$ 71.42
CASIDO, CONSTANCIA	PAYROLL SUPERVISOR	$ 63.21	$ 65.61
CHADWICK-WHITE, KAREN	FINANCIAL AID ASSISTANT	$ 39.65	$ 45.00
CHAIKA, KATHY	SENIOR ACCOUNTING TECHNICIAN	$ 48.31	$ 50.93
CHAN, REBECCA	ACCOUNTING TECHNICIAN	$ 44.85	$ 50.73
CHANDLER, CAMERON (LIZ)	INSTR PE	$ 67.04	$ 69.69
CHANG, SUKI	EXECUTIVE SECRETARY	$ 48.91	$ 50.97
CHOW, RAYMOND	CONTROLLER	$ 81.19	$ 83.62
CHRISTENSEN, BARBARA	DIR, COMMUNITY & GOVT RELATIONS	$ 109.76	$ 113.05
CLAIRE, MICHAEL	VICE PRESIDENT, INSTRUCTION/PRESIDENT		$ 136.89

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
CLINTON, VICTORIA	PART TIME INSTRUCTOR	$ 65.89	
CORRALES, RACHEL	OPERATIONS	$ 42.05	$ 43.61
DaSILVA, LINDA	EXEC. DIRECTOR CPD	$ 89.91	$ 119.75
DEAMER, PAT	INSTRUCTOR /SCI.-MATH	$ 60.96	$ 68.6[illegible]
DEDO, BARBARA	SENIOR PROGRAMMER II	$ 71.96	$ 75.16
del MUNDO, LORENA	PROGRAM SERVICE COORDINATOR	$ 37.23	$ 38.34
DELAPLAINE, ADA	HR REPRESENTATIVE		$ 76.72
EMMONS, PAMELA	STAFF ASSISTANT	$ 37.72	$ 38.85
ESCOBAR, MARIA	DIRECTOR, FA	$ 75.53	$ 77.79
ESCOBAR-MORA, MARCELLA	ACCOUNTING TECHNICIAN	$ 38.78	$ 41.99
ESTES, SUSAN	DEAN, LANGUAGE/ARTS	$ 89.91	$ 102.55
FAJARDO, ARLENE	ASSISTANT REGISTRAR	$ 62.81	$ 65.71
FEIMER, JOYCE (VORIS)	SUPERVISOR OF OPERATIONS & PRODUCTION	$ 69.34	$ 71.42
FLORES, EDITH	A&R ASSISTANT II	$ 21.97	$ 25.99
FORD, LORRITA	DIRECTOR OF LIBRARY SERVICES	$ 75.53	$ 77.79
FORREST, TAEKO	HUMAN RESOURCE REPRESENTATIVE	$ 36.75	$ 35.42
FUENE, DAVID	HUMAN RESOURCES REPRESENTATIVE	$ 47.85	$ 60.82
GAMIAO, ELAINE G.	A&R ASSISTANT II	$ 36.99	$ 43.37

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
GARCIA, DOREEN	FINANCIAL AID TECHNICIAN	$ 45.89	$ 47.27
GLASS, DANNY	FACILITIES/OPERATIONS MGR	$ 75.76	$ 78.36
GOTELLI, AL	ENGINEER	$ 47.41	$ 53.45
GULLI, TONY	CHIEF ENGINEER	$ 59.42	$ 61.7?
HANCOCK, SHERRI	DEAN, ENROLLMENT SERVICES	$ 89.91	$ 92.61
HARER, KATHRINE	INSTR. LANG ART/LEARN	$ 64.64	$ 69.32
HARRISON, SUE	ADMINISTRATIVE ASSISTANT	$ 52.01	$ 53.57
HART, MICHAEL	NETWORK MANAGER	$ 72.97	$ 75.99
HASSON, CATHY	DIRECTOR	$ 75.53	$ 7.79
HAUN, SAM	ACCOUNTING TECHNICIAN	$ 40.76	$ 42.23
HAUSMAN, SHELLEY	PROJECT DIRECTOR	$ 48.27	$ 54.76
HAYES, LINDA	DEAN, HUMANITIES	$ 89.91	$ 92.61
HECHIM, PHYLLIS	ADM ASSISTANT	$ 57.99	
HERNANDEZ, LUIS	CUSTODIAN	$ 37.04	$ 30.29
HEWITT, THOMAS	DIRECTOR, LIBRARY SERVICES	$ 75.53	$ 77.79
HUEG, HELEN	DIRECTOR OF PUBLIC RELATIONS	$ 61.40	$ 56.09
HUGHES, JENNIFER	VPSS	$ 89.91	$ 104.69
HUYNH, VIVIEN	A&R ASSISTANT II	$ 36.26	$ 37.96

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
INOKUCHI, RICHARD	FACILITIES/OPERATIONS MGR	$ 69.00	$ 71.47
IRBER, SANDY	DIRECTOR, COLLEGE DEVELOPMENT	$ 75.53	$ 77.79
JOEL, HARRY	VICE CHANCELLOR	$ 109.76	$ 127.92
JONES, CHARLES	COMPUTER SUPPORT	$ 49.35	$ 50.8[illegible]
JORGENSEN, AZADEH	STAFF ASSISTANT	$ 46.43	
KELLER, JAMES	EXECUTIVE VICE CHANCELLOR	$ 120.23	$ 138.70
KIRK, JOHN	INST. SOC SCI	$ 63.45	$ 71.44
KO, MAGGIE	ACCOUNTANT	$ 71.92	$ 74.08
LARA, MARIA	A&R ASSISTANT III	$ 43.46	$ 48.38
LAWRENCE, MARILYN	GENERAL MANAGER	$ 109.76	$ 121.10
LEE, ELLEN	PAYROLL CLERK I	$ 42.76	$ 46.29
LEONG, ANITA	ACCOUNTANT	$ 67.13	$ 70.26
LUCAS-WOODS, PHYLLIS	VP, STUDENT SERVICES	$ 109.76	$ 113.05
MARTINEZ, DIANE	FACILITIES/OPERATIONS MGR	$ 69.00	$ 71.07
MARTINEZ, JOHN	BROADCAST ENG II	$ 60.81	$ 62.63
McATEER, JANE	DIRECTOR	$ 75.53	$ 77.79
McBRIDE, MARILYN	VP INSTRUCTIONS	$ 109.76	$ 113.05
McGREW, MICHAEL	DIRECTOR, MAINTENANCE & OPERATIONS		$ 84.18

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
MEADOWS, MARGERY	DEAN OF BUSINESS	$ 89.91	$ 92.61
MELGOZA (HERNANDEZ), INGRID	HR REPRESENTATIVE	$ 46.23	$ 48.38
MELLOR, SANDRA	DEAN CORP/COMM ED	$ 89.91	$ 92.61
MENJIVAR, CLAUDIA	FINANCIAL AID ~~TECHNICIAN~~ DIRECTOR	$ 57.75	$ 62.41
MIHELCIC	A&R ASSISTANT		$ 33.88
MILEO, JEREMY	A&R ASSISTANT II	$ 37.81	$ 39.31
MILLER, RUTH	ASSISTANT REGISTRAR	$ 63.80	$ 65.71
MITCHELL, ANNE	ACCOUNTING TECHNICIAN		$ 41.99
MOHR, TOM	PRESIDENT, CANADA		$ 127.14
MORELLO, JOSEPH	DEAN, PE SKYLINE		$ 92.61
MORESCO, RENEE	A&R ASSISTANT II	$ 40.79	$ 42.33
MORRISON, REGINA	FINANCIAL AID ASSISTANT	$ 43.65	$ 45.00
MORROW, VICTORIA	PRESIDENT	$ 116.72	$ 137.19
NAVARETTE, CHERYL	OPERATIONS ASSISTANT I	$ 44.94	$ 46.30
NGUYEN, JEANNE	ACCOUNTING TECHNICIAN	$ 43.82	$ 45.14
NICHOLS, ANNIE	INSTR. BUSINESS	$ 61.98	$ 66.53
NOLASCO, LUCY	FINANCIAL AID TECHNICIAN	$ 44.25	$ 45.58
NUNES, VICTORIA	ADMINISTRATIVE ASSISTANT	$ 65.15	$ 71.01

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
NUNEZ, JOSE	VICE CHANCELLOR		$ 127.92
PANG, STEVE	ACCOUNTANT	$ 65.95	$ 67.95
PELLETIER, CODY	EMPLOYMENT MANAGER	$ 64.50	
PENA, MARIO	ACCOUNTING TECHNICIAN	$ 42.09	$ 43.36
PHAN, CHARLES	SENIIOR ACCOUNTANT	$ 45.88	$ 49.68
PITETTA, THANH	FINANCIAL AID TECHNICIAN	$ 39.94	$ 43.32
RABB, KAY	A&R ASSISTANT II	$ 38.60	$ 38.32
RABY, MELISSA	DEAN, ENROLLMENT SERVICES	$ 88.55	$ 92.61
RAMAZANE, MARSHA	DEAN, COUNSELING		$ 92.61
RICO, JUAN	CUSTODIAN		$ 38.40
RIVAS, JOEL	LEAD GROUNDSKEEPER	$ 43.35	$ 45.08
RIVERA-CONTRERA, JOAQUIN	INSTR SCI/MATH	$ 64.64	$ 67.19
ROECKS, JAN	DIRECTOR OF GENERAL SERVICES		$ 77.89
SAMUELSON, STEPHANIE	PURCHASING TECHNICIAN	$ 49.84	$ 51.34
SARTOR, GERTRUDE	A&R ASSISTANT II	$ 38.57	$ 39.73
SHILOH, DOROTHY	A&R ASSISTANT II	$ 38.97	$ 40.70
SKAFF, MARGARET	A&R ASSISTANT II	$ 43.71	$ 46.01
SOHRABI, SORAYA	PROGRAM SUPERVISOR	$ 49.49	$ 54.65

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
SOLER, FAYE	FINANCIAL AID TECHNICIAN	$ 47.60	$ 49.03
STANFORD, VIRGIL	DEAN FOR ADMINISTRATIVE STUDIES		$ 92.61
THOMAS, TOM	GROUNDSKEEPER	$ 34.22	$ 35.97
TIDD, RICHARD	IT SUPPORT TECH	$ 53.81	$ 55.43
TINDELL, TERRY	CUSTODIAN - UTILITY ENG	$ 43.27	
TREVASKIS, GERALDINE	A&R ASSISTANT II	$ 41.09	$ 42.33
TRINH, ANNIE	ACCOUNTING TECHNICIAN	$ 39.61	$ 41.99
TROTT, JOANNE	SR PROGRAMMER	$ 76.07	$ 78.36
URENA, JAVIER	PROGRAM SERVICES COORDINATOR	$ 43.69	$ 45.59
VERES, JOZSEF	CHIEF ENGINEER	$ 60.43	$ 62.76
VILLAREAL, HENRY	DEAN ADM/RECORD	$ 89.91	$ 92.61
WALSH, MICHAEL	INSTRUCTIONAL AIDE	$ 57.61	$ 49.62
WATSON, TERRY	FINANCIAL ANALYST	$ 61.83	$ 66.88
WILKES O'ROURKE, DEANNE	ADMINISTRATIVE ASSISTANT	$ 55.00	
WILLIAM-COX, CHEQUITQ	A&R ASSISTANT	$ 33.53	$ 36.29
WILLIAMSON, MICHAEL	DEAN, BUSINESS	$ 89.91	$ 92.61
WINCHESTER, BECKY	ADMINISTRATIVE ASSISTANT	$ 47.41	$ 51.34
WITHAM, BRADLEY	TECH SUPPORT SERVICES MANAGER	$ 64.50	$ 67.95

COMMUNITY COLLEGE DISTRICT NAME: SAN MATEO COUNTY CCD

Name	Title	06-07	07-08
WITHAM, JASMINE	WEB SUPPORT ANALYST	$ 64.62	$ 67.95
WOLF, ANDREAS	DEAN, PE	$ 89.23	$ 92.76
WONG, JANE	ADMINISTRATIVE ASSISTANT	$ 55.00	$ 57.43

Schedule 6
San Mateo Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Contracted Services

Purpose: To calculate the total contracted services fees.
Source: Invoices from Prestige Graphics, Inc.
Findings:

Page	Date	Amount	
1	July 10, 2006	$	717.97
4	August 8, 2006	$	8,422.70
5	August 11, 2006	$	4,459.65
6	August 30, 2006	$	1,533.92
7	October 13, 2006	$	9,600.00
8	October 23, 2006	$	4,784.84
9	November 30, 2006	$	8,680.00
10	January 8, 2007	$	4,153.28
11	January 31, 2007	$	1,605.42
12	March 27, 2007	$	9,600.00
13	April 17, 2007	$	4,676.04
14	May 1, 2007	$	6,200.00
15	June 26, 2007	$	7,087.77
	Total	**$**	**71,521.59**

Conclusion: Findings go forward to the EFCW-2.

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

July 10, 2006

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 191.06.02

PO:600182

Summer 2006
Skyline Only
Registration Statements

Records Processed:

Item 1
Seq 1

Skyline College:	3,173 Records @ $ .21 ea.	$ 666.33

TOTALS:	Records @ $ .21 ea.	$ 666.33

	Freight	Tax	Total Due
$ 666.33	-0-	51.64	$ 717.97

TERMS – NET 20

F

OK to pay
PO600182
Becky Winchester
OK-JJ

INVOICE NUMBER	PO	ACCOUNT	AMOUNT	DISCOUNT	SALES TAX	ADDITIONAL CHARGES	TOTAL
191.06.02	P0600182	10062222 10002-2333-5690-621000	666.33	.00	54.97	.00	721.30
		10003-3340-5690-621000	.00	.00	.00	.00	.00
		10004-4333-5690-621000	.00	.00	.00	.00	.00

CHECK NUMBER	CHECK DATE	VENDOR NUMBER	DISCOUNT	SALES TAX	ADDITIONAL CHARGES	TOTAL AMOUNT
363524	07/17/06	330314956	.00	54.97	.00	717.97

********** Detach and retain for your records. **********

********** Detach and retain for your records. **********

SMCCCD - Accounts Payable
3401 CSM Drive
San Mateo, CA 94402-3699
(650) 574-6505

11-49
1210

Prestige Graphics, Inc.
Notice to bank should match payee name below.

363524

Check Date
07/17/06

Check Amount
$********717.97

This Check Void After 180 Days

Seven Hundred Seventeen & 97/100 Dollars********

PAY TO THE ORDER OF

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego CA 92123

Union Bank
400 California Street
San Francisco, CA 94104

AUTHORIZED SIGNATURE

**** FILE COPY ** ** FILE COPY ****

C0000363524C A121000497A 7020024903C

PRESTIGE GRAPHICS

Federal Tax ID 330314956

Vendor Invoice	District Invoice	Amount	Due Date	Check Date	Have Copy of Invoice	Have Copy of Check	Check #	Description	
166.06.01	I0614472	$ 3,170.10	28-Jun-06	28-Jun-06	X	X	11362341	Registration Statements	P0600182
191.06.02	106L2222	$ 717.97	17-Jul-06	17-Jul-06	X	X	11363524	Registration Statements	P0600182
	Total	$ 3,888.07							

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 ● Fax (858) 560-1473

August 8, 2006

I0701555

OK to Pay
P0700582
Becky Winchester

PO: Not Assigned

Accounts Payable
San Mateo County Community College District
3401 CSM Drive
San Mateo, CA 94402

Invoice No: 220.06.SM.5

Postage Invoice Fall 06'
Registration Statements
Mailing Dates August 8th & 29th 2006

Postage First Class – Quantity 28,000 @ $ .31a.	$ 8,680.00	Item 4
Less Current Postage Balance:	($ 257.30)	Dep 1 $ 4492.21
Balance Due:	$ 8,422.70	Dep 2 1377.95
		Dep 3 ~~$1,942.81~~ 2552.54
		8422.70

Postage Amount Due: $ 8,422.70
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 8,422.70	-0-	-0-	$ 8,422.70

4

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

August 11, 2006

pr
I0701554

P0700506
ok to pay
Becky Winchester

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 222.06.5

PO:
Not Provided

Fall 2006
Registration Statements

Records Processed: 19,709

Item 1

Canada College:	4,445 Records @ $ .21 ea.	$ 933.45	eq. 2
College Of San Mateo:	8,234 Records @ $ .21 ea.	$ 1,729.14	eq 3
Skyline College:	7,030 Records @ $ .21 ea.	$ 1,476.30	eq 1
TOTALS:	19,709 Records @ $ .21 ea.	$ 4,138.89	

	Freight	Tax	Total Due
$ 4,138.89	-0-	320.76	$ 4,459.65

TERMS – NET 20

07

August 30, 2006

Prestige Graphics Inc.
9630 Ridgehaven Court
San Diego, CA. 92123
(858) 560-8213 ● Fax (858) 560-1473

I0701553

P0700506
OK to pay
Becky Lonchesk

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 242.06.3

PO:
Not Provided

Fall 2006
Registration Statements
Skyline Only

Records Processed: 6,779

item 1

Skyline College:	6,779 Records @ $ .21 ea.	$ 1,423.59	acq 1

TOTALS:	6,779 Records @ $ .21 ea.	$ 1,423.59

	Freight	Tax	Total Due	
$ 1,423.59	-0-	110.33	$ 1,533.92	- item 1 acq 1

TERMS – NET 20

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-6213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

October 13, 2006

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 292.06.05

PO:700506

Spring 2007
Appointment Registration Postcard
Postage Invoice
(Mailing Date October 19, 2006)

Postage First Class – Quantity 48,000 @ $ .20 ea. $ 9,600.00

Postage Amount Due: $ 9,600.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 9,600.00	-0-	-0-	$ 9,600.00

Due Upon Receipt

Item 1
Dog 1 @ 3,264.00 (34%)
Dog 2 @ 2112.00 (22%)
Dog 3 @ 4224.00 (44%)
9600.00

DO703678

OK to pay
10/25/06

OK
Becky Winchester
10/25/06
PO 700506

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

October 23, 2006

I0703854

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

OK to pay
Becky Winchester
P0700506
ITEM 2
10/31/06

Invoice No: 293.06.04

PO:700506

Spring 2006
Appointment Registration Postcards

SEQ

Records Processed: 49,341

Canada College:	10,923 Records @ $ .09 ea.	$ 983.07	* 2
College Of San Mateo:	20,378 Records @ $ .09 ea.	$ 1,634.02	* 3
Skyline College:	18,040 Records @ $ .09 ea.	$ 1,623.60	* 1
TOTALS:	49,341 Records @ $ .09 ea.	$ 4,440.69	

	Postage	Tax	Total Due
$ 4,440.69	-0-	344.15	$ 4,784.84

TERMS – NET 20

OK to pay
[illegible]
10/25/06

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

November 30, 2006

J07c5005

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 334.06SM7

PO:700506

Postage Invoice - Spring 07'
Registration Statement
Mailing Dates January 5th & 27th, 2007

Postage First Class – Quantity 28,000 @ $ .31 ea. $ 8,680.00

Postage Amount Due: $ 8,680.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 8,680.00	-0-	-0-	$ 8,680.00

Due Upon Receipt

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

January 8, 2007

D0707887

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 008.07.3

PO: 700506

Spring 2007
Registration Statements

Records Processed: 18,355

ITEM 1

Canada College:	4,167 Records @ $ .21 ea.	$ 875.07	Req. 2
College Of San Mateo:	7,493 Records @ $ .21 ea.	$ 1,573.53	Req. 3
Skyline College:	6,695 Records @ $ .21 ea.	$ 1,405.95	Req. 1
TOTALS:	18,335 Records @ $ .21 ea.	$ 3,854.55	

	Freight	Tax	Total Due
$ 3,854.55	-0-	298.73	$ 4,153.28

TERMS – NET 20

OK to pay
Joyce Lehman
01/12/07

Becky Wunderlich
PO700506

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

January 31, 2007

I0708791

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 031.07.11

PO: 700506

Spring 2007
Registration Statements

Records Processed: 7,095

ITem 1 Seq 1

Skyline College:	7,095 Records @ $ .21 ea.	$ 1,489.95
TOTALS:	7,095 Records @ $ .21 ea.	$ 1,489.95

	Freight	Tax	Total Due
$ 1,489.95	-0-	115.47	$ 1,605.42

TERMS – NET 20

ok to Pay
Becky Winchester
2/7/07

OK to pay
[illegible]
02/15/2007

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

March 27, 2007

J0711465

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

OK 4/2/07
to
Pay
Becky Winchester
P0700506

Invoice No: 086.07.03

PO:700506

Summer / Fall 2007
Appointment Registration Postcard Postage
Postage Invoice
(Mailing Date April 16, 2007)

Postage First Class – Quantity 48,000 @ $ .20 ea. $ 9,600.00

ITEM 4

SEQ 1, 2, 3

Postage Amount Due: $ 9,600.00
(Postage is non-taxable)

	Freight	Tax	Total Due
$ 9,600.00	-0-	-0-	$ 9,600.00

Due Upon Receipt

OK to pay
Jayne Shuman
3/30/2007

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-6213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

April 17, 2007
REVISED
(4-25-07)
JO712560

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

OK to pay
Becky [signature]
5/8/07

Invoice No: 107.07.03

INVOICE

PO:700506

Summer Fall 2007
Appointment Registration Postcards ITEM 2

			SEQ
Records Processed: 48,219			
Canada College:	10,711 Records @ $ .09 ea.	$ 963.99	2
College Of San Mateo:	19,915 Records @ $ .09 ea.	$ 1,792.35	3
Skyline College:	17,593 Records @ $ .09 ea.	$ 1,583.37	1
TOTALS:	48,219 Records @ $ .09 ea.	$ 4,339.71	

	Tax	Total Due
$ 4,339.71	336.33	$ 4,676.04

OK to pay
[signature]
04/30/2007

TERMS – NET 20

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

May 1, 2007

D0712897

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 121.07.03

PO:700506

Postage Invoice - Summer 07'
Registration Statement
Mailing Dates May 24th, June 11th & June 24th , 2007

Postage First Class – Quantity 20,000 @ $ .31 ea. $ 6,200.00

Postage Amount Due: $ 6,200.00
(Postage is non-taxable)

Item 4
adj 1 $ 2108.00
2 1364.00 ✓
3 2728.00 ✓

	Freight	Tax	Total Due
$ 6,200.00	-0-	-0-	$ 6,200.00

Due Upon Receipt

OK to Pay
Becky Winchester
5/11/07

Prestige Graphics, Inc.
9630 Ridgehaven Court
San Diego, CA 92123-1636
USA: 800.383-9361
Phone: 858.560-8213
Fax: 858.560-1473
Website: www.pgisd.com
Email: info@pgisd.com

June 26, 2007

(F)

T07L3254

SMCCCD Accounting Office
SMCCCD CHAN OFC I.T.S.
3401 CSM Drive
Bldg. DIST Room 1st
San Mateo, CA 94402

Invoice No: 176.07.03

INVOICE

Summer 2007
Registration Statements

PO: 700506

Item 1

CYCLE 1 - May 25, 2007

Records Processed: 4,621

Skyline College:	4,621 Records @ $ .21 ea.	$ 970.41	seq 1
TOTALS: ✓	4,621 Records @ $ .21 ea.	$ 970.41	

CYCLE 2 - June 12, 2007

Records Processed: 18,355

Canada College:	2,311 Records @ $ .21 ea.	$ 485.31	seq 2
College Of San Mateo:	5,270 Records @ $ .21 ea.	$ 1,106.70	seq 3
Skyline College:	5,708 Records @ $ .21 ea.	$ 1,198.68	seq 1
TOTALS: ✓	13,289 Records @ $ .21 ea.	$ 2,790.69	

CYCLE 3 - June 25, 2007

Records Processed: 18,355

Canada College:	1,603 Records @ $ .21 ea.	$ 336.63	seq 2
College Of San Mateo:	3,519 Records @ $ .21 ea.	$ 738.99	seq 3
Skyline College:	3,353 Records @ $ .21 ea.	$ 704.13	seq 1
TOTALS: ✓	8,475 Records @ $ .21 ea.	$ 1,779.75	

CYCLE TOTALS: (#1) $ 970.41 ◆ (#2) $ 2,790.69 ◆ (#3) $ 1,779.75

Total Cycles $ 5,540.85	Additional Postage Due	Tax	Total Due
Item 4 seq 1, 2, 3	$ 1,117.51	$ 429.41	$ 7,087.77

TERMS – NET 20
* *Postage Non-Taxable*

OK to pay.
Joyce Fleming 07/10/07

Schedule 10
San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2006-2007
Sungard Summary

Purpose: To calculate the total contracted services fees.
Source: Invoice from Sungard SCT, Inc.
Findings:

Service	Product	Amount
Maintenance	Students	$ 70,507.00
Maintenance	Finance	$ 56,406.00
Maintenance	Web for Students	$ 10,254.00
Total		**$ 137,167.00**

Conclusion: Findings go forward to EFCW-2.

SIGNED

PO701012
SO707457

Becky Winchester
#0701083
ok to pay (F)

Invoice

SAN MATEO COMM.COLLEGE DIST.
Attn: VICKIE NUNES
OFFICE OF INFO. TECH. SVCS.
3401 CSM DRIVE
SAN MATEO,CA 94402

Invoice Date: 11/17/2006
Invoice #: 66006
Project #: 01-00818
Job #: 0050

*** DUPLICATE COPY ***

Technical Currency Program

ice	Product	Amount
Maintenance →	Student	$70,507.00
Maintenance	WEBXTNDR	$604.32
Maintenance	SCNXTNDR	$120.32
Maintenance	ISIS_SCN	$28.32
Maintenance	APPXTNDR	$2,901.34
Maintenance	ISIS_RUN	$14.32
Maintenance	Financial Aid System	$53,585.00
Maintenance	XS-INT	$1,813.00
Maintenance	INAS Software	$1,537.00
Maintenance →	Finance	$56,406.00
Maintenance	Human Resources	$49,354.00
Maintenance →	Web for Students	$10,254.00
Maintenance	Web for Faculty & Advisors	$9,565.00
Maintenance	Web for Employees	$9,565.00
Maintenance	KOFAX-ASCENT 1	$689.00

od: 02/01/06 - 01/31/07

Internal Contract #124058.

ontract Agreement Total $266,943.62

se Remit To:
ard SCT, Inc.
3 Collections Center Drive
ago, IL 60693

Account Representative:
Joe Hofmann
Phone: 619-542-7908
Fax..: 619-542-7979

Invoice No: INV-02723
Sales Order: SO-02723

Page: 1 of 1
Invoice Date: 03/21/2007
Due Date: 03/22/2007

Sold To: SAN MATEO COUNTY COMM COLLEGE DIST
3401 CSM DRIVE
SAN MATEO, CA 94402

Ship To: SAN MATEO COUNTY COMM COLLEGE DIST
CUST ID: 2000284923
CONTRACT NO: 2010-01

3071210

Contact: FRANK VASKELIS

Currency: USD

ORDER DATE	SALES REPRESENTATIVE	TERMS	DELIVERY TERMS	SHIP VIA	CUSTOMER PURCHASE ORDER
03/21/07		PRESENTATION			PO700696

LINE	ITEM/DESCRIPTION	REV	DUE DATE	U/M	INVOICE QUANTITY	NET UNIT PRICE	EXTENDED PRICE
	TRA 2006 PROCESSING YEAR						
	CONTACT RAY COLONY AT (319) 665-7928 WITH INVOICING QUESTIONS						
1	D0063-004 SCHOOL RENEWAL FEE			EA	1.0000	$250.0000	$250.00
2	D0063-010 1098-T PRINTED (STANDARD SERVICE)			EA	39,422.0000	$0.5800	$22,864.76
3	D0063-019 FOREIGN POSTAGE			EA	11.0000	$1.0000	$11.00 will remove
4	D0063-020 IRS ARCHIVE MEDIA			EA	1.0000	$44.0000	$44.00

Subtotal:	$23,169.76
Total Tax/VAT:	$0.00
Total Amt:	$23,169.76

Remit To:
PEARSON GOVERNMENT SOLUTIONS
VANGENT, INC (DOING BUS AS PGS)
FEIN: 20-1961427 (571) 203-2571
13040 COLLECTION CENTER DRIVE
CHICAGO, IL 60693

- 11.00

$ 23,158.76

OK to pay (F)
$ 23,158.76
Becky Winchester
PO700696.

APR 9 '07 PM 12:59

will send new

San Mateo County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-06 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for
Source: Chancellor's website and attachments from district office.
Findings:

Source	Item	05-06	06-07
1.8-4 line 3	Net Revenue Received		$ 5,837,870
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ 116,757
1.8-4 line 4A	Enrollment Fees Waived	$ 3,895,177	$ 3,359,282
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 77,904	$ 67,186
		Unit Fee	
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**	$ 26.00	$ 24.00
Total # of credits	Line 4A divided by unit fee	149,814	139,970
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)	$ 136,331	$ 127,373
Summary			
2% of line 3	2% of Revenue Rec'd.	$ -	$ 116,757
1.8-4 line 4B.	2% of Fees Waived	$ 77,904	$ 67,186
1.8-4 5.	Credit Units Waived	$ 136,331	$ 127,373
Total Offset Savings	**Forward to Schedule 5A**	**$ 214,235**	**$ 311,316**

**Per unit fee
FY 2005-2006 fees are $26.00
FY 06-07: Summer and fall $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: San Mateo
COUNTY: San Mateo

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$34,280,414	$30,600,849	$1,517,307	$32,118,156
ENROLL FEE ADMIN (2%)	76,873	70,723	6,150	76,873
APPRENTICE ALLOWANCE	414,966	381,768	33,198	414,966
BASIC SKILLS	565,683	0	565,683	565,683
S.F.A.A.	782,830	720,203	62,627	782,830
E.O.P.S.	1,704,198	1,567,862	136,336	1,704,198
C.A.R.E.	115,468	115,430	38	115,468
D.S.P.S.	1,719,595	1,582,028	137,567	1,719,595
STATE HOSPITALS	0	0	0	0
CALWORKS	198,588	182,701	15,887	198,588
MATRICULATION (CREDIT)	1,383,394	1,266,283	117,111	1,383,394
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	19,530	17,967	1,563	19,530
PART-TIME FAC. ALLO.	938,479	863,400	75,079	938,479
PART-TIME FAC. OFF. HRS	392,590	0	392,590	392,590
PART-TIME FAC. INS.	8,076	0	8,076	8,076
TELECOMMUNICATIONS	151,469	101,283	50,186	151,469
PLANT & INSTRUCTIONAL	193,506	178,027	15,479	193,506
SCHDL. MAINT. & REPAIR	193,524	178,042	15,482	193,524
TANF	40,442	37,206	3,236	40,442
ECON. DEVELOPMENT	1,502,318	1,261,946	1	1,261,947
NURSING EDUCATION	118,047	57,331	60,716	118,047
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	566,367	566,367	0	566,367
ONE TIME FUNDS				
TRANSITION PAYMENT	1,231,445	1,074,398	157,047	1,231,445
TRANS.& ARTIC. -REAPPR	15,000	15,000	0	15,000
GEN. PURPOSE -REAPPROP	343,529	343,529	0	343,529
BASIC SKILLS -REAPPROP	513,503	513,503	0	513,503
CAR. TECH. TRAILER BIL	611,784	611,784	0	611,784
GEN. PUR. TRAILER BILL	1,196,869	1,196,869	0	1,196,869
INST. MATERIAL TRAILER	722,218	722,218	0	722,218
SCHLD.MAINT. TRAILER B	722,218	722,218	0	722,218
FACULTY STAFF DEV	76,880	76,880	0	76,880
TOTAL	$50,799,803	$45,025,815	$3,371,359	$48,397,174

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
San Mateo County C nunity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2005-2006 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 1,523.68	
2	Staff Training	(04)(B)(1)(b)	$ 5,235.39	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 134,928.25	
4	Waiving student fees	(04)(B)(2)(b)	$ 190,234.74	$ 171,544.61
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 5,040.31	
6	EFCW - Fee Waiver Costs	Total	$ 336,962.37	$ 171,544.61
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 214,235.00	$ 311,316.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 122,727.37	$ (139,771.39)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 214,235.00**	**$ 171,544.61**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Canada College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 16, 2009 12:33:02

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	73	19,180
BOGW - Part B based on income standards	2,976	770,955
BOGW - Part C based on financial need	516	143,493
Fee Waiver -- Dependent (children) of Deceased Law Enforcement/Fire Suppression	8	2,549

Total 3573

Total Amount = $ 936,177

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

San Mateo College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 16, 2009 12:35:10

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	201	41,408
BOGW - Part B based on income standards	2,925	859,958
BOGW - Part C based on financial need	1,025	334,384
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	23	4,847

total 4179

Total Amount = $ 1,240,597

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Skyline College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 16, 2009 12:35:25

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	212	54,016
BOGW - Part B based on income standards	2,358	710,060
BOGW - Part C based on financial need	1,276	406,538
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	41	11,894

total 3887

Total Amount = $ 1,182,508

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

June 26, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8536

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Santa Monica Community College District CC19385

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Santa Monica Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Dot Bramwell

Dot Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

TYPE OR HERE

(01) Claimant Identification Number: CC19385

(02) Claimant Name: Santa Monica Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1900 Pico Blvd

City: Santa Monica | State: CA | Zip Code: 90405-1628

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 1,214,632
Less: 10% Late Penalty		(14) $ 121,463
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,093,168
ue from State	(08)	(17) $ 1,093,168
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	53,449
(23) EFCW-1, (04)(A)(1)(b)(f)	2,402
(24) EFCW-1, (04)(A)(2)(a)(f)	783,134
(25) EFCW-1, (04)(B)(1)(a)(f)	28,028
(26) EFCW-1, (04)(B)(1)(b)(f)	7,367
(27) EFCW-1, (04)(B)(2)(a)(f)	61,890
(28) EFCW-1, (04)(B)(2)(b)(f)	184,373
(29) EFCW-1, (04)(B)(2)(c)(f)	3,140
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	414,788
(32) EFCW-1, (09)	74,711
(33) EFCW-1, (10)	249,227
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 6-15-07

Randall Lawson
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim: SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

rogram 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

Claimant:	(02) Type of Claim		Fiscal Year
ta Monica Community College District	Reimbursement	X	2004-2005
	Estimated		

) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 53,449.24	$ -	$ -	$ -	$ -	$ 53,449.24
b. Staff training (One time per employee)	$ 2,401.59	$ -	$ -	$ -	$ -	$ 2,401.59
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 783,133.52	$ -	$ -	$ -	$ -	$ 783,133.52
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Pre[illegible]g district policies & procedures for § IV.B.	$ 28,027.96	$ -	$ -	$ -	$ -	$ 28,027.96
b. Staff training (One time per employee)	$ 7,366.62	$ -	$ -	$ -	$ -	$ 7,366.62
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 61,889.99	$ -	$ -	$ -	$ -	$ 61,889.99
b. Waiving student fees	$ 184,372.59	$ -	$ -	$ -	$ -	$ 184,372.59
c. Reporting BOG fee waiver data to CCC	$ 3,140.29	$ -	$ -	$ -	$ -	$ 3,140.29
Total Direct Costs	$ 1,123,781.80	$ -	$ -	$ -	$ -	$ 1,123,781.80

rect Costs		
Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.91%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 414,787.86
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,538,569.66
t Reduction		
Less: Enrollment Fee Revenue offset		$ 74,711.00
Less: Enrollment Fee Waiver offsets		$ 249,227.00
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,214,631.66

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sa[illegible]nica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chitgar, Michael	Systems Analyst	$60.70	32.0	$ 1,942.40				
Chong, Jocelyn	Dean, Info. Tech.	$75.73	10.0	$ 757.30				
Cohanne, Jonathan	A & R Clerk II	$33.64	330.0	$ 11,101.20				
Gonzalez, Jamie	Accounting Tech.	$29.77	15.0	$ 446.55				
Kasch, Thomas	Computer Operator	$47.33	15.0	$ 709.95				
Marchant, Kathleen	A & R Clerk I	$29.06	2.0	$ 58.12				
Pena, Brian	Program Analyst II	$54.79	600.0	$ 32,874.00				
Prather, George	Director, Auxilary Services	$66.28	3.0	$ 198.84				
Remonde, Lucita	Accountant	$42.92	0.3	$ 12.88				
Reyes, Arnulfo	Program Analyst III	$53.48	100.0	$ 5,348.00				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 53,449.24	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Santa Monica Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Arinsberg, Toni	Registration Clerk	$12.82	0.5	$ 6.41				
Casillas, Ruth	Registration Clerk	$13.46	15.0	$ 201.90				
Cohanne, Jonathan	A & R Clerk II	$33.64	15.0	$ 504.60				
Delgadillo, Cristina	Registration Clerk	$12.21	5.0	$ 61.05				
Gonzalez, Jamie	Accounting Tech.	$29.77	15.0	$ 446.55				
Kasch, Darlene	Info. Systms Sup. Analyst	$68.26	5.0	$ 341.30				
Marchant, Kathleen	A & R Clerk I	$29.06	1.0	$ 29.06				
Myrow, Steve	Director, Fin. Aid	$67.64	5.0	$ 338.20				
Razon, Nadia	Registration Clerk	$12.21	4.0	$ 48.84				
Remonde, Lucita	Accountant	$42.92	0.3	$ 12.88				
Sturgis, Denise	Registration Clerk	$14.13	20.0	$ 282.60				
Walden, Cherie	Registration Clerk	$12.82	10.0	$ 128.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,401.59	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sa nica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office St Collecting Fees	$25.82	8,621.9	$ 222,617.46				
Calculating total enrollment fee to be collected Various Enrollment Office St Collecting Fees	$25.82	5,502.3	$ 142,069.39				
Answering student's questions regarding enrollment fee collection Various Enrollment Office St Collecting Fees	$25.82	9,394.0	$ 242,553.08				
Upda written and computer records for enrollment fee information Various Enrollment Office St Collecting Fees	$25.82	5,502.3	$ 142,069.39				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office St Collecting Fees	$25.82	947.0	$ 24,451.54				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office St Collecting Fees	$25.82	363.0	$ 9,372.66				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 783,133.52	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Santa Monica Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Chitgar, Michael	Systems Analyst	$60.70	22.0	$ 1,335.40				
Chong, Jocelyn	Dean, Info. Tech.	$75.73	100.0	$ 7,573.00				
Myrow, Steve	Director, Fin. Aid	$67.64	4.0	$ 270.56				
Pena, Brian	Program Analyst II	$54.79	100.0	$ 5,479.00				
Reyes, Arnulfo	Program Analyst III	$53.48	250.0	$ 13,370.00				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 28,027.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
San nica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Casillas, Ruth	Registration Clerk	$13.46	70.0	$ 942.20				
Dammer, Carolyn	Financial Aid Tech.	$34.48	40.0	$ 1,379.20				
Delgadillo, Cristina	Registration Clerk	$12.21	6.0	$ 73.26				
Fong, Fai	Program Analyst II	$49.70	5.0	$ 248.50				
Myrow, Steve	Director, Fin. Aid	$67.64	5.0	$ 338.20				
Razon, Nadia	Registration Clerk	$12.21	6.0	$ 73.26				
Sturgis, Denise	Registration Clerk	$14.13	160.0	$ 2,260.80				
Walden, Cherie	Registration Clerk	$12.82	160.0	$ 2,051.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 7,366.62	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sa onica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Carter, Shauna	Fin, Aid Cust. Serv. Clerk	$21.79	400.0	$ 8,716.00				
Casillas, Josh	Custmr. Serv. Clerk	$22.22	240.0	$ 5,332.80				
Castellane, Anthony	Financial Aid Clerk	$20.75	475.0	$ 9,856.25				
Chong, Jocelyn	Dean, Info. Tech.	$75.73	5.0	$ 378.65				
Clark, Kim	Financial Aid Tech.	$34.48	250.0	$ 8,620.00				
Delgadillo, Cristina	Registration Clerk	$12.21	190.0	$ 2,319.90				
Escobar, James	Registration Info. Clerk	$12.21	300.0	$ 3,663.00				
Lee, Jung	Systems Administrator	$53.48	24.0	$ 1,283.52				
Marchant, Kathleen	A & R Clerk I	$29.06	1.0	$ 29.06				
Myrow, Steve	Director, Fin. Aid	$67.64	4.0	$ 270.56				
Nezey, Elizabeth	Financial Aid Tech.	$41.90	250.0	$ 10,475.00				
Pena, Brian	Program Analyst II	$54.79	15.0	$ 821.85				
Razon, Nadia	Registration Clerk	$12.21	60.0	$ 732.60				
Sturgis, Denise	Registration Clerk	$14.13	240.0	$ 3,391.20				
Walden, Cherie	Registration Clerk	$12.82	230.0	$ 2,948.60				
Reyes, Arnulfo	Program Analyst III	$53.48	5.0	$ 267.40				
Wu, Frank	DBA/Director	$69.59	40.0	$ 2,783.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 61,889.99	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sa onica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	1,196.3	$ 35,733.48				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	1,715.4	$ 51,239.00				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	1,557.4	$ 46,519.54				
Noti[illegible] students of additional documentation requirements and how to obtain information							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	407.5	$ 12,172.03				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	998.4	$ 29,822.21				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staf Waiving Enrollment Fees	$29.87	297.5	$ 8,886.33				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 184,372.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Chitgar, Michael	Systems Analyst	$60.70	30.0	$ 1,821.00				
Chong, Jocelyn	Dean, Info. Tech.	$75.73	5.0	$ 378.65				
Myrow, Steve	Director, Fin. Aid	$67.64	6.0	$ 405.84				
Reyes, Arnulfo	Program Analyst III	$53.48	10.0	$ 534.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,140.29	$ -	$ -	$ -	$ -

Santa Monica Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
20xx-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	0.50	Arinsberg, Toni	Registration Clerk	$12.82	$6.41	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.50	**Arinsberg, Toni Total**			$6.41		
04-05	400.00	Carter, Shauna	Fin, Aid Cust. Serv. Clerk	$21.79	$8,716.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	400.00	**Carter, Shauna Total**			$8,716.00		
04-05	240.00	Casillas, Josh	Custmr. Serv. Clerk	$22.22	$5,332.80	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	240.00	**Casillas, Josh Total**			$5,332.80		
04-05	15.00	Casillas, Ruth	Registration Clerk	$13.46	$201.90	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	70.00	Casillas, Ruth	Registration Clerk	$13.46	$942.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	85.00	**Casillas, Ruth Total**			$1,144.10		
04-05	475.00	Castellane, Anthony	Financial Aid Clerk	$20.75	$9,856.25	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	475.00	**Castellane, Anthony Total**			$9,856.25		
04-05	32.00	Chitgar, Michael	Systems Analyst	$60.70	$1,942.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	22.00	Chitgar, Michael	Systems Analyst	$60.70	$1,335.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	30.00	Chitgar, Michael	Systems Analyst	$60.70	$1,821.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	84.00	**Chitgar, Michael Total**			$5,098.80		
04-05	10.00	Chong, Jocelyn	Dean, Info. Tech.	$75.73	$757.30	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	100.00	Chong, Jocelyn	Dean, Info. Tech.	$75.73	$7,573.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	5.00	Chong, Jocelyn	Dean, Info. Tech.	$75.73	$378.65	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	5.00	Chong, Jocelyn	Dean, Info. Tech.	$75.73	$378.65	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	120.00	**Chong, Jocelyn Total**			$9,087.60		
04-05	250.00	Clark, Kim	Financial Aid Tech.	$34.48	$8,620.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	250.00	**Clark, Kim Total**			$8,620.00		
04-05	330.00	Cohanne, Jonathan	A & R Clerk II	$33.64	$11,101.20	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	15.00	Cohanne, Jonathan	A & R Clerk II	$33.64	$504.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	345.00	**Cohanne, Jonathan Total**			$11,605.80		
04-05	40.00	Dammer, Carolyn	Financial Aid Tech.	$34.48	$1,379.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	40.00	**Dammer, Carolyn Total**			$1,379.20		
04-05	5.00	Delgadillo, Cristina	Registration Clerk	$12.21	$61.05	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	6.00	Delgadillo, Cristina	Registration Clerk	$12.21	$73.26	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	190.00	Delgadillo, Cristina	Registration Clerk	$12.21	$2,319.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	201.00	**Delgadillo, Cristina Total**			$2,454.21		
04-05	300.00	Escobar, James	Registration Info. Clerk	$12.21	$3,663.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	300.00	**Escobar, James Total**			$3,663.00		
04-05	5.00	Fong, Fai	Program Analyst II	$49.70	$248.50	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.00	**Fong, Fai Total**			$248.50		
04-05	15.00	Gonzalez, Jamie	Accounting Tech.	$29.77	$446.55	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	15.00	Gonzalez, Jamie	Accounting Tech.	$29.77	$446.55	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	30.00	**Gonzalez, Jamie Total**			$893.10		
04-05	5.00	Kasch, Darlene	Info. Systms Sup. Analyst	$68.26	$341.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	5.00	**Kasch, Darlene Total**			$341.30		
04-05	15.00	Kasch, Thomas	Computer Operator	$47.33	$709.95	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	15.00	**Kasch, Thomas Total**			$709.95		
04-05	24.00	Lee, Jung	Systems Administrator	$53.48	$1,283.52	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	24.00	**Lee, Jung Total**			$1,283.52		
04-05	2.00	Marchant, Kathleen	A & R Clerk I	$29.06	$58.12	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	1.00	Marchant, Kathleen	A & R Clerk I	$29.06	$29.06	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection

Santa Monica Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1.00	Marchant, Kathleen	A & R Clerk I	$29.06	$29.06	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	4.00	**Marchant, Kathleen Total**			$116.24		
04-05	4.00	Myrow, Steve	Director, Fin. Aid	$67.64	$270.56	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	5.00	Myrow, Steve	Director, Fin. Aid	$67.64	$338.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	5.00	Myrow, Steve	Director, Fin. Aid	$67.64	$338.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	4.00	Myrow, Steve	Director, Fin. Aid	$67.64	$270.56	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	6.00	Myrow, Steve	Director, Fin. Aid	$67.64	$405.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	24.00	**Myrow, Steve Total**			$1,623.36		
04-05	250.00	Nezey, Elizabeth	Financial Aid Tech.	$41.90	$10,475.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	250.00	**Nezey, Elizabeth Total**			$10,475.00		
04-05	600.00	Pena, Brian	Program Analyst II	$54.79	$32,874.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	100.00	Pena, Brian	Program Analyst II	$54.79	$5,479.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	15.00	Pena, Brian	Program Analyst II	$54.79	$821.85	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	715.00	**Pena, Brian Total**			$39,174.85		
04-05	3.00	Prather, George	Director, Auxilary Services	$66.28	$198.84	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	3.00	**Prather, George Total**			$198.84		
04-05	4.00	Razon, Nadia	Registration Clerk	$12.21	$48.84	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	6.00	Razon, Nadia	Registration Clerk	$12.21	$73.26	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	60.00	Razon, Nadia	Registration Clerk	$12.21	$732.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	70.00	**Razon, Nadia Total**			$854.70		
04-05	0.30	Remonde, Lucita	Accountant	$42.92	$12.88	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	0.30	Remonde, Lucita	Accountant	$42.92	$12.88	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.60	**Remonde, Lucita Total**			$25.76		
04-05	100.00	Reyes, Arnulfo	Program Analyst III	$53.48	$5,348.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	250.00	Reyes, Arnulfo	Program Analyst III	$53.48	$13,370.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	5.00	Reyes, Arnulfo	Program Analyst III	$53.48	$267.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	10.00	Reyes, Arnulfo	Program Analyst III	$53.48	$534.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	365.00	**Reyes, Arnulfo Total**			$19,520.20		
04-05	20.00	Sturgis, Denise	Registration Clerk	$14.13	$282.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	160.00	Sturgis, Denise	Registration Clerk	$14.13	$2,260.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	240.00	Sturgis, Denise	Registration Clerk	$14.13	$3,391.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	420.00	**Sturgis, Denise Total**			$5,934.60		
04-05	8,621.90	Various Enrollment Office Staff	Collecting Fees	$25.82	$222,617.46	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	5,502.30	Various Enrollment Office Staff	Collecting Fees	$25.82	$142,069.39	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	9,394.00	Various Enrollment Office Staff	Collecting Fees	$25.82	$242,553.08	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	5,502.30	Various Enrollment Office Staff	Collecting Fees	$25.82	$142,069.39	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	947.00	Various Enrollment Office Staff	Collecting Fees	$25.82	$24,451.54	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	363.00	Various Enrollment Office Staff	Collecting Fees	$25.82	$9,372.66	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	30,330.50	**Various Enrollment Office Staff Total**			$783,133.52		
04-05	1,196.30	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$35,733.48	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	1,715.40	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$51,239.00	Receiving waiver applications	Waiving student fees
04-05	1,557.40	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$46,519.54	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	407.50	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$12,172.03	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	998.40	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$29,822.21	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	297.50	Various Financial Office Staff	Waiving Enrollment Fees	$29.87	$8,886.33	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	6,172.50	**Various Financial Office Staff Total**			$184,372.59		

Santa Monica Community College District
308/95 ENROLLMENT [illegible]OLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	10.00	Walden, Cherie	Registration Clerk	$12.82	$128.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	160.00	Walden, Cherie	Registration Clerk	$12.82	$2,051.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	230.00	Walden, Cherie	Registration Clerk	$12.82	$2,948.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	400.00	**Walden, Cherie Total**			$5,128.00		
04-05	40.00	Wu, Frank	DBA/Director	$69.59	$2,783.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	40.00	**Wu, Frank Total**			$2,783.60		
	41,414.10	**Grand Total**			$1,123,781.80		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Santa Monica CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$47,657,206		$47,657,206	$677,300	$46,979,906
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,486,634		4,486,634	17,130	4,469,504
Course and Curriculum Development	6020	42,359		42,359	4,696	37,663
Academic/Faculty Senate	6030	479,455		479,455		479,455
Other Instructional Administration & Instructional Governance	6090	28,594		28,594		28,594
Instructional Support Services	6100					
Learning Center	6110	820,186		820,186		820,186
Library	6120	1,161,306		1,161,306	8,060	1,153,246
Media	6130	1,289,745		1,289,745	358,324	931,421
Museums and Galleries	6140	43,988		43,988		43,988
Academic Information Systems and Technology	6150	2,032,149		2,032,149	89,688	1,942,461
Other Instructional Support Services	6190	680,540		680,540		680,540
Admissions and Records	6200	2,607,574		2,607,574	11,694	2,595,880
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	456,322		456,322	28,040	428,282
Matriculation and Student Assessment	6320	804,327		804,327	22,370	781,957
Transfer Programs	6330	3,071,643		3,071,643	20,536	3,051,107
Career Guidance	6340	14,506		14,506		14,506
Other Student Counseling and Guidance	6390	1,202,235		1,202,235	1,636	1,200,599
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,317,696		1,317,696	12,231	1,305,465
Subtotal		$68,196,465	$0	$68,196,465	$1,251,705	$66,944,760

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Santa Monica CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,574,669	$539,297	$1,035,372	$5,830	$1,029,542
Health Services	6440	804,110		804,110		804,110
Student Personnel Admin.	6450	349,094		349,094	100,746	248,348
Financial Aid Administration	6460	1,042,561		1,042,561	19,077	1,023,484
Job Placement Services	6470	180,639		180,639		180,639
Veterans Services	6480					
Miscellaneous Student Services	6490	2,475,675		2,475,675	6,186	2,469,489
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,101,806		2,101,806	2,101,806	0
Custodial Services	6530	2,864,160		2,864,160	2,864,160	0
Grounds Maintenance and Repairs	6550	869,837		869,837	869,837	0
Utilities	6570	2,488,658		2,488,658	2,488,658	0
Other	6590	192,263		192,263	192,263	0
Planning, Policy Making, and Coordination	6600	4,485,440		4,485,440	4,485,440	0
General Inst. Support Services	6700					
Community Relations	6710	925,642		925,642	925,642	0
Fiscal Operations	6720	2,272,508		2,272,508	2,272,508	0
Human Resources Management	6730	1,725,555		1,725,555	1,725,555	0
Noninstructional Staff Benefits & Incentives	6740	584,120		584,120	584,120	0
Staff Development	6750	16,455		16,455	16,455	0
Staff Diversity	6760	3,833		3,833	3,833	0
Logistical Services	6770	5,137,670		5,137,670	5,137,670	0
Management Information Systems	6780	2,351,016		2,351,016	2,351,016	0
Subtotal		$100,642,176	$539,297	$100,102,879	$27,402,507	$72,700,372

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Santa Monica CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,119,975		1,119,975	1,119,975	0
Community Services and Economic Development	6800					
Community Recreation	6810	15,465		15,465		15,465
Community Service Classes	6820	116,060		116,060	2,832	113,228
Community Use of Facilities	6830	483,069		483,069		483,069
Economic Development	6840	4,287		4,287		4,287
Other Community Services & Economic Development	6890	443,775		443,775		443,775
Ancillary Services	6900					
Bookstores	6910	83,718		83,718		83,718
Child Development Center	6920	75,443		75,443		75,443
Farm Operations	6930					
Food Services	6940					
Parking	6950	2,664,195		2,664,195	1,073,207	1,590,988
Student and Co-curricular Activities	6960	914,651		914,651	3,736	910,915
Student Housing	6970					
Other	6990	411,677		411,677	10,042	401,635
Auxiliary Operations	7000					
Contract Education	7010	243,762		243,762	17,028	226,734
Other Auxiliary Operations	7090	4,797,700		4,797,700	71,350	4,726,350
Physical Property Acquisitions	7100	482,193		482,193	482,193	0
(05) Total		$112,498,146	$539,297	$111,958,849	$30,182,870	$81,775,979
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.91%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual F ncial and Budget Report

Expenditures by Activity

S10 Ge l Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	1,354					1,354
Architecture and Environmental Design	0200	15,434					15,434
Biological Sciences	0400	2,839,341	30,056	34,198	4,137		2,907,732
Business and Management	0500	2,234,289	5,974	65	1,404		2,241,732
Communications	0600	919,119	517	2,437	25,793		947,866
Computer and Information Science	0700	1,756,602		22,948	235,906		2,015,456
Education	0800	2,696,104	71,793	77,644	600		2,846,141
Engineering and Related Industrial Tech.	0900	198,970	115,282	8,424			322,676
Fine and Applied Arts	1000	7,037,109	18,569	70,509	319,409		7,445,596
Foreign Language	1100	2,114,080	853	1,599			2,116,532
Health	1200	1,030,244	57,321	11,442	42,865		1,141,872
Consumer Education and Home Economics	1300	1,022,565	113,753	64,034	20,530		1,220,882
Law	1400	118					118
Humanities (Letters)	1500	6,785,212	2,978	1,150	1,683		6,791,023
Library Science	1600	29,922					29,922
Mathematics	1700	4,390,488	450	109	721		4,391,768
Military Studies	1800						
Physical Sciences	1900	3,187,226	60,943	25,115	17,417		3,290,701
Psychology	2000	1,368,219	3,344	1,168			1,372,731
Public Affairs and Services	2100	43,225					43,225
Social Sciences	2200	4,279,695		5,054	5,737		4,290,486
Commercial Services	3000	774,496	71,490	6,774			852,760
Interdisciplinary Studies	4900	2,696,539	70,207	61,526	1,098		2,829,370
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	541,829					541,829
Subtotal - Instructional Activities	**599**	45,962,180	623,530	394,196	677,300		47,657,206

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]ncial and Budget Report

Expenditures by Activity

S10 Ger[illegible]l Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,371,690	97,814	17,130		4,486,634
Course and Curriculum Development	6020		36,361	1,302	4,696		42,359
Academic/Faculty Senate	6030		476,481	2,974			479,455
Other Instruct. Admin. & Instruct. Governance	6090		28,594				28,594
Subtotal - Instructional Administration	**6000**		4,913,126	102,090	21,826		5,037,042
Instructional Support Services (6100)							
Learning Center	6110	620,999	193,254	5,933			820,186
Library	6120		1,085,397	67,849	8,060		1,161,306
Media	6130		887,268	44,153	358,324		1,289,745
Museums and Galleries	6140		43,988				43,988
Academic Information Systems and Tech.	6150		1,661,593	280,868	89,688		2,032,149
Other Instructional Support Services	6190		257,013	423,527			680,540
Subtotal - Instructional Support Services	**6100**	620,999	4,128,513	822,330	456,072		6,027,914
Admissions and Records	**6200**		2,055,239	540,641	11,694		2,607,574
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		407,332	20,950	28,040		456,322
Matriculation and Student Assessment	6320		599,434	182,523	22,370		804,327
Transfer Programs	6330		3,037,388	13,719	20,536		3,071,643
Career Guidance	6340		14,506				14,506
Other Student Counseling and Guidance	6390		1,171,143	29,456	1,636		1,202,235
Subtotal - Student Counseling and Guidance	**6300**		5,229,803	246,648	72,582		5,549,033

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,194,489	110,976	12,231		1,317,696
Extended Opportunity Prgms. & Services (EOPS)	6430		989,549	39,993	5,830	[illegible]	1,574,669
Health Services	6440		799,610	4,500			804,110
Student Personnel Administration	6450		238,861	9,487	100,746		349,094
Financial Aid Administration	6460		957,552	65,932	19,077		1,042,561
Job Placement Services	6470		177,116	3,523			180,639
Veterans Services	6480						
Miscellaneous Student Services	6490		878,979	1,590,510	6,186		2,475,675
Subtotal - Other Student Services	**6400**		5,236,156	1,824,921	144,070	539,297	7,744,444
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,765,828	335,978			2,101,806
Custodial Services	6530		2,719,350	144,810			2,864,160
Grounds Maintenance and Repairs	6550		674,602	187,443	7,792		869,837
Utilities	6570			2,488,658			2,488,658
Other Operation and Maintenance of Plant	6590		124,373	43,061	24,829		192,263
Subtotal - Operation and Maintenance of Plant	**6500**		5,284,153	3,199,950	32,621		8,516,724
Planning, Policymaking, and Coordination	**6600**		2,353,732	2,122,547	9,161		4,485,440

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		856,029	61,776	7,837		925,642
Fiscal Operations	6720		1,585,370	687,138			2,272,508
Human Resources Management	6730		1,133,346	583,617	8,592		1,725,555
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		584,120				584,120
Staff Development	6750			16,455			16,455
Staff Diversity	6760			3,833			3,833
Logistical Services	6770		3,301,117	1,795,073	41,480		5,137,670
Management Information Systems	6780		1,825,853	352,935	172,228		2,351,016
Other General Institutional Support Services	6790		530,456	589,519			1,119,975
Subtotal - General Institutional Support Services	**6700**		9,816,291	4,090,346	230,137		14,136,774
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		9,678	5,787			15,465
Community Service Classes	6820	64,851	27,745	20,632	2,832		116,060
Community Use Facilities	6830		466,574	16,495			483,069
Economic Development	6840		4,287				4,287
Other Community Svcs. & Economic Development	6890		363,834	79,941			443,775
Subtotal - Community Services	**6800**	64,851	872,118	122,855	2,832		1,062,656

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910		83,718				83,718
Child Development Centers	6920		64,047	11,396			75,443
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,512,542	78,446	1,073,207		2,664,195
Student and Co-curricular Activities	6960		878,765	32,150	3,736		914,651
Student Housing	6970						
Other Ancillary Services	6990		356,469	45,166	10,042		411,677
Subtotal - Ancillary Services	**6900**		2,895,541	167,158	1,086,985		4,149,684
Auxiliary Operations (7000)							
Contract Education	7010	74,288	91,845	60,601	1,433	15,595	243,762
Other Auxiliary Operations	7090		1,896,454	2,829,896	71,350		4,797,700
Subtotal - Auxiliary Operations	**7000**	74,288	1,988,299	2,890,497	72,783	15,595	5,041,462
Physical Property and Related Acquisitions (7100)	**7100**			480,613	1,580		482,193
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220			87,257			87,257
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			87,257			87,257
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					272,912	272,912
Student Aid	7320					242,960	242,960
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					515,872	515,872
TOTAL EXPENDITURES and OTHER OUTGO	**391**	46,722,318	45,396,501	17,092,049	2,819,643	1,070,764	113,101,275

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	77,211
Avg. time p/account	6.7
Total Time (in minutes)	517314
Per Hour	60
Hours Worked (** **Activity 11**)	**8621.9**
***EFC 2**	66,028
Avg. time p/student	5.0
Total Time (in minutes)	330140
Per Hour	60
Hours Worked (** **Activity 12**)	**5502.3**
***EFC 1**	77,211
Avg. time p/question	7.3
Total Time (in minutes)	563640
Per Hour	60
Hours Worked (** **Activity 13**)	**9394.0**
***EFC 2**	66,028
Avg. time p/file	5.0
Total Time (in minutes)	330140
Per Hour	60
Hours Worked (** **Activity 14**)	**5502.3**
***EFC 4**	1,561
Avg. time p/account	36.4
Total Time (in minutes)	56820
Per Hour	60
Hours Worked (** **Activity 15**)	**947.0**
***EFC 5**	4,538
Avg. time p/student	4.8
Total Time (in minutes)	21782
Per Hour	60
Hours Worked (** **Activity 16**)	**363.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (default)**
EFC 1 - *Total number of students who enroll in the college*
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	13,543
Avg. time p/question	5.3
Total Time (in minutes)	71778
Per Hour	60
Hours Worked **(** Activity 21)**	**1196.3**
***EFW 6**	13,543
Avg. time p/application	7.6
Total Time (in minutes)	102927
Per Hour	60
Hours Worked **(** Activity 22)**	**1715.4**
***EFW 6**	13,543
Avg. time p/evaluation	6.9
Total Time (in minutes)	93447
Per Hour	60
Hours Worked **(** Activity 23)**	**1557.4**
***EFW 8**	3,881
Avg. time p/application	6.3
Total Time (in minutes)	24450
Per Hour	60
Hours Worked **(** Activity 24)**	**407.5**
***EFW 7**	9,662
Avg. time p/application	6.2
Total Time (in minutes)	59904
Per Hour	60
Hours Worked **(** Activity 25)**	**998.4**
***EFW 8**	3,881
Avg. time p/application	4.6
Total Time (in minutes)	17853
Per Hour	60
Hours Worked **(** Activity 26)**	**297.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Amisberg, Toni	Registration Clerk	10	10	9	8	10	5
Brideau, Rachel	A&R Clerk II	10	5	12	7		
Casillas, Ruth	Registration Clerk	3	4	2	3		3
Cohanne, Jonathan	A&R Clerk II	2	1.5	0.5		3.5	
Delgadillo, Cristina	Registration Clerk	5	3	4	3	4	3
Elliot, Kiersten	Asst. Dean Enrolment Srvcs	7	4	4	3	3	5
Franco, Sandra	A&R Clerk II	5	3	6	2		4
Garcia, Renay	A&R Clerk II	5	3	6	3		5
Gonzalez, Jaime	Accounting Technician					45	
Hoffman, Thelma	A&R Clerk III	10	10	10	5	10	5
Jauregi, Mario	Registration Clerk	2	5	2	5		1
Jones, Candee	A&R Clerk	3	4	7	2		
Marchant, Kathleen	A&R Clerk	1	1	5	5	1	1
Meza, Ofelia	Department Secretary					240	
Pant, Poonam	A&R Clerk II	5	5	5	5	5	5
Prather, George	Director Auxiliary Services			30			
Price, James	A&R Clerk II			5			2
Ramos, Angelita	Adminstrative Assistant	5	3	5	3	2	2
Razon, Nadia	Registration Clerk	10	5	3	5	5	10
Remonde, Lucita	Accounting Specialist					30	
Reza, Linda	Evening Coordinator	10	5	10	5	15	5
Romo, Alicia	Adminstrative Assistant	10	3	17	10	12	
Sasaki, Karen	A&R Clerk II	10	5	7	5		
Sturgis, Denise	Registration Clerk	10	5	5	5	5	5
Siefert, Alexandra	Accounting Specialist II					240	
Thompson, Raquel	Registration Clerk	5	10	4	5	15	10
Walden, Cherie	Registration Clerk	10	10	10	10	10	10
Young, Chris	A&R Clerk II	10	5	7	5		
Average		**6.7**	**5.0**	**7.3**	**5.0**	**36.4**	**4.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To summarize PHR's into an average PHR for Various Enrollment Office Staff performing Fee Collection Functions.
Source: EFCW 1.7-2 and PHR schedule from client. Initial year claim 98-99 through 05-06.
Findings:

		Productive Hourly Rates							
Staff	**Title**	**98-9**	**99-0**	**00-1**	**01-2**	**02-3**	**03-4**	**04-5**	**05-6**
Amisberg, Toni	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Brideau, Rachel	A&R Clerk II	$27.77	$28.76	$30.23	$32.98	$32.98	$32.98	$33.64	$34.82
Casillas, Ruth	Registration Clerk	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Cohanne, Jonathan	A&R Clerk II	$26.43	$27.39	$28.80	$29.91	$31.40	$31.40	$33.64	$34.82
Delgadillo, Cristina	Registration Clerk							$12.21	$12.89
Elliot, Kiersten	Asst. Dean Enrolment Srvcs								
Franco, Sandra	A&R Clerk II				$12.21	$12.82	$12.82	$22.76	$24.74
Garcia, Renay	A&R Clerk II	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13	$23.90	$25.97
Gonzalez, Jaime	Accounting Technician					$26.48	$27.81	$29.77	$32.36
Hoffman, Thelma	A&R Clerk III	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Jauregi, Mario	Registration Clerk								$12.89
Jones, Candee	A&R Clerk	$22.80	$24.84	$27.43	$28.48	$28.48	$28.48	$29.06	$31.57
Marchant, Kathleen	A&R Clerk	$23.95	$24.84	$26.12	$28.48	$28.48	$28.48	$29.06	$30.07
Meza, Ofelia	Department Secretary								
Pant, Poonam	A&R Clerk II	$22.80	$24.84	$26.12	$27.13	$27.13	$25.84	$28.48	$33.15
Prather, George	Director Auxillary Services								$68.60
Price, James	A&R Clerk II								
Ramos, Angelita	Adminstrative Assistant	$22.24	$23.37	$26.77	$29.60	$31.06	$31.06	$31.69	$32.80
Razon, Nadia	Registration Clerk							$12.21	$12.89
Remonde, Lucita	Accounting Specialist	$25.80	$28.06	$29.52	$40.08	$40.08	$40.08	$42.92	$44.42
Reza, Linda	Evening Coordinator	$28.46	$29.47	$30.99	$32.19	$32.19	$33.80	$38.00	$39.33
Romo, Alicia	Adminstrative Assistant	$34.36	$35.04	$37.50	$38.95	$38.95	$40.90	$41.71	$42.37
Sasaki, Karen	A&R Clerk II	$28.12	$28.12	$32.13	$33.38	$33.38	$33.38	$34.05	$36.98
Sturgis, Denise	Registration Clerk	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Siefert, Alexandra	Accounting Specialist II								
Thompson, Raquel	Registration Clerk							$12.21	$12.89
Walden, Cherie	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Young, Chris	A&R Clerk II						$23.43	$25.10	$27.27
Average		**$23.13**	**$24.14**	**$25.97**	**$25.41**	**$25.74**	**$25.84**	**$25.82**	**$28.45**

Conclusion: Findings go forward to EFCW-2's.

Schedule 3
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Arinsberg, Toni	Registration Clerk	10	12	15	10	10	10
Brideau, Rachel	A&R Clerk II	5		10	5	10	2
Carr, Sherita	Counselor	30	20	20		10	
Carter, Shauna	Financial Aid Ctmr. Srvc. Clerk	4	5	2	6	3	4
Castellane, Anthony	Financial Aid Clerk	3	4	2	7	3	5
Casillas, Cesar	Grants & Work Study Coord.	5	8	2	2	5	1
Casillas, Josh	Customer Service Clerk	3	7	4	5	7	2
Casillas, Ruth	Registration Clerk	5	5	4	3	2	3
Chang, Sarah	Counselor, Financial Aid	3	4	5	3	5	5
Clark, Kim	Financial Aid Technician	3	5	5		5	5
Conanne, Jonathan	A&R Clerk II	2					
Dammer, Carolyn	Financial Aid Technician	3	2	2	3	3	2
Delgadillo, Cristina	Registration Clerk	2	3	2	1	3	2
Elliot, Kiersten	Asst. Dean Enrolment Srvcs	7	4	4	3	3	5
Escobar, James	Registration Information Clerk	3	6	3	4	8	4
Franco, Sandra	A&R Clerk II	5	5	5	3	3	5
Garcia, Renay	A&R Clerk II	5	5	4	5	5	6
Gomez, Clara	Financial Aid Technician	5	6	4	9	3	4
Hoffman, Thelma	A&R Clerk III	10	10	10	10	10	10
Jauregi, Mario	Registration Clerk	10	5	5	2	2	
Jones, Candee	A&R Clerk II	3					
Le, Tri	Financial Aid Technician	5	5	3	10	2	3
Marchant, Kathleen	A&R Clerk	1					
Murphy, Diane	Registration Clerk	6	30	30	***2-4	30	***2-4
Myrow, Steven	Director, Financial Aid	1	1	1	1	1	1
Neal, Stacy	Asst. Director Financial Aid	5	5	3	3	3	5
Nezey, Elizabeth	Financial Aid Technician	3	7	3	7	7	2
Pant, Poonam	A&R Clerk II	2					
Price, James	A&R Clerk II	2					
Ramos, Angelita	Adminstrative Assistant	3					
Razon, Nadia	Registration Clerk	5	10	10	10	5	5
Reza, Linda	Evening Coordinator	10	10	10	15	10	10
Romo, Alicia	Adminstrative Assistant	2	2				
Sasaki, Karen	A&R Clerk II	5					
Sturgis, Denise	Registration Clerk	5	15	15	10	5	5
Thompson, Raquel	Registration Clerk	5	10	10	15	10	5
Walden, Cherie	Registration Clerk	10	10	10	10	10	10
Willoughby, Debra	Financial Aid Ctmr. Srvc. Clerk	4	6	4	8	3	4
Young, Chris	A&R Clerk II	5					
Average		**5.3**	**7.6**	**6.9**	**6.3**	**6.2**	**4.6**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**

EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student app in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into distric Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing writt notification to student of final eligibility status.

***Average not used, employee responed in weeks, not minutes.

Schedule 3A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
PHRs

Purpose: To summarize PHR's into an average PHR for Various Financial Office Staff performing Fee Waiver Functions.
Source: EFCW 1.7-3 and PHR schedule from client. Initial year claim 98-99 through 05-06.
Findings:

		Productive Hourly Rates							
Staff	Title	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Arinsberg, Toni	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Brideau, Rachel	A&R Clerk II	$27.77	$28.76	$30.23	$32.98	$32.98	$32.98	$33.64	$34.82
Carr, Sherita	Counselor						$55.36	$56.90	$57.96
Carter, Shauna	Financial Aid Ctmr. Srvc. Clerk								$24.15
Castellane, Anthony	Financial Aid Clerk						$17.14	$17.14	$23.00
Casillas, Cesar	Grants & Work Study Coord.		$18.99	$20.97	$22.88	$24.02	$25.22	$28.36	$30.81
Casillas, Josh	Customer Service Clerk	$11.82	$11.82	$12.96	$13.46	$14.13	$20.75	$22.22	$23.00
Casillas, Ruth	Registration Clerk	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Chang, Sarah	Counselor, Financial Aid	$44.70	$50.12	$55.15	$58.31	$59.48	$59.48	$60.55	$63.30
Clark, Kim	Financial Aid Technician	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Cohanne, Jonathan	A&R Clerk II	$26.43	$27.39	$28.80	$29.91	$31.40	$31.40	$33.64	$34.82
Dammer, Carolyn	Financial Aid Technician	$28.91	$30.98	$34.84	$36.18	$36.18			$37.46
Delgadillo, Cristina	Registration Clerk							$12.21	$12.89
Elliot, Kiersten	Asst. Dean Enrolment Srvcs								
Escobar, James	Registration Information Clerk							$12.21	$12.89
Franco, Sandra	A&R Clerk II				$12.21	$12.82	$12.82	$22.76	$24.74
Garcia, Renay	A&R Clerk II	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13	$23.90	$25.97
Gomez, Clara	Financial Aid Technician	$31.41	$32.49	$34.17	$35.49	$35.49	$35.49	$36.20	$43.57
Hoffman, Thelma	A&R Clerk III	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Jauregi, Mario	Registration Clerk								$12.89
Jones, Candee	A&R Clerk II	$22.80	$24.84	$27.43	$28.48	$28.48	$28.48	$29.06	$31.57
Le, Tri	Financial Aid Technician	$31.41	$32.49	$34.17	$35.49	$37.27	$37.27	$38.01	$39.54
Marchant, Kathleen	A&R Clerk	$23.95	$24.84	$26.12	$28.48	$28.48	$28.48	$29.06	$30.07
Murphy, Diane	Registration Clerk								
Myrow, Steven	Director, Financial Aid							$67.64	$70.00
Neal, Stacy	Asst. Director Financial Aid						$41.87	$44.85	$48.74
Nezey, Elizabeth	Financial Aid Technician	$32.99	$35.82	$37.67	$39.12	$39.12	$39.12	$41.90	$43.37
Pant, Poonam	A&R Clerk II	$22.80	$24.84	$26.12	$27.13	$27.13	$25.84	$28.48	$33.15
Price, James	A&R Clerk II								
Ramos, Angelita	Adminstrative Assistant	$22.24	$23.37	$26.77	$29.60	$31.06	$31.06	$31.69	$32.80
Razon, Nadia	Registration Clerk							$12.21	$12.89
Reza, Linda	Evening Coordinator	$28.46	$29.47	$30.99	$32.19	$32.19	$33.80	$38.00	$39.33
Romo, Alicia	Adminstrative Assistant	$34.36	$35.04	$37.50	$38.95	$38.95	$40.90	$41.71	$42.37
Sasaki, Karen	A&R Clerk II	$28.12	$28.12	$32.13	$33.38	$33.38	$33.38	$34.05	$36.98
Sturgis, Denise	Registration Clerk	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Thompson, Raquel	Registration Clerk							$12.21	$12.89
Walden, Cherie	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Willoughby, Debra	Financial Aid Ctmr. Srvc. Clerk								$17.27
Young, Chris	A&R Clerk II						$23.43	$25.10	$27.27
Average		**$25.39**	**$26.29**	**$28.33**	**$27.78**	**$28.17**	**$29.21**	**$29.87**	**$30.78**

Conclusion: Findings go forward to EFCW-2's.

Schedule 4
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: Schedules 4A, 4B, 4C, 4D and "Fin. Aid students served vs. BOGG recipents" report from client attached to the EFCW 1.8-3.
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1. (Sch. 4A)	Enrolled Students	73,219	76,813	78,808	82,493	82,196	73,008	77,211	77,757
EFC 2	1.8-1 2. (Sch. 4B)	Paid Enrollment fees	62,829	69,066	70,311	73,207	73,336	64,744	66,028	60,128
EFC 3	1.8-1 3. (Fin. Aid students served vs. BOGG recipients)	Exempted from enrollment fees (BOGG, etc.)	X	7,819	8,192	8,552	8,324	7,848	9,662	10,654
EFC 4	1.8-2 1. (Sch. 4C)	Delinquencies collections	222	219	327	280	268	690	1,561	3,289
EFC 5	1.8-2 2. (Sch. 4D)	Refunds	3,122	2,880	3,430	3,788	3,981	4,225	4,538	3,244
EFW 6	1.8-3 1. (Fin. Aid students served vs. BOGG recipients)	Waivers Requested	X	11,971	12,176	13,806	14,419	14,683	13,543	12,038
EFW 7	1.8-3 2. (Fin. Aid students served vs. BOGG recipients)	Waivers Approved	X	7,819	8,192	8,552	8,324	7,848	9,662	10,654
EFW 8	1.8-3 (1-2) (Fin. Aid students served vs. BOGG recipients)	Waivers Denied	X	4,152	3,984	5,254	6,095	6,835	3,881	1,384

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	13,531	14,086	14,177	14,455	14,581	14,725	13,888	13,428
	BFAP	2	25,279	26,747	27,101	28,257	28,271	23,631	26,569	27,383
	BFAP	2	10,001	10,466	10,960	12,502	12,557	11,404	11,545	11,564
	BFAP	3	24,408	25,514	26,570	27,279	26,787	23,248	25,209	25,382
EFC 1	1.8-1 1.	Enrolled Students	73,219	76,813	78,808	82,493	82,196	73,008	77,211	77,757

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4B
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	12,947	13,820	14,050	14,289	14,726	14,817	13,701	11,789
	BFAP	2	21,384	23,762	24,008	24,892	24,779	20,664	22,860	21,353
	BFAP	2	8,589	9,612	9,884	11,031	11,224	10,024	9,552	8,777
	BFAP	3	19,909	21,872	22,369	22,995	22,607	19,239	19,915	18,209
EFC 2	1.8-1	2. Paid Enrollment fees	62,829	69,066	70,311	73,207	73,336	64,744	66,028	60,128

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4C
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	18	23	30	27	25	34	70	340
	BFAP	2	71	55	88	87	97	290	850	1,114
	BFAP	2	24	10	13	12	13	19	12	280
	BFAP	3	109	131	196	154	133	347	629	1,555
EFC 4	1.8-2	1. Delinquencies collections	222	219	327	280	268	690	1,561	3,289

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

fa_wv_ref

Students paid fees and then refunded because a BOGG waiver was later issued

Stu-Head-Count	Sem-Code	Semester
974	19933	Fall 1993
183	19940	Winter 1994
330	19941	Spring 1994
670	19942	Summer 1994
1033	19943	Fall 1994
259	19950	Winter 1995
445	19951	Spring 1995
880	19952	Summer 1995
1422	19953	Fall 1995
244	19960	Winter 1996
648	19961	Spring 1996
1142	19962	summer 1996
1517	19963	Fall 1996
328	19970	Winter 1997
699	19971	Spring 1997
1093	19972	Summer 1997
1379	19973	Fall 1997
392	19980	WINTER 1998
680	19981	SPRING 1998
822	19982	Summer 1998
1709	19983	Fall 1998
192	19990	Winter 1999
399	19991	Spring 1999
636	19992	Summer 1999
1413	19993	Fall 1999
262	20000	Winter 2000
569	20001	Spring 2000
820	20002	Summer 2000
1692	20003	Fall 2000
308	20010	Winter 2001
610	20011	Spring 2001
883	20012	Summer 2001
1779	20013	Fall 2001
426	20020	Winter 2002
700	20021	Spring 2002
1231	20022	Summer 2002
1739	20023	Fall 2002
439	20030	Winter 2003
572	20031	Spring 2003
1279	20032	Summer 2003
1643	20033	Fall 2003
566	20040	Winter 2004
737	20041	Spring 2004
1282	20042	Summer 2004
2035	20043	Fall 2004
499	20050	Winter 2005
722	20051	Spring 2005

Schedule 4D
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: "Students paid fees and then refunded because a BOGG waiver was later issued" report from client attached to the EFCW 1.8-2.
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	fa_wv_ref.txt	1	822	636	820	883	1,231	1,279	1,282	985
	fa_wv_ref.txt	1	1,709	1,413	1,692	1,779	1,739	1,643	2,035	1,513
	fa_wv_ref.txt	1	192	262	308	426	439	566	499	328
	fa_wv_ref.txt	1	399	569	610	700	572	737	722	418
EFC 5	1.8-2 2.	Refunds	3,122	2,880	3,430	3,788	3,981	4,225	4,538	3,244

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFC 6 - Total number of enrollment fee waivers requested
EFC 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

fa_wv_serv_rec

Fin. Aid students served vs. BOGG recipents

	# of Served	# of recieved
98-99	12313	8733
99-00	11971	7819
00-01	12176	8192
01-02	13806	8552
02-03	14419	8324
03-04	14683	7848
04-05	13543	9662

California Home

Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2004 Summer Term

Data Current As Of May 01, 2012 01:20:35

Total Headcount	17,213

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2004 Fall Term

Data Current As Of May 01, 2012 01:20:59

Total Headcount	30,105

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2005 Winter Intersession

Data Current As Of May 01, 2012 01:21:09

Total Headcount	13,759

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2005 Spring Semester

Data Current As Of May 01, 2012 01:21:18

Total Headcount	29,502

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica C.C

Toni McAninsberg — Employee Name

Registration Clerk — Exact Position Title

Smc/Admissions/Main — College/Department/Location

$10 - 434-8215 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	0	.5	.5	.5	.5
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	0	0	0	0	.5	.5	.5	.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Toni Aninsberg Date 4-27-06

If you have any questions, please contact Toni Aninsberg, at 310-434-8215

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Shauna Carter — Employee Name

Fin Aid Customer Service Clerk — Exact Position Title

Fin Aid — College/Department/Location

(310) 434-4344 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						280	400	420
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

JOSIE CASILLAS — CUSTMR. SERV. CLRK.
Employee Name — Exact Position Title

SANTA MONICA/FIN. AID. — 310/434-4160 — (12mo)/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						240	240	240
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						240	240	240

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 04/21/06

If you have any questions, please contact _____, at _____

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04/21/06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: _____

Ruth Casillas — Employee Name

Registration Clerk — Exact Position Title

SMC Admiss'/Records — College/Department/Location

310) 434-4922 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	15	14	20	20			15	20
B. Enrollment Waiver Process:	110	100	60	60			70	100
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	125	114	80	80			85	120

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

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Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Anthony Cipollone — Employee Name

Financial Aid Clerk — Exact Position Title

SMC/Financial Aid — College/Department/Location

434-4344 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 A. Enrollment Collection Process:								0
Code 1 B. Enrollment Waiver Process:								
Code 2 A. Enrollment Collection Process:								
Code 2 B. Enrollment Waiver Process:								
Code 3 Record Retention:						250	475	484
Code 4 State Reporting:								
TOTALS:								

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Michael Chitgar — Employee Name

Systems Analyst — Exact Position Title

SMC / M.I.S. — College/Department/Location

434-4548 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	48	40	32	40	26	32	16
B. Enrollment Waiver Process:	32	40	30	28	30	24	22	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	34	30	24	32	24	30	24
TOTALS:	104	112	100	84	92	74	82	52

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael Chitgar Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Jocelyn Chang — Employee Name

Dean, Info. Tech. — Exact Position Title

Information Technology K4567 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	200	200	200	100	50	50	10	10
B. Enrollment Waiver Process:	200	200	50	50	50	50	100	40
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	5	5	5	5	5	5	5	5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	5	5	5	5	5	5	5	5
TOTALS:	410	410	260	160	110	110	120	60

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Jocelyn Chang Date 4/27/06

ou have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica Coll.

Kim P. Clark — Employee Name

Fin. Aid Tech. — Exact Position Title

Santa Monica — College/Department/Location

(310) 434-4924 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

600 600 250 250 250 250 250 250

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 600 600 250 250 250 250 250 250

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim P. Clark Kim P. Clark Date 5/3/06 5/3/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Jonathan Cohanne — Employee Name

Admissions & Records Clerk II — Exact Position Title

Admissions & Record — College/Department/Location

(310) 434-4469 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	508	480	435	490	410	380	330	250
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	25	23	23	19	20	15	15	13
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	48	45	44	5	4	0	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	581	548	502	514	434	395	345	263

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jonathan Cohanne Date 4/25/06

If you have any questions, please contact Jonathan Cohanne, at 310-434-4469.

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Carolyn Damm — Employee Name

Fin Aid Tech — Exact Position Title

Financial Aid — College/Department/Location

(310) 434-4123 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in ~~hours~~							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:						—	—	—
B. Enrollment Waiver Process:						0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:						—	—	—
B. Enrollment Waiver Process:						20	40	40
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						100	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						0	0	0
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Cristina Delgadillo — Registration Clerk
Employee Name — Exact Position Title

SMC/ADMISSIONS/MAIN — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							~~0~~	~~0~~
B. Enrollment Waiver Process:							~~0~~	~~0~~
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:							5	0
B. Enrollment Waiver Process:							6	8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							190	490
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.							~~0~~	~~0~~
TOTALS:							201	496

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cristina Delgadillo Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

JAMES W. ESCOBAR — Employee Name

REGISTRATION INFO CLERK — Exact Position Title

SMC/FIN AID/1900 PICO BLVD — College/Department/Location

(310) 434 4343 — Telephone #

12mo/11mo/10mo/nriv — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment** fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ 300 500HRS

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE INK

Employee Signature James W. Escobar Date 04/21/06

If you have any questions, please contact JAMES, at (310) 434-4343

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James W. Escobar 05/10/06

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Lai Fong — Programmer Analyst II
Employee Name — Exact Position Title

MIS — x4082 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:		40	5	5	5	5	5	5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		40	5	5	5	5	5	5

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty erjury under the laws of the State of California to be true and correct based on your personal knowledge or mation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature for Lai (confirmed) Date 4/27/06

I have any questions, please contact _____, at _____

SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Jaime Gonzalez — Accounting Technician
Employee Name — Exact Position Title

Auxiliary Services — (310)434-4675 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					15	15	15	15
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					15	15	15	15
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					30	30	30	36

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jaime Gonzalez Date 5-1-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Mario Jauregui — Employee Name

Registration Clerk — Exact Position Title

Admissions — College/Department/Location

4455 — Telephone #

12mo/11mo/10mo/hrly — Work year length: 120 day limit

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	0	0	0	0	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	0	0	0	0	0	0	0	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Darlene Kasch — Employee Name

Info. Systems Support Analyst — Exact Position Title

MIS — College/Department/Location

(310) 434-4546 — Telephone #

12mo/ ~~1mo/10mo/hrly~~ — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	5	5	5	5	5	5	5	5
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	5	5	5	5	5	5	5	5

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty njury under the laws of the State of California to be true and correct based on your personal knowledge or mation.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

oyee Signature Darlene Kasch Date 4/27/06

have any questions, please contact _____, at _____

SE SUBMIT THIS INFORMATION BY _____; TO _____

RIGI 006 SixTen and Associates

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Thomas Kasch — Employee Name

Computer Operator — Exact Position Title

MIS — College/Department/Location

(310) 434-8802 — Telephone #

12mo/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	15	15	15	15	15	15	15	15
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	15	15	15	15	15	15	15	15

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of
a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that
have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty
erjury under the laws of the State of California to be true and correct based on your personal knowledge or
rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

loyee Signature Thomas Kasch Date 4/27/06

u have any questions, please contact _____, at _____

ASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica Community College

Jung H. Lee — Employee Name

Systems Administrator — Exact Position Title

MIS — College/Department/Location

(310) 434-4838 — Telephone #

12mo/~~11mo~~/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
a. Enrollment Collection Process:								
b. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:								
Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						24	16	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						24	16	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that time has been reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA CC DIST.

KATHLEEN A. MARCHANT — ADMISSIONS & RECORD CLERK I
Employee Name — Exact Position Title

ADMISSIONS & RECORDS — 434-X4426
College/Department/Location — Telephone #

(12mo)/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	4	2	2	1
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
Enrollment Collection Process:	0	0	0	0	1	1	1	1
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	0	0	1	1	1	1
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen A. Marchant Date May 2, 2006

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

STEVE MYTOW — Employee Name

DIRECTOR, FIN AID — Exact Position Title

MC/FINANCIAL AID — College/Department/Location

(310) 434-4871 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							4	20
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							5	10
B. Enrollment Waiver Process:							5	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							4	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.							6	8
TOTALS:							24	56

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/1/06

If you have any questions, please contact STEVE MYTOW, at (310) 434-4871

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

ELIZABETH NEZEY — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

SANTA MONICA — College/Department/Location

310 434 4469 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	600	600	250	250	250	250	250	250
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	600	600	250	250	250	250	250	250

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Nezey Date 5/4/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Brian Peña — Employee Name

Programmer / Analyst II — Exact Position Title

MIS — College/Department/Location

(310) 434-4081 — Telephone #

(12mo)/1mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	500	500	400	800	400	400	600	500
B. Enrollment Waiver Process:	—	—	—	100	—	—	100	300
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	—	—	—	—	—	10	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	10	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	10	100	30	15	30	15	15	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	1	—	—	1	—	—	—	4
TOTALS:	511	600	430	916	430	435	715	834

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that I have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Brian Peña Date 4/26/2006

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Employee Name: Courtney Patterson VII

Exact Position Title: Director of Auxiliary Services

College/Department/Location: Auxiliary Services

Telephone #: 4976

Work year length: 12mo/11mo/10mo/hrly

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		3	3	3	3	3	3	3
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Nadia Razon — Employee Name

registration clerk — Exact Position Title

SMC/Admissions/Main — College/Department/Location

(310)434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							Ø	Ø
B. Enrollment Waiver Process:							Ø	Ø
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							4	4
B. Enrollment Waiver Process:							10	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nadia Razon — Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

LAURETTA T. REMONDE — Employee Name

ACCOUNTANT — Exact Position Title

ADMINISTRATIVE SERVICES — College/Department/Location

(310) 434-4677 — Telephone #

12mo/~~11mo/10mo/hrly~~ — ~~Work~~ year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	
	FISCAL YEARS: Report time in hours								
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	____	____	15	15	15	15	15	15	MINUTES
B. Enrollment Waiver Process:	____	____	____	____	____	____	____	____	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	____	____	15	15	15	15	15	15	MINUTES
B. Enrollment Waiver Process:	____	____	____	____	____	____	____	____	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	____	____	____	____	____	____	____	____	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	____	____	____	____	____	____	____	____	
TOTALS:	____	____	30	30	30	30	30	30	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature LReMonde — Date 5-01-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

ARMANDO RIOS — PROGRAMMER ANALYST III
Employee Name — Exact Position Title

MIS — x 4645 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	100	100	100	100	100	100	100	100
B. Enrollment Waiver Process:	250	250	250	250	250	250	250	250
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	5	5	5	5	5	5	5	5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	10	10	10	20	10	10	10	10
TOTALS:	365	365	365	365	365	365	365	365

LOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty rjury under the laws of the State of California to be true and correct based on your personal knowledge or nation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

oyee Signature _____ Date 09/27/05

have any questions, please contact _____, at _____

SE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Denise STURGIS — Employee Name

Registration Clerk — Exact Position Title

SMC /Admission/Main — College/Department/Location

(310) 434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	20	20	20	20	20	20	20	20
B. Enrollment Waiver Process:	160	160	160	160	160	160	160	160
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	240	240	240	240	240	240	240	240
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	420	420	420	420	420	420	420	420

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise M Sturgis Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Raquel Thompson — Employee Name

Registration Clerk — Exact Position Title

SMC/Admissions/main — College/Department/Location

(310) 434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	2.5
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
TOTALS:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	2.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. · PLEASE USE BLUE INK

Employee Signature Raquel Thompson Date 4/26/06

If you have any questions, please contact _____ at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Frank Vu — Employee Name

DSA/Director — Exact Position Title

MC — College/Department/Location

(310)434-4269 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	40	40	40	40	40	40	40	40
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	40	40	40	40	40	40	40	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____ at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

CHERIE J. WALDEN — Employee Name

REGISTRATION CLERK — Exact Position Title

ADMISSIONS & RECORDS — College/Department/Location

(310) 434-8275 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS: Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	10	10	10	10	10	10
B. Enrollment Waiver Process:	0	0	160	160	160	160	160	160
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	230	230	230	230	230	230
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	0	0	400	400	400	400	400	400

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cherie J. Walden Date 4-27-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

John Yoder — Employee Name

Web Svc Coord — Exact Position Title

Academic Computing 4184 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John C. Yoder Date 4-3-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Santa Monica Community College District
Mandated Reimbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Productive Hourly Rates							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Toni Arinsberg	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82	12.82	13.54
Rachel Brideau	Class. Perm. ADMIS/REC CLK II	12 - Full-time	27.77	28.76	30.23	32.98	32.98	32.98	33.64	34.82
Sherita Carr	Adjunct Faculty, Counselor	12 - Part-time						55.36	56.90	57.96
Anthony Castellane	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						20.75	20.75	23.00
Ceasar Casillas	Class. Perm. FIN AID GRANT&WKSTY	12 - Full-time						25.22	28.36	30.81
Ceasar Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time		18.99	20.97	22.88	24.02			
Josh Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						20.75	22.22	23.00
Josh Casillas	Class. Temp. Reg. Clerk	12 - Part-time	11.82	11.82	12.96	13.46	14.13			
Ruth Casillas	Class. Temp. Reg. Clerk	13 - Part-time	11.25	11.25	12.34	13.46	13.46	13.46	13.46	14.21
Sarah Chang	Adjunct Faculty, Counselor	12 - Part-time	44.70	50.12	55.15	58.31	59.48	59.48	60.55	63.30
Michael Chitgar	Class. Perm. SYST ANALYST	12 - Full-time	48.93	52.92	55.66	57.81	57.81	57.81	60.70	64.09
Jocelyn Chong	Certificated Director, Network Services	12 - Full-time	61.49							
Jocelyn Chong	Dean, Network Services	12 - Full-time		64.74	69.65	73.29	74.25	74.25	75.73	78.38
Kim Clark	Class. Perm. FIN AID TECH	12 - Full-time	28.46	29.47	30.99	33.80	33.80	33.80	34.48	35.69
Jonathan Cohanne	Class. Perm. ADMIS/REC CLK II	12 - Full-time	26.43	27.39	28.80	29.91	31.40	31.40	33.64	34.82
Carolyn Dammer	Class. Perm. FIN AID TECH	12 - Full-time						33.80	34.48	37.46
Carolyn Dammer	Class. Perm. CASH RECEIPT SUP.	12 - Full-time	28.91	30.98	34.84	36.18	36.18			
Cristina Delgadillo	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
James Escobar	Class. Temp, Reg/Info Clerk	12 - Part-time							12.21	12.89
Sandra Franco	Class. Perm. ADMIS/REC CLK I	12 - Full-time							22.76	24.74
Sandra Franco	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82		
Yim Fai Fong	Class. Perm. PROG. ANALYST II	12 - Full-time		38.53	42.54	46.40	48.72	48.72	49.70	51.44
Yim Fai Fong	Class. Perm. PROG. ANALYST I	12 - Full-time	32.99							
Renay Garcia	Class. Perm. ADMIS/REC CLK I	12 - Full-time							23.90	25.97
Renay Garcia	Class. Temp. Reg. Clerk	12 - Part-time	10.71	11.25	12.34	13.46	13.46	14.13		
Clara Gomez	Class. Perm. FIN AID TECH	12 - Full-time	31.41	32.49	34.17	35.49	35.49	35.49	36.20	43.57
Jaime Gonzalez	Class. Perm. ACCT TECH	12 - Full-time					26.48	27.81	29.77	32.36
Thelma Hoffman	Class. Perm. ADMIS/REC CLK III	12 - Full-time	28.46	29.47	30.99	33.80	33.80	33.80	34.48	35.69
Mario Jauregui	Class. Temp, Reg/Info Clerk	12 - Part-time	HIRE DATE	38534.00						12.89
Candee Jones	Class. Perm. ADMIS/REC CLK II	12 - Full-time	22.80	24.84	27.43	28.48	28.48	28.48	29.06	31.57
Darlene Kasch	Class. Perm. QUALITY ASSURANCE	12 - Full-time	59.52	61.27	64.43	66.92	66.92	66.92	68.26	70.65
Thomas Kasch	Class. Perm. COMPUTER OPER	12 - Full-time	39.21	42.48	44.67	46.40	46.40	46.40	47.33	48.98
Micky Kwan	Class. Perm. SYST ANALYST	12 - Full-time		43.54	48.08	49.93	49.93	49.93	53.48	55.35
Micky Kwan	Class. Perm. COMP NETWORK ANA	12 - Full-time	37.32							
Tri Le	Class. Perm. FIN AID TECH	12 - Full-time	31.41	32.49	34.17	35.49	37.27	37.27	38.01	39.54
Jung Lee	Class. Perm. SYST ADMINISTRATOR	12 - Full-time	38.26	41.46	45.79	49.93	49.93	52.43	53.48	55.35

revised by SixTen and Associates

Santa Monica Community College District
Mandated Reimbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Productive Hourly Rates							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Connie Lemke	Class. Perm. ADMIS/REC CLK I	12 - Full-time							29.06	30.07
Connie Lemke	Class. Perm. ADMIS/REC CLK II	12 - Full-time		17.81	20.47	22.32	23.43	25.84		
Kathleen Marchant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	23.95	24.84	26.12	28.48	28.48	28.48	29.06	30.07
Steve Myrow	Certificated Director, Financial Services	12 - Full-time							67.64	70.00
Stacy Neal	Class. Perm. FIN AID ASST DIRECTOR	12 - Full-time						41.87	44.85	48.74
Elizabeth Nezey	Class. Perm. FIN AID TECH	12 - Full-time	32.99	35.82	37.67	39.12	39.12	39.12	41.90	43.37
Poonam Pant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	22.80	24.84	26.12	27.13	27.13	25.84	28.48	33.15
Brian Pena	Class. Perm. PROG. ANALYST II	12 - Full-time		44.60	51.72	53.72	53.72	53.72	54.79	59.55
Brian Pena	Class. Perm. PROG. ANALYST I	12 - Full-time	38.26							
Angelita Ramos	Class. Perm. ADMIN ASST I	12 - Full-time	22.24	23.37	26.77	29.60	31.06	31.06	31.69	32.80
Nadia Razon	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
Lucita Remonde	Class. Perm. ACCOUNTANT	12 - Full-time				40.08	40.08	40.08	42.92	44.42
Lucita Remonde	Class. Perm. ACCOUNTING SPEC II	12 - Full-time	25.80	28.06	29.52		#VALUE!		#VALUE!	
Arnulfo Reyes	Class. Perm. PROG. ANALYST III	12 - Full-time	42.22	45.71	50.48	52.43	52.43	52.43	53.48	58.14
Linda Reza	Class. Perm. ADMIS/REC COORD	12 - Full-time							38.00	39.33
Linda Reza	Class. Perm. ADMIS/REC CLK III	12 - Full-time	28.46	29.47	30.99	32.19	32.19	33.80		
Alicia Romo	Class. Perm. ADMIN ASST II	12 - Full-time	34.36	35.04	37.50	38.95	38.95	40.90	41.71	42.37
Karen Sasaki	Class. Perm. ADMIS/REC CLK II	12 - Full-time	28.12	28.12	32.13	33.38	33.38	33.38	34.05	36.98
George Prather	Class. Perm. DIR OF AUXILIARY	12 - Full-time		50.76	56.75	61.88	61.88	61.88	66.28	68.60
Denise Sturgis	Class. Temp. Reg. Clerk	12 - Part-time	10.71	11.25	12.34	13.46	13.46	13.46	14.13	14.93
Raquel Thompson	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
Cherie Walden	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82	12.82	13.54
Debra Willoughby	Class. Perm. FIN AID CUST SVCS CLK	13 - Part-time	HIRE DATI	38748.00						17.27
CHENG SZU Wu	Class. Perm. DIR MIS	12 - Full-time		#VALUE!					69.59	75.63
CHENG SZU Wu	Class. Perm. DATA BASE ADMIN	12 - Full-time	52.64	58.06	61.36	64.43	66.92	66.92		
John Yoder	Class. Perm. INT. & WEB SVR COORD	12 - Full-time				47.55	47.55	47.55	48.50	52.72
John Yoder	Class. Perm. ASST COMP LAB SUPV	12 - Full-time	35.22	37.74	44.46					
Chris Young	Class. Perm. ADMIS/REC CLK II	12 - Full-time						23.43	25.10	27.27
Shauna Carter	Class. Perm. FIN AID SVC CLK	12 - Full-time							21.79	24.15

revised by SixTen and Associates

Santa Monica Community College District
Mandated Reimbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Annual Salaries w/o benefits							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Toni Arinsberg	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82	$12.82	$13.54
Rachel Brideau	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,442.00	$3,565.00	$3,748.00	$4,088.00	$4,088.00	$4,088.00	$4,170.00	$4,316.00
Sherita Carr	Adjunct Faculty, Counselor	12 - Part-time						$55.36	$56.90	$57.96
Anthony Castellane	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						$2,572.00	$2,572.00	$2,851.00
Ceasar Casillas	Class. Perm. FIN AID GRANT&WKSTY	12 - Full-time						$3,127.00	$3,516.00	$3,820.00
Ceasar Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time		$2,354.00	$2,600.00	$2,836.00	$2,978.00			
Josh Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						$2,572.00	$2,755.00	$2,851.00
Josh Casillas	Class. Temp. Reg. Clerk	12 - Part-time	$11.82	$11.82	$12.96	$13.46	$14.13			
Ruth Casillas	Class. Temp. Reg. Clerk	13 - Part-time	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Sarah Chang	Adjunct Faculty, Counselor	12 - Part-time	$44.70	$50.12	$55.15	$58.31	$59.48	$59.48	$60.55	$63.30
Michael Chitgar	Class. Perm. SYST ANALYST	12 - Full-time	$6,066.00	$6,560.00	$6,900.00	$7,167.00	$7,167.00	$7,167.00	$7,525.00	$7,945.00
Jocelyn Chong	Certificated Director, Network Services	12 - Full-time	$7,622.16							
Jocelyn Chong	Dean, Network Services	12 - Full-time		$8,026.00	$8,634.00	$9,086.00	$9,204.00	$9,204.00	$9,388.00	$9,717.00
Kim Clark	Class. Perm. FIN AID TECH	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$4,190.00	$4,190.00	$4,190.00	$4,274.00	$4,424.00
Jonathan Cohanne	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,277.00	$3,395.00	$3,570.00	$3,708.00	$3,893.00	$3,893.00	$4,170.00	$4,316.00
Carolyn Dammer	Class. Perm. FIN AID TECH	12 - Full-time						$4,190.00	$4,274.00	$4,644.00
Carolyn Dammer	Class. Perm. CASH RECEIPT SUP.	12 - Full-time	$3,584.00	$3,840.00	$4,319.00	$4,485.00	$4,485.00			
Cristina Delgadillo	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
James Escobar	Class. Temp, Reg/Info Clerk	12 - Part-time							$12.21	$12.89
Sandra Franco	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$2,822.00	$3,067.00
Sandra Franco	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82		
Yim Fai Fong	Class. Perm. PROG. ANALYST II	12 - Full-time		$4,776.00	$5,274.00	$5,752.00	$6,040.00	$6,040.00	$6,161.00	$6,377.00
Yim Fai Fong	Class. Perm. PROG. ANALYST I	12 - Full-time	$4,090.00							
Renay Garcia	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$2,963.00	$3,220.00
Renay Garcia	Class. Temp. Reg. Clerk	12 - Part-time	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13		
Clara Gomez	Class. Perm. FIN AID TECH	12 - Full-time	$3,894.00	$4,028.00	$4,236.00	$4,399.00	$4,399.00	$4,399.00	$4,487.00	$5,401.00
Jaime Gonzalez	Class. Perm. ACCT TECH	12 - Full-time					$3,283.00	$3,447.00	$3,691.00	$4,012.00
Thelma Hoffman	Class. Perm. ADMIS/REC CLK III	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$4,190.00	$4,190.00	$4,190.00	$4,274.00	$4,424.00
Mario Jauregui	Class. Temp, Reg/Info Clerk	12 - Part-time	HIRE DATE	7/1/2005						$12.89
Candee Jones	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$2,826.00	$3,079.00	$3,400.00	$3,531.00	$3,531.00	$3,531.00	$3,602.00	$3,914.00
Darlene Kasch	Class. Perm. QUALITY ASSURANCE	12 - Full-time	$7,378.00	$7,595.00	$7,987.00	$8,296.00	$8,296.00	$8,296.00	$8,462.00	$8,758.00
Thomas Kasch	Class. Perm. COMPUTER OPER	12 - Full-time	$4,861.00	$5,266.00	$5,538.00	$5,752.00	$5,752.00	$5,752.00	$5,867.00	$6,072.00
Micky Kwan	Class. Perm. SYST ANALYST	12 - Full-time		$5,397.00	$5,960.00	$6,190.00	$6,190.00	$6,190.00	$6,630.00	$6,862.00
Micky Kwan	Class. Perm. COMP NETWORK ANA	12 - Full-time	$4,627.00							
Tri Le	Class. Perm. FIN AID TECH	12 - Full-time	$3,894.00	$4,028.00	$4,236.00	$4,399.00	$4,620.00	$4,620.00	$4,712.00	$4,902.00
Jung Lee	Class. Perm. SYST ADMINISTRATOR	12 - Full-time	$4,743.00	$5,140.00	$5,676.00	$6,190.00	$6,190.00	$6,500.00	$6,630.00	$6,862.00

revised by SixTen and Associates

Santa Monica Community College District
Mandated Reimbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Annual Salaries w/o benefits							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Connie Lemke	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$3,602.00	$3,728.00
Connie Lemke	Class. Perm. ADMIS/REC CLK II	12 - Full-time		$2,208.00	$2,537.00	$2,767.00	$2,905.00	$3,203.00		
Kathleen Marchant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	$2,969.00	$3,079.00	$3,238.00	$3,531.00	$3,531.00	$3,531.00	$3,602.00	$3,728.00
Steve Myrow	Certificated Director, Financial Services	12 - Full-time							$8,385.00	$8,678.00
Stacy Neal	Class. Perm. FIN AID ASST DIRECTOR	12 - Full-time						$5,191.00	$5,560.00	$6,042.00
Elizabeth Nezey	Class. Perm. FIN AID TECH	12 - Full-time	$4,090.00	$4,440.00	$4,670.00	$4,850.00	$4,850.00	$4,850.00	$5,194.00	$5,376.00
Poonam Pant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	$2,826.00	$3,079.00	$3,238.00	$3,363.00	$3,363.00	$3,203.00	$3,531.00	$4,110.00
Brian Pena	Class. Perm. PROG. ANALYST II	12 - Full-time		$5,529.00	$6,411.00	$6,659.00	$6,659.00	$6,659.00	$6,792.00	$7,382.00
Brian Pena	Class. Perm. PROG. ANALYST I	12 - Full-time	$4,743.00							
Angelita Ramos	Class. Perm. ADMIN ASST I	12 - Full-time	$2,757.00	$2,897.00	$3,319.00	$3,670.00	$3,851.00	$3,851.00	$3,928.00	$4,066.00
Nadia Razon	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
Lucita Remonde	Class. Perm. ACCOUNTANT	12 - Full-time				$4,969.00	$4,969.00	$4,969.00	$5,321.00	$5,507.00
Lucita Remonde	Class. Perm. ACCOUNTING SPEC II	12 - Full-time	$3,198.00	$3,479.00	$3,659.00					
Arnulfo Reyes	Class. Perm. PROG. ANALYST III	12 - Full-time	$5,234.00	$5,667.00	$6,258.00	$6,500.00	$6,500.00	$6,500.00	$6,630.00	$7,207.00
Linda Reza	Class. Perm. ADMIS/REC COORD	12 - Full-time							$4,711.00	$4,876.00
Linda Reza	Class. Perm. ADMIS/REC CLK III	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$3,990.00	$3,990.00	$4,190.00		
Alicia Romo	Class. Perm. ADMIN ASST II	12 - Full-time	$4,260.00	$4,344.00	$4,649.00	$4,829.00	$4,829.00	$5,070.00	$5,171.00	$5,252.00
Karen Sasaki	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,486.00	$3,486.00	$3,983.00	$4,138.00	$4,138.00	$4,138.00	$4,221.00	$4,584.00
George Prather	Class. Perm. DIR OF AUXILIARY	12 - Full-time		$6,292.00	$7,035.00	$7,671.00	$7,671.00	$7,671.00	$8,216.00	$8,504.00
Denise Sturgis	Class. Temp. Reg. Clerk	12 - Part-time	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Raquel Thompson	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
Cherie Walden	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82	$12.82	$13.54
Debra Willoughby	Class. Perm. FIN AID CUST SVCS CLK	13 - Part-time	HIRE DATE	1/31/2006						$17.27
CHENG SZU Wu	Class. Perm. DIR MIS	12 - Full-time							$8,627.00	$9,376.00
CHENG SZU Wu	Class. Perm. DATA BASE ADMIN	12 - Full-time	$6,525.00	$7,198.00	$7,607.00	$7,987.00	$8,296.00	$8,296.00		
John Yoder	Class. Perm. INT. & WEB SVR COORD	12 - Full-time				$5,895.00	$5,895.00	$5,895.00	$6,013.00	$6,535.00
John Yoder	Class. Perm. ASST COMP LAB SUPV	12 - Full-time	$4,366.00	$4,678.00	$5,512.00					
Chris Young	Class. Perm. ADMIS/REC CLK II	12 - Full-time						$2,904.00	$3,111.00	$3,381.00
Shauna Carter	Class. Perm. FIN AID SVC CLK	12 - Full-time							2701.00	2994.00

revised by SixTen and Associates

Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 199 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office , additional information (enrollment fees waived) from Chancellor's Office website .
Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 3,095,700	$ 4,578,991	$ 4,774,191	$ 4,729,702	$ 6,410,305	$ 9,569,177	
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 61,914	$ 91,580	$ 95,484	$ 94,594	$ 128,206	$ 191,384	
1.8-4 line 4A	Enrollment Fees Waived	$ 1,409,809	$ 1,499,704	$ 1,582,997	$ 1,551,341	$ 2,282,555	$ 4,224,994	4674644
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 28,196	$ 29,994	$ 31,660	$ 31,027	$ 45,651	$ 84,500	$ 93,493
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 98,687	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		136,336	143,908	141,031	145,664	181,019	179,794
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 124,066	$ 130,956	$ 128,338	$ 132,554	$ 164,727	$ 163,613
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 28,196	$ 29,994	$ 31,660	$ 31,027	$ 45,651	$ 84,500	$ 93,493
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 98,687						
1.8-4 5.	Credit Units Waived		$ 124,066	$ 130,956	$ 128,338	$ 132,554	$ 164,727	$ 163,613
Total Enrollment Fee Waiver Offset	**Forward to Schedule 5A**	**$ 126,883**	**$ 154,060**	**$ 162,616**	**$ 159,365**	**$ 178,205**	**$ 249,227**	**$ 257,106**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Santa Monica
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$54,879,340	$53,786,620	$-1,837,093	$51,949,527
ENROLL FEE ADMIN (2%)	74,711	64,251	10,460	74,711
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	3,661,884	3,149,221	512,663	3,661,884
S.F.A.A.	776,770	666,732	110,038	776,770
E.O.P.S.	1,090,305	936,284	154,021	1,090,305
C.A.R.E.	98,357	84,587	13,770	98,357
D.S.P.S.	1,177,733	1,007,900	169,833	1,177,733
STATE HOSPITALS	0	0	0	0
CALWORKS	400,181	326,956	73,225	400,181
MATRICULATION (CREDIT)	730,493	620,308	110,185	730,493
MATRIC. (NONCREDIT)	35,366	30,414	4,952	35,366
FAC. & STAFF DIVERSITY	18,443	13,110	5,333	18,443
PART-TIME FACULTY INS.	96,379	0	96,379	96,379
PART-TIME FACULTY OFFIC	81,240	0	81,240	81,240
PART-TIME FACULTY ALLOC	1,000,440	860,378	140,062	1,000,440
BLOCK GRANT (ONE-TIME)	340,576	292,896	47,680	340,576
ECON. DEVELOPMENT	358,823	258,000	43,411	301,411
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	87,954	75,640	12,314	87,954
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	51,600	13,416	29,928	43,344
VTEA TITLE I C	516,314	302,044	131,660	433,704
PLANT & INSTRUCTIONAL	382,010	328,529	53,481	382,010
PRIOR YEAR CORRECTION	475,433	460,518	14,915	475,433
TOTAL	$66,387,455	$63,309,364	$0	$63,309,364

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Santa Monica Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5. Initial year claim 98-99 through 05-06.
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 26,519.02	$ 17,833.71	$ 23,829.64	$ 18,624.59	$ 18,207.44	$ 28,027.96	$ 41,063.25
	EFCW-1 B. 1. b.		4,553.28	4,881.10	5,146.80	4,448.40	5,661.60	7,366.62	8,625.15
	EFCW-1 B. 2. a.		59,936.20	39,293.75	39,869.85	41,494.88	47,288.48	61,889.99	73,632.97
	EFCW-1 B. 2. b.		144,928.89	158,313.72	177,630.88	189,462.97	201,490.59	184,372.59	163,900.41
	EFCW-1 B. 2. c.		41,568.08	33,275.85	2,331.91	2,745.47	2,282.99	3,140.29	3,309.66
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 277,505.47	$ 253,598.13	$ 248,809.08	$ 256,776.31	$ 274,931.10	$ 284,797.45	$ 290,531.44
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	126,883.00	154,060.00	162,616.00	159,365.00	178,205.00	249,227.00	257,106.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 150,622.47	$ 99,538.13	$ 86,193.08	$ 97,411.31	$ 96,726.10	$ 35,570.45	$ 33,425.44
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 126,883.00**	**$ 154,060.00**	**$ 162,616.00**	**$ 159,365.00**	**$ 178,205.00**	**$ 249,227.00**	**$ 257,106.00**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Santa Monica College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 01, 2012 01:22:30

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	488	207,982
BOGW - Part A-2 based on SSI recipient status	573	202,597
BOGW - Part A-3 based on general assistance recipient status	117	41,227
BOGW - Part B based on income standards .	6,951	2,965,595
BOGW - Part C based on financial need	1,485	772,861

Total Amount = $ 4,190,262

Back to Top of Page

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

June 26, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8536

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Santa Monica Community College District CC19385

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Santa Monica Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D T Bramwell

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS input ___/___/___

Program **267**

LABEL HERE

Claimant Identification Number: CC19385

(02) Claimant Name: Santa Monica Community College District
County of Location: Los Angeles
Street Address or P.O. Box: 1900 Pico Blvd
City: Santa Monica | State: CA | Zip Code: 90405-1628

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,291,585
Less: 10% Late Penalty		(14) $ 129,158
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 1,162,426
Due from State	(08)	(17) $ 1,162,426
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	47,573
(23) EFCW-1, (04)(A)(1)(b)(f)	2,947
(24) EFCW-1, (04)(A)(2)(a)(f)	865,435
(25) EFCW-1, (04)(B)(1)(a)(f)	41,063
(26) EFCW-1, (04)(B)(1)(b)(f)	8,625
(27) EFCW-1, (04)(B)(2)(a)(f)	73,633
(28) EFCW-1, (04)(B)(2)(b)(f)	163,900
(29) EFCW-1, (04)(B)(2)(c)(f)	3,310
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	413,221
(32) EFCW-1, (09)	71,016
(33) EFCW-1, (10)	257,106
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 6-15-07

Randall Lawson
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim
Kbp Sixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

(01) Claimant: Santa Monica Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 47,572.54	$ -	$ -	$ -	$ -	$ 47,572.54
b. Staff training (One time per employee)	$ 2,946.59	$ -	$ -	$ -	$ -	$ 2,946.59
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 865,434.80	$ -	$ -	$ -	$ -	$ 865,434.80
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. [illegible]ring district policies & procedures [illegible] IV.B.	$ 41,063.25	$ -	$ -	$ -	$ -	$ 41,063.25
b. Staff training (One time per employee)	$ 8,625.15	$ -	$ -	$ -	$ -	$ 8,625.15
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 73,632.97	$ -	$ -	$ -	$ -	$ 73,632.97
b. Waiving student fees	$ 163,900.41	$ -	$ -	$ -	$ -	$ 163,900.41
c. Reporting BOG fee waiver data to CCC	$ 3,309.66	$ -	$ -	$ -	$ -	$ 3,309.66
(05) Total Direct Costs	$ 1,206,485.37	$ -	$ -	$ -	$ -	$ 1,206,485.37

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.25%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 413,221.24
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,619,706.61
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 71,016.00
(10) Less: Enrollment Fee Waiver offsets		$ 257,106.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,291,584.61

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chitgar, Michael	Systems Analyst	$64.09	16.0	$ 1,025.44				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	10.0	$ 783.80				
Cohanne, Jonathan	A & R Clerk II	$34.82	250.0	$ 8,705.00				
Gonzalez, Jamie	Accounting Tech.	$32.36	15.0	$ 485.40				
Kasch, Thomas	Computer Operator	$48.98	15.0	$ 734.70				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Pena, Brian	Program Analyst II	$59.55	500.0	$ 29,775.00				
Prather, George	Director, Auxilary Services	$68.60	3.0	$ 205.80				
Remonde, Lucita	Accountant	$44.42	0.3	$ 13.33				
Reyes, Arnulfo	Program Analyst III	$56.14	100.0	$ 5,814.00				
(OE	Total [X] Subtotal [ ]			$ 47,572.54	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Arinsberg, Toni	Registration Clerk	$13.54	0.5	$ 6.77				
Casillas, Ruth	Registration Clerk	$14.21	20.0	$ 284.20				
Conanne, Jonathan	A & R Clerk II	$34.82	13.0	$ 452.66				
Delgadillo, Cristina	Registration Clerk	$12.89	8.0	$ 103.12				
Gonzalez, Jamie	Accounting Tech.	$32.36	15.0	$ 485.40				
Kasch, Darlene	Info. Systms Sup. Analyst	$70.65	5.0	$ 353.25				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Myrow, Steve	Director, Fin. Aid	$70.00	10.0	$ 700.00				
Razon, Nadia	Registration Clerk	$12.89	4.0	$ 51.56				
Remonde, Lucita	Accountant	$44.42	0.3	$ 13.33				
Sturgis, Denise	Registration Clerk	$14.93	20.0	$ 298.60				
Walden, Cherie	Registration Clerk	$13.54	10.0	$ 135.40				
Thompson, Raquel	Registration Clerk	$12.89	2.5	$ 32.23				
(C	Total ☒	Subtotal ☐	Page 1 of 1	$ 2,946.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Santa Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records							
Various Enrollment Office Sta Collecting Fees	$28.45	8,682.9	$ 247,028.51				
Calculating total enrollment fee to be collected							
Various Enrollment Office Sta Collecting Fees	$28.45	5,010.7	$ 142,554.42				
Answering student's questions regarding enrollment fee collection							
Various Enrollment Office Sta Collecting Fees	$28.45	9,460.4	$ 269,148.38				
Updating written and computer records for enrollment fee information							
Various Enrollment Office Sta Collecting Fees	$28.45	5,010.7	$ 142,554.42				
ig delinquent enrollment fees, or turning over accounts to collection agencies							
Various Enrollment Office Sta Collecting Fees	$28.45	1,995.3	$ 56,766.29				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Various Enrollment Office Sta Collecting Fees	$28.45	259.5	$ 7,382.78				
(Total ☒ Subtotal ☐		Page 1 of 1	$ 865,434.80	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Chitgar, Michael	Systems Analyst	$64.09	12.0	$ 769.08				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	80.0	$ 6,270.40				
Myrow, Steve	Director, Fin. Aid	$70.00	20.0	$ 1,400.00				
Pena, Brian	Program Analyst II	$59.55	300.0	$ 17,865.00				
Reyes, Arnulfo	Program Analyst III	$58.14	250.0	$ 14,535.00				
Jauregui, Mario	Registration Clerk	$12.89	1.0	$ 12.89				
Yoder, John	Web Svc. Coord.	$52.72	4.0	$ 210.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 41,063.25	$ -	$ -	$ -	$ -

New

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Casillas, Ruth	Registration Clerk	$14.21	100.0	$ 1,421.00				
Dammer, Carolyn	Financial Aid Tech.	$37.46	40.0	$ 1,498.40				
Delgadillo, Cristina	Registration Clerk	$12.89	8.0	$ 103.12				
Fong, Fai	Program Analyst II	$51.44	5.0	$ 257.20				
Myrow, Steve	Director, Fin. Aid	$70.00	10.0	$ 700.00				
Razon, Nadia	Registration Clerk	$12.89	6.0	$ 77.34				
Sturgis, Denise	Registration Clerk	$14.93	160.0	$ 2,388.80				
Walden, Cherie	Registration Clerk	$13.54	160.0	$ 2,166.40				
Jauregui, Mario	Registration Clerk	$12.89	1.0	$ 12.89				
(0	Total ☒ Subtotal ☐		Page 1 of 1	$ 8,625.15	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Carter, Shauna	Fin. Aid Cust. Serv. Clerk	$24.15	420.0	$ 10,143.00				
Casillas, Josh	Custmr. Serv. Clerk	$23.00	240.0	$ 5,520.00				
Castellane, Anthony	Financial Aid Clerk	$23.00	484.0	$ 11,132.00				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	5.0	$ 391.90				
Clark, Kim	Financial Aid Tech.	$35.69	250.0	$ 8,922.50				
Delgadillo, Cristina	Registration Clerk	$12.89	480.0	$ 6,187.20				
Escobar, James	Registration Info. Clerk	$12.89	500.0	$ 6,445.00				
Lee, Jung	Systems Administrator	$55.35	16.0	$ 885.60				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Myrow, Steve	Director, Fin. Aid	$70.00	8.0	$ 560.00				
Nezey, Elizabeth	Financial Aid Tech.	$43.37	250.0	$ 10,842.50				
Pena, Brian	Program Analyst II	$59.55	30.0	$ 1,786.50				
Razon, Nadia	Registration Clerk	$12.89	60.0	$ 773.40				
Sturgis, Denise	Registration Clerk	$14.93	240.0	$ 3,583.20				
Walden, Cherie	Registration Clerk	$13.54	230.0	$ 3,114.20				
Reyes, Arnulfo	Program Analyst III	$58.14	5.0	$ 290.70				
Wu, Frank	DBA/Director	$75.63	40.0	$ 3,025.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 73,632.97	$ -	$ -	$ -	$ -

New 04/05

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities. Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	1,063.4	$ 32,731.45				
Receiving waiver applications							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	1,524.8	$ 46,933.34				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	1,384.4	$ 42,611.83				
Notifying students of additional documentation requirements and how to obtain information							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	145.3	$ 4,472.33				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	1,100.9	$ 33,885.70				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staff Waiving Enrollment Fees	$30.78	106.1	$ 3,265.76				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 163,900.41	$ -	$ -	$ -	$ -

New 07/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Santa Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Chitgar, Michael	Systems Analyst	$64.09	24.0	$ 1,538.16				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	5.0	$ 391.90				
Myrow, Steve	Director, Fin. Aid	$70.00	8.0	$ 560.00				
Pena, Brian	Program Analyst II	$59.55	4.0	$ 238.20				
Reyes, Arnulfo	Program Analyst III	$58.14	10.0	$ 581.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,309.66	$ -	$ -	$ -	$ -

New

Santa Monica Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

)05-2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	0.50	Arinsberg, Toni	Registration Clerk	$13.54	$6.77	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.50	**Arinsberg, Toni Total**			$6.77		
05-06	420.00	Carter, Shauna	Fin, Aid Cust. Serv. Clerk	$24.15	$10,143.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	420.00	**Carter, Shauna Total**			$10,143.00		
05-06	240.00	Casillas, Josh	Custmr. Serv. Clerk	$23.00	$5,520.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	240.00	**Casillas, Josh Total**			$5,520.00		
05-06	20.00	Casillas, Ruth	Registration Clerk	$14.21	$284.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	100.00	Casillas, Ruth	Registration Clerk	$14.21	$1,421.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	120.00	**Casillas, Ruth Total**			$1,705.20		
05-06	484.00	Castellane, Anthony	Financial Aid Clerk	$23.00	$11,132.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and mainta .ec
	484.00	**Castellane, Anthony Total**			$11,132.00		
05-06	16.00	Chitgar, Michael	Systems Analyst	$64.09	$1,025.44	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	12.00	Chitgar, Michael	Systems Analyst	$64.09	$769.08	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	24.00	Chitgar, Michael	Systems Analyst	$64.09	$1,538.16	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	52.00	**Chitgar, Michael Total**			$3,332.68		
05-06	10.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$783.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	80.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$6,270.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$391.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
05-06	5.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$391.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Chong, Jocelyn Total**			$7,838.00		
05-06	250.00	Clark, Kim	Financial Aid Tech.	$35.69	$8,922.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	250.00	**Clark, Kim Total**			$8,922.50		
05-06	250.00	Cohanne, Jonathan	A & R Clerk II	$34.82	$8,705.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	13.00	Cohanne, Jonathan	A & R Clerk II	$34.82	$452.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	263.00	**Cohanne, Jonathan Total**			$9,157.66		
05-06	40.00	Dammer, Carolyn	Financial Aid Tech.	$37.46	$1,498.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	40.00	**Dammer, Carolyn Total**			$1,498.40		
05-06	8.00	Delgadillo, Cristina	Registration Clerk	$12.89	$103.12	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	8.00	Delgadillo, Cristina	Registration Clerk	$12.89	$103.12	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	480.00	Delgadillo, Cristina	Registration Clerk	$12.89	$6,187.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	496.00	**Delgadillo, Cristina Total**			$6,393.44		
05-06	500.00	Escobar, James	Registration Info. Clerk	$12.89	$6,445.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
	500.00	**Escobar, James Total**			$6,445.00		
05-06	5.00	Fong, Fai	Program Analyst II	$51.44	$257.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.00	**Fong, Fai Total**			$257.20		
05-06	15.00	Gonzalez, Jamie	Accounting Tech.	$32.36	$485.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	15.00	Gonzalez, Jamie	Accounting Tech.	$32.36	$485.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	30.00	**Gonzalez, Jamie Total**			$970.80		
05-06	1.00	Jauregui, Mario	Registration Clerk	$12.89	$12.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	1.00	Jauregui, Mario	Registration Clerk	$12.89	$12.89	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Jauregui, Mario Total**			$25.78		
05-06	5.00	Kasch, Darlene	Info. Systms Sup. Analyst	$70.65	$353.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	5.00	**Kasch, Darlene Total**			$353.25		
05-06	15.00	Kasch, Thomas	Computer Operator	$48.98	$734.70	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	15.00	**Kasch, Thomas Total**			$734.70		
05-06	16.00	Lee, Jung	Systems Administrator	$55.35	$885.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin
	16.00	**Lee, Jung Total**			$885.60		
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin
	3.00	**Marchant, Kathleen Total**			$90.21		
05-06	20.00	Myrow, Steve	Director, Fin. Aid	$70.00	$1,400.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.
05-06	10.00	Myrow, Steve	Director, Fin. Aid	$70.00	$700.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	10.00	Myrow, Steve	Director, Fin. Aid	$70.00	$700.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	8.00	Myrow, Steve	Director, Fin. Aid	$70.00	$560.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainin
05-06	8.00	Myrow, Steve	Director, Fin. Aid	$70.00	$560.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	56.00	**Myrow, Steve Total**			$3,920.00		
05-06	250.00	Nezey, Elizabeth	Financial Aid Tech.	$43.37	$10,842.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
	250.00	**Nezey, Elizabeth Total**			$10,842.50		
05-06	500.00	Pena, Brian	Program Analyst II	$59.55	$29,775.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
05-06	300.00	Pena, Brian	Program Analyst II	$59.55	$17,865.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
05-06	30.00	Pena, Brian	Program Analyst II	$59.55	$1,786.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
05-06	4.00	Pena, Brian	Program Analyst II	$59.55	$238.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	834.00	**Pena, Brian Total**			$49,664.70		
05-06	3.00	Prather, George	Director, Auxilary Services	$68.60	$205.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
	3.00	**Prather, George Total**			$205.80		
05-06	4.00	Razon, Nadia	Registration Clerk	$12.89	$51.56	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	6.00	Razon, Nadia	Registration Clerk	$12.89	$77.34	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	60.00	Razon, Nadia	Registration Clerk	$12.89	$773.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
	70.00	**Razon, Nadia Total**			$902.30		
05-06	0.30	Remonde, Lucita	Accountant	$44.42	$13.33	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
05-06	0.30	Remonde, Lucita	Accountant	$44.42	$13.33	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.60	**Remonde, Lucita Total**			$26.66		
05-06	100.00	Reyes, Arnulfo	Program Analyst III	$58.14	$5,814.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
05-06	250.00	Reyes, Arnulfo	Program Analyst III	$58.14	$14,535.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B
05-06	5.00	Reyes, Arnulfo	Program Analyst III	$58.14	$290.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
05-06	10.00	Reyes, Arnulfo	Program Analyst III	$58.14	$581.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	365.00	**Reyes, Arnulfo Total**			$21,221.10		
05-06	20.00	Sturgis, Denise	Registration Clerk	$14.93	$298.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	160.00	Sturgis, Denise	Registration Clerk	$14.93	$2,388.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	240.00	Sturgis, Denise	Registration Clerk	$14.93	$3,583.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining r
	420.00	**Sturgis, Denise Total**			$6,270.60		
05-06	2.50	Thompson, Raquel	Registration Clerk	$12.89	$32.23	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.50	**Thompson, Raquel Total**			$32.23		
05-06	8,682.90	Various Enrollment Office Staf	Collecting Fees	$28.45	$247,028.51	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	5,010.70	Various Enrollment Office Staf	Collecting Fees	$28.45	$142,554.42	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	9,460.40	Various Enrollment Office Staf	Collecting Fees	$28.45	$269,148.38	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,010.70	Various Enrollment Office Staf	Collecting Fees	$28.45	$142,554.42	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1,995.30	Various Enrollment Office Staf	Collecting Fees	$28.45	$56,766.29	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	259.50	Various Enrollment Office Staf	Collecting Fees	$28.45	$7,382.78	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	30,419.50	**Various Enrollment Office Staff Total**			$865,434.80		
05-06	1,063.40	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$32,731.45	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	1,524.80	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$46,933.34	Receiving waiver applications	Waiving student fees
05-06	1,384.40	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$42,611.83	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	145.30	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$4,472.33	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	1,100.90	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$33,885.70	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	106.10	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$3,265.76	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	5,324.90	**Various Financial Office Staff Total**			$163,900.41		
05-06	10.00	Walden, Cherie	Registration Clerk	$13.54	$135.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	160.00	Walden, Cherie	Registration Clerk	$13.54	$2,166.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	230.00	Walden, Cherie	Registration Clerk	$13.54	$3,114.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
	400.00	**Walden, Cherie Total**			$5,416.00		
05-06	40.00	Wu, Frank	DBA/Director	$75.63	$3,025.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining
	40.00	**Wu, Frank Total**			$3,025.20		
05-06	4.00	Yoder, John	Web Svc. Coord.	$52.72	$210.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	4.00	**Yoder, John Total**			$210.88		
	41,231.00	**Grand Total**			$1,206,485.37		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Santa Monica Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$55,077,051		$55,077,051	$560,622	$54,516,429
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,673,824		4,673,824	58,704	4,615,120
Course and Curriculum Development	6020	159,979		159,979	69,021	90,958
Academic/Faculty Senate	6030	594,119		594,119		594,119
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	1,684,173		1,684,173		1,684,173
Library	6120	1,411,115		1,411,115	44,183	1,366,932
Media	6130	1,275,320		1,275,320	355,857	919,463
Museums and Galleries	6140	32,984		32,984		32,984
Academic Information Systems and Technology	6150	1,060,928		1,060,928	337,529	723,399
Other Instructional Support Services	6190	436,661		436,661		436,661
Admissions and Records	6200	2,701,561		2,701,561	27,400	2,674,161
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	458,040		458,040	2,819	455,221
Matriculation and Student Assessment	6320	972,103		972,103	153,581	818,522
Transfer Programs	6330	3,414,303		3,414,303	16,538	3,397,765
Career Guidance	6340					
Other Student Counseling and Guidance	6390	1,653,512		1,653,512	3,779	1,649,733
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,204,529		1,204,529	26,812	1,177,717
Subtotal		$76,810,202	$0	$76,810,202	$1,656,845	$75,153,357

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Santa Monica Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,250,251	$387,004	$863,247	$16,416	$846,831
Health Services	6440	789,523		789,523	9,709	779,814
Student Personnel Admin.	6450	250,010		250,010		250,010
Financial Aid Administration	6460	2,202,866		2,202,866	146,301	2,056,565
Job Placement Services	6470	540,768		540,768	2,565	538,203
Veterans Services	6480					
Miscellaneous Student Services	6490	3,055,659		3,055,659	22,318	3,033,341
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,696,824		1,696,824	1,696,824	0
Custodial Services	6530	2,893,821		2,893,821	2,893,821	0
Grounds Maintenance and Repairs	6550	928,479		928,479	928,479	0
Utilities	6570	2,205,827		2,205,827	2,205,827	0
Other	6590	146,985		146,985	146,985	0
Planning, Policy Making, and Coordination	6600	4,782,428		4,782,428	4,782,428	0
General Inst. Support Services	6700					
Community Relations	6710	879,301		879,301	879,301	0
Fiscal Operations	6720	2,525,715		2,525,715	2,525,715	0
Human Resources Management	6730	2,091,604		2,091,604	2,091,604	0
Noninstructional Staff Benefits & Incentives	6740	729,889		729,889	729,889	0
Staff Development	6750	19,429		19,429	19,429	0
Staff Diversity	6760	27,050		27,050	27,050	0
Logistical Services	6770	4,998,700		4,998,700	4,998,700	0
Management Information Systems	6780	2,404,281		2,404,281	2,404,281	0
Subtotal		$111,229,612	$387,004	$110,842,608	$28,184,487	$82,658,121

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Santa Monica Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,349,677		1,349,677	1,349,677	0
Community Services and Economic Development	6800					
Community Recreation	6810	12,141		12,141		12,141
Community Service Classes	6820	37,741		37,741		37,741
Community Use of Facilities	6830	450,824		450,824	4,653	446,171
Economic Development	6840					
Other Community Services & Economic Development	6890	111,610		111,610		111,610
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	218,116		218,116		218,116
Farm Operations	6930					
Food Services	6940					
Parking	6950	3,221,057		3,221,057	1,514,539	1,706,518
Student and Co-curricular Activities	6960	772,591		772,591	10,166	762,425
Student Housing	6970					
Other	6990	518,913		518,913	2,844	516,069
Auxiliary Operations	7000					
Contract Education	7010	539,084		539,084	17,686	521,398
Other Auxiliary Operations	7090	5,085,411		5,085,411	25,862	5,059,549
Physical Property Acquisitions	7100	414,725		414,725	414,725	0
(05) Total		$123,961,502	$387,004	$123,574,498	$31,524,639	$92,049,859
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.25%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	3,120,571	17,456	98,069	11,441		3,247,537
Business and Management	0500	2,596,487	3,003	1,720	2,808		2,604,018
Communications	0600	1,095,958		3,785	32,934		1,132,677
Computer and Information Science	0700	1,907,513	14,090	31,808	78,118		2,031,529
Education	0800	3,010,655	12,343	15,321	1,762		3,040,081
Engineering and Related Industrial Tech.	0900	124,323	156,178	17,773	25,366		323,640
Fine and Applied Arts	1000	8,112,942	106,543	90,484	162,613		8,472,582
Foreign Language	1100	2,438,746	1,077	2,378			2,442,201
Health	1200	985,830	84,970	11,740	46,587		1,129,127
Consumer Education and Home Economics	1300	1,275,492	162,678	191,601	43,656		1,673,427
Law	1400	7,765					7,765
Humanities (Letters)	1500	7,863,162	655	4,702			7,868,519
Library Science	1600	57,389					57,389
Mathematics	1700	5,112,392	123	3,651	655		5,116,821
Military Studies	1800						
Physical Sciences	1900	3,708,656	68,771	49,831	11,362		3,838,620
Psychology	2000	1,725,933	523	1,716			1,728,172
Public Affairs and Services	2100	37,739					37,739
Social Sciences	2200	4,793,448		14,882	2,113		4,810,443
Commercial Services	3000	828,346	78,147	27,164	139,011		1,072,668
Interdisciplinary Studies	4900	3,641,912	98,128	74,606	2,196		3,816,842
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	625,254					625,254
Subtotal - Instructional Activities	**599**	53,070,513	804,685	641,231	560,622		55,077,051

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,514,849	100,271	58,704		4,673,824
Course and Curriculum Development	6020		26,183	64,775	69,021		159,979
Academic/Faculty Senate	6030		588,881	5,238			594,119
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,129,913	170,284	127,725		5,427,922
Instructional Support Services (6100)							
Learning Center	6110	1,537,151	135,751	11,271			1,684,173
Library	6120		1,280,371	86,561	44,183		1,411,115
Media	6130		829,654	89,809	355,857		1,275,320
Museums and Galleries	6140		32,984				32,984
Academic Information Systems and Tech.	6150		613,695	109,704	337,529		1,060,928
Other Instructional Support Services	6190		165,351	271,310			436,661
Subtotal - Instructional Support Services	**6100**	1,537,151	3,057,806	568,655	737,569		5,901,181
Admissions and Records	**6200**		2,149,367	524,794	27,400		2,701,561
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		448,866	6,355	2,819		458,040
Matriculation and Student Assessment	6320		614,555	203,967	153,581		972,103
Transfer Programs	6330		3,373,735	24,030	16,538		3,414,303
Career Guidance	6340						
Other Student Counseling and Guidance	6390		1,612,171	37,562	3,779		1,653,512
Subtotal - Student Counseling and Guidance	**6300**		6,049,327	271,914	176,717		6,497,958

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,018,802	158,915	26,812		1,204,529
Extended Opportunity Prgms. & Services (EOPS)	6430		817,609	29,222	16,416	387,004	1,250,251
Health Services	6440		774,033	5,781	9,709		789,523
Student Personnel Administration	6450		235,774	14,236			250,010
Financial Aid Administration	6460		1,585,396	471,169	146,301		2,202,866
Job Placement Services	6470		347,662	190,541	2,565		540,768
Veterans Services	6480						
Miscellaneous Student Services	6490		1,330,795	1,702,546	22,318		3,055,659
Subtotal - Other Student Services	**6400**		6,110,071	2,572,410	224,121	387,004	9,293,606
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,291,488	384,781	20,555		1,696,824
Custodial Services	6530		2,720,478	172,143	1,200		2,893,821
Grounds Maintenance and Repairs	6550		689,636	237,643	1,200		928,479
Utilities	6570			2,205,827			2,205,827
Other Operation and Maintenance of Plant	6590		132,013	11,338	3,634		146,985
Subtotal - Operation and Maintenance of Plant	**6500**		4,833,615	3,011,732	26,589		7,871,936
Planning, Policymaking, and Coordination	**6600**		2,909,693	1,847,529	25,206		4,782,428

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		809,571	68,791	939		879,301
Fiscal Operations	6720		1,606,034	890,729	28,952		2,525,715
Human Resources Management	6730		1,553,655	533,569	4,380		2,091,604
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		729,889				729,889
Staff Development	6750			19,429			19,429
Staff Diversity	6760			27,050			27,050
Logistical Services	6770		3,611,760	1,358,835	28,105		4,998,700
Management Information Systems	6780		1,828,388	467,672	108,221		2,404,281
Other General Institutional Support Services	6790		375,850	973,827			1,349,677
Subtotal - General Institutional Support Services	6700		10,515,147	4,339,902	170,597		15,025,646
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		7,258	4,883			12,141
Community Service Classes	6820		37,741				37,741
Community Use Facilities	6830		422,696	23,475	4,653		450,824
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		110,447	1,163			111,610
Subtotal - Community Services	6800		578,142	29,521	4,653		612,316

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2004-05

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		67,631	150,485			218,116
Farm Operations	6930						
Food Services	6940						
Parking	6950		1,628,316	78,202	1,514,539		3,221,057
Student and Co-curricular Activities	6960		698,805	63,620	10,166		772,591
Student Housing	6970						
Other Ancillary Services	6990		493,264	22,805	2,844		518,913
Subtotal - Ancillary Services	6900		2,888,016	315,112	1,527,549		4,730,677
Auxiliary Operations (7000)							
Contract Education	7010	366,442	98,121	56,835	17,686		539,084
Other Auxiliary Operations	7090		1,957,438	3,102,111	25,862		5,085,411
Subtotal - Auxiliary Operations	7000	366,442	2,055,559	3,158,946	43,548		5,624,495
Physical Property and Related Acquisitions (7100)	7100		34,466	375,451	4,808		414,725
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					51,683	51,683
Student Aid	7320					700,747	700,747
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	7300					752,430	752,430
TOTAL EXPENDITURES and OTHER OUTGO	391	54,974,106	47,115,807	17,827,481	3,657,104	1,139,434	124,713,932

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	77,757
Avg. time p/account	6.7
Total Time (in minutes)	520972
Per Hour	60
Hours Worked **(** Activity 11)**	**8682.9**
***EFC 2**	60,128
Avg. time p/student	5.0
Total Time (in minutes)	300640
Per Hour	60
Hours Worked **(** Activity 12)**	**5010.7**
***EFC 1**	77,757
Avg. time p/question	7.3
Total Time (in minutes)	567626
Per Hour	60
Hours Worked **(** Activity 13)**	**9460.4**
***EFC 2**	60,128
Avg. time p/file	5.0
Total Time (in minutes)	300640
Per Hour	60
Hours Worked **(** Activity 14)**	**5010.7**
***EFC 4**	3,289
Avg. time p/account	36.4
Total Time (in minutes)	119720
Per Hour	60
Hours Worked **(** Activity 15)**	**1995.3**
***EFC 5**	3,244
Avg. time p/student	4.8
Total Time (in minutes)	15571
Per Hour	60
Hours Worked **(** Activity 16)**	**259.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	12,038
Avg. time p/question	5.3
Total Time (in minutes)	63801
Per Hour	60
Hours Worked (** **Activity 21**)	**1063.4**
***EFW 6**	12,038
Avg. time p/application	7.6
Total Time (in minutes)	91489
Per Hour	60
Hours Worked (** **Activity 22**)	**1524.8**
***EFW 6**	12,038
Avg. time p/evaluation	6.9
Total Time (in minutes)	83062
Per Hour	60
Hours Worked (** **Activity 23**)	**1384.4**
***EFW 8**	1,384
Avg. time p/application	6.3
Total Time (in minutes)	8719
Per Hour	60
Hours Worked (** **Activity 24**)	**145.3**
***EFW 7**	10,654
Avg. time p/application	6.2
Total Time (in minutes)	66055
Per Hour	60
Hours Worked (** **Activity 25**)	**1100.9**
***EFW 8**	1,384
Avg. time p/application	4.6
Total Time (in minutes)	6366
Per Hour	60
Hours Worked (** **Activity 26**)	**106.1**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Arnisberg, Toni	Registration Clerk	10	10	9	8	10	5
Brideau, Rachel	A&R Clerk II	10	5	12	7		
Casillas, Ruth	Registration Clerk	3	4	2	3		3
Cohanne, Jonathan	A&R Clerk II	2	1.5	0.5		3.5	
Delgadillo, Cristina	Registration Clerk	5	3	4	3	4	3
Elliot, Kiersten	Asst. Dean Enrolment Srvcs	7	4	4	3	3	5
Franco, Sandra	A&R Clerk II	5	3	6	2		4
Garcia, Renay	A&R Clerk II	5	3	6	3		5
Gonzalez, Jaime	Accounting Technician					45	
Hoffman, Thelma	A&R Clerk III	10	10	10	5	10	5
Jauregi, Mario	Registration Clerk	2	5	2	5		1
Jones, Candee	A&R Clerk	3	4	7	2		
Marchant, Kathleen	A&R Clerk	1	1	5	5	1	1
Meza, Ofelia	Department Secretary					240	
Pant, Poonam	A&R Clerk II	5	5	5	5	5	5
Prather, George	Director Auxillary Services			30			
Price, James	A&R Clerk II			5			2
Ramos, Angelita	Adminstrative Assistant	5	3	5	3	2	2
Razon, Nadia	Registration Clerk	10	5	3	5	5	10
Remonde, Lucita	Accounting Specialist					30	
Reza, Linda	Evening Coordinator	10	5	10	5	15	5
Romo, Alicia	Adminstrative Assistant	10	3	17	10	12	
Sasaki, Karen	A&R Clerk II	10	5	7	5		
Sturgis, Denise	Registration Clerk	10	5	5	5	5	5
Siefert, Alexandra	Accounting Specialist II					240	
Thompson, Raquel	Registration Clerk	5	10	4	5	15	10
Walden, Cherie	Registration Clerk	10	10	10	10	10	10
Young, Chris	A&R Clerk II	10	5	7	5		
Average		**6.7**	**5.0**	**7.3**	**5.0**	**36.4**	**4.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
PHRs

Purpose: To summarize PHR's into an average PHR for Various Enrollment Office Staff performing Fee Collection Functions.
Source: EFCW 1.7-2 and PHR schedule from client. Initial year claim 98-99 through 05-06.
Findings:

		Productive Hourly Rates							
Staff	Title	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Arnisberg, Toni	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Brideau, Rachel	A&R Clerk II	$27.77	$28.76	$30.23	$32.98	$32.98	$32.98	$33.64	$34.82
Casillas, Ruth	Registration Clerk	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Cohanne, Jonathan	A&R Clerk II	$26.43	$27.39	$28.80	$29.91	$31.40	$31.40	$33.64	$34.82
Delgadillo, Cristina	Registration Clerk							$12.21	$12.89
Elliot, Kiersten	Asst. Dean Enrolment Srvcs								
Franco, Sandra	A&R Clerk II				$12.21	$12.82	$12.82	$22.76	$24.74
Garcia, Renay	A&R Clerk II	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13	$23.90	$25.97
Gonzalez, Jaime	Accounting Technician					$26.48	$27.81	$29.77	$32.36
Hoffman, Thelma	A&R Clerk III	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Jauregi, Mario	Registration Clerk								$12.89
Jones, Candee	A&R Clerk	$22.80	$24.84	$27.43	$28.48	$28.48	$28.48	$29.06	$31.57
Marchant, Kathleen	A&R Clerk	$23.95	$24.84	$26.12	$28.48	$28.48	$28.48	$29.06	$30.07
Meza, Ofelia	Department Secretary								
Pant, Poonam	A&R Clerk II	$22.80	$24.84	$26.12	$27.13	$27.13	$25.84	$28.48	$33.15
Prather, George	Director Auxillary Services								$68.60
Price, James	A&R Clerk II								
Ramos, Angelita	Adminstrative Assistant	$22.24	$23.37	$26.77	$29.60	$31.06	$31.06	$31.69	$32.80
Razon, Nadia	Registration Clerk							$12.21	$12.89
Remonde, Lucita	Accounting Specialist	$25.80	$28.06	$29.52	$40.08	$40.08	$40.08	$42.92	$44.42
Reza, Linda	Evening Coordinator	$28.46	$29.47	$30.99	$32.19	$32.19	$33.80	$38.00	$39.33
Romo, Alicia	Adminstrative Assistant	$34.36	$35.04	$37.50	$38.95	$38.95	$40.90	$41.71	$42.37
Sasaki, Karen	A&R Clerk II	$28.12	$28.12	$32.13	$33.38	$33.38	$33.38	$34.05	$36.98
Sturgis, Denise	Registration Clerk	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Siefert, Alexandra	Accounting Specialist II								
Thompson, Raquel	Registration Clerk							$12.21	$12.89
Walden, Cherie	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Young, Chris	A&R Clerk II						$23.43	$25.10	$27.27
Average		**$23.13**	**$24.14**	**$25.97**	**$25.41**	**$25.74**	**$25.84**	**$25.82**	**$28.45**

Conclusion: Findings go forward to EFCW-2's.

Schedule 3
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Arinsberg, Toni	Registration Clerk	10	12	15	10	10	10
Brideau, Rachel	A&R Clerk II	5		10	5	10	2
Carr, Sherita	Counselor	30	20	20		10	
Carter, Shauna	Financial Aid Ctmr. Srvc. Clerk	4	5	2	6	3	4
Castellane, Anthony	Financial Aid Clerk	3	4	2	7	3	5
Casillas, Cesar	Grants & Work Study Coord.	5	8	2	2	5	1
Casillas, Josh	Customer Service Clerk	3	7	4	5	7	2
Casillas, Ruth	Registration Clerk	5	5	4	3	2	3
Chang, Sarah	Counselor, Financial Aid	3	4	5	3	5	5
Clark, Kim	Financial Aid Technician	3	5	5		5	5
Cohanne, Jonathan	A&R Clerk II	2					
Dammer, Carolyn	Financial Aid Technician	3	2	2	3	3	2
Delgadillo, Cristina	Registration Clerk	2	3	2	1	3	2
Elliot, Kiersten	Asst. Dean Enrolment Srvcs	7	4	4	3	3	5
Escobar, James	Registration Information Clerk	3	6	3	4	8	4
Franco, Sandra	A&R Clerk II	5	5	5	3	3	5
Garcia, Renay	A&R Clerk II	5	5	4	5	5	6
Gomez, Clara	Financial Aid Technician	5	6	4	9	3	4
Hoffman, Thelma	A&R Clerk III	10	10	10	10	10	10
Jauregi, Mario	Registration Clerk	10	5	5	2	2	
Jones, Candee	A&R Clerk II	3					
Le, Tri	Financial Aid Technician	5	5	3	10	2	3
Marchant, Kathleen	A&R Clerk	1					
Murphy, Diane	Registration Clerk	6	30	30	***2-4	30	***2-4
Myrow, Steven	Director, Financial Aid	1	1	1	1	1	1
Neal, Stacy	Asst. Director Financial Aid	5	5	3	3	3	5
Nezey, Elizabeth	Financial Aid Technician	3	7	3	7	7	2
Pant, Poonam	A&R Clerk II	2					
Price, James	A&R Clerk II	2					
Ramos, Angelita	Adminstrative Assistant	3					
Razon, Nadia	Registration Clerk	5	10	10	10	5	5
Reza, Linda	Evening Coordinator	10	10	10	15	10	10
Romo, Alicia	Adminstrative Assistant	2	2				
Sasaki, Karen	A&R Clerk II	5					
Sturgis, Denise	Registration Clerk	5	15	15	10	5	5
Thompson, Raquel	Registration Clerk	5	10	10	15	10	5
Walden, Cherie	Registration Clerk	10	10	10	10	10	10
Willoughby, Debra	Financial Aid Ctmr. Srvc. Clerk	4	6	4	8	3	4
Young, Chris	A&R Clerk II	5					
Average		**5.3**	**7.6**	**6.9**	**6.3**	**6.2**	**4.6**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**

EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student app in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into distric Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing writt notification to student of final eligibility status.

***Average not used, employee responed in weeks, not minutes.

Schedule 3A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
PHRs

Purpose: To summarize PHR's into an average PHR for Various Financial Office Staff performing Fee Waiver Functions.
Source: EFCW 1.7-3 and PHR schedule from client. Initial year claim 98-99 through 05-06.
Findings:

		Productive Hourly Rates							
Staff	**Title**	**98-9**	**99-0**	**00-1**	**01-2**	**02-3**	**03-4**	**04-5**	**05-6**
Arinsberg, Toni	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Brideau, Rachel	A&R Clerk II	$27.77	$28.76	$30.23	$32.98	$32.98	$32.98	$33.64	$34.82
Carr, Sherita	Counselor						$55.36	$56.90	$57.96
Carter, Shauna	Financial Aid Ctmr. Srvc. Clerk								$24.15
Castellane, Anthony	Financial Aid Clerk						$17.14	$17.14	$23.00
Casillas, Cesar	Grants & Work Study Coord.		$18.99	$20.97	$22.88	$24.02	$25.22	$28.36	$30.81
Casillas, Josh	Customer Service Clerk	$11.82	$11.82	$12.96	$13.46	$14.13	$20.75	$22.22	$23.00
Casillas, Ruth	Registration Clerk	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Chang, Sarah	Counselor, Financial Aid	$44.70	$50.12	$55.15	$58.31	$59.48	$59.48	$60.55	$63.30
Clark, Kim	Financial Aid Technician	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Cohanne, Jonathan	A&R Clerk II	$26.43	$27.39	$28.80	$29.91	$31.40	$31.40	$33.64	$34.82
Dammer, Carolyn	Financial Aid Technician	$28.91	$30.98	$34.84	$36.18	$36.18			$37.46
Delgadillo, Cristina	Registration Clerk							$12.21	$12.89
Elliot, Kiersten	Asst. Dean Enrolment Srvcs								
Escobar, James	Registration Information Clerk							$12.21	$12.89
Franco, Sandra	A&R Clerk II				$12.21	$12.82	$12.82	$22.76	$24.74
Garcia, Renay	A&R Clerk II	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13	$23.90	$25.97
Gomez, Clara	Financial Aid Technician	$31.41	$32.49	$34.17	$35.49	$35.49	$35.49	$36.20	$43.57
Hoffman, Thelma	A&R Clerk III	$28.46	$29.47	$30.99	$33.80	$33.80	$33.80	$34.48	$35.69
Jauregi, Mario	Registration Clerk								$12.89
Jones, Candee	A&R Clerk II	$22.80	$24.84	$27.43	$28.48	$28.48	$28.48	$29.06	$31.57
Le, Tri	Financial Aid Technician	$31.41	$32.49	$34.17	$35.49	$37.27	$37.27	$38.01	$39.54
Marchant, Kathleen	A&R Clerk	$23.95	$24.84	$26.12	$28.48	$28.48	$28.48	$29.06	$30.07
Murphy, Diane	Registration Clerk								
Myrow, Steven	Director, Financial Aid							$67.64	$70.00
Neal, Stacy	Asst. Director Financial Aid						$41.87	$44.85	$48.74
Nezey, Elizabeth	Financial Aid Technician	$32.99	$35.82	$37.67	$39.12	$39.12	$39.12	$41.90	$43.37
Pant, Poonam	A&R Clerk II	$22.80	$24.84	$26.12	$27.13	$27.13	$25.84	$28.48	$33.15
Price, James	A&R Clerk II								
Ramos, Angelita	Adminstrative Assistant	$22.24	$23.37	$26.77	$29.60	$31.06	$31.06	$31.69	$32.80
Razon, Nadia	Registration Clerk							$12.21	$12.89
Reza, Linda	Evening Coordinator	$28.46	$29.47	$30.99	$32.19	$32.19	$33.80	$38.00	$39.33
Romo, Alicia	Adminstrative Assistant	$34.36	$35.04	$37.50	$38.95	$38.95	$40.90	$41.71	$42.37
Sasaki, Karen	A&R Clerk II	$28.12	$28.12	$32.13	$33.38	$33.38	$33.38	$34.05	$36.98
Sturgis, Denise	Registration Clerk	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Thompson, Raquel	Registration Clerk							$12.21	$12.89
Walden, Cherie	Registration Clerk				$12.21	$12.82	$12.82	$12.82	$13.54
Willoughby, Debra	Financial Aid Ctmr. Srvc. Clerk								$17.27
Young, Chris	A&R Clerk II						$23.43	$25.10	$27.27
Average		**$25.39**	**$26.29**	**$28.33**	**$27.78**	**$28.17**	**$29.21**	**$29.87**	**$30.78**

Conclusion: Findings go forward to EFCW-2's.

Schedule 4
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: Schedules 4A, 4B, 4C, 4D and "Fin. Aid students served vs. BOGG recipents" report from client attached to the EFCW 1.8-3.
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1. (Sch. 4A)	Enrolled Students	73,219	76,813	78,808	82,493	82,196	73,008	77,211	77,757
EFC 2	1.8-1 2. (Sch. 4B)	Paid Enrollment fees	62,829	69,066	70,311	73,207	73,336	64,744	66,028	60,128
EFC 3	1.8-1 3. (Fin. Aid students served vs. BOGG recipients)	Exempted from enrollment fees (BOGG, etc.)	X	7,819	8,192	8,552	8,324	7,848	9,662	10,654
EFC 4	1.8-2 1. (Sch. 4C)	Delinquencies collections	222	219	327	280	268	690	1,561	3,289
EFC 5	1.8-2 2. (Sch. 4D)	Refunds	3,122	2,880	3,430	3,788	3,981	4,225	4,538	3,244
EFW 6	1.8-3 1. (Fin. Aid students served vs. BOGG recipients)	Waivers Requested	X	11,971	12,176	13,806	14,419	14,683	13,543	12,038
EFW 7	1.8-3 2. (Fin. Aid students served vs. BOGG recipients)	Waivers Approved	X	7,819	8,192	8,552	8,324	7,848	9,662	10,654
EFW 8	1.8-3 (1-2) (Fin. Aid students served vs. BOGG recipients)	Waivers Denied	X	4,152	3,984	5,254	6,095	6,835	3,881	1,384

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4A
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	13,531	14,086	14,177	14,455	14,581	14,725	13,888	13,428
	BFAP	2	25,279	26,747	27,101	28,257	28,271	23,631	26,569	27,383
	BFAP	2	10,001	10,466	10,960	12,502	12,557	11,404	11,545	11,564
	BFAP	3	24,408	25,514	26,570	27,279	26,787	23,248	25,209	25,382
EFC 1	1.8-1 1.	Enrolled Students	73,219	76,813	78,808	82,493	82,196	73,008	77,211	77,757

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4B
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals 98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	12,947	13,820	14,050	14,289	14,726	14,817	13,701	11,789
	BFAP	2	21,384	23,762	24,008	24,892	24,779	20,664	22,860	21,353
	BFAP	2	8,589	9,612	9,884	11,031	11,224	10,024	9,552	8,777
	BFAP	3	19,909	21,872	22,369	22,995	22,607	19,239	19,915	18,209
EFC 2	1.8-1	2. Paid Enrollment fees	62,829	69,066	70,311	73,207	73,336	64,744	66,028	60,128

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4C
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: BFAP report from client attached to the EFCW 1.8-1. Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	BFAP	2	18	23	30	27	25	34	70	340
	BFAP	2	71	55	88	87	97	290	850	1,114
	BFAP	2	24	10	13	12	13	19	12	280
	BFAP	3	109	131	196	154	133	347	629	1,555
EFC 4	1.8-2	1. Delinquencies collections	222	219	327	280	268	690	1,561	3,289

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4D
Santa Monica Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: "Students paid fees and then refunded because a BOGG waiver was later issued" report from client attached to the EFCW 1.8-2.
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source	Pg. #	Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
	fa_wv_ref.txt	1	822	636	820	883	1,231	1,279	1,282	985
	fa_wv_ref.txt	1	1,709	1,413	1,692	1,779	1,739	1,643	2,035	1,513
	fa_wv_ref.txt	1	192	262	308	426	439	566	499	328
	fa_wv_ref.txt	1	399	569	610	700	572	737	722	418
EFC 5	1.8-2 2.	Refunds	3,122	2,880	3,430	3,788	3,981	4,225	4,538	3,244

Conclusion: Findings will go forward to the Schedule 4.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

fa_wv_ref

Students paid fees and then refunded because a BOGG waiver was later issued

Stu-Head-Count	Sem-Code	Semester
974	19933	Fall 1993
183	19940	Winter 1994
330	19941	Spring 1994
670	19942	Summer 1994
1033	19943	Fall 1994
259	19950	Winter 1995
445	19951	Spring 1995
880	19952	Summer 1995
1422	19953	Fall 1995
244	19960	Winter 1996
648	19961	Spring 1996
1142	19962	summer 1996
1517	19963	Fall 1996
328	19970	Winter 1997
699	19971	Spring 1997
1093	19972	Summer 1997
1379	19973	Fall 1997
392	19980	WINTER 1998
680	19981	SPRING 1998
822	19982	Summer 1998
1709	19983	Fall 1998
192	19990	Winter 1999
399	19991	Spring 1999
636	19992	Summer 1999
1413	19993	Fall 1999
262	20000	Winter 2000
569	20001	Spring 2000
820	20002	Summer 2000
1692	20003	Fall 2000
308	20010	Winter 2001
610	20011	Spring 2001
883	20012	Summer 2001
1779	20013	Fall 2001
426	20020	Winter 2002
700	20021	Spring 2002
1231	20022	Summer 2002
1739	20023	Fall 2002
439	20030	Winter 2003
572	20031	Spring 2003
1279	20032	Summer 2003
1643	20033	Fall 2003
566	20040	Winter 2004
737	20041	Spring 2004
1282	20042	Summer 2004
2035	20043	Fall 2004
499	20050	Winter 2005
722	20051	Spring 2005
985	20052	Summer 2005
1513	20053	Fall 2005
328	20060	Winter 2006
418	20061	Spring 2006

fa_wv_serv_rec

Fin. Aid students served vs. BOGG recipents

	# of Served	# of recieved
98-99	12313	8733
99-00	11971	7819
00-01	12176	8192
01-02	13806	8552
02-03	14419	8324
03-04	14683	7848
04-05	13543	9662
05-06	12038	10654

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Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2005 Summer Term

Data Current As Of May 01, 2012 01:21:29

Total Headcount	17,219

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Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2005 Fall Term

Data Current As Of May 01, 2012 01:21:37

Total Headcount	31,798

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Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2006 Winter Intersession

Data Current As Of May 01, 2012 01:21:47

Total Headcount	14,029

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Tuesday, May 1, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Santa Monica
For 2006 Spring Semester

Data Current As Of May 01, 2012 01:21:56

Total Headcount	30,297

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica C.C

Toni M. Arinsberg — Employee Name
Registration Clerk — Exact Position Title

SMC/Admissions/Main — College/Department/Location
310-434-8215 — Telephone #
12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	0	.5	.5	.5	.5
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.								
TOTALS:	0	0	0	0	.5	.5	.5	.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Toni Arinsberg — Date 4-27-06

If you have any questions, please contact Toni Arinsberg, at 310-434-8215

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Shauna Carter — Employee Name

Fin Aid Customer Service Clerk — Exact Position Title

Fin Aid — College/Department/Location

(310) 434-8344 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						280	400	48-0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shauna Carter Date 4/21/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

JOSH CASILLAS — CUSTMR. SERV. CLRK.
Employee Name — Exact Position Title

SANTA MONICA/FIN. AID. — 310/434-4160 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						240	240	240
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						240	240	240

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 04/21/06

If you have any questions, please contact _____, at _____

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[signature] 04/21/06

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: _____

Ruth Casillas — Employee Name

Registration Clerk — Exact Position Title

SMC Admiss/Records — College/Department/Location

310)434-4922 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 A. Enrollment Collection Process:								
Code 1 B. Enrollment Waiver Process:								
Code 2 A. Enrollment Collection Process:	15	14	20	20			15	20
Code 2 B. Enrollment Waiver Process:	110	100	60	60			70	100
Code 3 Record Retention:								
Code 4 State Reporting:								
TOTALS:	125	114	80	80			85	120

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Anthony Castellanos — Employee Name

Financial Aid Clerk — Exact Position Title

SMC/Financial Aid — College/Department/Location

434-4344 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 A. Enrollment Collection Process:								0
Code 1 B. Enrollment Waiver Process:								
Code 2 A. Enrollment Collection Process:								
Code 2 B. Enrollment Waiver Process:								
X Code 3 Record Retention:						250	475	484
Code 4 State Reporting:								
TOTALS:								

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 4/24/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Michael Chitgar — Employee Name

Systems Analyst — Exact Position Title

SMC / M.I.S. — College/Department/Location

434-4548 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	40	48	40	32	40	26	32	16
B. Enrollment Waiver Process:	32	40	30	28	30	24	22	12
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	34	30	24	32	24	30	24
TOTALS:	104	112	100	84	92	74	82	52

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of eta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature Michael Chitgar Date 4/26/06

you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Jocelyn Chong — Employee Name

Dean, Info. Tech. — Exact Position Title

Information Technology K4547 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	200	200	200	100	50	50	10	10
B. Enrollment Waiver Process:	200	200	50	50	50	50	100	40
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	5	5	5	5	5	5	5	5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	5	5	5	5	5	5	5	5
TOTALS:	410	410	260	160	110	110	120	60

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ate for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or iformation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature Jocelyn Chong Date 4/27/06

you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica Coll.

Kim P. Clark — Employee Name

Fin. Aid Tech. — Exact Position Title

Santa Monica — College/Department/Location

(310) 434-4924 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

600 600 250 250 250 250 250 250

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 600 600 250 250 250 250 250 250

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kim P. Clark Kim P. Clark Date 5/3/06 5/3/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Jonathan Cohanne (310) Admissions & Records Clerk II
Employee Name Exact Position Title

Admissions & Record 434-4469 (12mo/11mo/10mo/hrly)
College/Department/Location Telephone # Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	508	480	435	490	410	380	330	250
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	25	23	23	19	20	15	15	13
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	48	45	44	5	4	0	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	581	548	502	514	434	395	345	263

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jonathan Cohanne Date 4/25/06

If you have any questions, please contact Jonathan Cohanne, at 310-434-4469

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Carolyn Demm — Employee Name

Fin Aid Tech — Exact Position Title

Financial Aid — College/Department/Location

(310) 434-4123 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in ~~hours~~							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:						—	—	—
B. Enrollment Waiver Process:						0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:						—	—	—
B. Enrollment Waiver Process:						20	40	40
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						100	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.						0	0	0
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 5-4-6

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Cristina Delgadillo — Registration Clerk
Employee Name — Exact Position Title

SMC/ADMISSIONS/MAIN — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							~~0~~	~~0~~
B. Enrollment Waiver Process:							~~0~~	~~0~~
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							5	5
B. Enrollment Waiver Process:							6	8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							190	480
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.							~~0~~	~~0~~
TOTALS:							201	496

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cristina Delgadillo — Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

JAMES W. ESCOBAR — Employee Name

REGISTRATION INFO CLERK — Exact Position Title

SMC/FIN AID/1400 PICO BLVD — College/Department/Location

(310) 434 4343 — Telephone #

12mo/11mo/10mo/nriv — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

____ ____ ____ ____ ____ ____ 300 500HRS

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: ____ ____ ____ ____ ____ ____ ____ ____

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE INK

Employee Signature James W. Escobar Date 04/21/06

If you have any questions, please contact JAMES, at (310) 434-4343

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James W. Escobar 05/10/06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Lai Fong — Programmer Analyst II
Employee Name — Exact Position Title

MIS — x4089 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:		40	5	5	5	5	5	5
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:		40	5	5	5	5	5	5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ita for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nployee Signature for Fai (on leave) Date 4/27/06

ou have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Jaime Gonzalez — Employee Name

Accounting Technician — Exact Position Title

Auxiliary Services — College/Department/Location

(310)434-4675 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:					15	15	15	15
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:					15	15	15	15
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:					30	30	30	36

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jaime Gonzalez Date 5-1-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Mario Jauregui — Employee Name

Registration Clerk — Exact Position Title

Admissions — College/Department/Location

4455 — Telephone #

12mo/11mo/10mo/hrly — Work year length: 120 day limit

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	1
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	0	0	0	0	0	0
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	0	0	0	0	0	0	0	2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Darlene Kasch — Employee Name

Info. Systems Support Analyst — Exact Position Title

MIS — College/Department/Location

(310) 434-4546 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	5	5	5	5	5	5	5	5
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	5	5	5	5	5	5	5	5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Darlene Kasch Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Thomas Kasch — Employee Name

Computer Operator — Exact Position Title

MIS — College/Department/Location

(310) 434-8802 — Telephone #

12mo/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	15	15	15	15	15	15	15	15
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	15	15	15	15	15	15	15	15

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of rta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature Thomas Kasch Date 4/27/06

ou have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica Community College

Jung H. Lee — Employee Name

Systems Administrator — Exact Position Title

MIS — College/Department/Location

(310) 434-4835 — Telephone #

(12mo)/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						24	16	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						24	16	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/27/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA CC DIST.

KATHLEEN A. MARCHANT — Employee Name

ADMISSIONS & RECORD CLERK I — Exact Position Title

ADMISSIONS & RECORDS — College/Department/Location

434-X4426 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	4	2	2	1
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	0	0	1	1	1	1
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	0	0	1	1	1	1
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathleen A. Marchant Date May 2, 2006

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

STEVE MYTTOW — DIRECTOR, FIN AID
Employee Name — Exact Position Title

SMC/FINANCIAL AID — (310) 434-4871 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:							4	20
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							5	10
B. Enrollment Waiver Process:							5	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							4	8
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.							6	8
TOTALS:							24	56

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/26/06

If you have any questions, please contact STEVE MYTTOW, at (310) 434-4871

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

ELIZABETH NEZEY — Employee Name

FINANCIAL AID TECHNICIAN — Exact Position Title

SANTA MONICA — College/Department/Location

310 434 4469 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ____ ____ ____ ____ ____ ____ ____ ____

B. Enrollment Waiver Process: ____ ____ ____ ____ ____ ____ ____ ____

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

600 600 250 250 250 250 250 250

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

____ ____ ____ ____ ____ ____ ____ ____

TOTALS: 600 600 250 250 250 250 250 250

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Nezey Date 5/4/06

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

Brian Peña — Employee Name

Programmer / Analyst II — Exact Position Title

MIS — College/Department/Location

(310) 434-4081 — Telephone #

(12mo)/ 11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	500	500	400	800	400	400	600	500
B. Enrollment Waiver Process:	—	—	—	100	—	—	100	300
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	—	—	—	—	—	10	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	10	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	10	100	30	15	30	15	15	30
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	1	—	—	1	—	—	—	4
TOTALS:	511	600	430	916	430	435	715	834

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty " perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature Brian Peña Date 4/26/2006

you have any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Employee Name: Cooper Patterson IV

Exact Position Title: Director of Auxiliary Services

College/Department/Location: Auxiliary Services

Telephone #: 4976

Work year length: 12mo/11mo/10mo/hrly

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:		3	3	3	3	3	3	3
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Nadia Razon — Employee Name

registration clerk — Exact Position Title

SMC/Admissions/Main — College/Department/Location

(310)434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							0	0
B. Enrollment Waiver Process:							0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:							4	4
B. Enrollment Waiver Process:							10	10
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.							60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.							0	0
TOTALS:							70	70

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nadia Razon Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

MARIA T. HERNANDEZ — Employee Name

ASSISTANT — Exact Position Title

ADMIN SERVICES — College/Department/Location

(310) 434-4677 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS - Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	___	___	15	15	15	15	15	15
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	___	___	15	15	15	15	15	15
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___
TOTALS:	___	___	30	30	30	30	30	30

MINUTES

MINUTES

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA

ARNULFO REYES — PROGRAMMER ANALYST III
Employee Name — Exact Position Title

MIS — x 4545 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	100	100	100	100	100	100	100	100
B. Enrollment Waiver Process:	250	250	250	250	250	250	250	250
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	5	5	5	5	5	5	5	5
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	10	10	10	10	10	10	10	10
TOTALS:	365	365	365	365	365	365	365	365

PLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty erjury under the laws of the State of California to be true and correct based on your personal knowledge or rmation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

ployee Signature _____ Date 09/27/06

u have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica

Denise STURGIS — Employee Name

Registration Clerk — Exact Position Title

SMC / Admission / Main — College/Department/Location

(310) 434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	20	20	20	20	20	20	20	20
B. Enrollment Waiver Process:	160	160	160	160	160	160	160	160
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	240	240	240	240	240	240	240	240
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	420	420	420	420	420	420	420	420

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Denise M Sturgis — Date 4/25/06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College District

Raquel Thompson — Employee Name

Registration Clerk — Exact Position Title

SMC/Admissions/Main — College/Department/Location

(310) 434-4000 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	2.5
B. Enrollment Waiver Process:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	Ø	Ø	Ø	Ø	Ø	Ø	Ø
TOTALS:	Ø	Ø	Ø	Ø	Ø	Ø	Ø	2.5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Raquel Thompson Date 4/26/06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SANTA MONICA COLLEGE

CHERIE J. WALDEN — REGISTRATION CLERK
Employee Name — Exact Position Title

ADMISSIONS & RECORDS — (310) 434-4275 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities: FISCAL YEARS: Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:	0	0	0	0	0	0	0	0
B. Enrollment Waiver Process:	0	0	0	0	0	0	0	0
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	0	0	10	10	10	10	10	10
B. Enrollment Waiver Process:	0	0	160	160	160	160	160	160
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	0	0	230	230	230	230	230	230
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	0	0	0	0	0	0	0	0
TOTALS:	0	0	400	400	400	400	400	400

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cherie J. Walden Date 4-27-06

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica College

Frank Vu — Employee Name

DBA/Director — Exact Position Title

MIS — College/Department/Location

(310)434-4269 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	40	40	40	40	40	40	40	40
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:	40	40	40	40	40	40	40	40

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ta for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or ormation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

nployee Signature _____ Date 4/27/06

ou have any questions, please contact _____, at _____

EASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Santa Monica CCD

John Yoder — Employee Name

Web Svc Coord — Exact Position Title

Academic Computing 4184 — College/Department/Location / Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								4
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								4

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John C. Yoder Date 4-3-06

If you have any questions, please contact _____, at _____

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Santa Monica Co[illegible]unity College District
Mandate[illegible]inbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Productive Hourly Rates							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Toni Arinsberg	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82	12.82	13.54
Rachel Brideau	Class. Perm. ADMIS/REC CLK II	12 - Full-time	27.77	28.76	30.23	32.98	32.98	32.98	33.64	34.82
Sherita Carr	Adjunct Faculty, Counselor	12 - Part-time						55.36	56.90	57.96
Anthony Castellane	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						20.75	20.75	23.00
Ceasar Casillas	Class. Perm. FIN AID GRANT&WKSTY	12 - Full-time						25.22	28.36	30.81
Ceasar Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time		18.99	20.97	22.88	24.02			
Josh Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						20.75	22.22	23.00
Josh Casillas	Class. Temp. Reg. Clerk	12 - Part-time	11.82	11.82	12.96	13.46	14.13			
Ruth Casillas	Class. Temp. Reg. Clerk	13 - Part-time	11.25	11.25	12.34	13.46	13.46	13.46	13.46	14.21
Sarah Chang	Adjunct Faculty, Counselor	12 - Part-time	44.70	50.12	55.15	58.31	59.48	59.48	60.55	63.30
Michael Chitgar	Class. Perm. SYST ANALYST	12 - Full-time	48.93	52.92	55.66	57.81	57.81	57.81	60.70	64.09
Jocelyn Chong	Certificated Director, Network Services	12 - Full-time	61.49							
Jocelyn Chong	Dean, Network Services	12 - Full-time		64.74	69.65	73.29	74.25	74.25	75.73	78.38
Kim Clark	Class. Perm. FIN AID TECH	12 - Full-time	28.46	29.47	30.99	33.80	33.80	33.80	34.48	35.69
Jonathan Cohanne	Class. Perm. ADMIS/REC CLK II	12 - Full-time	26.43	27.39	28.80	29.91	31.40	31.40	33.64	34.82
Carolyn Dammer	Class. Perm. FIN AID TECH	12 - Full-time						33.80	34.48	37.46
Carolyn Dammer	Class. Perm. CASH RECEIPT SUP.	12 - Full-time	28.91	30.98	34.84	36.18	36.18			
Cristina Delgadillo	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
James Escobar	Class. Temp, Reg/Info Clerk	12 - Part-time							12.21	12.89
Sandra Franco	Class. Perm. ADMIS/REC CLK I	12 - Full-time							22.76	24.74
Sandra Franco	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82		
Yim Fai Fong	Class. Perm. PROG. ANALYST II	12 - Full-time		38.53	42.54	46.40	48.72	48.72	49.70	51.44
Yim Fai Fong	Class. Perm. PROG. ANALYST I	12 - Full-time	32.99							
Renay Garcia	Class. Perm. ADMIS/REC CLK I	12 - Full-time							23.90	25.97
Renay Garcia	Class. Temp. Reg. Clerk	12 - Part-time	10.71	11.25	12.34	13.46	13.46	14.13		
Clara Gomez	Class. Perm. FIN AID TECH	12 - Full-time	31.41	32.49	34.17	35.49	35.49	35.49	36.20	43.57
Jaime Gonzalez	Class. Perm. ACCT TECH	12 - Full-time					26.48	27.81	29.77	32.36
Thelma Hoffman	Class. Perm. ADMIS/REC CLK III	12 - Full-time	28.46	29.47	30.99	33.80	33.80	33.80	34.48	35.69
Mario Jauregui	Class. Temp, Reg/Info Clerk	12 - Part-time	HIRE DATI	38534.00						12.89
Candee Jones	Class. Perm. ADMIS/REC CLK II	12 - Full-time	22.80	24.84	27.43	28.48	28.48	28.48	29.06	31.57
Darlene Kasch	Class. Perm. QUALITY ASSURANCE	12 - Full-time	59.52	61.27	64.43	66.92	66.92	66.92	68.26	70.65
Thomas Kasch	Class. Perm. COMPUTER OPER	12 - Full-time	39.21	42.48	44.67	46.40	46.40	46.40	47.33	48.98
Micky Kwan	Class. Perm. SYST ANALYST	12 - Full-time		43.54	48.08	49.93	49.93	49.93	53.48	55.35
Micky Kwan	Class. Perm. COMP NETWORK ANA	12 - Full-time	37.32							
Tri Le	Class. Perm. FIN AID TECH	12 - Full-time	31.41	32.49	34.17	35.49	37.27	37.27	38.01	39.54
Jung Lee	Class. Perm. SYST ADMINISTRATOR	12 - Full-time	38.26	41.46	45.79	49.93	49.93	52.43	53.48	55.35

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Santa Monica C unity College District
Mandate einbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Productive Hourly Rates							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Connie Lemke	Class. Perm. ADMIS/REC CLK I	12 - Full-time							29.06	30.07
Connie Lemke	Class. Perm. ADMIS/REC CLK II	12 - Full-time		17.81	20.47	22.32	23.43	25.84		
Kathleen Marchant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	23.95	24.84	26.12	28.48	28.48	28.48	29.06	30.07
Steve Myrow	Certificated Director, Financial Services	12 - Full-time							67.64	70.00
Stacy Neal	Class. Perm. FIN AID ASST DIRECTOR	12 - Full-time						41.87	44.85	48.74
Elizabeth Nezey	Class. Perm. FIN AID TECH	12 - Full-time	32.99	35.82	37.67	39.12	39.12	39.12	41.90	43.37
Poonam Pant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	22.80	24.84	26.12	27.13	27.13	25.84	28.48	33.15
Brian Pena	Class. Perm. PROG. ANALYST II	12 - Full-time		44.60	51.72	53.72	53.72	53.72	54.79	59.55
Brian Pena	Class. Perm. PROG. ANALYST I	12 - Full-time	38.26							
Angelita Ramos	Class. Perm. ADMIN ASST I	12 - Full-time	22.24	23.37	26.77	29.60	31.06	31.06	31.69	32.80
Nadia Razon	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
Lucita Remonde	Class. Perm. ACCOUNTANT	12 - Full-time				40.08	40.08	40.08	42.92	44.42
Lucita Remonde	Class. Perm. ACCOUNTING SPEC II	12 - Full-time	25.80	28.06	29.52		#VALUE!		#VALUE!	
Arnulfo Reyes	Class. Perm. PROG. ANALYST III	12 - Full-time	42.22	45.71	50.48	52.43	52.43	52.43	53.48	58.14
Linda Reza	Class. Perm. ADMIS/REC COORD	12 - Full-time							38.00	39.33
Linda Reza	Class. Perm. ADMIS/REC CLK III	12 - Full-time	28.46	29.47	30.99	32.19	32.19	33.80		
Alicia Romo	Class. Perm. ADMIN ASST II	12 - Full-time	34.36	35.04	37.50	38.95	38.95	40.90	41.71	42.37
Karen Sasaki	Class. Perm. ADMIS/REC CLK II	12 - Full-time	28.12	28.12	32.13	33.38	33.38	33.38	34.05	36.98
George Prather	Class. Perm. DIR OF AUXILIARY	12 - Full-time		50.76	56.75	61.88	61.88	61.88	66.28	68.60
Denise Sturgis	Class. Temp. Reg. Clerk	12 - Part-time	10.71	11.25	12.34	13.46	13.46	13.46	14.13	14.93
Raquel Thompson	Class. Temp. Reg. Clerk	12 - Part-time							12.21	12.89
Cherie Walden	Class. Temp. Reg. Clerk	12 - Part-time				12.21	12.82	12.82	12.82	13.54
Debra Willoughby	Class. Perm. FIN AID CUST SVCS CLK	13 - Part-time	HIRE DAT	38748.00						17.27
CHENG SZU Wu	Class. Perm. DIR MIS	12 - Full-time		#VALUE!					69.59	75.63
CHENG SZU Wu	Class. Perm. DATA BASE ADMIN	12 - Full-time	52.64	58.06	61.36	64.43	66.92	66.92		
John Yoder	Class. Perm. INT. & WEB SVR COORD	12 - Full-time				47.55	47.55	47.55	48.50	52.72
John Yoder	Class. Perm. ASST COMP LAB SUPV	12 - Full-time	35.22	37.74	44.46					
Chris Young	Class. Perm. ADMIS/REC CLK II	12 - Full-time						23.43	25.10	27.27
Shauna Carter	Class. Perm. FIN AID SVC CLK	12 - Full-time							21.79	24.15

revised by SixTen and Associates

Santa Monica C[illegible]unity College District
Mandate[illegible]einbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Annual Salaries w/o benefits							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Toni Arinsberg	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82	$12.82	$13.54
Rachel Brideau	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,442.00	$3,565.00	$3,748.00	$4,088.00	$4,088.00	$4,088.00	$4,170.00	$4,316.00
Sherita Carr	Adjunct Faculty, Counselor	12 - Part-time						$55.36	$56.90	$57.96
Anthony Castellane	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						$2,572.00	$2,572.00	$2,851.00
Ceasar Casillas	Class. Perm. FIN AID GRANT&WKSTY	12 - Full-time						$3,127.00	$3,516.00	$3,820.00
Ceasar Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time		$2,354.00	$2,600.00	$2,836.00	$2,978.00			
Josh Casillas	Class. Perm. FIN AID CUST. SVCS CLK	12 - Full-time						$2,572.00	$2,755.00	$2,851.00
Josh Casillas	Class. Temp. Reg. Clerk	12 - Part-time	$11.82	$11.82	$12.96	$13.46	$14.13			
Ruth Casillas	Class. Temp. Reg. Clerk	13 - Part-time	$11.25	$11.25	$12.34	$13.46	$13.46	$13.46	$13.46	$14.21
Sarah Chang	Adjunct Faculty, Counselor	12 - Part-time	$44.70	$50.12	$55.15	$58.31	$59.48	$59.48	$60.55	$63.30
Michael Chitgar	Class. Perm. SYST ANALYST	12 - Full-time	$6,066.00	$6,560.00	$6,900.00	$7,167.00	$7,167.00	$7,167.00	$7,525.00	$7,945.00
Jocelyn Chong	Certificated Director, Network Services	12 - Full-time	$7,622.16							
Jocelyn Chong	Dean, Network Services	12 - Full-time		$8,026.00	$8,634.00	$9,086.00	$9,204.00	$9,204.00	$9,388.00	$9,717.00
Kim Clark	Class. Perm. FIN AID TECH	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$4,190.00	$4,190.00	$4,190.00	$4,274.00	$4,424.00
Jonathan Cohanne	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,277.00	$3,395.00	$3,570.00	$3,708.00	$3,893.00	$3,893.00	$4,170.00	$4,316.00
Carolyn Dammer	Class. Perm. FIN AID TECH	12 - Full-time						$4,190.00	$4,274.00	$4,644.00
Carolyn Dammer	Class. Perm. CASH RECEIPT SUP.	12 - Full-time	$3,584.00	$3,840.00	$4,319.00	$4,485.00	$4,485.00			
Cristina Delgadillo	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
James Escobar	Class. Temp, Reg/Info Clerk	12 - Part-time							$12.21	$12.89
Sandra Franco	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$2,822.00	$3,067.00
Sandra Franco	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82		
Yim Fai Fong	Class. Perm. PROG. ANALYST II	12 - Full-time		$4,776.00	$5,274.00	$5,752.00	$6,040.00	$6,040.00	$6,161.00	$6,377.00
Yim Fai Fong	Class. Perm. PROG. ANALYST I	12 - Full-time	$4,090.00							
Renay Garcia	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$2,963.00	$3,220.00
Renay Garcia	Class. Temp. Reg. Clerk	12 - Part-time	$10.71	$11.25	$12.34	$13.46	$13.46	$14.13		
Clara Gomez	Class. Perm. FIN AID TECH	12 - Full-time	$3,894.00	$4,028.00	$4,236.00	$4,399.00	$4,399.00	$4,399.00	$4,487.00	$5,401.00
Jaime Gonzalez	Class. Perm. ACCT TECH	12 - Full-time					$3,283.00	$3,447.00	$3,691.00	$4,012.00
Thelma Hoffman	Class. Perm. ADMIS/REC CLK III	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$4,190.00	$4,190.00	$4,190.00	$4,274.00	$4,424.00
Mario Jauregui	Class. Temp, Reg/Info Clerk	12 - Part-time	HIRE DATE	7/1/2005						$12.89
Candee Jones	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$2,826.00	$3,079.00	$3,400.00	$3,531.00	$3,531.00	$3,531.00	$3,602.00	$3,914.00
Darlene Kasch	Class. Perm. QUALITY ASSURANCE	12 - Full-time	$7,378.00	$7,595.00	$7,987.00	$8,296.00	$8,296.00	$8,296.00	$8,462.00	$8,758.00
Thomas Kasch	Class. Perm. COMPUTER OPER	12 - Full-time	$4,861.00	$5,266.00	$5,538.00	$5,752.00	$5,752.00	$5,752.00	$5,867.00	$6,072.00
Micky Kwan	Class. Perm. SYST ANALYST	12 - Full-time		$5,397.00	$5,960.00	$6,190.00	$6,190.00	$6,190.00	$6,630.00	$6,862.00
Micky Kwan	Class. Perm. COMP NETWORK ANA	12 - Full-time	$4,627.00							
Tri Le	Class. Perm. FIN AID TECH	12 - Full-time	$3,894.00	$4,028.00	$4,236.00	$4,399.00	$4,620.00	$4,620.00	$4,712.00	$4,902.00
Jung Lee	Class. Perm. SYST ADMINISTRATOR	12 - Full-time	$4,743.00	$5,140.00	$5,676.00	$6,190.00	$6,190.00	$6,500.00	$6,630.00	$6,862.00

revised by SixTen and Associates

Santa Monica C[illegible]unity College District
Mandate[illegible]einbursement
Fiscal Year: 1998-99 to 2005-06

EMPLOYEE	APPOINTMENT/TITLE	MONTHS/PT/FT	Annual Salaries w/o benefits							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
Connie Lemke	Class. Perm. ADMIS/REC CLK I	12 - Full-time							$3,602.00	$3,728.00
Connie Lemke	Class. Perm. ADMIS/REC CLK II	12 - Full-time		$2,208.00	$2,537.00	$2,767.00	$2,905.00	$3,203.00		
Kathleen Marchant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	$2,969.00	$3,079.00	$3,238.00	$3,531.00	$3,531.00	$3,531.00	$3,602.00	$3,728.00
Steve Myrow	Certificated Director, Financial Services	12 - Full-time							$8,385.00	$8,678.00
Stacy Neal	Class. Perm. FIN AID ASST DIRECTOR	12 - Full-time						$5,191.00	$5,560.00	$6,042.00
Elizabeth Nezey	Class. Perm. FIN AID TECH	12 - Full-time	$4,090.00	$4,440.00	$4,670.00	$4,850.00	$4,850.00	$4,850.00	$5,194.00	$5,376.00
Poonam Pant	Class. Perm. ADMIS/REC CLK I	12 - Full-time	$2,826.00	$3,079.00	$3,238.00	$3,363.00	$3,363.00	$3,203.00	$3,531.00	$4,110.00
Brian Pena	Class. Perm. PROG. ANALYST II	12 - Full-time		$5,529.00	$6,411.00	$6,659.00	$6,659.00	$6,659.00	$6,792.00	$7,382.00
Brian Pena	Class. Perm. PROG. ANALYST I	12 - Full-time	$4,743.00							
Angelita Ramos	Class. Perm. ADMIN ASST I	12 - Full-time	$2,757.00	$2,897.00	$3,319.00	$3,670.00	$3,851.00	$3,851.00	$3,928.00	$4,066.00
Nadia Razon	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
Lucita Remonde	Class. Perm. ACCOUNTANT	12 - Full-time				$4,969.00	$4,969.00	$4,969.00	$5,321.00	$5,507.00
Lucita Remonde	Class. Perm. ACCOUNTING SPEC II	12 - Full-time	$3,198.00	$3,479.00	$3,659.00					
Arnulfo Reyes	Class. Perm. PROG. ANALYST III	12 - Full-time	$5,234.00	$5,667.00	$6,258.00	$6,500.00	$6,500.00	$6,500.00	$6,630.00	$7,207.00
Linda Reza	Class. Perm. ADMIS/REC COORD	12 - Full-time							$4,711.00	$4,876.00
Linda Reza	Class. Perm. ADMIS/REC CLK III	12 - Full-time	$3,528.00	$3,653.00	$3,842.00	$3,990.00	$3,990.00	$4,190.00		
Alicia Romo	Class. Perm. ADMIN ASST II	12 - Full-time	$4,260.00	$4,344.00	$4,649.00	$4,829.00	$4,829.00	$5,070.00	$5,171.00	$5,252.00
Karen Sasaki	Class. Perm. ADMIS/REC CLK II	12 - Full-time	$3,486.00	$3,486.00	$3,983.00	$4,138.00	$4,138.00	$4,138.00	$4,221.00	$4,584.00
George Prather	Class. Perm. DIR OF AUXILIARY	12 - Full-time		$6,292.00	$7,035.00	$7,671.00	$7,671.00	$7,671.00	$8,216.00	$8,504.00
Denise Sturgis	Class. Temp. Reg. Clerk	12 - Part-time	$10.71	$11.25	$12.34	$13.46	$13.46	$13.46	$14.13	$14.93
Raquel Thompson	Class. Temp. Reg. Clerk	12 - Part-time							$12.21	$12.89
Cherie Walden	Class. Temp. Reg. Clerk	12 - Part-time				$12.21	$12.82	$12.82	$12.82	$13.54
Debra Willoughby	Class. Perm. FIN AID CUST SVCS CLK	13 - Part-time	HIRE DATE	1/31/2006						$17.27
CHENG SZU Wu	Class. Perm. DIR MIS	12 - Full-time							$8,627.00	$9,376.00
CHENG SZU Wu	Class. Perm. DATA BASE ADMIN	12 - Full-time	$6,525.00	$7,198.00	$7,607.00	$7,987.00	$8,296.00	$8,296.00		
John Yoder	Class. Perm. INT. & WEB SVR COORD	12 - Full-time				$5,895.00	$5,895.00	$5,895.00	$6,013.00	$6,535.00
John Yoder	Class. Perm. ASST COMP LAB SUPV	12 - Full-time	$4,366.00	$4,678.00	$5,512.00					
Chris Young	Class. Perm. ADMIS/REC CLK II	12 - Full-time						$2,904.00	$3,111.00	$3,381.00
Shauna Carter	Class. Perm. FIN AID SVC CLK	12 - Full-time							2701.00	2994.00

revised by SixTen and Associates

Schedule 5

Santa Monica Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office , additional information (enrollment fees waived) from Chancellor's Office website .
Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 3,095,700	$ 4,578,991	$ 4,774,191	$ 4,729,702	$ 6,410,305	$ 9,569,177	
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 61,914	$ 91,580	$ 95,484	$ 94,594	$ 128,206	$ 191,384	
1.8-4 line 4A	Enrollment Fees Waived	$ 1,409,809	$ 1,499,704	$ 1,582,997	$ 1,551,341	$ 2,282,555	$ 4,224,994	4674644
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 28,196	$ 29,994	$ 31,660	$ 31,027	$ 45,651	$ 84,500	$ 93,493
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 98,687	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		136,336	143,908	141,031	145,664	181,019	179,794
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 124,066	$ 130,956	$ 128,338	$ 132,554	$ 164,727	$ 163,613
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 28,196	$ 29,994	$ 31,660	$ 31,027	$ 45,651	$ 84,500	$ 93,493
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 98,687						
1.8-4 5.	Credit Units Waived		$ 124,066	$ 130,956	$ 128,338	$ 132,554	$ 164,727	$ 163,613
Total Enrollment Fee Waiver Offset	**Forward to Schedule 5A**	**$ 126,883**	**$ 154,060**	**$ 162,616**	**$ 159,365**	**$ 178,205**	**$ 249,227**	**$ 257,106**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Santa Monica
COUNTY: Los Angeles

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$67,481,057	$58,711,683	$3,384,158	$62,095,841
EQUALIZATION	951,769	875,629	76,140	951,769
ENROLL FEE ADMIN (2%)	71,016	65,334	5,682	71,016
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	614,476	565,318	49,158	614,476
S.F.A.A.	689,873	633,607	56,266	689,873
E.O.P.S.	1,196,722	1,096,729	99,993	1,196,722
C.A.R.E.	100,810	90,872	9,938	100,810
D.S.P.S.	1,234,732	1,135,955	98,777	1,234,732
STATE HOSPITALS	0	0	0	0
CALWORKS	427,181	349,765	77,416	427,181
MATRICULATION (CREDIT)	987,758	908,738	79,020	987,758
MATRIC. (NONCREDIT)	25,416	23,382	2,034	25,416
FAC.& STAFF DIVERSITY	23,912	20,218	3,694	23,912
PART-TIME FAC. INS.	68,204	0	68,204	68,204
PART-TIME FAC. OFF. HRS	86,891	0	86,891	86,891
PART-TIME FAC. ALLO.	1,000,440	920,404	80,036	1,000,440
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	504,102	463,773	40,329	504,102
ECON. DEVELOPMENT	300,000	252,000	0	252,000
TANF	87,954	80,917	7,037	87,954
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	56,437	15,802	31,605	47,407
VTEA TITLE I C	526,477	389,426	52,815	442,241
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	3,575,495	3,575,495	0	3,575,495
TOTAL	$80,063,054	$70,208,809	$4,327,763	$74,536,572

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Santa Monica Community College District
Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5. Initial year claim 98-99 through 05-06.
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.		$ 26,519.02	$ 17,833.71	$ 23,829.64	$ 18,624.59	$ 18,207.44	$ 28,027.96	$ 41,063.25
	EFCW-1 B. 1. b.		4,553.28	4,881.10	5,146.80	4,448.40	5,661.60	7,366.62	8,625.15
	EFCW-1 B. 2. a.		59,936.20	39,293.75	39,869.85	41,494.88	47,288.48	61,889.99	73,632.97
	EFCW-1 B. 2. b.		144,928.89	158,313.72	177,630.88	189,462.97	201,490.59	184,372.59	163,900.41
	EFCW-1 B. 2. c.		41,568.08	33,275.85	2,331.91	2,745.47	2,282.99	3,140.29	3,309.66
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 277,505.47	$ 253,598.13	$ 248,809.08	$ 256,776.31	$ 274,931.10	$ 284,797.45	$ 290,531.44
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	126,883.00	154,060.00	162,616.00	159,365.00	178,205.00	249,227.00	257,106.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 150,622.47	$ 99,538.13	$ 86,193.08	$ 97,411.31	$ 96,726.10	$ 35,570.45	$ 33,425.44
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 126,883.00**	**$ 154,060.00**	**$ 162,616.00**	**$ 159,365.00**	**$ 178,205.00**	**$ 249,227.00**	**$ 257,106.00**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Santa Monica College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 10, 2007 02:26:10

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	158	70,382
BOGW - Part A-2 based on SSI recipient status	261	92,872
BOGW - Part A-3 based on general assistance recipient status	27	10,244
BOGW - Part A-4 based on Veteran's or National Guard dependent status	34	15,678
BOGW - Part B based on income standards	8,402	3,557,359
BOGW - Part C based on financial need	1,772	928,109

Total Amount = $ 4,674,644

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

November 20, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8628

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Santa Monica Community College District CC19385

Dear Ms. Brummels:

Enclosed please find the original ***amended*** claim and an extra copy of the FAM-27 for Santa Monica Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers (***Amended)*** 2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D J Branwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC19385

(02) Claimant Name: Santa Monica Community College District

County of Location: Los Angeles

Street Address or P.O. Box: 1900 Pico Blvd

City: Santa Monica | State: CA | Zip Code: 90405-1628

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,291,585
Less : 10% Late Penalty		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,281,585
Due from State	(08)	(17) $ 1,281,585
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	47,573
(23) EFCW-1, (04)(A)(1)(b)(f)	2,947
(24) EFCW-1, (04)(A)(2)(a)(f)	865,435
(25) EFCW-1, (04)(B)(1)(a)(f)	41,063
(26) EFCW-1, (04)(B)(1)(b)(f)	8,625
(27) EFCW-1, (04)(B)(2)(a)(f)	73,633
(28) EFCW-1, (04)(B)(2)(b)(f)	163,900
(29) EFCW-1, (04)(B)(2)(c)(f)	3,310
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	413,221
(32) EFCW-1, (09)	71,016
(33) EFCW-1, (10)	257,106
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | Date: 10-18-07

Randall Lawson
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program
227

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM
EFCW-1

1) Claimant:

anta Monica Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2005-2006

)3) Leave Blank

irect Costs	Object Accounts					
4) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 47,572.54	$ -	$ -	$ -	$ -	$ 47,572.54
b. Staff training (One time per employee)	$ 2,946.59	$ -	$ -	$ -	$ -	$ 2,946.59
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 865,434.80	$ -	$ -	$ -	$ -	$ 865,434.80
rollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 41,063.25	$ -	$ -	$ -	$ -	$ 41,063.25
b. Staff training (One time per employee)	$ 8,625.15	$ -	$ -	$ -	$ -	$ 8,625.15
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 73,632.97	$ -	$ -	$ -	$ -	$ 73,632.97
b. Waiving student fees	$ 163,900.41	$ -	$ -	$ -	$ -	$ 163,900.41
c. Reporting BOG fee waiver data to CCC	$ 3,309.66	$ -	$ -	$ -	$ -	$ 3,309.66
) Total Direct Costs	$ 1,206,485.37	$ -	$ -	$ -	$ -	$ 1,206,485.37

irect Costs		
) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.25%
) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 413,221.24
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,619,706.61
it Reduction		
Less: Enrollment Fee Revenue offset		$ 71,016.00
Less rollment Fee Waiver offsets		$ 257,106.00
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,291,584.61

04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees								
Chitgar, Michael	Systems Analyst	$64.09	16.0	$ 1,025.44				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	10.0	$ 783.80				
Cohanne, Jonathan	A & R Clerk II	$34.82	250.0	$ 8,705.00				
Gonzalez, Jamie	Accounting Tech.	$32.36	15.0	$ 485.40				
Kasch, Thomas	Computer Operator	$48.98	15.0	$ 734.70				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Pena, Brian	Program Analyst II	$59.55	500.0	$ 29,775.00				
Prather, George	Director, Auxiliary Services	$68.60	3.0	$ 205.80				
Remonde, Lucita	Accountant	$44.42	0.3	$ 13.33				
Reyes, Arnulfo	Program Analyst III	$58.14	100.0	$ 5,814.00				
(05) Total [x] Subtotal [ ]			Page 1 of 1	$ 47,572.54	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Arinsberg, Toni	Registration Clerk	$13.54	0.5	$ 6.77				
Casillas, Ruth	Registration Clerk	$14.21	20.0	$ 284.20				
Cohanne, Jonathan	A & R Clerk II	$34.82	13.0	$ 452.66				
Delgadillo, Cristina	Registration Clerk	$12.89	8.0	$ 103.12				
Gonzalez, Jamie	Accounting Tech.	$32.36	15.0	$ 485.40				
Kasch, Darlene	Info. Systms Sup. Analyst	$70.65	5.0	$ 353.25				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Myrow, Steve	Director, Fin. Aid	$70.00	10.0	$ 700.00				
Razon, Nadia	Registration Clerk	$12.89	4.0	$ 51.56				
Remonde, Lucita	Accountant	$44.42	0.3	$ 13.33				
Sturgis, Denise	Registration Clerk	$14.93	20.0	$ 298.60				
Walden, Cherie	Registration Clerk	$13.54	10.0	$ 135.40				
Thompson, Raquel	Registration Clerk	$12.89	2.5	$ 32.23				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,946.59	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various Enrollment Office St Collecting Fees	$28.45	8,682.9	$ 247,028.51				
Calculating total enrollment fee to be collected Various Enrollment Office St Collecting Fees	$28.45	5,010.7	$ 142,554.42				
Answering student's questions regarding enrollment fee collection Various Enrollment Office St Collecting Fees	$28.45	9,460.4	$ 269,148.38				
Up[illegible]n written and computer records for enrollment fee information Various Enrollment Office St Collecting Fees	$28.45	5,010.7	$ 142,554.42				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various Enrollment Office St Collecting Fees	$28.45	1,995.3	$ 56,766.29				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various Enrollment Office St Collecting Fees	$28.45	259.5	$ 7,382.78				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 865,434.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Chitgar, Michael	Systems Analyst	$64.09	12.0	$ 769.08				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	80.0	$ 6,270.40				
Myrow, Steve	Director, Fin. Aid	$70.00	20.0	$ 1,400.00				
Pena, Brian	Program Analyst II	$59.55	300.0	$ 17,865.00				
Reyes, Arnulfo	Program Analyst III	$58.14	250.0	$ 14,535.00				
Jauregui, Mario	Registration Clerk	$12.89	1.0	$ 12.89				
Yoder, John	Web Svc. Coord.	$52.72	4.0	$ 210.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 41,063.25	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Casillas, Ruth	Registration Clerk	$14.21	100.0	$ 1,421.00				
Dammer, Carolyn	Financial Aid Tech.	$37.46	40.0	$ 1,498.40				
Delgadillo, Cristina	Registration Clerk	$12.89	8.0	$ 103.12				
Fong, Fai	Program Analyst II	$51.44	5.0	$ 257.20				
Myrow, Steve	Director, Fin. Aid	$70.00	10.0	$ 700.00				
Razon, Nadia	Registration Clerk	$12.89	6.0	$ 77.34				
Sturgis, Denise	Registration Clerk	$14.93	160.0	$ 2,388.80				
Walden, Cherie	Registration Clerk	$13.54	160.0	$ 2,166.40				
Jauregui, Mario	Registration Clerk	$12.89	1.0	$ 12.89				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 8,625.15	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Carter, Shauna	Fin. Aid Cust. Serv. Clerk	$24.15	420.0	$ 10,143.00				
Casillas, Josh	Custmr. Serv. Clerk	$23.00	240.0	$ 5,520.00				
Castellane, Anthony	Financial Aid Clerk	$23.00	484.0	$ 11,132.00				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	5.0	$ 391.90				
Clark, Kim	Financial Aid Tech.	$35.69	250.0	$ 8,922.50				
Delgadillo, Cristina	Registration Clerk	$12.89	480.0	$ 6,187.20				
Escobar, James	Registration Info. Clerk	$12.89	500.0	$ 6,445.00				
Lee, Jung	Systems Administrator	$55.35	16.0	$ 885.60				
Marchant, Kathleen	A & R Clerk I	$30.07	1.0	$ 30.07				
Myrow, Steve	Director, Fin. Aid	$70.00	8.0	$ 560.00				
Nezey, Elizabeth	Financial Aid Tech.	$43.37	250.0	$ 10,842.50				
Pena, Brian	Program Analyst II	$59.55	30.0	$ 1,786.50				
Razon, Nadia	Registration Clerk	$12.89	60.0	$ 773.40				
Sturgis, Denise	Registration Clerk	$14.93	240.0	$ 3,583.20				
Walden, Cherie	Registration Clerk	$13.54	230.0	$ 3,114.20				
Reyes, Arnulfo	Program Analyst III	$58.14	5.0	$ 290.70				
Wu, Frank	DBA/Director	$75.63	40.0	$ 3,025.20				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 73,632.97	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Monica Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	1,063.4	$ 32,731.45				
Receiving waiver applications							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	1,524.8	$ 46,933.34				
Evaluating waiver applications and verifying application documents							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	1,384.4	$ 42,611.83				
Nc students of additional documentation requirements and how to obtain information							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	145.3	$ 4,472.33				
Entering approved application information into district records; providing student award letter							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	1,100.9	$ 33,885.70				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Various Financial Office Staf Waiving Enrollment Fees	$30.78	106.1	$ 3,265.76				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 163,900.41	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Monica Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Chitgar, Michael	Systems Analyst	$64.09	24.0	$ 1,538.16				
Chong, Jocelyn	Dean, Info. Tech.	$78.38	5.0	$ 391.90				
Myrow, Steve	Director, Fin. Aid	$70.00	8.0	$ 560.00				
Pena, Brian	Program Analyst II	$59.55	4.0	$ 238.20				
Reyes, Arnulfo	Program Analyst III	$58.14	10.0	$ 581.40				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 3,309.66	$ -	$ -	$ -	$ -

Santa Monica Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	0.50	Arinsberg, Toni	Registration Clerk	$13.54	$6.77	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.50	**Arinsberg, Toni Total**			$6.77		
05-06	420.00	Carter, Shauna	Fin, Aid Cust. Serv. Clerk	$24.15	$10,143.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	420.00	**Carter, Shauna Total**			$10,143.00		
05-06	240.00	Casillas, Josh	Custmr. Serv. Clerk	$23.00	$5,520.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	240.00	**Casillas, Josh Total**			$5,520.00		
05-06	20.00	Casillas, Ruth	Registration Clerk	$14.21	$284.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	100.00	Casillas, Ruth	Registration Clerk	$14.21	$1,421.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	120.00	**Casillas, Ruth Total**			$1,705.20		
05-06	484.00	Castellane, Anthony	Financial Aid Clerk	$23.00	$11,132.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining r
	484.00	**Castellane, Anthony Total**			$11,132.00		
05-06	16.00	Chitgar, Michael	Systems Analyst	$64.09	$1,025.44	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	12.00	Chitgar, Michael	Systems Analyst	$64.09	$769.08	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	24.00	Chitgar, Michael	Systems Analyst	$64.09	$1,538.16	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	52.00	**Chitgar, Michael Total**			$3,332.68		
05-06	10.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$783.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	80.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$6,270.40	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$391.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	5.00	Chong, Jocelyn	Dean, Info. Tech.	$78.38	$391.90	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	100.00	**Chong, Jocelyn Total**			$7,838.00		
05-06	250.00	Clark, Kim	Financial Aid Tech.	$35.69	$8,922.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	250.00	**Clark, Kim Total**			$8,922.50		
05-06	250.00	Cohanne, Jonathan	A & R Clerk II	$34.82	$8,705.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	13.00	Cohanne, Jonathan	A & R Clerk II	$34.82	$452.66	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	263.00	**Cohanne, Jonathan Total**			$9,157.66		
05-06	40.00	Dammer, Carolyn	Financial Aid Tech.	$37.46	$1,498.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	40.00	**Dammer, Carolyn Total**			$1,498.40		
05-06	8.00	Delgadillo, Cristina	Registration Clerk	$12.89	$103.12	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	8.00	Delgadillo, Cristina	Registration Clerk	$12.89	$103.12	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	480.00	Delgadillo, Cristina	Registration Clerk	$12.89	$6,187.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	496.00	**Delgadillo, Cristina Total**			$6,393.44		
05-06	500.00	Escobar, James	Registration Info. Clerk	$12.89	$6,445.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	500.00	**Escobar, James Total**			$6,445.00		
05-06	5.00	Fong, Fai	Program Analyst II	$51.44	$257.20	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.00	**Fong, Fai Total**			$257.20		
05-06	15.00	Gonzalez, Jamie	Accounting Tech.	$32.36	$485.40	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	15.00	Gonzalez, Jamie	Accounting Tech.	$32.36	$485.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	30.00	**Gonzalez, Jamie Total**			$970.80		
05-06	1.00	Jauregui, Mario	Registration Clerk	$12.89	$12.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	1.00	Jauregui, Mario	Registration Clerk	$12.89	$12.89	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Jauregui, Mario Total**			$25.78		
05-06	5.00	Kasch, Darlene	Info. Systms Sup. Analyst	$70.65	$353.25	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	5.00	**Kasch, Darlene Total**			$353.25		
05-06	15.00	Kasch, Thomas	Computer Operator	$48.98	$734.70	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.

Santa Monica Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
	15.00	**Kasch, Thomas Total**			$734.70		
05-06	16.00	Lee, Jung	Systems Administrator	$55.35	$885.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	16.00	**Lee, Jung Total**			$885.60		
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	1.00	Marchant, Kathleen	A & R Clerk I	$30.07	$30.07	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	3.00	**Marchant, Kathleen Total**			$90.21		
05-06	20.00	Myrow, Steve	Director, Fin. Aid	$70.00	$1,400.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	10.00	Myrow, Steve	Director, Fin. Aid	$70.00	$700.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	10.00	Myrow, Steve	Director, Fin. Aid	$70.00	$700.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	8.00	Myrow, Steve	Director, Fin. Aid	$70.00	$560.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	8.00	Myrow, Steve	Director, Fin. Aid	$70.00	$560.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	56.00	**Myrow, Steve Total**			$3,920.00		
05-06	250.00	Nezey, Elizabeth	Financial Aid Tech.	$43.37	$10,842.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	250.00	**Nezey, Elizabeth Total**			$10,842.50		
05-06	500.00	Pena, Brian	Program Analyst II	$59.55	$29,775.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	300.00	Pena, Brian	Program Analyst II	$59.55	$17,865.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	30.00	Pena, Brian	Program Analyst II	$59.55	$1,786.50	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	4.00	Pena, Brian	Program Analyst II	$59.55	$238.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	834.00	**Pena, Brian Total**			$49,664.70		
05-06	3.00	Prather, George	Director, Auxilary Services	$68.60	$205.80	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	3.00	**Prather, George Total**			$205.80		
05-06	4.00	Razon, Nadia	Registration Clerk	$12.89	$51.56	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	6.00	Razon, Nadia	Registration Clerk	$12.89	$77.34	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	60.00	Razon, Nadia	Registration Clerk	$12.89	$773.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	70.00	**Razon, Nadia Total**			$902.30		
05-06	0.30	Remonde, Lucita	Accountant	$44.42	$13.33	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	0.30	Remonde, Lucita	Accountant	$44.42	$13.33	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	0.60	**Remonde, Lucita Total**			$26.66		
05-06	100.00	Reyes, Arnulfo	Program Analyst III	$58.14	$5,814.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	250.00	Reyes, Arnulfo	Program Analyst III	$58.14	$14,535.00	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	5.00	Reyes, Arnulfo	Program Analyst III	$58.14	$290.70	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	10.00	Reyes, Arnulfo	Program Analyst III	$58.14	$581.40	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	365.00	**Reyes, Arnulfo Total**			$21,221.10		
05-06	20.00	Sturgis, Denise	Registration Clerk	$14.93	$298.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	160.00	Sturgis, Denise	Registration Clerk	$14.93	$2,388.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	240.00	Sturgis, Denise	Registration Clerk	$14.93	$3,583.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	420.00	**Sturgis, Denise Total**			$6,270.60		
05-06	2.50	Thompson, Raquel	Registration Clerk	$12.89	$32.23	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	2.50	**Thompson, Raquel Total**			$32.23		
05-06	8,682.90	Various Enrollment Office Stal	Collecting Fees	$28.45	$247,028.51	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	5,010.70	Various Enrollment Office Stal	Collecting Fees	$28.45	$142,554.42	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	9,460.40	Various Enrollment Office Stal	Collecting Fees	$28.45	$269,148.38	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	5,010.70	Various Enrollment Office Stal	Collecting Fees	$28.45	$142,554.42	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees

Santa Monica Community College District
308/95 ENROLLMENT [illegible] COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1,995.30	Various Enrollment Office Stat	Collecting Fees	$28.45	$56,766.29	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	259.50	Various Enrollment Office Stat	Collecting Fees	$28.45	$7,382.78	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	30,419.50	**Various Enrollment Office Staff Total**			$865,434.80		
05-06	1,063.40	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$32,731.45	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	1,524.80	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$46,933.34	Receiving waiver applications	Waiving student fees
05-06	1,384.40	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$42,611.83	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	145.30	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$4,472.33	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	1,100.90	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$33,885.70	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	106.10	Various Financial Office Staff	Waiving Enrollment Fees	$30.78	$3,265.76	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	5,324.90	**Various Financial Office Staff Total**			$163,900.41		
05-06	10.00	Walden, Cherie	Registration Clerk	$13.54	$135.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	160.00	Walden, Cherie	Registration Clerk	$13.54	$2,166.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	230.00	Walden, Cherie	Registration Clerk	$13.54	$3,114.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	400.00	**Walden, Cherie Total**			$5,416.00		
05-06	40.00	Wu, Frank	DBA/Director	$75.63	$3,025.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	40.00	**Wu, Frank Total**			$3,025.20		
05-06	4.00	Yoder, John	Web Svc. Coord.	$52.72	$210.88	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
	4.00	**Yoder, John Total**			$210.88		
	41,231.00	**Grand Total**			$1,206,485.37		

SixTen and Associates
Mandate Reimbursement Services

KENNETH B. PETERSEN, MPA, JD, President
3252 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

July 21, 2006

Claim File Copy

CERTIFIED MAIL # 7003 3110 0000 2900 4778

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Sierra Joint Community College District CC31090

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Sierra Joint Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC 31090

(02) Claimant Name: Sierra Joint Community College District

County of Location: Placer

Street Address or P.O. Box: 5000 Rocklin Road

City: Rocklin | State: CA | Zip Code: 95677

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 259,700	(13) $ 236,153
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 236,153
Due from State	(08) $ 259,700	(17) $ 236,153
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	4,480
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	182,193
(25) EFCW-1, (04)(B)(1)(a)(f)	215
(26) EFCW-1, (04)(B)(1)(b)(f)	431
(27) EFCW-1, (04)(B)(2)(a)(f)	757
(28) EFCW-1, (04)(B)(2)(b)(f)	67,411
(29) EFCW-1, (04)(B)(2)(c)(f)	1,795
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	105,228
(32) EFCW-1, (09)	55,748
(33) EFCW-1, (10)	70,609
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 7/6/6

Joyce Lopes
Type or Print Name

Director of Finance
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Sierra Joint Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 4,480.00	$ -	$ -	$ -	$ -	$ 4,480.00
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 182,193.18	$ -	$ -	$ -	$ -	$ 182,193.18
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 214.91	$ -	$ -	$ -	$ -	$ 214.91
b. Staff training (One time per employee)	$ 430.60	$ -	$ -	$ -	$ -	$ 430.60
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 756.86	$ -	$ -	$ -	$ -	$ 756.86
b. Waiving student fees	$ 67,411.48	$ -	$ -	$ -	$ -	$ 67,411.48
c. Reporting BOG fee waiver data to CCC	$ 1,794.65	$ -	$ -	$ -	$ -	$ 1,794.65
(05) Total Direct Costs	$ 257,281.68	$ -	$ -	$ -	$ -	$ 257,281.68

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	40.90%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 105,228.21
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 362,509.89
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 55,748.00
(10) Less: Enrollment Fee Waiver Offsets		$ 70,608.50
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 236,153.39

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ra Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Latinkic, Ivan Systems Analyst	$44.80	100.0	$ 4,480.00				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 4,480.00	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ *Adopting Procedures, Recording, and Maintaining Records*
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Student Services Technician Various	$14.87	2,321.8	$ 34,525.17				
Calculating total enrollment fee to be collected Student Services Technician Various	$14.87	3,604.9	$ 53,604.86				
Answering student's questions regarding enrollment fee collection Student Services Technician Various	$14.87	3,592.2	$ 53,416.01				
Updating written and computer records for enrollment fee information Student Services Technician Various	$14.87	2,505.1	$ 37,250.84				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Student Services Technician Various	$14.87	46.2	$ 686.99				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Student Services Technician Various	$14.87	182.2	$ 2,709.31				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 182,193.18	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Prado, Doreen Student Services Technician	$30.13	1.0	$ 30.13				
Yamamoto, Craig Financial Services Manager	$53.63	3.0	$ 160.89				
Garner, Lucia Student Services Technician	$23.89	1.0	$ 23.89				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 214.91	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Prado, Doreen	Student Services Technician	$30.13	4.0	$ 120.52				
Yamamoto, Craig	Financial Services Manager	$53.63	4.0	$ 214.52				
Garner, Lucia	Student Services Technician	$23.89	4.0	$ 95.56				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 430.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ra Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ *Adopting Procedures, Recording, and Maintaining Records*
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Prado, Doreen	Student Services Technician	$30.13	18.0	$ 542.34				
Yamamoto, Craig	Financial Services Manager	$53.63	4.0	$ 214.52				
(05) Total ☒	Subtotal ☐	Page 1 of 1		$ 756.86	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ *Adopting Procedures, Recording, and Maintaining Records*
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Student FA Specialist Various	$33.42	527.7	$ 17,635.73				
Receiving waiver applications Student FA Specialist Various	$33.42	263.9	$ 8,819.54				
Evaluating waiver applications and verifying application documents Student FA Specialist Various	$33.42	527.7	$ 17,635.73				
Notifying students of additional documentation requirements and how to obtain information Student FA Specialist Various	$33.42	130.8	$ 4,371.34				
Entering approved application information into district records; providing student award letter Student FA Specialist Various	$33.42	475.4	$ 15,887.87				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Student FA Specialist Various	$33.42	91.6	$ 3,061.27				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 67,411.48	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Prado, Doreen	Student Services Technician	$30.13	20.0	$ 602.60				
Yamamoto, Craig	Financial Services Manager	$53.63	20.0	$ 1,072.60				
Garner, Lucia	Student Services Technician	$23.89	5.0	$ 119.45				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,794.65	$ -	$ -	$ -	$ -

Sierra Joint Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

2004-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1.00	Garner, Lucia	Student Services Technician	$23.89	$23.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	4.00	Garner, Lucia	Student Services Technician	$23.89	$95.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	5.00	Garner, Lucia	Student Services Technician	$23.89	$119.45	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	10.00	**Garner, Lucia Total**			$238.90		
04-05	100.00	Latinkic, Ivan	Systems Analyst	$44.80	$4,480.00	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	100.00	**Latinkic, Ivan Total**			$4,480.00		
04-05	1.00	Prado, Doreen	Student Services Technician	$30.13	$30.13	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	4.00	Prado, Doreen	Student Services Technician	$30.13	$120.52	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	18.00	Prado, Doreen	Student Services Technician	$30.13	$542.34	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	20.00	Prado, Doreen	Student Services Technician	$30.13	$602.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	43.00	**Prado, Doreen Total**			$1,295.59		
04-05	527.70	Student FA Specialist	Various	$33.42	$17,635.73	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	263.90	Student FA Specialist	Various	$33.42	$8,819.54	Receiving waiver applications	Waiving student fees
04-05	527.70	Student FA Specialist	Various	$33.42	$17,635.73	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	130.80	Student FA Specialist	Various	$33.42	$4,371.34	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	475.40	Student FA Specialist	Various	$33.42	$15,887.87	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	91.60	Student FA Specialist	Various	$33.42	$3,061.27	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	2,017.10	**Student FA Specialist Total**			$67,411.48		
04-05	2,321.80	Student Services Technician	Various	$14.87	$34,525.17	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	3,604.90	Student Services Technician	Various	$14.87	$53,604.86	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	3,592.20	Student Services Technician	Various	$14.87	$53,416.01	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	2,505.10	Student Services Technician	Various	$14.87	$37,250.84	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	46.20	Student Services Technician	Various	$14.87	$686.99	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	182.20	Student Services Technician	Various	$14.87	$2,709.31	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	12,252.40	**Student Services Technician Total**			$182,193.18		
9/20/04	8.00	Yamamoto, Craig	Financial Services Manager	$53.63	$429.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
9/21/04	8.00	Yamamoto, Craig	Financial Services Manager	$53.63	$429.04	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
9/22/04	4.00	Yamamoto, Craig	Financial Services Manager	$53.63	$214.52	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
4/4/05	3.00	Yamamoto, Craig	Financial Services Manager	$53.63	$160.89	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
4/11/05	4.00	Yamamoto, Craig	Financial Services Manager	$53.63	$214.52	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/12/05	4.00	Yamamoto, Craig	Financial Services Manager	$53.63	$214.52	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining re
	31.00	**Yamamoto, Craig Total**			$1,662.53		
	14,453.50	**Grand Total**			$257,281.68		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$28,058,788		$28,058,788	$281,745	$27,777,043
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	3,174,896		3,174,896	55,783	3,119,113
Course and Curriculum Development	6020	18,353		18,353	4,184	14,169
Academic/Faculty Senate	6030	402		402		402
Other Instructional Administration & Instructional Governance	6090	510,230		510,230	216,070	294,160
Instructional Support Services	6100					
Learning Center	6110	11,742		11,742	5,598	6,144
Library	6120	1,463,711		1,463,711	29,396	1,434,315
Media	6130	339,585		339,585	3,295	336,290
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,451,365		1,451,365	41,100	1,410,265
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,105,515		2,105,515		2,105,515
Matriculation and Student Assessment	6320	550,319		550,319	2,357	547,962
Transfer Programs	6330	83,703		83,703	536	83,167
Career Guidance	6340	63,896		63,896	4,995	58,901
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,192,223		1,192,223	48,386	1,143,837
Subtotal		$39,024,728	$0	$39,024,728	$693,445	$38,331,283

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$297,394		$297,394	$1,476	$295,918
Health Services	6440	319,990		319,990		319,990
Student Personnel Admin.	6450	600,602		600,602	1,976	598,626
Financial Aid Administration	6460	1,004,785		1,004,785	83,616	921,169
Job Placement Services	6470					
Veterans Services	6480	67,298		67,298		67,298
Miscellaneous Student Services	6490	604,347		604,347	8,140	596,207
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,086,580		1,086,580	1,086,580	0
Custodial Services	6530	900,931		900,931	900,931	0
Grounds Maintenance and Repairs	6550	458,844		458,844	458,844	0
Utilities	6570	1,628,212		1,628,212	1,628,212	0
Other	6590	350,658		350,658	350,658	0
Planning, Policy Making, and Coordination	6600	2,751,772		2,751,772	2,751,772	0
General Inst. Support Services	6700					
Community Relations	6710	680,769		680,769	680,769	0
Fiscal Operations	6720	3,969,441		3,969,441	3,969,441	0
Human Resources Management	6730	628,936		628,936	628,936	0
Noninstructional Staff Benefits & Incentives	6740	574,271		574,271	574,271	0
Staff Development	6750	370,776		370,776	370,776	0
Staff Diversity	6760	206,900		206,900	206,900	0
Logistical Services	6770	985,957		985,957	985,957	0
Management Information Systems	6780	2,964,328		2,964,328	2,964,328	0
Subtotal		$59,477,519	$0	$59,477,519	$18,347,028	$41,130,491

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	48,910		48,910	48,910	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	1,121,055		1,121,055	16,945	1,104,110
Community Use of Facilities	6830	4,409		4,409		4,409
Economic Development	6840	522,507		522,507	51,181	471,326
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	751,764		751,764	151	751,613
Farm Operations	6930					
Food Services	6940	39,136		39,136	8,352	30,784
Parking	6950	897,567		897,567	49,779	847,788
Student and Co-curricular Activities	6960	30,112		30,112		30,112
Student Housing	6970					
Other	6990	508,583		508,583	750	507,833
Auxiliary Operations	7000					
Contract Education	7010	4,289		4,289		4,289
Other Auxiliary Operations	7090	494,491		494,491	25,764	468,727
Physical Property Acquisitions	7100					
(05) Total		$63,900,342	$0	$63,900,342	$18,548,860	$45,351,482
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				40.90%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
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Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional*	Noninstructional**				
		(1)	(2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	401,855	28,147	19,543	5,048		454,593
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,044,246	12,968	43,452	15,173		1,115,839
Business and Management	0500	848,017	14,951	3,471	23,801		890,240
Communications	0600	338,018		8,972	101		347,091
Computer and Information Science	0700	1,847,818	83,981	54,963	24,680		2,011,442
Education	0800	1,628,929	31,559	259,071	35,633		1,955,192
Engineering and Related Industrial Tech.	0900	1,528,985	82,952	516,127	50,383		2,178,447
Fine and Applied Arts	1000	2,183,209	51,145	114,096	13,500		2,361,950
Foreign Language	1100	657,212	6,837	1,165	5,580		670,794
Health	1200	980,187	78,624	25,623	6,282		1,090,716
Consumer Education and Home Economics	1300	673,093	7,915	126,073	14,365		821,446
Law	1400						
Humanities (Letters)	1500	2,602,442	13,511	4,131	12,223		2,632,307
Library Science	1600	1,602					1,602
Mathematics	1700	2,274,438	61,272	64,934	5,926		2,406,570
Military Studies	1800						
Physical Sciences	1900	1,790,347	35,257	34,352	21,436		1,881,392
Psychology	2000	674,759		1,066	5,785		681,610
Public Affairs and Services	2100	613,582	143,650	129,223			886,455
Social Sciences	2200	2,098,494	663	4,675	17,503		2,121,335
Commercial Services	3000			1,842	21,376		23,218
Interdisciplinary Studies	4900	2,042,665	136,529	11,998	2,950		2,194,142
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,332,407					1,332,407
Subtotal - Instructional Activities	**599**	25,562,305	789,961	1,424,777	281,745		28,058,788

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Sierra Jt. Community College District | 270 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,651,987	467,126	55,783		3,174,896
Course and Curriculum Development	6020		400	13,769	4,184		18,353
Academic/Faculty Senate	6030		402				402
Other Instruct. Admin. & Instruct. Governance	6090		105,602	188,558	216,070		510,230
Subtotal - Instructional Administration	**6000**		2,758,391	669,453	276,037		3,703,881
Instructional Support Services (6100)							
Learning Center	6110			6,144	5,598		11,742
Library	6120		1,204,353	229,962	29,396		1,463,711
Media	6130		321,496	14,794	3,295		339,585
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		1,525,849	250,900	38,289		1,815,038
Admissions and Records	**6200**		1,357,522	52,743	41,100		1,451,365
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,087,454	18,061			2,105,515
Matriculation and Student Assessment	6320		497,722	50,240	2,357		550,319
Transfer Programs	6330		72,961	10,206	536		83,703
Career Guidance	6340		8,815	50,086	4,995		63,896
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		2,666,952	128,593	7,888		2,803,433

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		944,988	198,849	48,386		1,192,223
Extended Opportunity Prgms. & Services (EOPS)	6430		289,067	6,851	1,476		297,394
Health Services	6440		243,004	76,986			319,990
Student Personnel Administration	6450		489,095	109,531	1,976		600,602
Financial Aid Administration	6460		808,058	113,111	83,616		1,004,785
Job Placement Services	6470						
Veterans Services	6480		66,114	1,184			67,298
Miscellaneous Student Services	6490		582,349	13,858	8,140		604,347
Subtotal - Other Student Services	**6400**		3,422,675	520,370	143,594		4,086,639
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		671,461	409,441	5,678		1,086,580
Custodial Services	6530		876,031	23,383	1,517		900,931
Grounds Maintenance and Repairs	6550		382,560	75,043	1,241		458,844
Utilities	6570			1,628,212			1,628,212
Other Operation and Maintenance of Plant	6590		315,136	21,022	14,500		350,658
Subtotal - Operation and Maintenance of Plant	**6500**		2,245,188	2,157,101	22,936		4,425,225
Planning, Policymaking, and Coordination	**6600**		1,660,564	958,819	132,389		2,751,772

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		388,972	284,797	7,000		680,769
Fiscal Operations	6720		1,195,865	2,768,623	4,953		3,969,441
Human Resources Management	6730		566,397	53,827	8,712		628,936
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		574,271				574,271
Staff Development	6750		294,532	72,395	3,849		370,776
Staff Diversity	6760		191,050	12,705	3,145		206,900
Logistical Services	6770		750,027	231,613	4,317		985,957
Management Information Systems	6780		2,104,113	659,871	200,344		2,964,328
Other General Institutional Support Services	6790		21,529	27,381			48,910
Subtotal - General Institutional Support Services	**6700**		6,086,756	4,111,212	232,320		10,430,288
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	237,248	333,928	532,934	16,945		1,121,055
Community Use Facilities	6830		4,167	242			4,409
Economic Development	6840		240,191	231,135	51,181		522,507
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	237,248	578,286	764,311	68,126		1,647,971

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		203,032	548,581	151		751,764
Farm Operations	6930						
Food Services	6940			30,784	8,352		39,136
Parking	6950		374,587	473,201	49,779		897,567
Student and Co-curricular Activities	6960		23,526	6,586			30,112
Student Housing	6970						
Other Ancillary Services	6990		332,759	175,074	750		508,583
Subtotal - Ancillary Services	**6900**		933,904	1,234,226	59,032		2,227,162
Auxiliary Operations (7000)							
Contract Education	7010	164	765	3,360			4,289
Other Auxiliary Operations	7090		281,505	187,222	8,766	16,998	494,491
Subtotal - Auxiliary Operations	**7000**	164	282,270	190,582	8,766	16,998	498,780
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					746,768	746,768
Tax Revenue Anticipation Notes	7220			191,900			191,900
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			191,900		746,768	938,668
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					706,795	706,795
Student Aid	7320					444,892	444,892
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,151,687	1,151,687
TOTAL EXPENDITURES and OTHER OUTGO	**391**	25,799,717	24,308,318	12,654,987	1,312,222	1,915,453	65,990,697

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 3 and 4.
Findings:

***EFC 2**	36,660
Avg. time p/account	3.8
Total Time (in minutes)	139308
Per Hour	60
Hours Worked **(** 11)**	**2321.8**
***EFC 2**	36,660
Avg. time p/student	5.9
Total Time (in minutes)	216294
Per Hour	60
Hours Worked **(** 12)**	**3604.9**
***EFC 1**	44,902
Avg. time p/question	4.8
Total Time (in minutes)	215530
Per Hour	60
Hours Worked **(** 13)**	**3592.2**
***EFC 2**	36,660
Avg. time p/file	4.1
Total Time (in minutes)	150306
Per Hour	60
Hours Worked **(** 14)**	**2505.1**
***EFC 4**	924
Avg. time p/account	3.0
Total Time (in minutes)	2772
Per Hour	60
Hours Worked **(** 15)**	**46.2**
***EFC 5**	2,377
Avg. time p/student	4.6
Total Time (in minutes)	10934
Per Hour	60
Hours Worked **(** 16)**	**182.2**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFW 1 - Total number of students who enroll in the college
EFW 2 - Total number of students who paid enrollment fees
EFW 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFW 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 2 and 4.
Findings:

***EFW 6**	7,916
Avg. time p/question	4.0
Total Time (in minutes)	31664
Per Hour	60
Hours Worked **(** 21)**	**527.7**
***EFW 6**	7,916
Avg. time p/application	2.0
Total Time (in minutes)	15832
Per Hour	60
Hours Worked **(** 22)**	**263.9**
***EFW 6**	7,916
Avg. time p/evaluation	4.0
Total Time (in minutes)	31664
Per Hour	60
Hours Worked **(** 23)**	**527.7**
***EFW 8**	785
Avg. time p/application	10.0
Total Time (in minutes)	7850
Per Hour	60
Hours Worked **(** 24)**	**130.8**
***EFW 7**	7,131
Avg. time p/application	4.0
Total Time (in minutes)	28524
Per Hour	60
Hours Worked **(** 25)**	**475.4**
***EFW 8**	785
Avg. time p/application	7.0
Total Time (in minutes)	5495
Per Hour	60
Hours Worked **(** 26)**	**91.6**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

	*EFC Workload Multiplier					
	2		1	2	4	5
	**Activity Codes					
Staff	11	12	13	14	15	16
Franks, Kara	4	6	3	6		
Limpach, Haley	4	7	4	4		
Macdonald, June	4	4	5	3		8
Miller, Patty	4	6	7.5	5		1.5
Platz, Anna[1]	73					
Tang, Carmen	1	7	3	1		
Wasley, Judy	5	6	4	4	3	7
Williams, Liz	5	5	4	5		
Witz, Megan	4	8	8	5		
Yantos, Kah	2	4	3	3		
Yatmolyck, Alex	5	6	7	5		2
Average	**3.8**	**5.9**	**4.8**	**4.1**	**3.0**	**4.6**

1-Not used

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1. Total number of students who enroll in the college
EFC 2. Total number of students who paid enrollment fees
EFC 4. Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5. Total number of enrollment fee refunds due to change in waiver eligibility and not a result of course change

***Activities**
11 = Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 = Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 = Answer Questions and/or referring student to the appropriate person for an answer.
14 = Updating Student File for the enrollment fee information, and providing a copy to the student.
15 = Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 = Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

	*EFW Workload Multiplier					
	6			8	7	8
	**Activity Codes					
Staff	21	22	23	24	25	26
Amaro, Bonnie	4	2	4	10	4	7
Browa, Barbara	4	2	4	10	4	7
Keroher, Kylee	4	2	4	10	4	7
Garner, Lucia	4	2	4	10	4	7
Outman, Jan	4	2	4	10	4	7
Prado, Doreen	4	2	4	10	4	7
Keroher, Kylee	4	2	4	10	4	7
Roche, Maureen	4	2	4	10	4	7
White, Patricia	4	2	4	10	4	7
Average	**4.0**	**2.0**	**4.0**	**10.0**	**4.0**	**7.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activities**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Multiplier	Source			Totals						
				98-99	99-00	00-01	01-02	02-03	03-04	04-05
1	1.8-1	1.	Enrolled Students	41,369	41,342	41,684	45,371	46,898	45,103	44,902
2	1.8-1	2.	Paid Enrollment fees	35,211	36,721	36,636	38,171	38,219	37,595	36,660
3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)		4,686	4,553	4,993	5,334	6,253	7,131
4	1.8-2	1.	Delinquencies collections						719	924
5	1.8-2	2.	Refunds		1563	1518	1664	1778	2084	2377
6	1.8-3	1.	Waivers Requested	X	5,201	5,054	5,543	5,921	6,941	7,916
7	1.8-3	2.	Waivers Approved	X -	4,686	4,553	4,993	5,334	6,253	7,131
8	1.8-3 (1-2)		Waivers Denied	X	515	501	550	587	688	785

Conclusion: Findings will go forward to the Schedule 1A and 1B.

Multiplier
1 - Total number of students who enroll in the college
2 - Total number of students who paid enrollment fees
3 - Total number of students waived from enrollment fees (BOGG, etc.)
4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
6 - Total number of enrollment fee waivers requested
7 - Total number of enrollment fee waivers granted
8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2004 Summer Term

Data Current As Of June 01, 2006 09:29:55

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	6,853

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2004 Fall Term

Data Current As Of June 01, 2006 09:30:27

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	18,727

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2005 Spring Semester

Data Current As Of June 01, 2006 09:30:55

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	19,322

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Full Time Equivalent Students(FTES)

Sierra CCD For Annual 2004--2005

District	College	Credit FTES	Non-Credit FTES
Sierra CCD	Sierra	11,428.13	267.21
Total		**11,428.13**	**267.21**

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2004 Summer Term

Data Current As Of June 09, 2006 09:25:00

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	6,853

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2004 Fall Term

Data Current As Of June 09, 2006 09:25:38

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	18,727

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra CCD
For 2005 Spring Semester

Data Current As Of June 09, 2006 09:26:22

Download The Result With College Breakdown In Comma Delimited Format

Total Headcount	19,322

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Financial Services

Lucia Garner — Employee Name

Student Serv. Tech.-Fin. Serv. — Exact Position Title

Sierra/Fin. Serv./Rocklin (916)789-2931 — College/Department/Location, Telephone #

(12mo) 11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-99	99-00	00-01	01-02	02-03	03-04 (10 mos)	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						5	5	5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucia Garner Date 4/28/06

If you have any questions, please contact Lucia Garner, at (916) 789-2931

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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COPY GK - TO CONFERENCE ON 5/11/06

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SIERRA COLLEGE

IVAN LATINKIC — Employee Name

SYSTEMS ANALYST/PROGRAMMER, SENIOR — Exact Position Title

ROCKLIN COLLEGE/IT/ROCKLIN CAMPUS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							100	105
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							100	105

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ivan Latinkic Date 5/11/2006

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Sierra College

Doreen Prado
Employee Name

Student Services Technician
Exact Position Title

Financial Services
College/Department/Location

789-2623
Telephone #

(12mo)/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	1	1	1	1	1	1	1	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	4	4	4	4	4	4	4	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	18	18	18	18	18	18	18	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	20	20	20	20	20	20	20	
TOTALS:	43	43	43	43	43	43	43	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date 4-28-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SIERRA COLLEGE Fiscal Year: 03-04

CRAIG YAMAMOTO
Employee Name

FINANCIAL SERVICES MANAGER
Exact Position Title

FINANCIAL SERVICES
Department/Location

916 789-2805
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/7/03	1A (1B) 2A 2B 3 4	UPDATE POLICIES & PROCEDURES	3
4/14/03	1A 1B 2A (2B) 3 4	STAFF TRAINING	4
4/15/03	1A 1B 2A 2B (3) 4	SET UP RECORD RETENTION	4
9/20/04	1A 1B 2A 2B 3 (4)	REVIEW MIS REPORTS	8
9/21/04	1A 1B 2A 2B 3 (4)	CORRECT ERRORS	8
9/22/04	1A 1B 2A 2B 3 (4)	FINAL MIS REPORT	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/25/05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SIERRA COLLEGE Fiscal Year: 05-06

CRAIG YAMAMOTO
Employee Name

FINANCIAL SERVICES MANAGER
Exact Position Title

FINANCIAL SERVICES
Department/Location

916 789-2805
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/4/05	1A (1B) 2A 2B 3 4	UPDATE POLICIES & PROCEDURES	3
4/11/05	1A 1B 2A (2B) 3 4	TRAIN STAFF	4
4/12/05	1A 1B 2A 2B (3) 4	SET UP RECORD RETENTION	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/28/06

If you have any questions, please contact CRAIG, at 789-2805

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Kara Franks — Employee Name

Student Services Technician III — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-12-010

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District
ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Haley Limpach — Employee Name
Student Ambassador — Exact Position Title

916-781-0103 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Haley Limpach Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

June Macdonald — Employee Name

Student Service Tech III — Exact Position Title

916-781-0403 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)					X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature June Macdonald — Date 5/11/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 5/16/06 ; TO Linda Fisher

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROSEVILLE — Department/Location

Patty Miller — Employee Name

SST IV, Site — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patty Miller Date 5-12-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION ~~BY~~ TO Linda Fisher; by Monday - 5-15-06

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Carmen Tang — Employee Name

Office Assistant — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (12mo circled) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
~~**Code 15**~~ Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
~~**Code 16**~~ Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/12/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Judy A. Wasley — Employee Name

Student Services Tech III — Exact Position Title

916-781-0103 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy A. Wasley Date 5/11/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Liz Williams — Employee Name

Student Services Technician — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Liz Williams — Date 5/11/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Megan Witz — Employee Name

Student Ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4min		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5min		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Megan Witz — Date 05/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Kat Yantos — Employee Name

Student Ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kat Yantos — Date 5/16/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District
ADMISSIONS + RECORDS/ROSEVILLE — Department/Location
Alex Yatmo Cycle — Employee Name
Student Services Tech III — Exact Position Title
916-781-0103 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-12-2006

If you have any questions, please contact _____ 781-6260 , at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra Community College — District
Financial Services / Rocklin — Department/Location
Bonnie Amaro — Employee Name
Student Financial Assistance Specialist — Exact Position Title
916-789-2627 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bonnie Amaro Date 4-28-06

If you have any questions, please contact Bonnie Amaro at 916 789 2627

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Servics
Department/Location

Barbara Browa
Employee Name

Student Financial Assistance Specialist
Exact Position Title

789-2626
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Brown B Brown Date 4th 4/28/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. Sierra College

Financial Services
District

Student Services / Rocklin
Department/Location

Lucia Garner
Employee Name

Student Serv. Tech. - Fin. Serv.
Exact Position Title

(916) 789-2931
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		applied for	granted	denied	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucia Garner Date 4/28/06

If you have any questions, please contact Lucia Garner at (916) 789-2931

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Kylee Keroher
Employee Name

Student Services Technician
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kee for K. Keroher Date 6-6-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Jan Outman
Employee Name

Student Services Tech.
Exact Position Title

789-2624
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jan Outman Date 5-11-06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Doreen Prado
Employee Name

Student Services Technician
Exact Position Title

(916) 789-2623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date 4-28-06

If you have any questions, please contact Doreen Prado at 789-2623

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Maureen Roche
Employee Name

Student Services Tech
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra
District

Financial Services
Department/Location

Patricia White
Employee Name

Student Financial Assistance Specialist
Exact Position Title

(916) 789-2625 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time In Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A White Date 4-28-06

If you have any questions, please contact Patty White at 789-2625

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: SIERRA JT. COMMUNITY COLLEGE DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	5472	5433	5641	6424	7429	6894	6853	7201
Fall	17728	17991	17659	18773	20249	18791	18727	19337
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	18169	17918	18386	20174	19220	19418	19322	19337 *Est.
Total	41369	41342	41684	45371	46898	45103	44902	45875
2. Number of students who paid enrollment fees:								
Summer	5046	4913	5233	6015	5648	6519	5950	5581
Fall	15,676	15,865	15,680	16,334	16,706	15,649	14,915	14,752
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	14,489	15,943	15,793	15,529	15865	15427	15715	14475
Total	35,211	36,721	36,636	38,171	38,219	37,595	36,660	34,808
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Linda Fisher Date 6/2/06

LINDA FISHER — Employee Name: (print)

ACCTNG MANAGER — Position or Title

If you have any questions, please contact LAURENCE LEE, at 916-781-7185

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: SIERRA COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer		938	911	999	1067	1251	1426	
Fall		2108	2099	2247	2400	2814	3209	
Winter/ Intersession		—	—	—	—	—	—	
Spring		1640	1593	1747	1867	2188	2496	
Total		4686	4553	4993	5334	6253	7131	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/28/06

CRAIG YAMAMOTO
Employee Name: (print)

FINANCIAL SERVICES MANAGER
Position or Title

If you have any questions, please contact CRAIG, at 916-789-2805

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Sierra Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	N/A	N/A	N/A	N/A	N/A	102	N/A	N/A
Fall	N/A	N/A	N/A	N/A	N/A	339	450	N/A
Winter/Intersession	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Spring	N/A	N/A	N/A	N/A	N/A	278	474	N/A
Total	N/A	N/A	N/A	N/A	N/A	719	924	N/A
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Anna Platz Date 5-18-06

Anna Platz
Employee Name: (print)

Cashier
Position or Title

If you have any questions, please contact _____, at _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Sierra Comm. College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	—	313	304	333	356	417	475	—
Fall	—	703	683	749	800	938	1070	—
Winter/Intersession	—	—	—	—	—	—	—	—
Spring	—	547	531	582	622	729	832	—
Total	—	1563	1518	1664	1778	2084	2377	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lawrence Lee Date 6-5-2006

LAWRENCE LEE Director, Risk, Feasibility & Loss Control

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: SIERRA COLLEGE

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer		1040	1011	1109	1184	1388	1583	
Fall		2340	2274	2494	2664	3123	3562	
Winter/Intersession		–	–	–	–	–	–	
Spring		1621	1769	1940	2073	2430	2771	
Total		5201	5054	5543	5921	6941	7916	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer		938	911	999	1067	1251	1426	
Fall		2108	2049	2247	2400	2814	3209	
Winter/Intersession		–	–	–	–	–	–	
Spring		1640	1593	1747	1867	2188	2496	
Total		4686	4553	4993	5334	6253	7131	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4/28/06

CRAIG YAMAMORI
Employee Name: (print)

FINANCIAL SERVICES MANAGER
Position or Title

If you have any questions, please contact CRAIG, at 916 789-2805

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: SIERRA JOINT CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 785,245	$ 760,171	$ 862,466	$ 903,263	$ 1,703,185	$ 2,898,884	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$ 54,967						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
~~Winter~~/Intersession								
~~Spring~~ TOTAL CREDITS (4A ÷ ENROLLMENT FEE)			69,766	78,406	82115	108,691	124,185	
TOTAL x $0.91 per credit			62886	71,349	74,725	98,909	113,008	
			$11	$11	$11	*$15.67	$23.34**	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lawrence Lee Date 6-5-2006

LAWRENCE LEE Director, Risk, Feasibility & Loss Control
Employee Name: (print) Position or Title

u have any questions, please contact _____, at _____.

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Revised January 2005

* FY 03-04 - PER UNIT (11+8+18)/3 = 15.67

** FY 04-05 - PER UNIT (18+26+26)/3 = 23.34

A&R Fee collections

Staff involved in process:

1998-1999
Temporary Workers – 85%
Judy Wasley – 15%

1999-2000
Temporary Workers – 85%
Judy Wasley – 15%

2000-2001
Temporary Workers – 85%
Judy Wasley – 15%

2001-2002
Temporary Workers – 85%
Judy Wasley – 15%

2002-2003
Student Workers – 10%
Temporary Workers – 75%
Judy Wasley – 15%

2003-2004
Student Workers – 75%
Temporary Workers – 10%
June Macdonald – 15%

2004-2005
Student Workers – 75%
Temporary Workers – 10%
Kara Franks – 7.5%
Alistair Turner – 7.5%

Current year 2005 – 2006
Student Workers – 75%
Temporary Workers – 10%
Judy Wasley – 7.5%
Liz Williams – 7.5%

Timeline: We began using e-reg in November of 2002. Prior to that we were using phone registration and in-person registration.

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: Temporary Employees

Title: _____ Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $8.50	17,680	3,713	1,800	11.88
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

$8.50/hr.

use this # per Laurence Lee, the 8.50 hr plus 55¢ medical = the $11.88 per hr.

Same

Employee Name/or Job Class: Student Workers

Title: _____ Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $8.50	17,680	3,713	1,800	11.88
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

$8.50/hr.

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Duplicate this form for additional employees:

Employee Name/or Job Class: Student Financial Assistance Specialist

Title: Mid-level (C) Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99	$15.58 32,406	11,342	1800	24.30
99-00	15.81 32,885	11,510	"	24.66
00-01	19.61 40,789	14,276	"	30.59
01-02	19.61 40,789	14,276	"	30.59
02-03	20.20 42,016	14,706	"	31.51
03-04	20.37 42,370	14,829	"	31.78
04-05	20.88 43,430	16,721	"	33.42
05-06	21.30 44,304	18,386	"	34.83

Employee Name/or Job Class: Student Services Technician

Title: Mid-level (C) Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99	$15.58 32406	11,342	1800	24.30
99-00	15.81 32,885	11510	"	2466
00-01	18.68 38854	13599	"	29.14
01-02	18.68 38854	13,599	"	29.14
02-03	19.24 40,019	14,007	"	30.01
03-04	19.40 40352	14123	"	30.26
04-05	19.89 41371	15928	"	31.83
05-06	20.29 42,203	17514	"	33.18

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Duplicate this form for additional employees:

Employee Name/or Job Class: Latinkic, Ivan

Title: Systems Analyst Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05	58,219	22,44	1,800	44.80
05-06	62,316	25,861	"	48.99

Employee Name/or Job Class: Craig Yamamoto

Title: Financial Services Manager Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				39.28
99-00				41.24
00-01				43.30
01-02				45.47
02-03				47.74
03-04	71,048	19,193	1,800	50.13
04-05	76,011	20,523	1,800	53.63
05-06				

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PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: Lucia Garner

Title: Student Services Technician - Fin. Serv. Location: Rocklin, CA - Sierra College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	N/A			
99-00	N/A			
00-01	N/A			
01-02	N/A			
02-03	N/A			
03-04	$2642.58	$700	150	22.28
04-05	$2833.13	$750	150	23.89
05-06	$3030.24	$750	150	25.20

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

4/28/06
Lucia Garner

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plicate this form for additional employees:

Employee Name/or Job Class: Doreen Prado

Title: Student Services Tech Location: F

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	2778	556	150	22.22
99-00	2836	595	150	22.87
00-01	3331	671	150	26.26
01-02	3399	671	150	27.13
02-03	3590	689	150	28.53
03-04	3680	700	150	29.20
04-05	3770	750	150	30.13
05-06	3973	750	150	31.49

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

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Schedule 5

College of the Sequoias Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,404,703	$ 2,925,985	$ 2,033,709	$ 2,552,897	$ 3,676,627	$ 5,347,168
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 48,094	$ 58,520	$ 40,674	$ 51,058	$ 73,533	$ 106,943
1.8-4 line 4A	Enrollment Fees Waived	$ 785,245	$ 760,171	$ 862,466	$ 903,263	$ 1,703,185	$ 2,898,484
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 54,967	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		69,106	78,406	82,114	108,690	124,185
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 54,967					
1.8-4 5.	Credit Units Waived		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008
Total Offset Savings	**Forward to EFCW-1**	**$ 70,672**	**$ 78,089**	**$ 88,598**	**$ 92,789**	**$ 132,972**	**$ 170,978**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Sierra
COUNTY: Placer

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$0	$3,557,702	$-1,147,066	$2,410,636
ENROLL FEE ADMIN (2%)	55,748	47,943	7,805	55,748
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	2,169,069	1,865,399	303,670	2,169,069
S.F.A.A.	427,888	366,694	61,194	427,888
E.O.P.S.	659,341	565,655	93,686	659,341
C.A.R.E.	98,204	82,640	15,564	98,204
D.S.P.S.	969,956	830,084	139,872	969,956
STATE HOSPITALS	0	0	0	0
CALWORKS	203,827	175,292	28,535	203,827
MATRICULATION (CREDIT)	581,675	500,241	81,434	581,675
MATRIC. (NONCREDIT)	4,260	3,664	596	4,260
FAC. & STAFF DIVERSITY	16,901	12,014	4,887	16,901
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	48,527	0	48,527	48,527
PART-TIME FACULTY ALLOC	564,871	485,789	79,082	564,871
BLOCK GRANT (ONE-TIME)	293,787	252,657	41,130	293,787
ECON. DEVELOPMENT	840,748	672,456	33,772	706,228
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	47,800	41,108	6,692	47,800
VTEA LEADERSHIP	150,000	58,500	67,500	126,000
VTEA TECH. PREP.	68,800	26,832	30,960	57,792
VTEA TITLE I C	346,903	270,584	20,815	291,399
PLANT & INSTRUCTIONAL	329,528	283,394	46,134	329,528
PRIOR YEAR CORRECTION	154,575	140,907	13,668	154,575
TOTAL	$8,085,511	$10,271,115	$0	$10,271,115

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Total EFCW - Fee Waiver Costs	EFCW-1	$34,856.35	$41,903.12	$45,881.84	$50,348.80	$59,130.32	$70,608.50
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$70,672.00	$78,089.00	$88,598.00	$92,789.00	$132,972.00	$170,978.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	-$35,815.65	-$36,185.88	-$42,716.16	-$42,440.20	-$73,841.68	-$100,369.50
4								
5	**Total Enrollment Fee Waiver Offset Claimed**	**Forward to EFCW -1**	**$34,856.35**	**$41,903.12**	**$45,881.84**	**$50,348.80**	**$59,130.32**	**$70,608.50**

Conclusion: The lower of the Waiver Costs from the EFCW-1 or Enrollment Fee Waiver offset from Schedule 5 will be carried to the EFCW-1 form was the Waiver offset.

Schedule 6
Sierra Joint Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Year 2004-2005
Weighted PHR

Purpose: To calculate a weighted PHR

TITLE		Percentage	PHR	Weighted
Temporary Workers		85	11.88	10.10
Student Services Tech		15	31.83	4.77
	PHR	100%		14.87

Conclusion: To EFCW-2

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sierra College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 30, 2006 03:02:58

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	3,628	1,244,340
BOGW - Part B based on income standards	37	6,884
BOGW - Part C based on financial need	3,837	1,647,260

Total Unduplicated Count = 7,131
Total Amount = $ 2,898,484

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

December 21, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4877

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Sierra Joint Community College District CC31090

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Sierra Joint Community College District's reimbursement claims listed below:

486/75	Mandated Reimbursement Process	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC31090

(02) Claimant Name: Sierra Joint Community College District

County of Location: Placer

Street Address or P.O. Box: 5000 Rocklin Road

City: Rocklin | State: CA | Zip Code: 95677

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 246,000	(13) $ 223,691
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 223,691
Due from State	(08) $ 246,000	(17) $ 223,691
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	5,144
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	178,853
(25) EFCW-1, (04)(B)(1)(a)(f)	25
(26) EFCW-1, (04)(B)(1)(b)(f)	101
(27) EFCW-1, (04)(B)(2)(a)(f)	47
(28) EFCW-1, (04)(B)(2)(b)(f)	73,787
(29) EFCW-1, (04)(B)(2)(c)(f)	1,661
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	92,684
(32) EFCW-1, (09)	52,990
(33) EFCW-1, (10)	75,622
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 12/5/6

Joyce Lopes — Director of Finance

Type or Print Name — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Program 287	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Sierra Joint Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 5,143.95	$ -	$ -	$ -	$ -	$ 5,143.95
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 178,853.32	$ -	$ -	$ -	$ -	$ 178,853.32
3. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 25.20	$ -	$ -	$ -	$ -	$ 25.20
b. Staff training (One time per employee)	$ 100.80	$ -	$ -	$ -	$ -	$ 100.80
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 47.24	$ -	$ -	$ -	$ -	$ 47.24
b. Waiving student fees	$ 73,787.34	$ -	$ -	$ -	$ -	$ 73,787.34
c. Reporting BOG fee waiver data to CCC	$ 1,661.40	$ -	$ -	$ -	$ -	$ 1,661.40
)5) Total Direct Costs	$ 259,619.25	$ -	$ -	$ -	$ -	$ 259,619.25

ıdirect Costs		
)6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.70%
)7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 92,684.07
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 352,303.32
ost Reduction		
9) Less: Enrollment Fee Revenue offset		$ 52,990.00
0) Less: Enrollment Fee Waiver offsets		$ 75,621.98
1) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 223,691.34

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Joint Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Latinkic, Ivan Systems Analyst	$48.99	105.0	$ 5,143.95				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 5,143.95	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Joint Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Student Services Technician Various	$15.08	2,204.5	$ 33,243.86				
Calculating total enrollment fee to be collected Student Services Technician Various	$15.08	3,422.8	$ 51,615.82				
Answering student's questions regarding enrollment fee collection Student Services Technician Various	$15.08	3,576.6	$ 53,935.13				
Updating written and computer records for enrollment fee information Student Services Technician Various	$15.08	2,378.5	$ 35,867.78				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Student Services Technician Various	$15.08	86.4	$ 1,302.91				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Student Services Technician Various	$15.08	191.5	$ 2,887.82				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 178,853.32	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
e Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Gamer, Lucia SST-Financial Services	$25.20	1.0	$ 25.20				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 25.20	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Gamer, Lucia SST-Financial Services	$25.20	4.0	$ 100.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 100.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Prado, Doreen Administrative Technician	$31.49	1.5	$ 47.24				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 47.24	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Student FA Specialists Various	$34.83	554.1	$ 19,299.30				
Receiving waiver applications							
Student FA Specialists Various	$34.83	277.1	$ 9,651.39				
Evaluating waiver applications and verifying application documents							
Student FA Specialists Various	$34.83	554.1	$ 19,299.30				
Notifying students of additional documentation requirements and how to obtain information							
Student FA Specialists Various	$34.83	137.7	$ 4,796.09				
Entering approved application information into district records; providing student award letter							
Student FA Specialists Various	$34.83	499.1	$ 17,383.65				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Student FA Specialists Various	$34.83	96.4	$ 3,357.61				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 73,787.34	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
a Joint Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Prado, Doreen — Administrative Technician	$31.49	20.0	$ 629.80				
Yamamota, Craig — Financial Services Manager	$51.58	20.0	$ 1,031.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,661.40	$ -	$ -	$ -	$ -

Sierra Joint Community College District
308/95 ENROLLME[illegible]E COLLECTIONS/WAIVERS
[illegible]5-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1.00	Garner, Lucia	SST-Financial Services	$25.20	$25.20	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	4.00	Garner, Lucia	SST-Financial Services	$25.20	$100.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	5.00	**Garner, Lucia Total**			$126.00		
05-06	105.00	Latinkic, Ivan	Systems Analyst	$48.99	$5,143.95	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	105.00	**Latinkic, Ivan Total**			$5,143.95		
7/20/2005	1.50	Prado, Doreen	Administrative Technician	$31.49	$47.24	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
7/30/2005	1.50	Prado, Doreen	Administrative Technician	$31.49	$47.24	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
8/15/2005	8.00	Prado, Doreen	Administrative Technician	$31.49	$251.92	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
8/16/2005	8.00	Prado, Doreen	Administrative Technician	$31.49	$251.92	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
9/15/2005	2.50	Prado, Doreen	Administrative Technician	$31.49	$78.73	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	21.50	**Prado, Doreen Total**			$677.05		
05-06	554.10	Student FA Specialists	Various	$34.83	$19,299.30	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	277.10	Student FA Specialists	Various	$34.83	$9,651.39	Receiving waiver applications	Waiving student fees
05-06	554.10	Student FA Specialists	Various	$34.83	$19,299.30	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	137.70	Student FA Specialists	Various	$34.83	$4,796.09	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	499.10	Student FA Specialists	Various	$34.83	$17,383.65	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	96.40	Student FA Specialists	Various	$34.83	$3,357.61	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	2,118.50	**Student FA Specialists Total**			$73,787.34		
05-06	2,204.50	Student Services Technicians	Various	$15.08	$33,243.86	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,422.80	Student Services Technicians	Various	$15.08	$51,615.82	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	3,576.60	Student Services Technicians	Various	$15.08	$53,935.13	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,378.50	Student Services Technicians	Various	$15.08	$35,867.78	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	86.40	Student Services Technicians	Various	$15.08	$1,302.91	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	191.50	Student Services Technicians	Various	$15.08	$2,887.82	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	11,860.30	**Student Services Technicians Total**			$178,853.32		
9/9/2005	8.00	Yamamota, Craig	Financial Services Manager	$51.58	$412.64	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
9/20/2005	8.00	Yamamota, Craig	Financial Services Manager	$51.58	$412.64	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
9/21/2005	4.00	Yamamota, Craig	Financial Services Manager	$51.58	$206.32	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Yamamota, Craig Total**			$1,031.60		
	14,130.30	**Grand Total**			$259,619.26		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Joint Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$30,496,019		$30,496,019	$346,442	$30,149,577
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,715,481		4,715,481	116,792	4,598,689
Course and Curriculum Development	6020	22,950		22,950	3,514	19,436
Academic/Faculty Senate	6030	1,681		1,681		1,681
Other Instructional Administration & Instructional Governance	6090	550,692		550,692	197,164	353,528
Instructional Support Services	6100					
Learning Center	6110	21,445		21,445	19,901	1,544
Library	6120	1,558,911		1,558,911	29,645	1,529,266
Media	6130	410,051		410,051	21,352	388,699
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,605,188		1,605,188	7,375	1,597,813
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,478,700		2,478,700	2,527	2,476,173
Matriculation and Student Assessment	6320	614,472		614,472	6,482	607,990
Transfer Programs	6330	33,532		33,532		33,532
Career Guidance	6340	6,218		6,218		6,218
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,300,227		1,300,227	34,002	1,266,225
Subtotal		$43,815,567	$0	$43,815,567	$785,196	$43,030,371

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Joint Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$391,286		$391,286	$2,901	$388,385
Health Services	6440	368,338		368,338	9,746	358,592
Student Personnel Admin.	6450	627,524		627,524	1,456	626,068
Financial Aid Administration	6460	1,047,536		1,047,536	17,594	1,029,942
Job Placement Services	6470					
Veterans Services	6480	68,221		68,221		68,221
Miscellaneous Student Services	6490	612,043		612,043	16,541	595,502
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,016,950		1,016,950	1,016,950	0
Custodial Services	6530	1,028,438		1,028,438	1,028,438	0
Grounds Maintenance and Repairs	6550	453,691		453,691	453,691	0
Utilities	6570	1,757,541		1,757,541	1,757,541	0
Other	6590	360,042		360,042	360,042	0
Planning, Policy Making, and Coordination	6600	2,472,434		2,472,434	2,472,434	0
General Inst. Support Services	6700					
Community Relations	6710	822,046		822,046	822,046	0
Fiscal Operations	6720	3,145,260		3,145,260	3,145,260	0
Human Resources Management	6730	627,225		627,225	627,225	0
Noninstructional Staff Benefits & Incentives	6740	851,069		851,069	851,069	0
Staff Development	6750	360,030		360,030	360,030	0
Staff Diversity	6760	257,696		257,696	257,696	0
Logistical Services	6770	956,324		956,324	956,324	0
Management Information Systems	6780	2,981,883		2,981,883	2,981,883	0
Subtotal		$64,021,144	$0	$64,021,144	$17,924,063	$46,097,081

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Joint Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	52,522		52,522	52,522	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	1,135,958		1,135,958	4,422	1,131,536
Community Use of Facilities	6830	11,904		11,904		11,904
Economic Development	6840	642,788		642,788	137,302	505,486
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	792,417		792,417		792,417
Farm Operations	6930					
Food Services	6940	8,025		8,025	4,927	3,098
Parking	6950	949,116		949,116	14,946	934,170
Student and Co-curricular Activities	6960	97,963		97,963		97,963
Student Housing	6970					
Other	6990	645,347		645,347	7,958	637,389
Auxiliary Operations	7000					
Contract Education	7010	141		141		141
Other Auxiliary Operations	7090	654,027		654,027	8,315	645,712
Physical Property Acquisitions	7100					
(05) Total		$69,011,352	$0	$69,011,352	$18,154,455	$50,856,897
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.70%		
(07) Notes						

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	484,497	6,347	22,633			513,477
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,224,769	13,771	56,072	28,176		1,322,788
Business and Management	0500	1,041,016	7,336	3,097	4,484		1,055,933
Communications	0600	408,499		2,764	2,319		413,582
Computer and Information Science	0700	1,496,534	92,729	30,476	60,397		1,680,136
Education	0800	1,879,037	536	337,047	78,670		2,295,290
Engineering and Related Industrial Tech.	0900	1,521,875	111,872	432,340	1,299		2,067,386
Fine and Applied Arts	1000	2,374,860	42,539	135,078	16,491		2,568,968
Foreign Language	1100	626,633	4,833	1,311	11,161		643,938
Health	1200	998,335	75,806	40,260	14,440		1,128,841
Consumer Education and Home Economics	1300	877,442	7,687	152,572	13,121		1,050,822
Law	1400						
Humanities (Letters)	1500	2,918,161	923	7,040	6,550		2,932,674
Library Science	1600						
Mathematics	1700	2,850,111	50,064	60,618	25,323		2,986,116
Military Studies	1800						
Physical Sciences	1900	2,054,150	38,594	46,018	23,639		2,162,401
Psychology	2000	768,549		1,807	7,575		777,931
Public Affairs and Services	2100	574,464	103,181	160,066			837,711
Social Sciences	2200	2,314,541	172	6,028	10,499		2,331,240
Commercial Services	3000						
Interdisciplinary Studies	4900	2,260,244	145,315	19,208	42,298		2,467,065
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,259,720					1,259,720
Subtotal - Instructional Activities	**599**	27,933,437	701,705	1,514,435	346,442		30,496,019

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible] COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		2,813,511	1,785,178	116,792		4,715,481
Course and Curriculum Development	6020			19,436	3,514		22,950
Academic/Faculty Senate	6030		(402)	2,083			1,681
Other Instruct. Admin. & Instruct. Governance	6090		115,623	237,905	197,164		550,692
Subtotal - Instructional Administration	**6000**		2,928,732	2,044,602	317,470		5,290,804
Instructional Support Services (6100)							
Learning Center	6110			1,544	19,901		21,445
Library	6120		1,295,276	233,990	29,645		1,558,911
Media	6130		381,053	7,646	21,352		410,051
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		1,676,329	243,180	70,898		1,990,407
Admissions and Records	**6200**		1,550,012	47,801	7,375		1,605,188
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,429,860	46,313	2,527		2,478,700
Matriculation and Student Assessment	6320		553,265	54,725	6,482		614,472
Transfer Programs	6330		33,456	76			33,532
Career Guidance	6340		5,324	894			6,218
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		3,021,905	102,008	9,009		3,132,922

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA

For Actual Year: 2004-05

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		971,695	294,530	34,002		1,300,227
Extended Opportunity Prgms. & Services (EOPS)	6430		381,867	6,518	2,901		391,286
Health Services	6440		271,723	86,869	9,746		368,338
Student Personnel Administration	6450		451,969	174,099	1,456		627,524
Financial Aid Administration	6460		803,790	226,152	17,594		1,047,536
Job Placement Services	6470						
Veterans Services	6480		67,406	815			68,221
Miscellaneous Student Services	6490		574,843	20,659	16,541		612,043
Subtotal - Other Student Services	**6400**		3,523,293	809,642	82,240		4,415,175
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		716,905	296,283	3,762		1,016,950
Custodial Services	6530		1,004,248	20,979	3,211		1,028,438
Grounds Maintenance and Repairs	6550		408,625	45,066			453,691
Utilities	6570			1,757,541			1,757,541
Other Operation and Maintenance of Plant	6590		336,698	23,344			360,042
Subtotal - Operation and Maintenance of Plant	**6500**		2,466,476	2,143,213	6,973		4,616,662
Planning, Policymaking, and Coordination	**6600**		2,108,323	342,381	21,730		2,472,434

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		419,388	394,978	7,680		822,046
Fiscal Operations	6720		1,544,955	1,603,088	(2,783)		3,145,260
Human Resources Management	6730		598,395	18,268	10,562		627,225
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		851,069				851,069
Staff Development	6750		294,276	65,754			360,030
Staff Diversity	6760		122,851	133,942	903		257,696
Logistical Services	6770		760,309	196,015			956,324
Management Information Systems	6780		2,198,590	672,913	110,380		2,981,883
Other General Institutional Support Services	6790		41,801	10,721			52,522
Subtotal - General Institutional Support Services	**6700**		6,831,634	3,095,679	126,742		10,054,055
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	242,740	361,349	527,447	4,422		1,135,958
Community Use Facilities	6830		6,379	5,525			11,904
Economic Development	6840		261,482	244,004	137,302		642,788
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	242,740	629,210	776,976	141,724		1,790,650

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		202,174	590,243			792,417
Farm Operations	6930						
Food Services	6940			3,098	4,927		8,025
Parking	6950		395,114	539,056	14,946		949,116
Student and Co-curricular Activities	6960		78,015	19,948			97,963
Student Housing	6970						
Other Ancillary Services	6990		380,503	256,886	7,958		645,347
Subtotal - Ancillary Services	**6900**		1,055,806	1,409,231	27,831		2,492,868
Auxiliary Operations (7000)							
Contract Education	7010			141			141
Other Auxiliary Operations	7090		313,231	332,481	8,315		654,027
Subtotal - Auxiliary Operations	**7000**		313,231	332,622	8,315		654,168
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					974,373	974,373
Tax Revenue Anticipation Notes	7220			171,266			171,266
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			171,266		974,373	1,145,639
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,582,994	1,582,994
Student Aid	7320					325,879	325,879
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,908,873	1,908,873
TOTAL EXPENDITURES and OTHER OUTGO	**391**	28,176,177	26,806,656	13,033,036	1,166,749	2,883,246	72,065,864

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 3 and 4.
Findings:

***EFC 2**	34,808
Avg. time p/account	3.8
Total Time (in minutes)	132270
Per Hour	60
Hours Worked **(** 11)**	**2204.5**
***EFC 2**	34,808
Avg. time p/student	5.9
Total Time (in minutes)	205367
Per Hour	60
Hours Worked **(** 12)**	**3422.8**
***EFC 1**	44,707
Avg. time p/question	4.8
Total Time (in minutes)	214594
Per Hour	60
Hours Worked **(** 13)**	**3576.6**
***EFC 2**	34,808
Avg. time p/file	4.1
Total Time (in minutes)	142713
Per Hour	60
Hours Worked **(** 14)**	**2378.5**
***EFC 4**	1,727
Avg. time p/account	3.0
Total Time (in minutes)	5181
Per Hour	60
Hours Worked **(** 15)**	**86.4**
***EFC 5**	2,498
Avg. time p/student	4.6
Total Time (in minutes)	11491
Per Hour	60
Hours Worked **(** 16)**	**191.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFW 1 - Total number of students who enroll in the college
EFW 2 - Total number of students who paid enrollment fees
EFW 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFW 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	8,312
Avg. time p/question	4.0
Total Time (in minutes)	33248
Per Hour	60
Hours Worked **(** 21)**	**554.1**
***EFW 6**	8,312
Avg. time p/application	2.0
Total Time (in minutes)	16624
Per Hour	60
Hours Worked **(** 22)**	**277.1**
***EFW 6**	8,312
Avg. time p/evaluation	4.0
Total Time (in minutes)	33248
Per Hour	60
Hours Worked **(** 23)**	**554.1**
***EFW 8**	826
Avg. time p/application	10.0
Total Time (in minutes)	8260
Per Hour	60
Hours Worked **(** 24)**	**137.7**
***EFW 7**	7,486
Avg. time p/application	4.0
Total Time (in minutes)	29944
Per Hour	60
Hours Worked **(** 25)**	**499.1**
***EFW 8**	826
Avg. time p/application	7.0
Total Time (in minutes)	5782
Per Hour	60
Hours Worked **(** 26)**	**96.4**

Conclusion: *Findings will go forward to the EFCW-2.*

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 04-05 timestudy.
Findings:

	*EFC Workload Multiplier					
	2		1	2	4	5
	**Activity Codes					
Staff	11	12	13	14	15	16
Franks, Kara	4	6	3	6		
Limpach, Haley	4	7	4	4		
Macdonald, June	4	4	5	3		8
Miller, Patty	4	6	7.5	5		1.5
Platz, Anna[1]	73					
Tang, Carmen	1	7	3	1		
Wasley, Judy	5	6	4	4	3	7
Williams, Liz	5	5	4	5		
Witz, Megan	4	8	8	5		
Yantos, Kah	2	4	3	3		
Yatmolyck, Alex	5	6	7	5		2
Average	**3.8**	**5.9**	**4.8**	**4.1**	**3.0**	**4.6**

1-Not used

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1. Total number of students who enroll in the college
EFC 2. Total number of students who paid enrollment fees
EFC 4. Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5. Total number of enrollment fee refunds due to change in waiver eligibility and not a result of course change

***Activities**
11 = Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 = Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 = Answer Questions and/or referring student to the appropriate person for an answer.
14 = Updating Student File for the enrollment fee information, and providing a copy to the student.
15 = Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 = Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 04-05 timestudy.
Findings:

	*EFW Workload Multiplier					
	6			8	7	8
	**Activity Codes					
Staff	21	22	23	24	25	26
Amaro, Bonnie	4	2	4	10	4	7
Browa, Barbara	4	2	4	10	4	7
Keroher, Kylee	4	2	4	10	4	7
Garner, Lucia	4	2	4	10	4	7
Outman, Jan	4	2	4	10	4	7
Prado, Doreen	4	2	4	10	4	7
Keroher, Kylee	4	2	4	10	4	7
Roche, Maureen	4	2	4	10	4	7
White, Patricia	4	2	4	10	4	7
Average	**4.0**	**2.0**	**4.0**	**10.0**	**4.0**	**7.0**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activities**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1	1.8-1 1.	Enrolled Students	41,369	41,342	41,684	45,371	46,898	45,103	44,902	44,707
2	1.8-1 2.	Paid Enrollment fees	35,211	36,721	36,636	38,171	38,219	37,595	36,660	34,808
3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)		4,686	4,553	4,993	5,334	6,253	7,131	7,468
4	1.8-2 1.	Delinquencies collections						719	924	1,727
5	1.8-2 2.	Refunds		1,563	1,518	1,664	1,778	2,084	2,377	2,498
6	1.8-3 1.	Waivers Requested	X	5,201	5,054	5,543	5,921	6,941	7,916	8,312
7	1.8-3 2.	Waivers Approved	X -	4,686	4,553	4,993	5,334	6,253	7,131	7,486
8	1.8-3 (1-2)	Waivers Denied	X	515	501	550	587	688	785	826

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***Multiplier**
1 - Total number of students who enroll in the college
2 - Total number of students who paid enrollment fees
3 - Total number of students waived from enrollment fees (BOGG, etc.)
4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
6 - Total number of enrollment fee waivers requested
7 - Total number of enrollment fee waivers granted
8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2006 Spring Semester

Data Current As Of October 30, 2006 11:28:21

Total Headcount	18,477

© 2001 State of California. California Community Colleges, Chancellor's Office

Spring 18477
Fall 18,981
Summer 7,119
44,577

California Home

Monday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2005 Fall Term

Data Current As Of October 30, 2006 11:28:00

Total Headcount	18,981

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2005 Summer Term

Data Current As Of October 30, 2006 11:27:30

Total Headcount	7,119

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Financial Services

Lucia Garner — Employee Name

Student Serv. Tech. - Fin. Serv. — Exact Position Title

Sierra/Fin Serv/Rocklin (916)789-2931 — College/Department/Location / Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	98-99	99-00	00-01	01-02	02-03	03-04 (10 mos)	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						1	1	1
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:						4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						5	5	5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucia Garner Date 4/28/06

If you have any questions, please contact Lucia Garner, at (916) 789-2931

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SIERRA COLLEGE

IVAN LATINKIC — Employee Name

SYSTEMS ANALYST/PROGRAMMER, SENIOR — Exact Position Title

SIERRA COLLEGE IT / ROCKLIN CAMPUS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:							100	105
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:							100	105

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ivan Latinkic Date 5/11/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Sierra College Fiscal Year: 04-05

Doreen Prado
Employee Name

Student Services Tech.
Exact Position Title

Financial Services
Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
6/30/05	1A 1B 2A 2B (3) 4	upload, post, demographic	1.5
7/30/05	1A 1B 2A 2B (3) 4	" " "	1.5
7/2005	1A 1B 2A 2B 3 (4)	MIS Meeting	1.5
8/5/05	1A 1B 2A 2B 3 (4)	MIS Reject Report	8
8/8/05	1A 1B 2A 2B 3 (4)	MIS Reject Report	8
9/5/05	1A 1B 2A 2B 3 (4)	MIS Final Report	2.5
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date 4-28-06

If you have any questions, please contact _____, at _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SIERRA COLLEGE Fiscal Year: 04-05

CRAIG YAMAMOTO
Employee Name

FINANCIAL SERVICES MANAGER
Exact Position Title

FINANCIAL SERVICES
Department/Location

916 789-2805
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/5/04	1A (1B) 2A 2B 3 4	UPDATE POLICIES & PROCEDURES	3
4/12/04	1A 1B 2A (2B) 3 4	STAFF TRAINING	4
4/13/04	1A 1B 2A 2B (3) 4	SET UP RECORD RETENTION	4
9/19/05	1A 1B 2A 2B 3 (4)	REVIEW MIS REPORTS	8
9/20/05	1A 1B 2A 2B 3 (4)	CORRECT ERRORS	8
9/21/05	1A 1B 2A 2B 3 (4)	FINAL MIS REPORT	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/28/06

If you have any questions, please contact CRAIG, at 789-2805

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Kara Franks — Employee Name

Student Services Technician III — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-12-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Haley Limpach — Employee Name

Student Ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Haley Limpach Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

June MacDonald — Employee Name

Student Service Tech III — Exact Position Title

916-781-0403 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)					X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature J MacDonald — Date 5/11/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY 5/16/06 ; TO Linda Fisher

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District
ADMISSIONS + RECORDS/ROSEVILLE — Department/Location

Patty Miller — Employee Name
SST IV, Site — Exact Position Title

916-781-0403 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patty Miller — Date 5-12-06

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION ~~TO~~ BY Linda Fisher ~~TO~~ BY Monday - 5-15-06

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Carmen Tang — Employee Name

Office Assistant — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
~~**Code 15**~~ Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
~~**Code 16**~~ Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/12/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Judy A. Wasley — Employee Name

Student Services Tech III — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		X			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy A. Wasley Date 5/11/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Liz Williams — Employee Name

Student Services Technician — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.6	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Liz Williams — Date 5/11/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Megan Witz — Employee Name

Student Ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4min		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	8min		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8min	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5min		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Megan Witz — Date 05/15/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Kath Yantos — Employee Name

Student Ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly (circle) — Work year length

Fiscal Year: 98-99 ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

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Employee Signature K. Yantos — Date 5/10/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District
ADMISSIONS + RECORDS/ROSEVILLE — Department/Location
Alex Yatmo Lyuke — Employee Name
Student Services Tech III — Exact Position Title
916-781-0403 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-12-2006

If you have any questions, please contact _____ 781-6260 , at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra Community College — District
Financial Services / Rocklin — Department/Location
Bonnie Amaro — Employee Name
Student Financial Assistance Specialist — Exact Position Title
916.789.2627 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bonnie Amaro Date 4-28-06

If you have any questions, please contact Bonnie Amaro at 916 789 2627

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Barbara Browa
Employee Name

Student Financial Assistance Specialist
Exact Position Title

789-2626
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B. Browa B Browa Date 4th 4/28/06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program. Sierra College

Financial Services
District

Student Services / Rocklin
Department/Location

Lucia Garner
Employee Name

Student Serv Tech. - Fin. Serv.
Exact Position Title

(916) 789-2931
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		applicants	granted	denied	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lucia Garner Date 4/28/06

If you have any questions, please contact Lucia Garner at (916) 789-2931

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Kylee Keroher
Employee Name

Student Services Technician
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lee for K. Keroher Date 6-6-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Jan Outman
Employee Name

Student Services Tech.
Exact Position Title

789-2624
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jan Outman Date 5-11-06

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Doreen Prado
Employee Name

Student Services Technician
Exact Position Title

(916) 789-2623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date 4-28-06

If you have any questions, please contact Doreen Prado at 789-2623

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Services
Department/Location

Maureen Roche
Employee Name

Student Services Tech
Exact Position Title

Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications. Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra
District

Financial Services
Department/Location

Patricia White
Employee Name

Student Financial Assistance Specialist
Exact Position Title

(916) 789-2625 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time In Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A White Date 4-28-06

If you have any questions, please contact Patty White at 789-2625

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: SIERRA JOINT COMMUNITY COLLEGE DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	5,472	5,433	5,641	6,424	7,429	6,894	6,853	7,201
Fall	17,728	17,991	17,656	18,771	20,249	18,791	18,727	19,337
Winter/ Intersession								
Spring	18,168	17,918	18,386	20,173	19,220	19,418	19,322	18,189
Total	41,368	41,342	41,683	45,368	46,898	45,103	44,902	44,707
2. Number of students who paid enrollment fees:								
Summer								5,581
Fall								14,752
Winter/ Intersession								
Spring								14,475
Total								34,808
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total		4,686	4,553	4,993	5,334	6,253	7,131	7,468

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lawrence Lee Date 11-6-2006

Employee Name: (print) Lawrence Lee Position or Title Director, Risk, Feasibility & Loss Control

If you have any questions, please contact Same at (916) 781-7185

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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(Note: Linda Fisher signed original
Craig Yamamoto " ")

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Sierra Joint Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer						102	—	152
Fall						339	450	514
Winter/Intersession						—	—	—
Spring						278	474	1061
Total						719	924	1727
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer	—	313	304	333	356	417	475	699
Fall	—	703	683	749	800	938	1070	1423
Winter/Intersession	—	—	—	—	—	—	—	—
Spring	—	547	531	582	622	729	832	873
Total	—	1563	1518	1664	1778	2084	2377	2998

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Lawrence Lee Date: 11-6-2006

Lawrence Lee, Director, Risk, Feasibility & Loss Control

Employee Name: (print) Position or Title

If you have any questions, please contact same at (916) 781-7185

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Sierra Joint CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								1662
Fall								3740
Winter/Intersession								
Spring								2910
Total								8312
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								1497
Fall								3369
Winter/Intersession								
Spring								2620
Total								7486

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 11-6-2006

Lawrence Lee — Director, Risk, Feasibility & Loss Control

Employee Name: (print) Position or Title

If you have any questions, please contact me, at (916) 781-7185

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Sierra Joint Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	'98-9	'99-0	'02-3	'01-2	'02-3	'03-4	'04-5	'05-6
1. Enrollment Fees Collected								
2. Enrollment Fees Refunded								
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)								
4A. Total Enrollment Fees Waived (BOGG, etc.)		$ 785,245	$ 760,171	$ 862,466	$ 903,283	$ 1,703,185	$ 2,898,484	$ 3,018,581
4B. 2% Enrollment Fees Waived (Line 4A x 2%)		$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$ 60,372
4C. 7% Enrollment Fees Waived (Line 4A x 7%)		$ 54,967						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Total Credits (4A/Enrollment Fee)			69,106	78,406	82,115	108,691	124,185	116,099
TOTAL x $0.91 per credit			$ 62,886	$ 71,349	$ 74,725	$ 98,909	$ 113,008	$ 105,650
Cost per unit			$ 11	$ 11	$ 11	$ 15.67	$ 23.34	$ 26.00
FY 03-04perunit(11+18+18)/3=15.67 FY 04-05perunit(18+26+26)/3=23.34								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 11-6-2006

Employee Name:(print) LAWRENCE LEE Position or Title Director, Risk Feasibility & Loss Control

If you have any questions, please contact Same at (916) 781-7185

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

(Note: Linda Fisher & L. Lee signed Originals)

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Schedule 6
Sierra Joint Community College District
308/95 Enrollment Fee Collections and Waivers
Fiscal Year 2005-2006
Weighted PHR

Purpose: To calculate a weighted PHR

TITLE		Percentage	PHR	Weighted
Temporary Workers		85	11.88	10.10
Student Services Tech		15	33.18	4.98
	PHR	100%		15.08

Conclusion: To EFCW-2

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: Temporary Employees

Title: _____ Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $8.50	17,680	3,713	1,800	11.88
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

$8.50/hr.

Employee Name/or Job Class: Student Workers

Title: _____ Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $8.50	17,680	3,713	1,800	11.88
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

$8.50/hr.

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PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: Student Financial Assistance Specialist

Title: Mid-level (c) Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $15.58	32,406	11,342	1800	24.30
99-00 15.81	32,885	11,510	"	24.66
00-01 19.61	40,789	14,276	"	30.59
01-02 19.61	40,789	14,276	"	30.59
02-03 20.20	42,016	14,706	"	31.51
03-04 20.37	42,370	14,829	"	31.78
04-05 20.88	43,430	16,721	"	33.42
05-06 21.30	44,304	18,386	"	34.83

Employee Name/or Job Class: Student Services Technician

Title: Mid-level (c) Location: _____

A. Fiscal Year	B. Annual /~~Monthly~~ Salary	C. Annual /~~Monthly~~ Benefits	D. Annual /~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99 $15.58	32406	11,342	1800	24.30
99-00 15.81	32,885	11,510	"	24.66
00-01 18.68	38,854	13,599	"	29.14
01-02 18.68	38,854	13,599	"	29.14
02-03 19.24	40,019	14,007	"	30.01
03-04 19.40	40352	14123	"	30.26
04-05 19.99	41,571	15928	"	31.83
05-06 20.29	42,203	17,514	"	33.18

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plicate this form for additional employees:

Employee Name/or Job Class: Bonnie Amaro

Title: Stu. Fin. Asst. Special Location: Rocklin

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	5097	555.60	150	37.68
99-00	5097	594.88	150	37.95
00-01	5097	671.00	150	38.45
01-02	5505	671.00	150	41.17
02-03	5505	689.04	150	41.29
03-04	5505	700.04	150	41.37
04-05	5505	750.00	150	41.70
06	5505	750.00	150	41.70

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
(3				

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Duplicate this form for additional employees:

Employee Name/or Job Class: Kristine Armstrong

Title: Student Services Tech Location: Rocklin

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06	3,058	750	150	25.39

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

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PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: Lucia Garner

Title: Student Services Technician - Fin. Serv. Location: Rocklin, CA - Sierra College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	N/A			
99-00	N/A			
00-01	N/A			
01-02	N/A			
02-03	N/A			
03-04	$2642.58	$700	150	22.28
04-05	$2833.13	$750	150	23.89
05-06	$3030.24	$750	150	25.20

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

4/28/06
Lucia Garner

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Duplicate this form for additional employees:

Employee Name/or Job Class: Latinkic, Ivan

Title: Systems Analyst Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05	58,219	22,414	1,800	44.80
05-06	62,316	25,861	"	48.99

Employee Name/or Job Class: Craig Yamamoto

Title: Financial Services Manager Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				39.28
99-00				41.24
00-01				43.30
01-02				45.47
02-03				47.74
03-04	71,048	19,183	1,800	50.13
04-05	76,011	20,523	1,800	53.63
05-06				

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uplicate this form for additional employees:

Employee Name/or Job Class: Jan Outman

Title: Student Services Tech Location: Financial Services

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	2778	556	150	22.22
99-00	2836	595	150	22.87
00-01	3331	671	150	26.26
01-02	3399	671	150	27.13
02-03	3590	689	150	28.53
03-04	3680	700	150	29.20
04-05	3770	750	150	30.13
06	3973	750	150	31.49

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
6				

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uplicate this form for additional employees:

Employee Name/or Job Class: Doreen Prado

Title: Student Services Tech Location: F

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	2778	556	150	22.22
99-00	2836	595	150	22.87
00-01	3331	671	150	26.26
01-02	3399	671	150	27.13
02-03	3590	689	150	28.53
03-04	3680	700	150	29.20
04-05	3770	750	150	30.13
06	3973	750	150	31.49

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
6				

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Duplicate this form for additional employees:

Employee Name/or Job Class: Patricia White
Student Financial
Title: Assistance Specialist Location: Rocklin

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99	$3872	$556	150	$29.52
99-00	$4517	$595	150	$34.08
00-01	$4820	$671	150	$36.61
01-02	$5089	$671	150	$38.40
02-03	$4989	$689	150	$37.85
03-04	$5217	$700	150	$39.45
04-05	$5364	$750	150	$40.76
05-06	$5498	$750	150	$41.65

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
6				

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Name	Title	04-05	05-06
SUMNER, JOANN	ASSOC DEAN CURRIC. RETIRED		N/A
THIERS, LAURIE	PROJECT MANAGER EP&S	$ 45.09	$ 42.19
TSUJI, BILL	DEAN, LIBERAL ARTS RETIRED	$ 72.11	N/A
VELAZQUEZ, NILO	BOOKSTORE MANAGER RETIRED		N/A
VERMILLION, RHONDA	PAYROLL TECHNICIAN	$ 29.19	$ 30.80
VOLEK, JOHN	DEAN-P.E. ATHLETICS	$ 72.11	$ 72.11
WALTERS-DUNLAP, KAREN	DEAN, SCIENCE AND MATH	$ 72.11	$ 73.09
WASLEY, JUDY	SST-ADMISSIONS		$ 32.06
WHARFF, BEVERLY	PERSONNEL TECHNICIAN RETIRED		N/A
WHITE, MARGERET	ASSOC DIRECTOR NURSING	$ 67.31	$ 70.71
WHITE, PATRICIA	STUDENT FINANCIAL ASST. SPECIALIST		$ 43.27
WICKSTROM, ROBERT	DIRECTOR OF BUSINESS SERVICES RETIRED		N/A
WILLIAMS, LIZ	SST-ADMISSIONS		$ 29.08
WILSON, JAMES	INSTRUCTIONAL. ASST. III	$ 35.35	$ 43.34
WILSON, WOODROW	DIRECTOR, PLANNING AND RESEARCH	$ 72.11	$ 72.11
WITZ, MEGAN	STUDENT ASSISTANT		$ 12.10
WOLLESEN, MARY	PROGRAM MANGER OF SBDC & ECONOMIC DEVELOPMENT	$ 54.16	$ 71.88
YAMAMOTO, CRAIG	FINANCIAL SERVICES MANAGER	$ 51.58	$ 51.58
YANTOS, KAH	STUDENT ASSISTANT		$ 12.10

College of the Sequoias Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 2,404,703	$ 2,925,985	$ 2,033,709	$ 2,552,897	$ 3,676,627	$ 5,347,168	
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 48,094	$ 58,520	$ 40,674	$ 51,058	$ 73,533	$ 106,943	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 785,245	$ 760,171	$ 862,466	$ 903,263	$ 1,703,185	$ 2,898,484	$ 3,018,581
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$ 60,372
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 54,967	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		69,106	78,406	82,114	108,690	124,185	116,099
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008	$ 105,650
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$ 60,372
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 54,967						
1.8-4 5.	Credit Units Waived		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008	$ 105,650
Total Offset Savings	**Forward to EFCW-1**	**$ 70,672**	**$ 78,089**	**$ 88,598**	**$ 92,789**	**$ 132,972**	**$ 170,978**	**$ 166,022**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-2006 fees are $26.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Sierra
COUNTY: Placer

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$49,063	$1,976,432	$-883,079	$1,093,353
EQUALIZATION	575,130	529,118	46,012	575,130
ENROLL FEE ADMIN (2%)	52,990	48,750	4,240	52,990
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	363,977	334,858	29,119	363,977
S.F.A.A.	433,597	397,834	35,763	433,597
E.O.P.S.	710,148	653,337	56,811	710,148
C.A.R.E.	103,585	93,425	10,160	103,585
D.S.P.S.	1,053,843	969,534	84,309	1,053,843
STATE HOSPITALS	0	0	0	0
CALWORKS	190,322	187,520	2,802	190,322
MATRICULATION (CREDIT)	639,710	588,534	51,176	639,710
MATRIC. (NONCREDIT)	0	0	0	0
FAC.& STAFF DIVERSITY	18,306	15,478	2,828	18,306
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	46,500	0	46,500	46,500
PART-TIME FAC. ALLO.	564,871	519,682	45,189	564,871
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	327,457	301,262	26,195	327,457
ECON. DEVELOPMENT	1,001,924	715,616	126,000	841,616
TANF	47,800	43,976	3,824	47,800
VTEA LEADERSHIP	150,000	126,000	0	126,000
VTEA TECH. PREP.	56,437	15,802	31,605	47,407
VTEA TITLE I C	416,349	267,244	82,489	349,733
NURSING CARE	179,487	0	179,487	179,487
PRIOR YEAR CORRECTION	-1,145,373	-1,145,373	0	-1,145,373
TOTAL	$5,888,455	$6,672,791	$0	$6,672,791

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 214.91	$ 25.20
2	Staff Training	(04)(B)(1)(b)	$ 430.60	$ 100.80
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 756.86	$ 47.24
4	Waiving student fees	(04)(B)(2)(b)	$ 67,411.48	$ 73,787.34
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,794.65	$ 1,661.40
6	EFCW - Fee Waiver Costs	Total	$ 70,608.50	$ 75,621.98
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 170,989.00	$ 166,022.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (100,380.50)	$ (90,400.02)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 70,608.50**	**$ 75,621.98**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Monday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sierra College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of October 30, 2006 11:31:01

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	3,882	1,335,328
BOGW - Part B based on income standards	5	2,041
BOGW - Part C based on financial need	4,011	1,681,212

Total Unduplicated Count = 7,468
Total Amount = $ 3,018,581

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
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January 18, 2008

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 8697

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Sierra Joint Community College District CC 31090

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Sierra Joint Community College District's reimbursement claim listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fe Collection and Waivers	2006-2007
764/99	Integrated Waste Management	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC31090
(02) Claimant Name: Sierra Joint Community College District
County of Location: Placer
Street Address or P.O. Box: 5000 Rocklin Road
City: Rocklin | State: CA | Zip Code: 95677

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 391,400	(13) $ 355,835
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 355,835
Due from State	(08) $ 391,400	(17) $ 355,835
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	266,994
(25) EFCW-1, (04)(B)(1)(a)(f)	136
(26) EFCW-1, (04)(B)(1)(b)(f)	337
(27) EFCW-1, (04)(B)(2)(a)(f)	591
(28) EFCW-1, (04)(B)(2)(b)(f)	118,862
(29) EFCW-1, (04)(B)(2)(c)(f)	1,699
(30) EFCW-1, (06)	38
(31) EFCW-1, (07)	149,579
(32) EFCW-1, (09)	60,738
(33) EFCW-1, (10)	121,625
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date** 1/9/8

Joyce Lopes
Type or Print Name

Director of Finance
Title

(38) Name of Contact Person for Claim

Sixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Sierra Joint Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 266,993.86	$ -	$ -	$ -	$ -	$ 266,993.86
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. [illegible]ring district policies & procedures for § IV.B.	$ 135.62	$ -	$ -	$ -	$ -	$ 135.62
b. Staff training (One time per employee)	$ 336.96	$ -	$ -	$ -	$ -	$ 336.96
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 591.48	$ -	$ -	$ -	$ -	$ 591.48
b. Waiving student fees	$ 118,861.72	$ -	$ -	$ -	$ -	$ 118,861.72
c. Reporting BOG fee waiver data to CCC	$ 1,698.80	$ -	$ -	$ -	$ -	$ 1,698.80
(11) Total Direct Costs	$ 388,618.44	$ -	$ -	$ -	$ -	$ 388,618.44

Indirect Costs		
(12) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	38.49%
(13) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 149,579.24
(14) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 538,197.68

Cost Reduction		
(15) Less: Enrollment Fee Revenue offset		$ 60,738.00
(16) Less: Enrollment Fee Waiver offsets		$ 121,624.58
(17) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 355,835.10

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$25.98	1,510.0	$ 39,229.80				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$25.98	2,237.0	$ 58,117.26				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$25.98	5,108.2	$ 132,711.04				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$25.98	1,286.3	$ 33,418.07				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Office Staff Various	$25.98	135.4	$ 3,517.69				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 266,993.86	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination								
Prado, Doreen	Student Services Technician	$32.86	1.0	$ 32.86				
Garner, Lucia	Student Services Technician	$25.69	4.0	$ 102.76				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 135.62	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, *Functions Performed*, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Prado, Doreen	Student Services Technician	$32.86	4.0	$ 131.44				
Garner, Lucia	Student Services Technician	$25.69	8.0	$ 205.52				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 336.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Prado, Doreen Student Services Technician	$32.86	18.0	$ 591.48				
(05) Total ☒ Subtotal ☐ Page 1 of 1			$ 591.48	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$32.13	493.8	$ 15,865.79				
Receiving waiver applications							
Financial Aid Office Staff Various	$32.13	569.8	$ 18,307.67				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$32.13	1,088.9	$ 34,986.36				
Notifying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$32.13	147.1	$ 4,726.32				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$32.13	1,228.2	$ 39,462.07				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$32.13	171.6	$ 5,513.51				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 118,861.72	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Sierra Joint Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Prado, Doreen	Student Services Technician	$32.86	20.0	$ 657.20				
Yamamoto, Craig	Financial Services Manager	$52.08	20.0	$ 1,041.60				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,698.80	$ -	$ -	$ -	$ -

Sierra Joint Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	1,510.00	Enrollment Office Staff	Various	$25.98	$39,229.80	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	2,237.00	Enrollment Office Staff	Various	$25.98	$58,117.26	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	5,108.20	Enrollment Office Staff	Various	$25.98	$132,711.04	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	1,286.30	Enrollment Office Staff	Various	$25.98	$33,418.07	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	135.40	Enrollment Office Staff	Various	$25.98	$3,517.69	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	10,276.90	**Enrollment Office Staff Total**			$266,993.86		
06-07	493.80	Financial Aid Office Staf	Various	$32.13	$15,865.79	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	569.80	Financial Aid Office Staf	Various	$32.13	$18,307.67	Receiving waiver applications	Waiving student fees
06-07	1,088.90	Financial Aid Office Staf	Various	$32.13	$34,986.36	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	147.10	Financial Aid Office Staf	Various	$32.13	$4,726.32	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,228.20	Financial Aid Office Staf	Various	$32.13	$39,462.07	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	171.60	Financial Aid Office Staf	Various	$32.13	$5,513.51	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	3,699.40	**Financial Aid Office Staff Total**			$118,861.72		
06-07	4.00	Garner, Lucia	Student Services Technician	$25.69	$102.76	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	8.00	Garner, Lucia	Student Services Technician	$25.69	$205.52	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	12.00	**Garner, Lucia Total**			$308.28		
06-07	1.00	Prado, Doreen	Student Services Technician	$32.86	$32.86	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	4.00	Prado, Doreen	Student Services Technician	$32.86	$131.44	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	18.00	Prado, Doreen	Student Services Technician	$32.86	$591.48	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
06-07	20.00	Prado, Doreen	Student Services Technician	$32.86	$657.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	43.00	**Prado, Doreen Total**			$1,412.98		
06-07	20.00	Yamamoto, Craig	Financial Services Manager	$52.08	$1,041.60	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Yamamoto, Craig Total**			$1,041.60		
	14,051.30	**Grand Total**			$388,618.44		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Jt. Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$32,127,266		$32,127,266	$22,892	$32,104,374
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,328,663		5,328,663	7,271	5,321,392
Course and Curriculum Development	6020	18,069		18,069		18,069
Academic/Faculty Senate	6030	5,949		5,949		5,949
Other Instructional Administration & Instructional Governance	6090	491,598		491,598	12,694	478,904
Instructional Support Services	6100					
Learning Center	6110	22,890		22,890		22,890
Library	6120	1,521,262		1,521,262		1,521,262
Media	6130	404,010		404,010		404,010
Museums and Galleries	6140	88,892		88,892	88,892	0
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	1,344,880		1,344,880	2,291	1,342,589
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,657,454		2,657,454	5,500	2,651,954
Matriculation and Student Assessment	6320	656,772		656,772		656,772
Transfer Programs	6330	53,121		53,121		53,121
Career Guidance	6340	7,333		7,333		7,333
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,314,769		1,314,769	21,913	1,292,856
Subtotal		$46,042,928	$0	$46,042,928	$161,453	$45,881,475

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Jt. Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$909,292	$495,830	$413,462		$413,462
Health Services	6440	395,941		395,941	100	395,841
Student Personnel Admin.	6450	568,282		568,282	3,350	564,932
Financial Aid Administration	6460	1,081,271		1,081,271		1,081,271
Job Placement Services	6470					
Veterans Services	6480	45,284		45,284		45,284
Miscellaneous Student Services	6490	841,241		841,241		841,241
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,138,414		1,138,414	1,138,414	0
Custodial Services	6530	1,160,941		1,160,941	1,160,941	0
Grounds Maintenance and Repairs	6550	512,942		512,942	512,942	0
Utilities	6570	2,174,391		2,174,391	2,174,391	0
Other	6590	434,379		434,379	434,379	0
Planning, Policy Making, and Coordination	6600	3,758,364		3,758,364	3,758,364	0
General Inst. Support Services	6700					
Community Relations	6710	839,709		839,709	839,709	0
Fiscal Operations	6720	4,609,871		4,609,871	4,609,871	0
Human Resources Management	6730	642,707		642,707	642,707	0
Noninstructional Staff Benefits & Incentives	6740	781,670		781,670	781,670	0
Staff Development	6750	413,733		413,733	413,733	0
Staff Diversity	6760	169,579		169,579	169,579	0
Logistical Services	6770	974,393		974,393	974,393	0
Management Information Systems	6780	3,346,291		3,346,291	3,346,291	0
Subtotal		$70,841,623	$495,830	$70,345,793	$21,122,287	$49,223,506

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Sierra Jt. Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	86,053		86,053	86,053	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	1,408,789		1,408,789	652	1,408,137
Community Use of Facilities	6830	6,838		6,838		6,838
Economic Development	6840	1,498,102		1,498,102	329,776	1,168,326
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	849,075		849,075		849,075
Farm Operations	6930					
Food Services	6940	4,788		4,788		4,788
Parking	6950	2,026,044		2,026,044	4,434	2,021,610
Student and Co-curricular Activities	6960	85,172		85,172		85,172
Student Housing	6970	914,048		914,048	144,986	769,062
Other	6990	19,359		19,359		19,359
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	798,039		798,039	309	797,730
Physical Property Acquisitions	7100					
(05) Total		$78,537,930	$495,830	$78,042,100	$21,688,497	$56,353,603
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				38.49%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	547,905		23,513			571,418
Architecture and Environmental Design	0200			34,257			34,257
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,432,494		51,086	11,060		1,494,640
Business and Management	0500	1,179,788		6,630			1,186,418
Communications	0600	340,991		9,689			350,680
Information Technology	0700	1,566,164		51,085			1,617,249
Education	0800	2,217,860		428,763	9,620		2,656,243
Engineering and Industrial Tech.	0900	1,653,177	5,462	432,959			2,091,598
Fine and Applied Arts	1000	2,520,727		132,616			2,653,343
Foreign Language	1100	731,337		13,097			744,434
Health	1200	1,036,611		23,451			1,060,062
Family and Consumer Sciences	1300	850,513		152,041			1,002,554
Law	1400	18,692					18,692
Humanities (Letters)	1500	3,135,288		10,717	1,106		3,147,111
Library Science	1600	893		47,217			48,110
Mathematics	1700	2,825,335		11,521			2,836,856
Military Studies	1800						
Physical Sciences	1900	2,285,808		47,147			2,332,955
Psychology	2000	834,120		2,990			837,110
Public and Protective Services	2100	749,002		153,054			902,056
Social Sciences	2200	2,437,602		20,055	1,106		2,458,763
Commercial Services	3000						
Interdisciplinary Studies	4900	2,795,104		27,122			2,822,226
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,260,491					1,260,491
Subtotal - Instructional Activities	**599**	30,419,902	5,462	1,679,010	22,892		32,127,266

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,299,356	2,022,036	7,271		5,328,663
Course and Curriculum Development	6020			18,069			18,069
Academic/Faculty Senate	6030		285	5,664			5,949
Other Instruct. Admin. & Instruct. Governance	6090		68,860	410,044	12,694		491,598
Subtotal - Instructional Administration	**6000**		3,368,501	2,455,813	19,965		5,844,279
Instructional Support Services (6100)							
Learning Center	6110		1,467	21,423			22,890
Library	6120		1,260,843	260,419			1,521,262
Media	6130		387,030	16,980			404,010
Museums and Galleries	6140				88,892		88,892
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		1,649,340	298,822	88,892		2,037,054
Admissions and Records	**6200**		1,308,157	34,432	2,291		1,344,880
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,593,320	58,634	5,500		2,657,454
Matriculation and Student Assessment	6320		601,941	54,831			656,772
Transfer Programs	6330		53,121				53,121
Career Guidance	6340		4,809	2,524			7,333
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		3,253,191	115,989	5,500		3,374,680

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		980,330	312,526	21,913		1,314,769
Extended Opportunity Prgms. & Services (EOPS)	6430		383,677	29,785		495,830	909,292
Health Services	6440		293,547	102,294	100		395,941
Student Personnel Administration	6450		435,121	129,811	3,350		568,282
Financial Aid Administration	6460		800,870	280,401			1,081,271
Job Placement Services	6470						
Veterans Services	6480		44,260	1,024			45,284
Miscellaneous Student Services	6490		591,893	249,348			841,241
Subtotal - Other Student Services	**6400**		3,529,698	1,105,189	25,363	495,830	5,156,080
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		775,736	362,678			1,138,414
Custodial Services	6530		1,133,296	27,645			1,160,941
Grounds Maintenance and Repairs	6550		444,836	68,106			512,942
Utilities	6570			2,174,391			2,174,391
Other Operation and Maintenance of Plant	6590		372,843	52,536	9,000		434,379
Subtotal - Operation and Maintenance of Plant	**6500**		2,726,711	2,685,356	9,000		5,421,067
Planning, Policymaking, and Coordination	**6600**		2,053,527	1,704,755	82		3,758,364

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CAL.. ORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		427,955	411,754			839,709
Fiscal Operations	6720		1,347,022	3,262,849			4,609,871
Human Resources Management	6730		617,063	23,797	1,847		642,707
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		781,670				781,670
Staff Development	6750		297,080	116,477	176		413,733
Staff Diversity	6760		88,299	81,280			169,579
Logistical Services	6770		739,716	227,782	6,895		974,393
Management Information Systems	6780		2,334,046	1,002,525	9,720		3,346,291
Other General Institutional Support Services	6790		67,200	18,853			86,053
Subtotal - General Institutional Support Services	**6700**		6,700,051	5,145,317	18,638		11,864,006
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	111,616	478,351	818,170	652		1,408,789
Community Use Facilities	6830		6,838				6,838
Economic Development	6840		399,155	769,171	329,776		1,498,102
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	111,616	884,344	1,587,341	330,428		2,913,729

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

C FORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS: Instructional* (1)	SALARIES and BENEFITS: Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		201,970	647,105			849,075
Farm Operations	6930						
Food Services	6940		986	3,802			4,788
Parking	6950		361,745	1,659,865	4,434		2,026,044
Student and Co-curricular Activities	6960		82,734	2,438			85,172
Student Housing	6970		426,789	342,273	144,986		914,048
Other Ancillary Services	6990			19,359			19,359
Subtotal - Ancillary Services	**6900**		1,074,224	2,674,842	149,420		3,898,486
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090		318,415	442,138	309	37,177	798,039
Subtotal - Auxiliary Operations	**7000**		318,415	442,138	309	37,177	798,039
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290			437,697			437,697
Subtotal - Long-Term Debt and Other Financing	**7200**			437,697			437,697
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	30,531,518	26,871,621	20,366,701	672,780	533,007	78,975,627

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 3 and 4.
Findings:

***EFC 2**	33,555
Avg. time p/account	2.7
Total Time (in minutes)	90599
Per Hour	60
Hours Worked **(** 11)**	**1510.0**
***EFC 2**	33,555
Avg. time p/student	4.0
Total Time (in minutes)	134220
Per Hour	60
Hours Worked **(** 12)**	**2237.0**
***EFC 1**	45,745
Avg. time p/question	6.7
Total Time (in minutes)	306492
Per Hour	60
Hours Worked **(** 13)**	**5108.2**
***EFC 2**	33,555
Avg. time p/file	2.3
Total Time (in minutes)	77177
Per Hour	60
Hours Worked **(** 14)**	**1286.3**
***EFC 4**	1,758
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 15)**	**0.0**
***EFC 5**	4,063
Avg. time p/student	2.0
Total Time (in minutes)	8126
Per Hour	60
Hours Worked **(** 16)**	**135.4**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFW 1 - Total number of students who enroll in the college
EFW 2 - Total number of students who paid enrollment fees
EFW 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFW 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	7,597
Avg. time p/question	3.9
Total Time (in minutes)	29628
Per Hour	60
Hours Worked **(** 21)**	**493.8**
***EFW 6**	7,597
Avg. time p/application	4.5
Total Time (in minutes)	34187
Per Hour	60
Hours Worked **(** 22)**	**569.8**
***EFW 6**	7,597
Avg. time p/evaluation	8.6
Total Time (in minutes)	65334
Per Hour	60
Hours Worked **(** 23)**	**1088.9**
***EFW 8**	865
Avg. time p/application	10.2
Total Time (in minutes)	8823
Per Hour	60
Hours Worked **(** 24)**	**147.1**
***EFW 7**	7,597
Avg. time p/application	9.7
Total Time (in minutes)	73691
Per Hour	60
Hours Worked **(** 25)**	**1228.2**
***EFW 8**	865
Avg. time p/application	11.9
Total Time (in minutes)	10294
Per Hour	60
Hours Worked **(** 26)**	**171.6**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

	*EFC Workload Multiplier						
	2		1	2	4	5	
	**Activity Codes						06-07
Staff	11	12	13	14	15	16	PHR
Davis, Debbie	3	4	8	3		1.0	32.06
Eberhart, Stacey	2		5	1			22.94
George, Janice	3	4	7	3		3	22.94
Average	**2.7**	**4.0**	**6.7**	**2.3**		**2.0**	25.98

1-Not used

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided)**
EFC 1. Total number of students who enroll in the college
EFC 2. Total number of students who paid enrollment fees
EFC 4. Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5. Total number of enrollment fee refunds due to change in waiver eligibility and not a result of course change

***Activities**
11 = Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 = Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 = Answer Questions and/or referring student to the appropriate person for an answer.
14 = Updating Student File for the enrollment fee information, and providing a copy to the student.
15 = Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 = Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

	*EFW Workload Multiplier						
	6			8	7	8	
	**Activity Codes						06-07
Staff	21	22	23	24	25	26	PHR
Alias, Laurie	4.0	5.0	10.0	6.0	10.0	10.0	$25.29
Amaro, Bonnie	4.0	2.0	4.0	10.0	4.0	7.0	$44.41
Armstrong, Kristine	4.0	2.0	4.0	10.0	4.0	7.0	$24.50
Bilyk, Lina	4.0	5.0	13.0	14.0	12.0	18.0	$27.91
Bobyk, Nikolay	4.0	2.0	4.0	10.0	4.0	7.0	$28.37
Brown, Barbara	4.0	2.0	4.0	10.0	4.0	7.0	$44.35
Burske, Aubree	4.0	6.0	9.0	10.0	12.0	11.0	$27.91
Calvert, Tina	3.0	6.0	10.0	10.0	11.0	20.0	$27.91
Evans, Emily	4.0	6.0	12.0	7.0	10.0	15.0	$27.91
Franks, Kara	4.0	5.0	15.0	15.0	12.0	15.0	$32.06
Garner, Lucia	4.0	2.0	4.0	10.0	4.0	7.0	$25.69
Hanawalt, Carrol	3.0	6.0	7.0	9.0	14.0	17.0	$40.32
Johnston, Scott	4.0	6.0	10.0	5.0	10.0	10.0	$27.91
Macdonald, June	5.0	3.0	8.0	10.0	12.0	15.0	$36.14
McGuire, Karin	4.0	6.0	12.0	6.0	11.0	12.0	$29.31
McKenzie, Delores	4.0	6.0	9.0	10.0	12.0	11.0	$30.54
Miller, Patty	6.0	6.0	15.0	15.0	12.5	15.0	$32.84
Outman, Jan	4.0	2.0	4.0	10.0	4.0	7.0	$34.83
Prado, Doreen	4.0	2.0	4.0	10.0	4.0	7.0	$32.86
Ragsac, Rebecca	4.0	6.0	9.0	10.0	10.0	20.0	$34.50
Reeves, Karen	4.0	6.0	8.0	10.0	15.0	10.0	$36.01
Reich-Zuazo, Erica	3.0	5.0	9.0	10.0	10.0	10.0	$27.91
Snell, Gerri	3.0	6.0	9.0	15.0	12.0	11.0	$32.06
Velera, Corrine	4.0	6.0	15.0	15.0	15.0	10.0	$31.28
Wasley, Judy	3.0	6.0	7.0	9.0	14.0	17.0	$32.86
White, Patricia	4.0	2.0	4.0	10.0	4.0	7.0	$44.35
Williams, Liz	3.0	3.0	7.0	5.0	12.0	15.0	$29.78
Yatmolyck, Alex	3.5	6.0	15.0	15.0	12.5	15.0	$29.78
Average	**3.9**	**4.5**	**8.6**	**10.2**	**9.7**	**11.9**	**$32.13**

Schedule 3
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

	6			8	7	8	
	**Activity Codes						06-07
Staff	21	22	23	24	25	26	PHR

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activities**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1	1.8-1 1.	Enrolled Students	41,369	41,342	41,684	45,371	46,898	45,103	44,902	44,707	45,745
2	1.8-1 2.	Paid Enrollment fees	35,211	36,721	36,636	38,171	38,219	37,595	36,660	34,808	33,555
3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)		4,686	4,553	4,993	5,334	6,253	7,131	7,468	12,190
4	1.8-2 1.	Delinquencies collections						719	924	1,727	1,758
5	1.8-2 2.	Refunds		1,563	1,518	1,664	1,778	2,084	2,377	2,498	4,063
6	1.8-3 1.	Waivers Requested	X	5,201	5,054	5,543	5,921	6,941	7,916	8,312	*7597
7	1.8-3 2.	Waivers Approved	X -	4,686	4,553	4,993	5,334	6,253	7,131	7,486	*7597
8	1.8-3 (1-2)	Waivers Denied	X	515	501	550	587	688	785	826	**865

Conclusion: Findings will go forward to the Schedule 1A and 1B.
*Using the number from the Chancellors website. College's number unreasonable.
** Using the difference from the numbers submitted on the 1.8-3.

***Multiplier**
1 - Total number of students who enroll in the college
2 - Total number of students who paid enrollment fees
3 - Total number of students waived from enrollment fees (BOGG, etc.)
4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
6 - Total number of enrollment fee waivers requested
7 - Total number of enrollment fee waivers granted
8 - Total number of enrollment fee waivers denied

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2007 Spring Semester

Data Current As Of December 18, 2007 08:30:18

Total Headcount	19,110

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19,110
19,373
7,262
45,745

total

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2006 Fall Term

Data Current As Of December 18, 2007 08:30:34

Total Headcount	19,373

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Sierra
For 2006 Summer Term

Data Current As Of December 18, 2007 08:30:43

Total Headcount	7,262

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Sienna College

Lueja Garner
Employee Name

Student Services Technician - Financial Aid
Exact Position Title

Sienna College - Financial Aid Office 789-2931 (12mo/11mo/10mo/hrly)
College/Department/Location Telephone # Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		4	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		8	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.			
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			
TOTALS:		12	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lueja Garner Date 10/22/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Sienna College

Doreen Prado
Employee Name

Student Services Technician
Exact Position Title

Sienna College - Financial Aid
College/Department/Location

784-2623
Telephone #

(12mo)/11mo/10mo/hrly
Work year length

MIS Reporting

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	05-06	06-07	07-08
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		1	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.			
A. Enrollment Collection Process:			
B. Enrollment Waiver Process:		4	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.		18	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.		20	
TOTALS:		43	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date _____

If you have any questions, please contact _____, at _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: FINANCIAL SERVICES/AID Fiscal Year: 06-07

CRAIG YAMAMOTO
Employee Name

FINANCIAL SERVICES MANAGER
Exact Position Title

SIERRA COLLEGE - FINANCIAL AID/SERVICES 789-2805
Department/Location Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
07/ 06	1A (1B) 2A 2B 3 4	PREPARE POLICIES & PROCEDURES	8
07/ 06	1A 1B 2A (2B) 3 4	STAFF TRAINING	8
07/ 06	1A 1B 2A 2B (3) 4	SET UP RECORD RETENTION	4
09/ 06	1A 1B 2A 2B 3 (4)	REVIEW MIS REPORTS	8
09/ 06	1A 1B 2A 2B 3 (4)	CORRECT MIS REPORTS	8
09/ 06	1A 1B 2A 2B 3 (4)	~~ENTER~~ FINAL MIS REPORTS	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

3 2011 hours

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature for Craig Yamamoto Date 10-22-07

If you have any questions, please contact LINDA, at 789-2805

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS / NCC — Department/Location

Debbie Davis — Employee Name

Administrative/Student Services Technician — Exact Position Title

916-781-0403 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time In Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Debbie Davis Date 5/15/06

If you have any questions, please contact ____ at ____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST — District

ADMISSIONS + RECORDS/ROCKLIN — Department/Location

Stacey Ebermark — Employee Name

Student ambassador — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Stacey Ebermark Date 5/15/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA JT. COMM. COLLEGE DIST. — District

ADMISSIONS + RECORDS/NCC — Department/Location

JANICE GEORGE — Employee Name

A+R OFFICE ASST #4 — Exact Position Title

916-781-0403 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 96-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)					✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice M George Date 5-15-06

If you have any questions, please contact A+R, at NCC X5302

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

ADMISSIONS & RECORDS
Department/Location

LAURIE ALLAS
Employee Name

A/R Tech
Exact Position Title

781-7134
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Laurie Allas Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA College
District

FINANCIAL AID - SIERRA College
Department/Location

BONNIE AMARO
Employee Name

STUDENT FINANCIAL ASSISTANCE SPECIALIST
Exact Position Title

789-2627
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Bonnie Amaro Date 10-23-07

If you have any questions, please contact BONNIE AMARO, at 916-789-2627

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Aid - Sierra College
Department/Location

Kristine Armstrong
Employee Name

Student Services Technician -
Exact Position Title

281-0510
Telephone #

12mo/11mo/10mo/hrly (12mo)
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kristine Armstrong Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

ASB / L-115
Department/Location

Bilyk, Lina
Employee Name

Student Service Technician
Exact Position Title

(916) 781-0569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	13		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	14			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	18		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 10/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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NOV 2 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Aid - Sierra College
Department/Location

Nikolay Bobyk
Employee Name

Student Financial Assistance Specialist
Exact Position Title

789-2408
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature N Bobyk Date 10-23-07

If you have any questions, please contact _____, at _____

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BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA COLLEGE
District

FINANCIAL AID - SIERRA COLLEGE
Department/Location

BARBARA BROWN
Employee Name

STUDENT FINANCIAL ASSISTANCE SPECIALIST
Exact Position Title

789-2626
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature B Brown Date 10/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions & Records / Rocklin
Department/Location

Aubree Buske
Employee Name

Student Services Tech. - Temporary
Exact Position Title

_____ Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			✓
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	11		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/23/07

If you have any questions, please contact _____, at _____

PLEASE RETURN THIS INFORMATION BY _____; TO _____.

RECEIVED
NOV 2 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions and Records
Department/Location

Tina Calvert
Employee Name

Evaluations / Student Services
Exact Position Title

789-2991
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	11		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tina Calvert Date Oct. 23, 2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions & Records
Department/Location

Emily Evans
Employee Name

Student Services Technician
Exact Position Title

781-0477
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	12		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Emily Evans Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

AAR Rocklin
Department/Location

Kara Franlos
Employee Name

SST - AAR
Exact Position Title

781-0457
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Aid - Sierra College
Department/Location

Lucia Gomez
Employee Name

Student Services Technician - Financial Aid
Exact Position Title

789-2931
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓	✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Lucia Gomez Date 10/22/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions/Records - Rocklin
Department/Location

Carol Hanawalt
Employee Name

Evaluator
Exact Position Title

916 789-2637
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			✓
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14			✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	17			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Carol Hanawalt Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

AiR Rocklin
Department/Location

Scott Johnston
Employee Name

Student Services TECH
Exact Position Title

_____
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 10-23-2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

A&R
Department/Location

Irene Macdonald
Employee Name

Cashier
Exact Position Title

x2982
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 minutes	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Irene Macdonald Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admission & Records
Department/Location

Karin McGuire
Employee Name

Student Service Technician
Exact Position Title

789.2791
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	12			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	11	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	12	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karin McGuire Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

A:R Rocklin
Department/Location

Delores McKenzie
Employee Name

Student Service Tech II
Exact Position Title

2976
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12			✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	11	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Delores McKenzie Date 10-23-2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions - Roseville Gateway Center
Department/Location

Kathy Miller
Employee Name

SSTIII site
Exact Position Title

Telephone # 6269

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10-15		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10-20			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathy Miller Date 10/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO Gail Madden

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BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SIERRA College
District

FINANCIAL AID - SIERRA College
Department/Location

JAN OUTMAN
Employee Name

STUDENT SERVICES TECH
Exact Position Title

289-2624
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda S Wellers Date 10-23-05

If you have any questions, please contact LINDA, at 789-2805

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Aid - Sierra College
Department/Location

Doreen Prado
Employee Name

Financial Services Technician
Exact Position Title

789-2623
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doreen Prado Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College — District
A&R/Rocklin — Department/Location
REBECCA RAGSTAC — Employee Name
STUDENT SERVICES TECH. — Exact Position Title
(916) 781-0529 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			✓
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rebecca Ragstac Date 10/23/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College — District
A & R - NCC — Department/Location
Karen Reeves — Employee Name
Admin. Student Services Tech — Exact Position Title
5302745302 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen L Reeves Date 10/22/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College — District
A&R NCC — Department/Location
Erica Reich-Zuazo — Employee Name
Student Services Tech — Exact Position Title
(530) 274-5302 — Telephone #
12mo/11 mo/10mo/hrly ~~Work~~ year length(circle)
Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		.6	.7	.8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			✓
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Erica Reich-Zuazo Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions & Records / Rocklin
Department/Location

Gerri Snell
Employee Name

Student Services Tech
Exact Position Title

789-2657
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	9		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	11		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gerri Snell Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

A+R Rocklin
Department/Location

Corrine Vierra
Employee Name

SST. Records + Evaluations
Exact Position Title

(916)781-2964
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	34		✓	
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10		✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admin & Records / Rocklin
Department/Location

Judy Wasley
Employee Name

Evaluator
Exact Position Title

916/781-0518
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9		✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14	✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	17	✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Judy C. Wasley Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Financial Aid - Sierra College
Department/Location

Patricia White
Employee Name

Student Financial Assistance Specialist
Exact Position Title

789-2625
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia A White Date 10-23-07

If you have any questions, please contact Patty White, at 789-2625

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

RAP Rocklin
Department/Location

Liz Williams
Employee Name

Student Services Tech
Exact Position Title

(916) 789-2969
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			✓
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3		✓	
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	12			✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Liz Williams Date 10/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Sierra College
District

Admissions / Roseville Gateway
Department/Location

Alex Yarmolyuk
Employee Name

SST-III Site
Exact Position Title

916-781-6260
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 05-06 (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3-4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10-15			✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10-20			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10-22-07

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: SIERRA CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		45,745	?
2. Number of students who paid enrollment fees:			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		33,555	?
3. Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total		12,190	✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Laurence Lee Date: 12-18-07

Employee Name: (print) Laurence Lee Position or Title: Dir. Risk, Feasibility & Loss Control

If you have any questions, please contact me (916) 781-7185

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Revised July 2007

(see attached) ✓

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Sierra College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total			
2. Number of students who paid enrollment fees:			
Summer			
Fall			
Winter/ Intersession			
Spring			
Total			
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer	1940	2005	
Fall	5257	5130	
Winter/ Intersession	0	0	
Spring	5379	5055	
Total	12,576	12,190	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 10-31-07

Linda S. Williams
Employee Name: (print)

Manager Financial Aid
Position or Title

If you have any questions, please contact Linda Williams, at 789-2805.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Sierra Joint CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection: me (Ana)			
Summer		150	
Fall		684	
Winter/Intersession		N/A	
Spring		924	
Total		1758	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility Linda or June?			
Summer	647	668	
Fall	1,752	1710	
Winter/Intersession	0	0	
Spring	1,793	1685	
Total	4,192	4063	

* Estimate
1 of 3 of EFCW 1.8-1 #5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Laurence Lee Date 10-31-2007

Laurence Lee
Employee Name: (print)

Director, Risk, Feasibility & Loss Control
Position or Title

If you have any questions, please contact me, at 916-781-7185.

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BY: _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Sierra College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer	2134	2206	
Fall	5582	5643	
Winter/Intersession	0	0	
Spring	5453	5206	
Total	13,169	13,055	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer	1940	2005	
Fall	5257	5,130	
Winter/Intersession	0	0	
Spring	5379	5,055	
Total	12,576	12,190	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Linda S Williams Date 10-23-07

Linda S. Williams
Employee Name: (print)

Manager Financial Aid
Position or Title

If you have any questions, please contact 916-789-2805 - Linda at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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BY: _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Sierra College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 3,018,581	$ 2,603,656	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer			
B. Fall			
C. Winter/Intersession			
D. Spring			
TOTAL x $0.91 per credit			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Linda S. Williams Date 10-31-07

Linda S. Williams
Employee Name: (print)

Manager, Financial Aid
Position or Title

If you have any questions, please contact Linda Williams, at 789-2805

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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BY: _____

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C '06 DATA MART

As of Date: 22-Oct-07 10:45:21

College	Year	Award Type	Award Desc	Headcount	Total Amount
Sierra	2005-2006	BA	BOGW - Part A basis unreported	3882	1335328
Sierra	2005-2006	BB	BOGW - Part B based on income standards	5	2041
Sierra	2005-2006	BC	BOGW - Part C based on financial need	4011	1681212
				7,898	3,018,581

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Sierra Joint Community College District

	Productive Hourly Rate (PHR) 2006-07 Additional Information					12-13-2007	L.Lee		
	Sierra Joint Community College District								
Note:									
1	Annual salary from Accounting budget data used, including stipend, shift diff or longivity								
2	Step D used for classified employees; step C for conf/sup, if needed								
3	Certificated management has only one step								
4	Step 11, Class D used for FT faculty; step 7, Class C for PT, if needed								
5	Exceptions to #2,3,4 above is noted by (&)								
6	Annual salary = hourly rate x 2080								
7	Shortcut PHR for 12 months employee = annual salary x 1.21 / 1800								
8	Shortcut PHR for 10 months employee = annual salary x 1.21 / 1500								
9	(*) 1=hourly salary rate; 2=annual salary rate								
10	(#) 1=12 month employee; 2=10 month employee; 3=part time (hand calculated)								
11	Title or pay may have changed from one fiscal year to next								
12	**Data represents "to the best of my knowledge"**								
13	05-06 PHR copied from 05-06 PHR spreadsheet unless bolded (use "paste special" & "value")								
Name	**Title (05-06 title change)**	**&**	*****	**#**	**05-06 PHR**	**06-07 sal.rate**	**06-07 PHR**		
Alias, Laurie	A & R Technician		1	1		18.09	25.29		
Armstrong, Krsitne	Student Services Technician		2	1		36,441.00	24.50		
Bilyk, Lina	Student Services Technician		2	1		41,516.00	27.91		
Bobyk, Nikolay	Student Financial Assistance Specialist		2	1		42,203.00	28.37		
Burske, Aubree	Student Services Tecnician - Temp		1	1		19.96	27.91		
Clavert, Tina	Evaluation - Student Services		1	1		19.96	27.91		
Davis, Debbie	Administrative/Student Services Technician		2	1		47,694.00	32.06		
Eberhart, Stacey	Student Ambasador		1	1		16.41	22.94		
Evans, Emily	Student Services Technician		1	1		19.96	27.91		
George, Janice	A & R Office Assistant		1	1		16.41	22.94		
Johnston, Scott	Student Services Technician		1	1		19.96	27.91		
McGuire, Karin	Student Services Technician		2	1		43,596.00	29.31		
McKenzie, Delores	Student Services Technician		2	1		45,427.00	30.54		
Outman, Jan	Student Services Technician		2	1		51,810.00	34.83		
Ragsac, Rebecca	Student Services Technician		2	1		51,324.00	34.50		
Reeves, Karen	Student Services Technician		2	1		53,573.00	36.01		
Reich-Zuazo, Erica	Student Services Technician		1	1		19.96	27.91		
Snell, Gerri	Student Services Technician		2	1		47,694.00	32.06		
Velera, Corrine	Student Services Technician		2	1		46,529.00	31.28		
Yamamoto, Craig	Financial Services Manager (resigned)		2	1	51.58	77,468.00	52.08		

SixTen and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT Sierra Joint Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 32.82	$ 35.60
	AVERAGE ADMINISTRATIVE SECRETARY	$ 27.01	$ 29.31
	AVERAGE ASSOCIATE DEAN	$ 68.66	$ 74.92
	AVERAGE DEAN	$ 73.56	$ 80.27
	AVERAGE EXECUTIVE SECRETARY *ERROR IN 05-06*	$ 45.45*	$ 40.49
	AVERAGE FACULTY	$ 53.75	$ 57.73
	AVERAGE PRESIDENT	$ 112.51	$ 116.68
	AVERAGE VICE PRESIDENT	$ 85.50	$ 87.90
ALLBEE, NEAL	ASSOC. DEAN, PUBLIC SAFETY	$ 78.03	$ 78.03
AMARO, BONNIE	FINANCIAL ASSISTANT SPECIALIST	$ 44.41	$ 44.41
BARNEY, JANICE	ADMINISTRATIVE ASSISTANT	$ 39.35	$ 40.32
BASQUE, JOAN	ADMINISTRATIVE ASSISTANT	$ 37.11	$ 37.11
BENSEN, BONNIE	CONSULTANT	$ 110.00	$ 110.00
BIRDSONG, CYNDIE	PAYROLL TECHNICIAN (IA - Dist. Learning)	$ 32.06	$ 32.86

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
BISCHOFF, JEANETTER	STUDENT SERVICES TECHNICIAN	$ 26.06	$ 27.01
BRAY, KEVIN	INTERIM DEAN, COUNSELING	$ 76.47	$ 89.98
BRAZIL, DONNA	SUPERVISOR CAMPUS ADMIN SERVICES	$ 47.01	$ 48.18
BRIDGES, KAREN	ADMINISTRATIVE SECRETARY	$ 30.54	$ 31.28
BROWN, BARBARA	FINANCIAL ASSISTANT SPECIALIST	$ 43.27	$ 44.35
BROWN, WENDY	GENERAL ASSISTANT IV	$ 14.40	$ 9.68
BRUCE, KELLY	SYSTEMS ANALYST PROGRAMMER	$ 42.78	$ 44.00
CLARKSON, STEPHEN	GROUNDS MAINTENANCE. II	$ 33.58	$ 34.43
CONWAY, MARY	FACULTY	$ 73.90	$ 62.23
CORBETT, DIANE	ADMINISTRATIVE ASSISTANT I	$ 45.46	$ 46.60
CRANDALL, KOURTNEY	ACCOUNTING ANALYST	$ 26.93	$ 28.37
CULLEY, CHRISTINA	ADMIN ASSISTANT	$ 40.95	$ 43.14
CUNNINGHAM, RAY	ASSISTANT DIRECTOR OF PLANT OPERATIONS	$ 56.87	$ 67.15
DAVENPORT, SUZANNE	DISTRICT LEARNING COORDIATOR	$ 61.69	$ 62.93
DAVIES, MANDY	ASSOCIATE VP DEAN, STUDENT SERVICES	$ 79.23	$ 79.23
DECOURTEN, FRANK	INTERIM VP, ED PROG & SERVICES	$ 86.33	$ 60.24
DOLLESIN, NINETTE	R&R ANALYST	$ 52.89	$ 52.89
DRENNON (ORTEZ), SUE	BENEFITS COORDINATOR	$ 51.58	----------
DUPIUS, JENNIFER	PAYROLL TECHNICIAN	$ 29.69	$ 31.28

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
ECHAVARRIA, RUTH	ADMINISTRATIVE ASSISTANT	$ 37.11	$ 38.04
EPTING-DAVIS, CARLA	ASSOCIATE DEAN, STUDENT SERVICES	$ 54.35	$ 61.13
FERDAND, LORANA	GENERAL ASSISTANT IV	---------	$ 9.68
FERNANDES, CAROLINE	SYSTEMS ANALYST PROGRAMMER	$ 50.18	$ 51.46
FISHER, LINDA	ACCOUNTING MANAGER	$ 56.87	$ 58.01
FISHER, SUE	EXECUTIVE SECRETARY/BOARD RECORDER	$ 40.11	$ 40.11
FRANKS, KARA	SST-ADMISSIONS	$ 30.66	$ 32.06
GARNER, LUCIA	SST-FINANCIAL SERVICES	$ 24.63	$ 25.69
GIFFORD, NORMAN	ADMINISTRATIVE SERVICE TECH.	$ 32.06	$ 32.86
GOFF, ARLENE	PURCHASING ASSISTANT	$ 41.23	$ 42.26
GREEN, MAGGIE	ADMINISTRATIVE ASSISTANT	$ 35.35	$ 36.23
GUEVARA, STEPHANIE	ASSOCIATE DEAN (Dean, Business & High Tech)	$ 72.11	$ 72.11
HALEY, BRIAN	DEAN, LEARNING RESOURCE CTR	$ 72.11	$ 72.11
HALLAM, JENE	ADMINISTRATIVE ASSISTANT	$ 29.80	$ 36.73
HALLBERG, KAYLENE	DEAN, COUNSELING	$ 67.31	$ 67.31
HAMBLEN, JOHN	RESIDENCE LIFE SUPERVISOR	$ 40.91	$ 41.23
HANAWALT, CAROL	FINANCIAL AID SPECIALIST	$ 39.35	$ 40.32
HOLLWAGER, MARGO	ADMINISTRATIVE ASSISTANT	$ 23.53	$ 24.50
HUTCHING, SHARON	EXECUTIVE SECRETARY	$ 44.64	$ 44.64

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
JACKSON, DARLENE	ASSOCIATE DEAN, CHILD DEVELOPMENT CENTER	$ 67.31	$ 67.31
JAMISON, DIANNE	ADMINISTRATIVE TECH SBDC	$ 41.32	---
JUNG, STEPHEN	FACULTY	$ 64.09	$ 65.38
KALINA, MICHELLE	PROFESSOR-RESEARCH	$ 86.73	Resigned
KELLEY, CRAIG	RESEARCH ANALYST	$ 41.07	$ 41.89
KEROHER, KYLEE	SST	$ 25.02	Resigned
KLEINBACH, MARY	EXECUTIVE SECRETARY - EP&S	$ 47.76	Retired
LANGLEY, AMANDA	FACILITIES OPERATION ASSISTANT	$ 28.05	$ 29.78
LaPLACA, LISA	STUDENT SERVICES TECHNICIAN *ERROR IN 05-06*	$ 82.70*	$ 32.31
LATINKIC, IVAN	SYSTEMS ANALYST	$ 40.42	$ 41.89
LEE, LAWRENCE	DIRECTOR, RISK, FEASIBILITY & LOSS CONTROL	$ 78.57	$ 78.57
LELAND, JEAN	EMPLOYEE RELATIONS ANALYST	$ 49.12	$ 58.01
LIMPACH, HALEY	STUDENT ASSISTANT	$ 12.10	$ 9.68
LINDE, KAREN	ATHLETIC DIRECTOR (FACULTY)	$ 81.53	$ 83.17
LOPES, JOYCE	DIRECTOR OF FINANCE	$ 71.13	$ 74.04
LUDUTSKY-TAYLOR, TINA	PROVOST NCC	$ 82.70	Resigned
LYNN, MORGAN	INTERIM PRESIDENT	$ 116.68	-----
MACDONALD, JUNE	SST-ADMISSIONS	$ 35.15	$ 36.14
MACKEY, JENNIFER	ASSISTANT PROG MGR-COMMUNITY ED	$ 38.34	$ 39.26

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
MAHONEY, KAREN	ADMINISTRATIVE ASSISTANT	$ 34.77	$ 36.23
MALFA, DIANNE	ADMIN ASSISTANT-CHILD DEVELOPMENT CTRS	$ 41.32	$ 41.32
MARIANO, CINDY	EOPS/CARE/CALWORKS COORDINATOR	$ 88.79	$ 90.58
MARTINDALE, SHIRLEY	ADMIN. SECRETARY III	$ 41.88	$ 43.14
MARTINEZ, RON	ASSOC. VP HUMAN RESOURCES	$ 87.40	$ 87.40
MCCLYMONDS, JUDY	ADMIN. ASST.	$ 44.64	$ 45.54
MCDERMID, PATT	WRITING CENTER COORDINATOR	$ 80.16	$ 80.58
McKNIGHT, DIANE	ASSOC. DEAN LIBERAL ARTS	$ 74.28	$ 74.28
MCLAUGHLIN, CAROLYN	ACCOUNTING TECHNICIAN	$ 34.22	$ 36.20
MICHAELS, SUE	SUPERVISOR-MARKETING/PUBLIC RELATIONS	$ 49.12	$ 50.11
MILLER, PATTY	SST III-SITE	$ 30.41	$ 32.84
MODDER, GAIL	PROJECT MANAGER CUSTOMER SERVICES	$ 56.58	$ 58.56
MORGAN, LYNN	INTERIM PRESIDENT	$ 116.68	$ 116.68
MOSTAFAVI, ANNA	ACCOUNTING TECHNICIAN	$ 28.50	$ 29.78
NAVADEREEN, SOUNDERA	PT INSTRUCTOR	$ 67.18	$ 68.70
ORTIZ, SUSAN	BENEFITS COORDINATOR	$ 51.58	$ 52.62
OUTMAN, JAN	SST-FINANCIAL SERVICES	$ 33.49	---------
PATTERSON, PAT	GENERAL ASSISTANT IV	---------	$ 9.68
PASSUELLO, MARCY	PAYROLL COORDINATOR	$ 29.56	$ 29.56

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
PELTON, JOY	FACILITY OPS ASSISTANT	$ 28.37	$ 28.37
PLATZ, ANA	CASHIER	$ 20.42	$ 23.32
POLAND, BECKY	CURRICULUM ASSISTANT-STUDENT SERVICES	$ 32.58	$ 40.49
POWERS, JAN	COMMUNITY ED PROGRAM MANAGER	$ 54.16	---------
PRADO, DOREEN	ADMINISTRATIVE TECHNICIAN	$ 32.05	$ 32.86
RANTZ, RICK	DEAN , TRUCKEE CENTER	$ 73.09	$ 73.09
REHWALD, WENDE	HEALTH SERVICES COORDINATOR	$ 64.49	$ 70.76
REID, CORAL	ADMINISTRATIVE SERVICES TECH II	$ 36.16	$ 37.27
ROATH, LYNN	ENVIRONMENT HEALTH & SAFETY SPECIALIST	$ 49.70	$ 51.46
ROBERTS, MILLIE	EXECUTIVE SECRETARY	$ 50.61	$ 52.62
ROBERTSON, PAM	CASHIER	$ 23.32	$ 23.32
ROCHE, MAUREEN	SHORT TERM/PART TIME	$ 12.10	$ 12.10
SANCHEZ, LUIS	FACULTY	$ 65.26	$ 82.70
SCHNEIDER, GREG	PURCHASING SUPERVISOR Resigned	$ 40.41	$ 40.41
SCHWENK, LONNIE	CHIEF OF POLICE SERVICES	$ 44.98	$ 45.88
SCOTT, SANDRA	DIRECTOR OF ECONOMIC DEVELOPMENT	$ 72.11	$ 72.11
SESSIONS, PAM	ADMIN. SERVICE TECH III	$ 39.35	$ 40.32
SHIELDS, TRACY	ARTICULATION OFFICE	$ 43.39	$ 44.43
SIEMERS, BECKY	INTERIM ASSOCIATE DEAN	$ 71.69	$ 71.69

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
SILER, TINA	HR DEVELOPMENT ASSISTANT	$ 36.38	$ 37.11
SMALLEY, CRAIG	DATA ADMIN/DIST SYST SEC MGR	$ 66.34	$ 67.67
SMITH, DOUG	VP FINANCE ADMIN.	$ 87.90	$ 87.90
SNYDER, SCOTT	TECH SUPPORT SERVICES MANAGER	$ 56.87	$ 58.01
STONE, DENISE	DSPS	$ 73.91	$ 75.40
STRICKLIN, ANGELA	ADMINISTRATIVE ASSISTANT	$ 28.05	Resigned
STUPHEN, DEBRA	DEAN, LIBERAL ARTS RETIRED	$ 68.28	$ 81.94
THIERS, LAURIE	PROJECT MANAGER EP&S	$ 42.19	$ 43.94
VERMILLION, RHONDA	PAYROLL TECHNICIAN	$ 30.80	$ 32.06
VOLEK, JOHN	DEAN-P.E. ATHLETICS	$ 72.11	$ 72.11
WALTERS-DUNLAP, KAREN	DEAN, SCIENCE AND MATH Resigned	$ 73.09	$ 73.09
WASLEY, JUDY	SST-ADMISSIONS	$ 32.06	$ 32.86
WHITE, MARGERET	ASSOC DIRECTOR NURSING	$ 70.71	$ 70.71
WHITE, PATRICIA	STUDENT FINANCIAL ASST. SPECIALIST	$ 43.27	$ 44.35
WILLIAMS, LIZ	SST-ADMISSIONS	$ 29.08	$ 29.78
WILSON, JAMES	INSTRUCTIONAL. ASST. III	$ 43.34	$ 46.60
WILSON, WOODROW	DIRECTOR, PLANNING AND RESEARCH	$ 72.11	$ 72.11
WITZ, MEGAN	STUDENT ASSISTANT	$ 12.10	$ 12.10
WOLLESEN, MARY	PROGRAM MANGER OF SBDC & ECONOMIC DEVELOPMENT	$ 71.88	$ 71.88

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
SNELL, GERRI	STUDENT SERVICES TECHNICIAN		$ 32.06
SNYDER, SCOTT	TECH SUPPORT SERVICES MANAGER	$ 56.87	$ 58.01
STONE, DENISE	DSPS	$ 73.91	$ 75.40
STRICKLIN, ANGELA	ADMINISTRATIVE ASSISTANT	$ 28.05	Resigned
STUPHEN, DEBRA	DEAN, LIBERAL ARTS RETIRED	$ 68.28	$ 81.94
THIERS, LAURIE	PROJECT MANAGER EP&S	$ 42.19	$ 43.94
VELERA, CORRINE	STUDENT SERVICES TECHNICIAN		$ 31.28
VERMILLION, RHONDA	PAYROLL TECHNICIAN	$ 30.80	$ 32.06
VOLEK, JOHN	DEAN-P.E. ATHLETICS	$ 72.11	$ 72.11
WALTERS-DUNLAP, KAREN	DEAN, SCIENCE AND MATH Resigned	$ 73.09	$ 73.09
WASLEY, JUDY	SST-ADMISSIONS	$ 32.06	$ 32.86
WHITE, MARGERET	ASSOC DIRECTOR NURSING	$ 70.71	$ 70.71
WHITE, PATRICIA	STUDENT FINANCIAL ASST. SPECIALIST	$ 43.27	$ 44.35
WILLIAMS, LIZ	SST-ADMISSIONS	$ 29.08	$ 29.78
WILSON, JAMES	INSTRUCTIONAL. ASST. III	$ 43.34	$ 46.60
WILSON, WOODROW	DIRECTOR, PLANNING AND RESEARCH	$ 72.11	$ 72.11
WITZ, MEGAN	STUDENT ASSISTANT	$ 12.10	$ 12.10
WOLLESEN, MARY	PROGRAM MANGER OF SBDC & ECONOMIC DEVELOPMENT	$ 71.88	$ 71.88
YAMAMOTO, CRAIG	FINANCIAL SERVICES MANAGER RESIGNED		$ 52.08

College of the Sequoias Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,404,703	$ 2,925,985	$ 2,033,709	$ 2,552,897	$ 3,676,627	$ 5,347,168		$ 2,603,656
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 48,094	$ 58,520	$ 40,674	$ 51,058	$ 73,533	$ 106,943	$ -	$ 52,073
1.8-4 line 4A	Enrollment Fees Waived	$ 785,245	$ 760,171	$ 862,466	$ 903,263	$ 1,703,185	$ 2,898,484	$ 3,018,581	$ 2,638,375
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$ 60,372	$ 52,768
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 54,967	For 00-01 through 05-06 - unit fee						
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 20.00
Total # of credits	Line 4A divided by unit fee		69,106	78,406	82,114	108,690	124,185	116,099	131,918
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008	$ 105,650	$ 120,045
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 15,705	$ 15,203	$ 17,249	$ 18,065	$ 34,064	$ 57,970	$ 60,372	$ 52,768
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 54,967							
1.8-4 5.	Credit Units Waived		$ 62,886	$ 71,349	$ 74,724	$ 98,908	$ 113,008	$ 105,650	$ 120
Total Offset Savings	**Forward to EFCW-1**	**$ 70,672**	**$ 78,089**	**$ 88,598**	**$ 92,789**	**$ 132,972**	**$ 170,978**	**$ 166,022**	**$ 172,813**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2005-2006 fees are $26.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Sierra
COUNTY: Placer

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$4,871,581	$3,032,100	$1,532,203	$4,564,303
ENROLL FEE ADMIN (2%)	60,738	55,879	4,859	60,738
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	180,650	0	180,650	180,650
S.F.A.A.	443,446	407,971	35,475	443,446
E.O.P.S.	725,690	667,634	58,056	725,690
C.A.R.E.	145,557	133,913	11,644	145,557
D.S.P.S.	1,271,476	1,217,598	53,878	1,271,476
STATE HOSPITALS	0	0	0	0
CALWORKS	241,140	221,848	19,292	241,140
MATRICULATION (CREDIT)	925,137	844,686	80,451	925,137
MATRIC. (NONCREDIT)	0	5,909	-5,909	0
FAC.& STAFF DIVERSITY	17,202	15,826	1,376	17,202
PART-TIME FAC. ALLO.	564,871	519,682	45,189	564,871
PART-TIME FAC. OFF. HRS	41,580	0	41,580	41,580
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	159,462	146,705	12,757	159,462
SCHDL. MAINT. & REPAIR	159,477	146,719	12,758	159,477
TANF	56,049	51,565	4,484	56,049
ECON. DEVELOPMENT	848,500	434,700	278,040	712,740
NURSING EDUCATION	218,037	141,323	76,714	218,037
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	-1,426,013	-1,426,013	0	-1,426,013
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	283,091	283,091	0	283,091
BASIC SKILLS -REAPPROP	170,750	170,750	0	170,750
CAR. TECH. TRAILER BIL	504,152	504,152	0	504,152
GEN. PUR. TRAILER BILL	986,300	986,300	0	986,300
INST. MATERIAL TRAILER	595,156	595,156	0	595,156
SCHLD.MAINT. TRAILER B	595,156	595,156	0	595,156
FACULTY STAFF DEV	63,355	63,355	0	63,355
TOTAL	$12,754,498	$9,854,767	$2,456,693	$12,311,460

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Schedule 5A
Sierra Joint Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2004-2005 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 214.91	$ 25.20	$ 135.62
2	Staff Training	(04)(B)(1)(b)	$ 430.60	$ 100.80	$ 336.96
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 756.86	$ 47.24	$ 591.48
4	Waiving student fees	(04)(B)(2)(b)	$ 67,411.48	$ 73,787.34	$ 118,861.72
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 1,794.65	$ 1,661.40	$ 1,698.80
6	EFCW - Fee Waiver Costs	Total	$ 70,608.50	$ 75,621.98	$ 121,624.58
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 170,989.00	$166,022.00	$ 172,813.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (100,380.50)	$ (90,400.02)	$ (51,188.42)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 70,608.50**	**$ 75,621.98**	**$ 121,624.58**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home

Wednesday, N

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Sierra College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of November 21, 2007 03:21:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	3,424	1,044,166
BOGW - Part B based on income standards	8	2,537
BOGW - Part C based on financial need	4,165	1,543,888
Fee Waiver – Dependent of (children) deceased or disabled Veteran	101	43,840

Total Amount = $ 2,634,431 7,597 2,590,591

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
2 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 28, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4785

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
State Center Community College District CC10225

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for State Center Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC10225

(02) Claimant Name: State Center Community College District

County of Location: Fresno

Street Address or P.O. Box: 1525 East Weldon Avenue

City: Fresno | State: CA | Zip Code: 93704-6398

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 674,200	(13) $ 612,977
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 612,977
Due from State	(08) $ 674,200	(17) $ 612,977
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	470,326
(25) EFCW-1, (04)(B)(1)(a)(f)	155
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	155
(28) EFCW-1, (04)(B)(2)(b)(f)	492,242
(29) EFCW-1, (04)(B)(2)(c)(f)	3,099
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	352,582
(32) EFCW-1, (09)	209,931
(33) EFCW-1, (10)	495,651
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

Douglas R. Brinkley
Type or Print Name

Vice Chancellor, Finance & Administration
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 807	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

State Center Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 470,326.45	$ -	$ -	$ -	$ -	$ 470,326.45
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 154.94	$ -	$ -	$ -	$ -	$ 154.94
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 154.94	$ -	$ -	$ -	$ -	$ 154.94
b. Waiving student fees	$ 492,242.49	$ -	$ -	$ -	$ -	$ 492,242.49
c. Reporting BOG fee waiver data to CCC	$ 3,098.80	$ -	$ -	$ -	$ -	$ 3,098.80
(05) Total Direct Costs	$ 965,977.62	$ -	$ -	$ -	$ -	$ 965,977.62

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.50%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 352,581.83
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,318,559.45
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 209,931.00
(10) Less: Enrollment Fee Waiver offsets		$ 495,651.17
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 612,977.28

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Center Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various enrollment office sta Collecting fees	$38.57	3,606.5	$ 139,102.71				
Calculating total enrollment fee to be collected Various enrollment office sta Collecting fees	$38.57	1,707.8	$ 65,869.85				
Answering student's questions regarding enrollment fee collection Various enrollment office sta Collecting fees	$38.57	2,962.5	$ 114,263.63				
U[illegible]ng written and computer records for enrollment fee information Various enrollment office sta Collecting fees	$38.57	1,416.9	$ 54,649.83				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various enrollment office sta Collecting fees	$38.57	2,373.5	$ 91,545.90				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various enrollment office sta Collecting fees	$38.57	126.9	$ 4,894.53				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 470,326.45	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Center Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Cortes, Chris Director, Financial Aid	$77.47	2.0	$ 154.94				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 154.94	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Center Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Cortes, Chris Director, Financial Aid	$77.47	2.0	$ 154.94				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 154.94	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Center Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Various financial office staff Waiving enrollment fees	$44.69	713.9	$ 31,904.19				
Receiving waiver applications Various financial office staff Waiving enrollment fees	$44.69	2,526.0	$ 112,886.94				
Evaluating waiver applications and verifying application documents Various financial office staff Waiving enrollment fees	$44.69	1,647.4	$ 73,622.31				
Notifying students of additional documentation requirements and how to obtain information Various financial office staff Waiving enrollment fees	$44.69	701.5	$ 31,350.04				
Entering approved application information into district records; providing student award letter Various financial office staff Waiving enrollment fees	$44.69	4,737.3	$ 211,709.94				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Various financial office staff Waiving enrollment fees	$44.69	688.5	$ 30,769.07				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 492,242.49	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Center Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Cortes, Chris Director, Financial Aid	$77.47	40.0	$ 3,098.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 3,098.80	$ -	$ -	$ -	$ -

New 04/06

State Center Community College District

308/95 ENROLLMEN[illegible] COLLECTIONS/WAIVERS

[illegible]-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	2.00	Cortes, Chris	Director, Financial Aid	$77.47	$154.94	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	2.00	Cortes, Chris	Director, Financial Aid	$77.47	$154.94	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	40.00	Cortes, Chris	Director, Financial Aid	$77.47	$3,098.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	44.00	**Cortes, Chris Total**			$3,408.68		
04-05	3,606.50	Various enrollment office sta	Collecting fees	$38.57	$139,102.71	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	1,707.80	Various enrollment office sta	Collecting fees	$38.57	$65,869.85	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	2,962.50	Various enrollment office sta	Collecting fees	$38.57	$114,263.63	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	1,416.90	Various enrollment office sta	Collecting fees	$38.57	$54,649.83	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	2,373.50	Various enrollment office sta	Collecting fees	$38.57	$91,545.90	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	126.90	Various enrollment office sta	Collecting fees	$38.57	$4,894.53	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	12,194.10	**Various enrollment office staff Total**			$470,326.45		
04-05	713.90	Various financial office staff	Waiving enrollment fees	$44.69	$31,904.19	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	2,526.00	Various financial office staff	Waiving enrollment fees	$44.69	$112,886.94	Receiving waiver applications	Waiving student fees
04-05	1,647.40	Various financial office staff	Waiving enrollment fees	$44.69	$73,622.31	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	701.50	Various financial office staff	Waiving enrollment fees	$44.69	$31,350.04	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	4,737.30	Various financial office staff	Waiving enrollment fees	$44.69	$211,709.94	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	688.50	Various financial office staff	Waiving enrollment fees	$44.69	$30,769.07	In case of denied applications, reviewing and evaluating information if denial is appealed by stude	Waiving student fees
	11,014.60	**Various financial office staff Total**			$492,242.49		
	23,252.70	**Grand Total**			$965,977.62		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: February 8, 2005

INSTITUTION:
State Center Community College District
1525 East Weldon Avenue

FILING REF.: The preceding Agreement was dated NONE

Fresno CA 93704-6398

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/08	36.5	On-Campus	All Programs
PROV.	07/01/08	06/30/09	36.5	On-Campus	All Programs

*BASE:
Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first $25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of $25,000.

U73153

Schedule 1A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	77,283
Avg. time p/account	2.8
Total Time (in minutes)	216392
Per Hour	60
Hours Worked (** **Activity 11**)	**3606.5**
***EFC 2**	40,987
Avg. time p/student	2.5
Total Time (in minutes)	102468
Per Hour	60
Hours Worked (** **Activity 12**)	**1707.8**
***EFC 1**	77,283
Avg. time p/question	2.3
Total Time (in minutes)	177751
Per Hour	60
Hours Worked (** **Activity 13**)	**2962.5**
***EFC 1**	77,283
Avg. time p/file	1.1
Total Time (in minutes)	85011
Per Hour	60
Hours Worked (** **Activity 14**)	**1416.9**
***EFC 4**	30,277
Avg. time p/account	5.1
Total Time (in minutes)	154413
Per Hour	60
Hours Worked (** **Activity 15**)	**2573.5**
***EFC 5**	2,820
Avg. time p/student	2.7
Total Time (in minutes)	7614
Per Hour	60
Hours Worked (** **Activity 16**)	**126.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	32,948
Avg. time p/question	1.3
Total Time (in minutes)	42832
Per Hour	60
Hours Worked (** **Activity 21**)	**713.9**
***EFW 6**	32,948
Avg. time p/application	4.6
Total Time (in minutes)	151561
Per Hour	60
Hours Worked (** **Activity 22**)	**2526.0**
***EFW 6**	32,948
Avg. time p/evaluation	3.0
Total Time (in minutes)	98844
Per Hour	60
Hours Worked (** **Activity 23**)	**1647.4**
***EFW 8**	7,794
Avg. time p/application	5.4
Total Time (in minutes)	42088
Per Hour	60
Hours Worked (** **Activity 24**)	**701.5**
***EFW 7**	25,154
Avg. time p/application	11.3
Total Time (in minutes)	284240
Per Hour	60
Hours Worked (** **Activity 25**)	**4737.3**
***EFW 8**	7,794
Avg. time p/application	5.3
Total Time (in minutes)	41308
Per Hour	60
Hours Worked (** **Activity 26**)	**688.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	4	5	
		**Activity Codes					
		11	12	13	14	15	16
Penny Christen	Account Tech II			1.0			5.0
Michael Coppedge	Cashier	1.0		2.3	0.9	21.1	
Dan Cousins	Accounting Supervisor	7.0	1.0	5.0			1.0
Sherri Dodd	Account Clerk III	2.1	4.0	1.9	0.8	1.9	2.0
Teresa Ervine	Account Clerk III	3.9	4.8	1.9	1.8	2.7	4.1
Sussette Ishizuka	Account Tech II	2.0	1.0	2.0		1.0	1.0
Dale Jimenez (White)	Account Clerk II	4.9	3.9	2.9	2.5	6.0	9.1
Linda Sanchez	Account Clerk II	3.0		3.0			
Wil Schofield	Accounting Supervisor	1.0	2.0	2.0		4.0	
Barbara Shipley	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0
Janice L. Stannard	Cashier	2.5	1.5	4.0		5.5	0.5
Evelyn Thieme	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0
Average		**2.8**	**2.5**	**2.3**	**1.1**	**5.1**	**2.7**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answering Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	04-05 PHR
Penny Christen	Account Tech II	$47.45
Michael Coppedge	Cashier	$31.62
Dan Cousins	Accounting Supervisor	$55.32
Sherri Dodd	Account Clerk III	$35.17
Teresa Ervine	Account Clerk III	$32.45
Sussette Ishizuka	Account Tech II	$47.29
Dale Jimenez (White)	Account Clerk II	$29.72
Linda Sanchez	Account Clerk II	$28.80
Wil Schofield	Accounting Supervisor	$55.36
Barbara Shipley	Office Assistant III	$34.66
Janice L. Stannard	Cashier	$30.49
Evelyn Thieme	Office Assistant III	$34.48
Average		**$38.57**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default i**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in f
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of paymer and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student accc and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the s
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Chris Cortes	Director, Financial Aid	1	5	3	6	14	6
Kathryn Duerksen	Financial Aid Assistant II	1	5	3	6	14	6
Mary Mathos	Financial Aid Assistant I	3	3	3	3	3	3
Linda Nygren	Financial Aid Assistant I	1	5	3	6	14	6
Sandra Rodriguez	Office Assistant III	1	5	3	6		
Barbara Shipley	Office Assistant III	1					
Evelyn Thieme	Office Assistant III	1					
Average		**1.3**	**4.6**	**3.0**	**5.4**	**11.3**	**5.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student app in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into distric Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing writte notification to student of final eligibility status.

Schedule 3A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						04-05 PHR
		6			8	7	8	
		**Activity Codes						
		21	22	23	24	25	26	
Chris Cortes	Director, Financial Aid	1	5	3	6	14	6	$77.47
Kathryn Duerksen	Financial Aid Assistant II	1	5	3	6	14	6	$48.18
Mary Mathos	Financial Aid Assistant I	3	3	3	3	3	3	$41.59
Linda Nygren	Financial Aid Assistant I	1	5	3	6	14	6	$43.47
Sandra Rodriguez	Office Assistant III	1	5	3	6			$33.00
Barbara Shipley	Office Assistant III	1						$34.66
Evelyn Thieme	Office Assistant III	1						$34.48
Average		**1.3**	**4.6**	**3.0**	**5.4**	**11.3**	**5.3**	**$44.69**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1. Enrolled Students	64,348	67,056	69,882	75,704	80,611	76,738	77,283
EFC 2	1.8-1	2. Paid Enrollment fees	38,288	44,207	44,848	43,379	44,342	39,698	40,987
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	32,963	34,791	37,481	41,827	45,977	45,108	48,622
EFC 4	1.8-2	1. Delinquencies collections	N/A	2,818	13,720	23,797	20,170	36,077	30,277
EFC 5	1.8-2	2. Refunds	1,305	1,890	2,083	2,471	2,435	2,968	2820
EFW 6	1.8-3	1. Waivers Requested	X	22,223	22,848	26,252	29,475	31,637	32,948
EFW 7	1.8-3	2. Waivers Approved	X	14,264	19,482	22,680	24,201	24,599	25,154
EFW 8	1.8-3 (1-2)	Waivers Denied	X	7,959	3,366	3,572	5,274	7,038	7,794

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fresno City
For 2005 Spring Semester

Data Current As Of July 05, 2006 11:51:54

Total Headcount	21,102

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2005 Spring Semester

Data Current As Of July 05, 2006 11:56:28

Total Headcount	11,625

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fresno City
For 2004 Fall Term

Data Current As Of July 05, 2006 11:52:12

Total Headcount	21,932

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2004 Fall Term

Data Current As Of July 05, 2006 11:56:43

Total Headcount	11,855

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fresno City For 2004 Summer Term

Data Current As Of July 05, 2006 11:52:23

Total Headcount	7,690

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2004 Summer Term

Data Current As Of July 05, 2006 11:56:54

Total Headcount	3,079

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SCCCD - Reedley College

Chris Cortes	Director of Financial Aid	
Employee Name	Exact Position Title	
RC - Financial Aid Office	(559) 638-0312	12mo/11mo/10mo/hrly
College/Department/Location	Telephone #	Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:'								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2			2			2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					40			8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	2	2	2	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	40	40	40	40	40	40	40
TOTALS:	44	42	42	44	82	42	44	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 6738-0312

PLEASE SUBMIT THIS INFORMATION BY C. Cortes ; TO Ed Eng

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO / FCC
Department/Location

PENNY CHRISTEN
Employee Name

ACCT TECH II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5:00					✓

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Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCD
District

CBO / FCC
Department/Location

MICHAEL COPPEDGE
Employee Name

CASHIER
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses. 1.95	.57	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer. 2.28	2:17	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. 1.87	:52	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) 21.05	21:53				2 ✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					✓

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Employee Signature M. Coppedge Date 5-4-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO / FCC
Department/Location

Dan Cousins
Employee Name

Acct Supervisor
Exact Position Title

8705
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7:00	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1:00	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5:00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature C.A. Shaw for Dan Cousins Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO / FCC
Department/Location

Sheri Dodd
Employee Name

Account Clerk III
Exact Position Title

442-4600x8716 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.08 2:05					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4:00					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.92 1:55					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0.75 0:45					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.92 1.55					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student acoount/record.	2.00					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sheri Dodd Date 5-1-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO - FCC
Department/Location

Theresa Ervine
Employee Name

Acct Clerk III
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.87 3:52	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4.78 4:47	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.88 1:53	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.82 1:49	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2.65 2:39				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4.1 4:06					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Theresa Ervine by [signature] Date 5/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

STATE CENTER COMMUNITY COLLEGE DISTRICT — District

BUS. SERVICES OFFICE / REEDLEY COLLEGE — Department/Location

SUSETTE "ISHIZUKA" Shi Wong Ishizuka — Employee Name

ACCTG TECH II — Exact Position Title

61

638-3641 ext 3450 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susette Ishizuka — Date 2/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD (WHITE)
District

CBO / FCC
Department/Location

Dale Jimenez
Employee Name

Acc Clerk II
Exact Position Title

(559) 442-4600 X8712
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.55	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.56	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.52	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.30	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5.65				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9.06					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dale Jimenez Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCD
District

CBO / FCC
Department/Location

Linda Sanchez
Employee Name

Account Clerk II
Exact Position Title

8708
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.00	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/01/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Comm Coll Dist.
District

RC-BSO
Department/Location

Wil Schofield
Employee Name

Acctng Supervisor
Exact Position Title

638-3641 x3501
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	\					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	\					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Wil Schofield Date 2/2/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

ADMISSIONS & RECORDS
Department/Location

BARBARA SHIPLEY
Employee Name

OA III
Exact Position Title

695-4851
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.0	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. .33	20SEC.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2.0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 2/16/06

If you have any questions, please contact Tina D Masterson, at (559) 625-4852

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Reedley Business Office
Department/Location

Janice L Stannard
Employee Name

Cashier
Exact Position Title

559/638-0342 X3441
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	/					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5.5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice L Stannard Date 2/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Community College
District

Admissions + Records
Department/Location

Evelyn Thieme
Employee Name

Office Assistant III
Exact Position Title

559) 675-4800
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student. 1.33	30 sec.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evelyn Thieme Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Chris Cortes
Employee Name

Director of Financial Aid
Exact Position Title

(559) 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD — District

Financial Aid - Reedley College — Department/Location

Kathryn Duerksen — Employee Name

Financial Aid Assistant II — Exact Position Title

(559) 638-0312 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Duerksen Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - FCC
Department/Location

Mary Mathes
Employee Name

Financial Aid Assistant I
Exact Position Title

442-8245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

USING 6

USING 8

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Mathes Date 5-5-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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ONLY STAFF NOT Reporting on that

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Linda Nygren
Employee Name

Financial Aid Assistant I
Exact Position Title

(559) 638-0312
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda T. Nygren Date 4-28-06

If you have any questions, please contact Chris Cortes at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Sandra Rodriguez
Employee Name

Office Assistant III
Exact Position Title

(559) 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra J. Rodriguez Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

ADMISSIONS & RECORDS
Department/Location

BARBARA SHIPLEY
Employee Name

OA III
Exact Position Title

675-4851
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02 02-03 03-04 (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 625-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Tina Saved for every year

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Community College
District

Admissions + Records
Department/Location

Evelyn Thieme
Employee Name

Office Assistant III
Exact Position Title

(559) 675-4800
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
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Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

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Employee Signature Evelyn Thieme Date 5/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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time same for every year

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: SCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	11561	15319	15062	16545	17127	13754	15223	16385
Fall	30981	33352	35433	37424	39598	39049	39143	39333
Winter/ intersession.	—	—	—	—	—	—	—	—
Spring	28703	30327	31833	34315	35619	35228	35243	33904
Total	43972	47064	49836	52771	54662	52023	52322	52028
2. Number of students who paid enrollment fees:								
Summer	6912	9020	8129	8005	8037	6116	7173	7296
Fall	16664	18484	19460	18589	19145	17890	18089	17791
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	15412	16403	17259	16185	17161	15692	15721	15099
Total	21607 ~~21894~~	24451	25001	24589	24408	20718	19225	19177
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	4849	6299	6924	7696	8769	7280	8050	9099
Fall	14822	14868	15973	17606	19282	19593	21056	21596
Winter/ Intersession	—	—	—	—	—	—	—	—
Spring	13291	13624	14694	16525	17826	18235	19516	18805
Total	32244	22607	24835	28183	30254	31305	33107	32851

1-3=2

SA. YK

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Doris Griffin by Cheryl Sullivan Date 5/1/06

Doris Griffith / Cheryl Sullivan — Acct Tech II

Employee Name: (print) Position or Title

If you have any questions, please contact ______________________, at ______________.

PLEASE SUBMIT THIS INFORMATION BY ____________; TO ______________________.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: STATE C

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	71251	78998	82529	87814	92544	88031	89609	59622
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	38288	44202	44848	43549	44350	39698	40987	40122
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total	32963	34791	37481	41827	45979	45108	48622	49500

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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COPY W/ Corrected totals

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: SCCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	N/A	2818	13,720	23,791	20,170	36,077	30,227	15,655
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	1305	1890	2083	2471	2435	2968	2820	2071

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Employee Signature: _____ Date 5/1/06

Employee Name: (print) Cheryl Sullivan

Position or Title Acct Tech II

If you have any questions, please contact _____, at 559-442-4600 ext. 8709

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: State Center CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession	—	—	—	—	—	—	—	—
Spring								
Total	19,931	22,223	22,848	26,252	29,475	31,637	32,948	33,196
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession	—	—	—	—	—	—	—	—
Spring								
Total	16,931	21,471	20,195	22,457	23,990	25,542	25,919	31,529

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Employee Signature: Ron Wells Date 5/16/06

RON WALLS
Employee Name: (print)

ACCT / AUDITOR
Position or Title

If you have any questions, please contact _____, at _____.

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: State Center CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 2694717	$ 2103506	$ 2275061	$ 2539796	$ 2718599	$ 3710030	$ 5759626	$ 4424869
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 28,500	$ 45,524	$ 255904	$ 340979	$ 423607.5	$ 601803	$ 1088026	$ 1037021.7
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 570	$ 910	$ 5,142	$ 6,822.0	$ 8,472.1	$ 12,036.1	$ 21,760.2	$ 20,740.4
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$ 1,995	$ 3,187						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession			—	—	—	—	—	—
~~Spring~~ TOTAL PER FY			234963	310089	385098	337670	415389	398855
TOTAL x $0.91 per credit			211,541	282,181	350,439	307,280	378,004	362,958

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Employee Signature: Ron Walls Date 6/22/06

RON WALLS
Employee Name: (print)

Position or Title

If you have any questions, please contact _____, at _____.

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STATE CENTER COMMUNITY COLLEGE DISTRICT
PRODUCTIVE HOURLY RATE CALCULATION
For EFCW Claim
For Fiscal Year Ended June 30, 2005

Name	Pay Class	Annual Salary	Benefits	Total Sal/Ben	Annual Hours	Less Annual Hol Hrs	Less Annual Vac Hrs	Less Annual Sick Hrs	Annual Prod Hrs	Annual Prod Hr Rate
Financial Aid Director	M66-5	112,405.00	24,204.30	136,609	2,080	120	176	96	1,688	$ 80.93
Financial Aid Manager	M59-5	97,921.00	22,419.87	120,341	2,080	120	176	96	1,688	$ 71.29
Financial Aid Assistant II	R60-C	47,484.00	19,857.26	67,341	2,080	120	168	96	1,696	$ 39.71
Financial Aid Assistant I	R57-C	44,105.00	19,174.03	63,279	2,080	120	168	96	1,696	$ 37.31
Office Assistant I	R38-C	27,735.00	15,864.02	43,599	2,080	120	168	96	1,696	$ 25.71
Office Assistant II	R41-C	29,854.00	16,292.48	46,146	2,080	120	168	96	1,696	$ 27.21
Office Assistant III	R48-C	35,421.00	17,418.13	52,839	2,080	120	168	96	1,696	$ 31.16
Programmer/Analyst	R73-C	65,112.00	23,421.65	88,534	2,080	120	168	96	1,696	$ 52.20
Accounting Supervisor	M37-5	63,321.00	23,159.51	86,481	2,080	120	176	96	1,688	$ 51.23
Account Tech II	R61-C	48,632.00	20,089.39	68,721	2,080	120	168	96	1,696	$ 40.52
Account Tech I	R57-C	44,105.00	19,174.03	63,279	2,080	120	168	96	1,696	$ 37.31
Cashier	R44-C	32,167.00	16,760.17	48,927	2,080	120	168	96	1,696	$ 28.85
Account Clerk II	R41-C	29,854.00	16,292.48	46,146	2,080	120	168	96	1,696	$ 27.21
Account Clerk III	R48-C	35,421.00	17,418.13	52,839	2,080	120	168	96	1,696	$ 31.16
Student Aides	6.75/HR	6,669.00	425.48	7,094	988	-	-	-	988	$ 7.18
	ID									
Coppedge, Michael	251982	36,309.00	17,311.00	53,620	2,080	120	168	96	1,696	$ 31.62
Cortes, Chris	300013	101,012.00	29,749.00	130,761	2,080	120	176	96	1,688	$ 77.47
Cousins, Daniel	82310	69,420.00	23,957.00	93,377	2,080	120	176	96	1,688	$ 55.32
Cristan, Penny	27045	58,708.00	21,770.00	80,478	2,080	120	168	96	1,696	$ 47.45
Dodd, Sherri	130575	41,326.00	18,318.00	59,644	2,080	120	168	96	1,696	$ 35.17
Duerksen, Kathy	89276	58,835.00	21,717.00	80,552	2,080	120	192	96	1,672	$ 48.18
Ervin, Theresa	210151	38,171.00	17,642.00	55,813	2,080	120	144	96	1,720	$ 32.45
Ishizuka, Sussette	15303	57,602.00	21,470.00	79,072	2,080	120	192	96	1,672	$ 47.29
Jimenez(White), Dale	50772	33,731.00	16,675.00	50,406	2,080	120	168	96	1,696	$ 29.72
Lewis, Otha	80616	67,574.00	23,592.00	91,166	2,080	120	96	96	1,768	$ 51.56
Mathos, Mary	196123	50,561.00	19,978.00	70,539	2,080	120	168	96	1,696	$ 41.59
Nicholes, Gary	163972	52,298.00	20,522.00	72,820	2,080	120	144	96	1,720	$ 42.34
Nygren, Linda	89271	52,284.00	20,402.00	72,686	2,080	120	192	96	1,672	$ 43.47
Ramon, Frank	61772	109,532.00	23,347.00	132,879	2,080	120	176	96	1,688	$ 78.72
Rodriguez, Sandra	20317	39,072.00	17,682.00	56,754	2,080	120	144	96	1,720	$ 33.00
Sanchez, Linda	29526	32,908.00	16,627.00	49,535	2,080	120	144	96	1,720	$ 28.80
Schofield, Wil	185827	69,420.00	24,028.00	93,448	2,080	120	176	96	1,688	$ 55.36
Shipley,Barbara	40281	41,338.00	18,272.00	59,610	2,080	120	144	96	1,720	$ 34.66
Stannard, Janice	209053	35,421.00	17,015.00	52,436	2,080	120	144	96	1,720	$ 30.49
Thieme,Evelyn	95148	41,052.00	18,258.00	59,310	2,080	120	144	96	1,720	$ 34.48
Trexler, Gina	116581	46,513.00	19,319.00	65,832	2,080	120	144	96	1,720	$ 38.27

State Center Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,103,506	$ 2,775,061	$ 2,593,976	$ 2,718,599	$ 3,710,030	$ 5,759,626
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,070	$ 55,501	$ 51,880	$ 54,372	$ 74,201	$ 115,193
1.8-4 line 4A	Enrollment Fees Waived	$ 3,206,475	$ 6,320,816	$ 3,708,191	$ 4,048,517	$ 6,346,697	$ 9,751,000
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 224,453	For 00-01 through 04-05 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		574,619	337,108	368,047	405,022	417,780
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 224,453					
1.8-4 5.	Credit Units Waived		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 288,583**	**$ 649,319**	**$ 380,932**	**$ 415,893**	**$ 495,504**	**$ 575,200**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: State Center
COUNTY: Fresno

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$69,164,121	$62,485,773	$55,801	$62,541,574
ENROLL FEE ADMIN (2%)	209,931	180,541	29,390	209,931
APPRENTICE ALLOWANCE	38,880	33,437	5,443	38,880
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	4,100,764	3,526,657	574,107	4,100,764
S.F.A.A.	1,405,576	1,206,216	199,360	1,405,576
E.O.P.S.	2,243,194	1,927,768	315,426	2,243,194
C.A.R.E.	223,978	192,621	31,357	223,978
D.S.P.S.	1,390,017	1,189,571	200,446	1,390,017
STATE HOSPITALS	0	0	0	0
CALWORKS	1,362,604	1,230,899	131,705	1,362,604
MATRICULATION (CREDIT)	1,006,515	853,387	153,128	1,006,515
MATRIC. (NONCREDIT)	27,045	23,259	3,786	27,045
FAC.& STAFF DIVERSITY	24,814	17,638	7,176	24,814
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	1,105,044	950,338	154,706	1,105,044
BLOCK GRANT (ONE-TIME)	537,005	461,824	75,181	537,005
ECON. DEVELOPMENT	899,238	700,767	54,593	755,360
TELECOMMUNICATIONS	122,612	63,119	59,493	122,612
TANF	265,871	226,423	39,448	265,871
VTEA LEADERSHIP	150,000	58,500	67,500	126,000
VTEA TECH. PREP.	103,200	107,328	-20,640	86,688
VTEA TITLE I C	1,374,235	535,951	618,406	1,154,357
PLANT & INSTRUCTIONAL	602,336	518,009	84,327	602,336
PRIOR YEAR CORRECTION	2,079,388	2,059,321	20,067	2,079,388
TOTAL	$88,436,368	$78,549,347	$2,860,206	$81,409,553

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)			$ 118.96			$ 154.94
2	Staff Training	(04)(B)(1)(b)				$ 2,619.60		
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)		$ 106.74	$ 118.96	$ 130.98	$ 144.48	$ 154.94
4	Waiving student fees	(04)(B)(2)(b)	$ 181,175.39	$ 232,968.53	$ 290,746.58	$ 355,838.75	$ 414,661.56	$ 492,242.49
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)		$ 2,134.80	$ 2,379.20	$ 2,619.60	$ 2,889.60	$ 3,098.80
6	EFCW - Fee Waiver Costs	Total	$ 181,175.39	$ 235,210.07	$ 293,363.70	$ 361,208.93	$ 417,695.64	$ 495,651.17
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 288,583.00	$ 649,319.00	$ 380,932.00	$ 415,893.00	$ 495,504.00	$ 575,200.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (107,407.61)	$ (414,108.93)	$ (87,568.30)	$ (54,684.07)	$ (77,808.36)	$ (79,548.83)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 181,175.39**	**$ 235,210.07**	**$ 293,363.70**	**$ 361,208.93**	**$ 417,695.64**	**$ 495,651.17**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fresno City College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 05, 2006 11:31:24

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	84	41,340
BOGW - Part A-2 based on SSI recipient status	11	3,663
BOGW - Part A-3 based on general assistance recipient status	1	338
BOGW - Part A-4 based on Veteran's or National Guard dependent status	28	11,609
BOGW - Part A basis unreported	5,221	411,501
BOGW - Part B based on income standards	11,557	4,431,850
BOGW - Part C based on financial need	4,900	1,949,141

Total Unduplicated Count = 17,846
Total Amount = $ 6,849,442

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Reedley College College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 05, 2006 11:45:17

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	8	3,686
BOGW - Part A-2 based on SSI recipient status	26	6,409
BOGW - Part A-4 based on Veteran's or National Guard dependent status	29	14,742
BOGW - Part A basis unreported	1,698	106,274
BOGW - Part B based on income standards	4,435	1,739,639
BOGW - Part C based on financial need	2,528	1,030,808

Total Unduplicated Count = 7,308
Total Amount = $ 2,901,558

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 16, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
State Center Community College District CC10225

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for State Center Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2005-2006
1/84	Health Fee Elimination	2005-2006
308/95	Enrollment Fee Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. T. Bramwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office — Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC10225

(02) Claimant Name: State Center Community College District

County of Location: Fresno

Street Address or P.O. Box: 1525 East Weldon Avenue

City: Fresno | State: CA | Zip Code: 93704-6398

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 588,700	(13) $ 535,215
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 535,215
Due from State	(08) $ 588,700	(17) $ 535,215
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	7
(23) EFCW-1, (04)(A)(1)(b)(f)	18
(24) EFCW-1, (04)(A)(2)(a)(f)	393,566
(25) EFCW-1, (04)(B)(1)(a)(f)	683
(26) EFCW-1, (04)(B)(1)(b)(f)	672
(27) EFCW-1, (04)(B)(2)(a)(f)	168
(28) EFCW-1, (04)(B)(2)(b)(f)	528,475
(29) EFCW-1, (04)(B)(2)(c)(f)	5,412
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	339,085
(32) EFCW-1, (09)	197,461
(33) EFCW-1, (10)	535,411
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date** 1/8/07

Douglas R. Brinkley — **Type or Print Name**

Vice Chancellor, Finance & Admin — **Title**

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 257	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: State Center Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 7.02	$ -	$ -	$ -	$ -	$ 7.02
b. Staff training (One time per employee)	$ 17.57	$ -	$ -	$ -	$ -	$ 17.57
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 393,565.61	$ -	$ -	$ -	$ -	$ 393,565.61
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 683.28	$ -	$ -	$ -	$ -	$ 683.28
b. Staff training (One time per employee)	$ 672.40	$ -	$ -	$ -	$ -	$ 672.40
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 168.10	$ -	$ -	$ -	$ -	$ 168.10
b. Waiving student fees	$ 528,475.46	$ -	$ -	$ -	$ -	$ 528,475.46
c. Reporting BOG fee waiver data to CCC	$ 5,411.84	$ -	$ -	$ -	$ -	$ 5,411.84
(05) Total Direct Costs	$ 929,001.28	$ -	$ -	$ -	$ -	$ 929,001.28

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.50%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 339,085.47
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,268,086.75
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 197,461.00
(10) Less: Enrollment Fee Waiver offsets		$ 535,411.08
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 535,214.67

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ıte Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Shipley, Barbara Office Assistant III	$35.14	0.1	$ 3.51				
Thieme, Evelyn Office Assistant III	$35.05	0.1	$ 3.51				
(05) Total [X] Subtotal [ ] Page 1 of 1			$ 7.02	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Shipley, Barbara Office Assistant III	$35.14	0.5	$ 17.57				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 17.57	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Student Fee Technician Various	$35.33	3,169.4	$ 111,974.90				
Calculating total enrollment fee to be collected Student Fee Technician Various	$35.33	1,404.5	$ 49,620.99				
Updating written and computer records for enrollment fee information Student Fee Technician Various	$35.33	1,584.7	$ 55,987.45				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Student Fee Technician Various	$35.33	1,957.5	$ 69,158.48				
roviding refund of enrollment fees paid to students establishing fee waiver after enrollment Student Fee Technician Various	$35.33	118.3	$ 4,179.54				
Answering student's questions regarding enrollment fee collection Student Fee Technician Various	$35.33	2,905.3	$ 102,644.25				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 393,565.61	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Ramon, Frank Director Financial Aid	$85.41	8.0	$ 683.28				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 683.28	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ıte Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Cortes, Chris Director Financial Aid	$84.05	8.0	$ 672.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 672.40	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ate Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Cortes, Chris Director Financial Aid	$84.05	2.0	$ 168.10				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 168.10	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: ate Center Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Receiving waiver applications Financial Aid Assistant Various	$47.55	2,545.0	$ 121,014.75				
Evaluating waiver applications and verifying application documents Financial Aid Assistant Various	$47.55	1,659.8	$ 78,923.49				
Entering approved application information into district records; providing student award letter Financial Aid Assistant Various	$47.55	5,085.8	$ 241,829.79				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Assistant Various	$47.55	547.0	$ 26,009.85				
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Assistant Various	$47.55	719.2	$ 34,197.96				
Notifying students of additional documentation requirements and how to obtain information Financial Aid Assistant Various	$47.55	557.3	$ 26,499.62				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 528,475.46	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ite Center Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cortes, Chris	Director Financial Aid	$84.05	40.0	$ 3,362.00				
Ramon, Frank	Director Financial Aid	$85.41	24.0	$ 2,049.84				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,411.84	$ -	$ -	$ -	$ -

State Center Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	8.00	Cortes, Chris	Director Financial Aid	$84.05	$672.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	2.00	Cortes, Chris	Director Financial Aid	$84.05	$168.10	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	40.00	Cortes, Chris	Director Financial Aid	$84.05	$3,362.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	50.00	**Cortes, Chris Total**			$4,202.50		
05-06	719.20	Financial Aid Assistant	Various	$47.55	$34,197.96	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	2,545.00	Financial Aid Assistant	Various	$47.55	$121,014.75	Receiving waiver applications	Waiving student fees
05-06	1,659.80	Financial Aid Assistant	Various	$47.55	$78,923.49	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	557.30	Financial Aid Assistant	Various	$47.55	$26,499.62	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	5,085.80	Financial Aid Assistant	Various	$47.55	$241,829.79	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	547.00	Financial Aid Assistant	Various	$47.55	$26,009.85	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	11,114.10	**Financial Aid Assistant Total**			$528,475.46		
5/1/2006	8.00	Ramon, Frank	Director Financial Aid	$85.41	$683.28	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
5/2/2006	8.00	Ramon, Frank	Director Financial Aid	$85.41	$683.28	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
5/3/2006	8.00	Ramon, Frank	Director Financial Aid	$85.41	$683.28	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
5/4/2006	8.00	Ramon, Frank	Director Financial Aid	$85.41	$683.28	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	32.00	**Ramon, Frank Total**			$2,733.12		
2/15/2006	0.50	Shipley, Barbara	Office Assistant III	$35.14	$17.57	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
2/16/2006	0.10	Shipley, Barbara	Office Assistant III	$35.14	$3.51	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	0.60	**Shipley, Barbara Total**			$21.08		
05-06	3,169.40	Student Fee Technician	Various	$35.33	$111,974.90	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	1,404.50	Student Fee Technician	Various	$35.33	$49,620.99	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	2,905.30	Student Fee Technician	Various	$35.33	$102,644.25	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	1,584.70	Student Fee Technician	Various	$35.33	$55,987.45	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	1,957.50	Student Fee Technician	Various	$35.33	$69,158.48	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	118.30	Student Fee Technician	Various	$35.33	$4,179.54	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	11,139.70	**Student Fee Technician Total**			$393,565.61		
2/16/2006	0.10	Thieme, Evelyn	Office Assistant III	$35.05	$3.51	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	0.10	**Thieme, Evelyn Total**			$3.51		
	22,336.50	**Grand Total**			$929,001.28		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: February 8, 2005

INSTITUTION:
State Center Community College District
1525 East Weldon Avenue

FILING REF.: The preceding Agreement was dated NONE

Fresno CA 93704-6398

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/08	36.5	On-Campus	All Programs
PROV.	07/01/08	06/30/09	36.5	On-Campus	All Programs

*BASE:
Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first $25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of $25,000.

U73153

Schedule 1A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	79,235
Avg. time p/account	2.4
Total Time (in minutes)	190164
Per Hour	60
Hours Worked (** **Activity 11**)	**3169.4**
***EFC 1**	33,707
Avg. time p/student	2.5
Total Time (in minutes)	84268
Per Hour	60
Hours Worked (** **Activity 12**)	**1404.5**
***EFC 1**	79,235
Avg. time p/question	2.2
Total Time (in minutes)	174317
Per Hour	60
Hours Worked (** **Activity 13**)	**2905.3**
***EFC 1**	79,235
Avg. time p/file	1.2
Total Time (in minutes)	95082
Per Hour	60
Hours Worked (** **Activity 14**)	**1584.7**
***EFC 4**	26,100
Avg. time p/account	4.5
Total Time (in minutes)	117450
Per Hour	60
Hours Worked (** **Activity 15**)	**1957.5**
***EFC 5**	2,534
Avg. time p/student	2.8
Total Time (in minutes)	7095
Per Hour	60
Hours Worked (** **Activity 16**)	**118.3**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	33,196
Avg. time p/question	1.3
Total Time (in minutes)	43155
Per Hour	60
Hours Worked (** **Activity 21**)	**719.2**
***EFW 6**	33,196
Avg. time p/application	4.6
Total Time (in minutes)	152702
Per Hour	60
Hours Worked (** **Activity 22**)	**2545.0**
***EFW 6**	33,196
Avg. time p/evaluation	3.0
Total Time (in minutes)	99588
Per Hour	60
Hours Worked (** **Activity 23**)	**1659.8**
***EFW 8**	6,192
Avg. time p/application	5.4
Total Time (in minutes)	33437
Per Hour	60
Hours Worked (** **Activity 24**)	**557.3**
***EFW 7**	27,004
Avg. time p/application	11.3
Total Time (in minutes)	305145
Per Hour	60
Hours Worked (** **Activity 25**)	**5085.8**
***EFW 8**	6,192
Avg. time p/application	5.3
Total Time (in minutes)	32818
Per Hour	60
Hours Worked (** **Activity 26**)	**547.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1				4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Heather Chaney	Account Clerk I	3.0		3.0			
Penny Christen	Account Tech II			1.0			5.0
Michael Coppedge	Account Clerk III						5.0
Dan Cousins	Accounting Supervisor	7.0	1.0	5.0			1.0
Sherri Dodd	Account Clerk III	2.2	4.3	1.9	0.8	1.9	1.8
Theresa Ervine	Account Clerk III	3.9	4.8	1.9	1.8	2.7	4.1
Sussette Ishizuka	Account Tech II	2.0	1.0	2.0		1.0	1.0
Dale Jimenez (White)	Account Clerk II	4.9	3.9	2.9	2.5	6.0	9.1
Wanda Johnson	Cashier	1.0	4.0	1.0	1.0	1.0	2.0
Leslie Mabray	Account Clerk III	0.9		2.3	0.9	21.1	
Yolanda Mendoza	Account Technician I	1.0	1.0	1.0	1.0	1.5	1.0
Linda Sanchez	Account Clerk II	3.0		3.0			
Wil Schofield	Accounting Supervisor	1.0	2.0	2.0		4.0	
Barbara Shipley	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0
Janice L. Stannard	Cashier	2.5	1.5	4.0		5.5	0.5
Cheryl Sullivan	Account Technician II			1.0			5.0
Juan Tirado	Accounting Clerk III	1.0	2.0	3.0	2.0	5.0	2.0
Evelyn Thieme	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0
Average		**2.4**	**2.5**	**2.2**	**1.2**	**4.5**	**2.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answering Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier						04-05 PHR	05-06 PHR
		1	2	1		4	5		
		**Activity Codes							
		11	12	13	14	15	16		
Heather Chaney	Account Clerk I	3.0		3.0					14.71
Penny Christen	Account Tech II			1.0			5.0	$47.45	*$47.45*
Michael Coppedge	Cashier						5.0	$31.62	$36.26
Dan Cousins	Accounting Supervisor	7.0	1.0	5.0			1.0	$55.32	$59.89
Sherri Dodd	Account Clerk III	2.2	4.3	1.9	0.8	1.9	1.8	$35.17	$36.91
Theresa Ervine	Account Clerk III	3.9	4.8	1.9	1.8	2.7	4.1	$32.45	$35.98
Sussette Ishizuka	Account Tech II	2.0	1.0	2.0		1.0	1.0	$47.29	$51.24
Dale Jimenez (White)	Account Clerk II	4.9	3.9	2.9	2.5	6.0	9.1	$29.72	$31.68
Wanda Johnson	Cashier	1.0	4.0	1.0	1.0	1.0	2.0		$17.90
Leslie Mabray	Account Clerk III	0.9		2.3	0.9	21.1			$28.00
Yolanda Mendoza	Account Technician I	1.0	1.0	1.0	1.0	1.5	1.0		$18.21
Linda Sanchez	Account Clerk II	3.0		3.0				$28.80	$29.18
Wil Schofield	Accounting Supervisor	1.0	2.0	2.0		4.0		$55.36	$58.69
Barbara Shipley	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0	$34.66	$35.14
Janice L. Stannard	Cashier	2.5	1.5	4.0		5.5	0.5	$30.49	$24.37
Cheryl Sullivan	Account Technician II			1.0			5.0		$43.93
Tirado, Juan	Accounting Clerk III	1.0	2.0	3.0	2.0	5.0	2.0		$31.32
Evelyn Thieme	Office Assistant III	1.5	2.0	1.0	0.3	2.0	1.0	$34.48	$35.05
Average		**2.4**	**2.5**	**2.2**	**1.2**	**4.5**	**2.8**	**$38.57**	**$35.33**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 04-05 timestudy.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Chris Cortes	Director, Financial Aid	1	5	3	6	14	6
Kathryn Duerksen	Financial Aid Assistant II	1	5	3	6	14	6
Mary Mathos	Financial Aid Assistant I	3	3	3	3	3	3
Linda Nygren	Financial Aid Assistant I	1	5	3	6	14	6
Sandra Rodriguez	Office Assistant III	1	5	3	6		
Barbara Shipley	Office Assistant III	1					
Evelyn Thieme	Office Assistant III	1					
Average		**1.3**	**4.6**	**3.0**	**5.4**	**11.3**	**5.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student app in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into distric Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing writte notification to student of final eligibility status.

Schedule 3A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions
Source: EFCW 1.7-3.
Findings:

Staff	Title	05-06 PHR
Chris Cortes	Director, Financial Aid	$ 84.05
Kathryn Duerksen	Financial Aid Assistant II	$ 51.16
Mary Mathos	Financial Aid Assistant I	$ 44.63
Linda Nygren	Financial Aid Assistant I	$ 47.12
Sandra Rodriguez	Office Assistant III	$ 35.67
Barbara Shipley	Office Assistant III	$ 35.14
Evelyn Thieme	Office Assistant III	$ 35.05
Average		**$ 47.55**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate
22 - Receive Applications from students by mail, fax, computer online access, or eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for co
24 - Incomplete Applications: Notifying the student of the additional required infc in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the informatior Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when d notification to student of final eligibility status.

Schedule 4
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	64,348	67,056	69,882	75,704	80,611	76,738	77,283	79,235
EFC 2	1.8-1	2. Paid Enrollment fees	38,288	44,207	44,848	43,379	44,342	39,698	40,987	33,707
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	32,963	34,791	37,481	41,827	45,977	45,108	48,622	45,528
EFC 4	1.8-2	1. Delinquencies collections	N/A	2,818	13,720	23,797	20,170	36,077	30,277	26,100
EFC 5	1.8-2	2. Refunds	1,305	1,890	2,083	2,471	2,435	2,968	2820	2,534
EFW 6	1.8-3	1. Waivers Requested	X	22,223	22,848	26,252	29,475	31,637	32,948	33,196
EFW 7	1.8-3	2. Waivers Approved	X	14,264	19,482	22,680	24,201	24,599	25,154	27,004
EFW 8	1.8-3 (1-2	Waivers Denied	X	7,959	3,366	3,572	5,274	7,038	7,794	6,192

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with *enrollment fee accounts receivable (did not pay in full at time of registration)*
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

27,345* +
51,899* +
79,245* *

0* *

Wednesday, I

Student Demographics

Stude... ...esno City
For 2005 Summer Term

Data Current As Of November 01, 2006 08:30:38

Total Headcount	8,729

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FRESNO CITY 8729
2310
20850

51889

REEDLEY 3574
12113
11659

27346

79235 total headcount FRESNO CITY & REEDLEY

California Home

Wednesday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fresno City
For 2005 Fall Term

Data Current As Of November 01, 2006 08:30:59

Total Headcount	22,310

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Fresno City
For 2006 Spring Semester

Data Current As Of November 01, 2006 08:31:20

Total Headcount	20,850

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2005 Summer Term

Data Current As Of November 01, 2006 08:32:15

Total Headcount	3,574

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2005 Fall Term

Data Current As Of November 01, 2006 08:32:27

Total Headcount	12,113

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Reedley College
For 2006 Spring Semester

Data Current As Of November 01, 2006 08:32:46

Total Headcount	11,659

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SCCCD - Reedley College

Chris Cortes — Employee Name

Director of Financial Aid — Exact Position Title

RC - Financial Aid Office — College/Department/Location

(559) 638-0312 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	2			2			2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:					40			8
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	2	2	2	2	2	2	2	2
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	40	40	40	40	40	40	40	40
TOTALS:	44	42	42	44	82	42	44	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes — Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 6738-0312

PLEASE SUBMIT THIS INFORMATION BY C. Cortes ; TO Ed Eng

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: SCCCD Fiscal Year: 2005-2006

Frank Ramon — Employee Name

Director - Financial Aid — Exact Position Title

Financial Aid - FCC — Department/Location

442-8245 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/1/06	1A (1B) 2A 2B 3 4	Preparing and reviewing procedures	8
5/1/06	1A 1B 2A 2B 3 (4)	MIS + BFAP state reporting	24
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature F. Ramon Date 5/5/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: SCCCD Fiscal Year: 05-06

BARBARA SHIPLEY
Employee Name

OA III
Exact Position Title

ADMISSIONS & RECORDS 675-4851
Department/Location Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
2/16/06	(1A) 1B 2A 2B 3 4	Update procedures manual	5 min
2/15/06	1A 1B (2A) 2B 3 4	Training	30 min
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: State Center Community College Fiscal Year: 2005 - 2006

Evelyn Thieme
Employee Name

Office Assistant III
Exact Position Title

Admissions & Records (559) 675-4800
Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
2/16/06	(1A) 1B 2A 2B 3 4	Updating policies + procedures	5 min
2/15/06	1A 1B (2A) 2B 3 4	Training re Preparation of employee Average Time Record for Mandated Costs	30 MIN MRP
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evelyn Thieme Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO/FCC
Department/Location

Heather Chaney
Employee Name

Account Clerk I
Exact Position Title

8708
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.00	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/01/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO/FCC
Department/Location

Michael Coppedge
Employee Name

Acct. Clerk III
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5-1-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO/ICC
Department/Location

Dan Cousins
Employee Name

Acct Supervisor
Exact Position Title

8705
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7:00	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1:00	—				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5:00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Dan Cousins by CJ Stone Date 5/1/08

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCC D
District

CBO / FCC
Department/Location

Sherri Dodd
Employee Name

Account Clerk III
Exact Position Title

442-4600 x 8711
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 ~~03-04~~ 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2:09	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4:19	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:52	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0:45	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1:52				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1:45					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherri Dodd Date 5-1-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO-FCC
Department/Location

Therese Ervine
Employee Name

Acct Clerk III
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3:52	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4:47	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:53	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1:49	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2:39				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4:09					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Therese Ervine by CJ Sun Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Community College District — Bus. Services Office / Reedley college
District — Department/Location

[redacted] — Acctg Tech II — 61
Employee Name — Exact Position Title

[redacted] — (12mo/11mo/10mo/hrly)
Telephone # — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [redacted] Date 2/2/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO/FCC
Department/Location

Dale Jimenez
Employee Name

Acc Clerk II
Exact Position Title

(559) 442-4600
Telephone #

8 7/2
Work year length

12mo/11mo/10mo/hrly (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.55	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.56	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.52	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.30	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5.65				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9.06					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dale Jimenez Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

RC-BSO
Department/Location

WANDA L. JOHNSON
Employee Name

CASHIER - 44
Exact Position Title

559 638-3461
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Wanda L. Johnson Date 2/2/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD — District
MUSACCHIO
CBO/FCC — Department/Location
Leslie Mabray — Employee Name
Account Clerk III — Exact Position Title
949-4600 ext 8707 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.57	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.17	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.52	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	21.03				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Leslie Mabray Date 5-1-06

If you have any questions, please contact Leslie Mabray, at ext 8707

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

B50 - Rdly
Department/Location

YOLANDA D MENDOZA
Employee Name

PROVISIONAL ACCT TECH I
Exact Position Title

57

638-0342
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yolanda D Mendoza Date 2-16-06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Comm Coll Dist. — District
RC-BSO — Department/Location
Wil Schofield — Employee Name
Acctng Supervisor — Exact Position Title
638-3641 x3501 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-99) 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	\					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	\					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Wil Schofield Date 2/2/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

ADMISSIONS & RECORDS
Department/Location

BARBARA SHIPLEY
Employee Name

OA III
Exact Position Title

675-4851
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1.0	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20 SEC.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2.0				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.0					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Reedley Business Office
Department/Location

Janice L Stannard
Employee Name

Cashier
Exact Position Title

559/638-0342
Telephone #x3441

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	/					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5.5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	.5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice L Stannard Date 2/22/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

CBO / FCC
Department/Location

Cheryl Sullivan
Employee Name

Acct. Tech II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/1/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Community College — Admissions + Records
District — Department/Location

Evelyn Thieme — Office Assistant III
Employee Name — Exact Position Title

(559) 675-4800 — 12mo/11mo/10mo/hrly
Telephone # — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	30 Sec.	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evelyn Thieme — Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4852

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

RC - BSO
Department/Location

Juan Tirado
Employee Name

Accounting Clerk III
Exact Position Title

638 - 364 / x3440
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juan Tirado Date 2/2/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Chris Cortes
Employee Name

Director of Financial Aid
Exact Position Title

(559) 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD — District

Financial Aid - Reedley College — Department/Location

Kathryn Duerksen — Employee Name

Financial Aid Assistant II — Exact Position Title

(559) 638-0312 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 ~~05-06~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Duerksen Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - FCC
Department/Location

Mary Mathes
Employee Name

Financial Aid Assistant I
Exact Position Title

442-8245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3	✓			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓	

USING 6

USING 5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Mathes Date 5-5-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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WHY STAFF NOT Reporting as Mgt

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Linda Nygren
Employee Name

Financial Aid Assistant I
Exact Position Title

(559) 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda T. Nygren Date 4-28-06

If you have any questions, please contact Chris Cortes, at (559) 638-0312

PLEASE SUBMIT THIS INFORMATION BY C. Cortes ; TO Ed Eng

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

Financial Aid - Reedley College
Department/Location

Sandra Rodriguez
Employee Name

Office Assistant III
Exact Position Title

(559) 638-0312
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra J. Rodriguez Date 4-28-06

If you have any questions, please contact Chris Cortes at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

SCCCD
District

ADMISSIONS & RECORDS
Department/Location

BARBARA SHIPLEY
Employee Name

OA III
Exact Position Title

675-4851
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 2/16/06

If you have any questions, please contact Tina Masterson, at (559) 625-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Time saved for every year

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center Community College
District

Admissions + Records
Department/Location

Evelyn Thieme
Employee Name

Office Assistant III
Exact Position Title

(559) 675-4800
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 99-00 ~~00-01~~ 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Evelyn Thieme Date 5/16/06

If you have any questions, please contact Tina Masterson, at (559) 675-4802

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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time same for every year

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: STATE CENTER CCD

Duplicated #

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								12,303
Fall								34,423
Winter/ Intersession								0
Spring								32,509
Total								79,235
2. Number of students who paid enrollment fees:								
Summer								3,925
Fall								14,899
Winter/ Intersession								0
Spring								14,883
Total								33,707
3. Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								8,378
Fall								19,524
Winter/ Intersession								0
Spring								17626
Total								45,528

DORIS

1 = 2

FEE/BOG FINAID

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Wells Date 12/11/06

RON WELLS
Employee Name: (print)

ACCT/AUDITOR
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.&2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: STATE CENTER CCD Duplicated #'s

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	95-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								26,100
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								2,534

FCC/RC BSO

FCC BSO

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Walls Date 12/11/06

RON WALLS Acct Analyst

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____

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EFCW 1.6-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: STATE CENTER CCD

Unduplicated #'s

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	'98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								33,196
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								27,004

FCCRC FIN AID

FCCRC FIN AID

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

82% Rate

Employee Signature: Ron Walls Date 12/11/06

RON WALLS
Employee Name: (print)

Acct Auditor
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

From Frank + Chris' Worksheets

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EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: STATE CENTER CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$ — 16,208,441
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$ — 10,377,035
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$ — 207,541
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								Total units
Fall								Est.
Winter/Intersession								399,117
Spring								
TOTAL x $0.91 per credit								

DO
DO
DO

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of date for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Walls Date 12/11/06

RON WALLS
Employee Name: (print)

ACCT/AUDITOR
Position or Title

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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STATE CENTER COMMUNITY COLLEGE DISTRICT
PRODUCTIVE HOURLY RATE CALCULATION
For EFCW Claim
For Fiscal Year Ended June 30, 2006

Name	Pay Class	Annual Salary	Benefits	Total Sal/Ben	Annual Hours	Less Annual Hol Hrs	Less Annual Vac Hrs	Less Annual Sick Hrs	Annual Prod Hrs	Annual Prod Hr Rate	
Actuals listed below were calculated thru 4/30/06 payroll, which is 10 months of fiscal year.											
	ID										
Chaney, Heather	82838	13,470.00	956.00	14,426	981	-	-	-	981	$ 14.71	Hourly
Coppedge, Michael	251982	34,606.00	15,615.00	50,221	1,733	112	140	80	1,401	$ 35.85	
Cortes, Chris	300013	91,384.00	25,785.00	117,169	1,733	112	147	80	1,394	$ 84.05	
Cousins, Daniel	82310	55,884.00	19,101.00	74,985	1,560	104	132	72	1,252	$ 59.89	Term 3/31/06
Cristan, Penny	27045	13,320.00	5,160.00	18,480	433	16	28	16	373	$ 49.54	Term 9/12/05
Dodd, Sherri	130575	36,226.00	15,926.00	52,152	1,733	112	140	80	1,401	$ 37.22	
Duerksen, Kathy	89276	51,593.00	19,057.00	70,650	1,733	112	160	80	1,381	$ 51.16	
Ervin, Theresa	210151	35,263.00	15,867.00	51,130	1,733	112	120	80	1,421	$ 35.98	
Ishizuka, Sussette	15303	51,687.00	19,075.00	70,762	1,733	112	160	80	1,381	$ 51.24	
Jimenez, Dale	50772	29,579.00	14,809.00	44,388	1,733	112	140	80	1,401	$ 31.68	
Johnson, Wanda	94746	20,602.00	3,958.00	24,560	1,372	-	-	-	1,372	$ 17.90	Hourly
Lewis, Otha	80616	62,066.00	20,831.00	82,897	1,733	112	80	80	1,461	$ 56.74	
Mabray, Leslie	22402	9,742.00	5,070.00	14,812	607	24	20	34	529	$ 28.00	Hire 1/17/06
Mathos, Mary	196123	44,783.00	17,748.00	62,531	1,733	112	140	80	1,401	$ 44.63	
Mendoza, Yolanda	17117	13,685.00	971.00	14,656	805	-	-	-	805	$ 18.21	Hourly
Nicholes, Gary	163972	44,729.00	17,560.00	62,289	1,733	112	120	80	1,421	$ 43.83	
Nygren, Linda	89271	46,915.00	18,158.00	65,073	1,733	112	160	80	1,381	$ 47.12	
Ramon, Frank	61772	97,933.00	21,127.00	119,060	1,733	112	147	80	1,394	$ 85.41	
Rodriguez, Sandra	20317	34,263.00	16,430.00	50,693	1,733	112	120	80	1,421	$ 35.67	
Sanchez, Linda	29526	27,263.00	14,204.00	41,467	1,733	112	120	80	1,421	$ 29.18	
Schofield, Wil	185827	60,926.00	20,891.00	81,817	1,733	112	147	80	1,394	$ 58.69	
Shipley,Barbara	40281	34,263.00	15,676.00	49,939	1,733	112	120	80	1,421	$ 35.14	
Stannard, Janice	209053	22,160.00	12,467.00	34,627	1,733	112	120	80	1,421	$ 24.37	
Sullivan, Cheryl	26841	44,842.00	17,581.00	62,423	1,733	112	120	80	1,421	$ 43.93	
Thieme,Evelyn	95148	34,263.00	15,549.00	49,812	1,733	112	120	80	1,421	$ 35.05	
Tirado, Juan	285372	21,133.00	10,621.00	31,754	1,213	96	47	56	1,014	$ 31.32	Hire 9/12/05
Trexler, Gina	116581	42,646.00	17,178.00	59,824	1,733	112	120	80	1,421	$ 42.10	

STATE CENTER COMMUNITY COLLEGE DISTRICT
PRODUCTIVE HOURLY RATE CALCULATION
For EFCW Claim
For Fiscal Year Ended June 30, 2006

Name	Pay Class	Annual Salary	Benefits	Total Sal/Ben	Annual Hours	Less Annual Hol Hrs	Less Annual Vac Hrs	Less Annual Sick Hrs		Annual Prod Hrs	Annual Prod Hr Rate	
Annual Hours= 2080*10/12												
Holiday Hours= 120-8 (Memorial Day)												
Sick Hours= 96*10/12												
Vac Hours= Annual Accrual*10/12												

STATE CENTER COMMUNITY COLLEGE DISTRICT
PRODUCTIVE HOURLY RATE CALCULATION
For EFCW Claim
For Fiscal Year Ended June 30, 2006

Name	Pay Class	Annual Salary	Benefits	Total Sal/Ben	Annual Hours	Less Annual Hol Hrs	Less Annual Vac Hrs	Less Annual Sick Hrs	Annual Prod Hrs	Annual Prod Hr Rate
Financial Aid Director	M66-5	118,284.00	25,696.33	143,980	2,080	120	176	96	1,688	$ 85.30
Financial Aid Manager	M59-5	103,042.00	23,842.91	126,885	2,080	120	176	96	1,688	$ 75.17
Financial Aid Assistant II	R60-C	49,967.00	20,821.65	70,789	2,080	120	168	96	1,696	$ 41.74
Financial Aid Assistant I	R57-C	46,412.00	20,138.03	66,550	2,080	120	168	96	1,696	$ 39.24
Office Assistant I	R38-C	29,186.00	16,825.47	46,011	2,080	120	168	96	1,696	$ 27.13
Office Assistant II	R41-C	31,415.00	17,254.10	48,669	2,080	120	168	96	1,696	$ 28.70
Office Assistant III	R48-C	37,274.00	18,380.79	55,655	2,080	120	168	96	1,696	$ 32.82
Programmer/Analyst	R73-C	68,517.00	24,388.82	92,906	2,080	120	168	96	1,696	$ 54.78
Accounting Supervisor	M37-5	66,633.00	24,126.53	90,760	2,080	120	176	96	1,688	$ 53.77
Account Tech II	R61-C	51,175.00	21,053.95	72,229	2,080	120	168	96	1,696	$ 42.59
Account Tech I	R57-C	46,412.00	20,138.03	66,550	2,080	120	168	96	1,696	$ 39.24
Cashier	R44-C	33,849.00	17,722.16	51,571	2,080	120	168	96	1,696	$ 30.41
Account Clerk II	R41-C	31,415.00	17,254.10	48,669	2,080	120	168	96	1,696	$ 28.70
Account Clerk III	R48-C	37,274.00	18,380.79	55,655	2,080	120	168	96	1,696	$ 32.82
Student Aides	6.75/HR	6,669.00	425.48	7,094	988	-	-	-	988	$ 7.18

Schedule 5
State Center Com[illegible]nity College District
308/95 Enrollment F[illegible]ollection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 2,103,506	$ 2,775,061	$ 2,593,976	$ 2,718,599	$ 3,710,030	$ 5,759,626	$ 5,831,406
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,070	$ 55,501	$ 51,880	$ 54,372	$ 74,201	$ 115,193	$ 116,628
1.8-4 line 4A	Enrollment Fees Waived	$ 3,206,475	$ 6,320,816	$ 3,708,191	$ 4,048,517	$ 6,346,697	$ 9,751,000	$ 10,377,035
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020	$ 207,541
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 224,453	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		574,619	337,108	368,047	405,022	417,780	399,116
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180	$ 363,196
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020	$ 207,541
(Line 4A X 7%)	7% of Fees Waived (99-00 o	$ 224,453						
1.8-4 5.	Credit Units Waived		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180	$ 363,196
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 288,583**	**$ 649,319**	**$ 380,932**	**$ 415,893**	**$ 495,504**	**$ 575,200**	**$ 570,737**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: State Center
COUNTY: Fresno

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$77,980,443	$74,853,967	$-1,718,646	$73,135,321
EQUALIZATION	1,082,005	995,443	86,562	1,082,005
ENROLL FEE ADMIN (2%)	197,461	181,664	15,797	197,461
APPRENTICE ALLOWANCE	30,924	29,545	1,379	30,924
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	688,122	633,073	55,049	688,122
S.F.A.A.	1,343,108	1,234,584	108,524	1,343,108
E.O.P.S.	2,384,863	2,189,818	195,045	2,384,863
C.A.R.E.	251,795	231,653	20,142	251,795
D.S.P.S.	1,542,007	1,418,648	123,359	1,542,007
STATE HOSPITALS	0	0	0	0
CALWORKS	1,163,618	1,040,775	122,843	1,163,618
MATRICULATION (CREDIT)	1,119,982	1,026,705	93,277	1,119,982
MATRIC. (NONCREDIT)	25,549	23,505	2,044	25,549
FAC.& STAFF DIVERSITY	27,798	23,504	4,294	27,798
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	1,105,044	1,016,642	88,402	1,105,044
TELECOMMUNICATIONS	120,299	67,524	52,775	120,299
PLANT & INSTRUCTIONAL	626,585	576,459	50,126	626,585
ECON. DEVELOPMENT	872,528	732,923	1	732,924
TANF	263,282	242,221	21,061	263,282
VTEA LEADERSHIP	300,000	126,000	126,000	252,000
VTEA TECH. PREP.	150,500	126,420	0	126,420
VTEA TITLE I C	1,062,505	520,025	372,479	892,504
NURSING CARE	179,487	0	179,487	179,487
PRIOR YEAR CORRECTION	209,442	209,442	0	209,442
TOTAL	$92,727,347	$87,500,540	$0	$87,500,540

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)			$ 118.96			$ 154.94	$ 683.28
2	Staff Training	(04)(B)(1)(b)				$ 2,619.60			$ 672.40
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)		$ 106.74	$ 118.96	$ 130.98	$ 144.48	$ 154.94	$ 168.10
4	Waiving student fees	(04)(B)(2)(b)	$ 181,175.39	$ 232,968.53	$ 290,746.58	$ 355,838.75	$ 414,661.56	$ 492,242.49	$ 528,475.46
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)		$ 2,134.80	$ 2,379.20	$ 2,619.60	$ 2,889.60	$ 3,098.80	$ 5,411.84
6	EFCW - Fee Waiver Costs	Total	$ 181,175.39	$ 235,210.07	$ 293,363.70	$ 361,208.93	$ 417,695.64	$ 495,651.17	$ 535,411.08
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 288,583.00	$ 649,319.00	$ 380,932.00	$ 415,893.00	$ 495,504.00	$ 575,200.00	$ 570,737.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (107,407.61)	$ (414,108.93)	$ (87,568.30)	$ (54,684.07)	$ (77,808.36)	$ (79,548.83)	$ (35,325.92)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 181,175.39**	**$ 235,210.07**	**$ 293,363.70**	**$ 361,208.93**	**$ 417,695.64**	**$ 495,651.17**	**$ 535,411.08**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Fresno City College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 08:34:48

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	270	82,551
BOGW - Part A-2 based on SSI recipient status	70	18,178
BOGW - Part A-3 based on general assistance recipient status	17	4,123
BOGW - Part A-4 based on Veteran's or National Guard dependent status	52	20,137
BOGW - Part A basis unreported	1,864	206,426
BOGW - Part B based on income standards	12,480	4,778,442
BOGW - Part C based on financial need	4,868	1,828,985

Total Unduplicated Count = 17,695
Total Amount = $ 6,938,842

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Head count
17,695
2732
25,427

6938842
3,091,262
10,039,104

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Reedley College College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 08:35:05

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	17	3,627
BOGW - Part A-2 based on SSI recipient status	43	10,179
BOGW - Part A-3 based on general assistance recipient status	2	741
BOGW - Part A-4 based on Veteran's or National Guard dependent status	29	12,194
BOGW - Part A basis unreported	838	47,808
BOGW - Part B based on income standards	4,969	2,005,488
BOGW - Part C based on financial need	2,621	1,011,225

Total Unduplicated Count = 7,732
Total Amount = $ 3,091,262

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Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 18, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8697

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
State Center Community College District CC10225

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for State Center Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC10225

(02) Claimant Name: State Center Community College District

County of Location: Fresno

Street Address or P.O. Box: 1525 East Weldon Avenue

City: Fresno | State: CA | Zip Code: 93704-6398

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 856,400	(13) $ 778,569
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 778,569
Due from State	(08) $ 856,400	(17) $ 778,569
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	622,407
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	543
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	377,802
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	37
(31) EFCW-1, (07)	365,274
(32) EFCW-1, (09)	209,112
(33) EFCW-1, (10)	378,344
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) **Date**

1-7-08

Douglas R. Brinkley
Type or Print Name

Vice Chancellor, Finance and Administrative
Title

(38) Name of Contact Person for Claim

Sixten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

State Center Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 622,406.93	$ -	$ -	$ -	$ -	$ 622,406.93
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 542.64	$ -	$ -	$ -	$ -	$ 542.64
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 377,801.70	$ -	$ -	$ -	$ -	$ 377,801.70
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
5) Total Direct Costs	$ 1,000,751.27	$ -	$ -	$ -	$ -	$ 1,000,751.27

direct Costs		
6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	36.50%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 365,274.21
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,366,025.48
st Reduction		
9) Less: Enrollment Fee Revenue offset		$ 209,112.00
10) Less: Enrollment Fee Waiver offsets		$ 378,344.34
11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 778,569.14

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Student Fee Technician Various	$40.11	2,948.6	$ 118,268.35				
Calculating total enrollment fee to be collected Student Fee Technician Various	$40.11	3,076.8	$ 123,410.45				
Answering student's questions regarding enrollment fee collection Student Fee Technician Various	$40.11	3,205.0	$ 128,552.55				
Updating written and computer records for enrollment fee information Student Fee Technician Various	$40.11	2,179.4	$ 87,415.73				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Student Fee Technician Various	$40.11	4,023.0	$ 161,362.53				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Student Fee Technician Various	$40.11	84.7	$ 3,397.32				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 622,406.93	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination							
Cortes, Chris Director, Financial Aid	$90.44	6.0	$ 542.64				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 542.64	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
State Center Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$47.40	1,221.5	$ 57,899.10				
Receiving waiver applications							
Financial Aid Office Staff Various	$47.40	1,858.9	$ 88,111.86				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$47.40	1,593.3	$ 75,522.42				
Notifying students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$47.40	505.4	$ 23,955.96				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$47.40	2,387.1	$ 113,148.54				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$47.40	404.3	$ 19,163.82				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 377,801.70	$ -	$ -	$ -	$ -

State Center Community College District
308/95 ENROLLMEN[illegible]E COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
7/10/2006	6.00	Cortes, Chris	Director, Financial Aid	$90.44	$542.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Cortes, Chris Total**			$542.64		
06-07	1,221.50	Financial Aid Office Staf	Various	$47.40	$57,899.10	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	1,858.90	Financial Aid Office Staf	Various	$47.40	$88,111.86	Receiving waiver applications	Waiving student fees
06-07	1,593.30	Financial Aid Office Staf	Various	$47.40	$75,522.42	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	505.40	Financial Aid Office Staf	Various	$47.40	$23,955.96	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	2,387.10	Financial Aid Office Staf	Various	$47.40	$113,148.54	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	404.30	Financial Aid Office Staf	Various	$47.40	$19,163.82	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	7,970.50	**Financial Aid Office Staff Total**			$377,801.70		
06-07	2,948.60	Student Fee Technician	Various	$40.11	$118,268.35	Referencing student accounts and records	Calculating and collecting enrollment fe
06-07	3,076.80	Student Fee Technician	Various	$40.11	$123,410.45	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
06-07	3,205.00	Student Fee Technician	Various	$40.11	$128,552.55	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
06-07	2,179.40	Student Fee Technician	Various	$40.11	$87,415.73	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
06-07	4,023.00	Student Fee Technician	Various	$40.11	$161,362.53	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fe
06-07	84.70	Student Fee Technician	Various	$40.11	$3,397.32	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fe
	15,517.50	**Student Fee Technician Total**			$622,406.93		
	23,494.00	**Grand Total**			$1,000,751.27		

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN #:

DATE: February 8, 2005

INSTITUTION:
State Center Community College District
1525 East Weldon Avenue

FILING REF.: The preceding Agreement was dated NONE

Fresno CA 93704-6398

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: FACILITIES AND ADMINISTRATIVE COST RATES*

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

TYPE	EFFECTIVE PERIOD FROM	TO	RATE(%)	LOCATIONS	APPLICABLE TO
PRED.	07/01/04	06/30/08	36.5	On-Campus	All Programs
PROV.	07/01/08	06/30/09	36.5	On-Campus	All Programs

*BASE:
Modified total direct costs, consisting of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first $25,000 of each subgrant or subcontract (regardless of the period covered by the subgrant or subcontract). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of $25,000.

U73153

Schedule 1A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	76,921
Avg. time p/account	2.3
Total Time (in minutes)	176918
Per Hour	60
Hours Worked **(** Activity 11)**	**2948.6**
***EFC 1**	76,921
Avg. time p/student	2.4
Total Time (in minutes)	184610
Per Hour	60
Hours Worked **(** Activity 12)**	**3076.8**
***EFC 1**	76,921
Avg. time p/question	2.5
Total Time (in minutes)	192303
Per Hour	60
Hours Worked **(** Activity 13)**	**3205.0**
***EFC 1**	76,921
Avg. time p/file	1.7
Total Time (in minutes)	130766
Per Hour	60
Hours Worked **(** Activity 14)**	**2179.4**
***EFC 4**	33,997
Avg. time p/account	7.1
Total Time (in minutes)	241379
Per Hour	60
Hours Worked **(** Activity 15)**	**4023.0**
***EFC 5**	1,816
Avg. time p/student	2.8
Total Time (in minutes)	5085
Per Hour	60
Hours Worked **(** Activity 16)**	**84.7**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	31,866
Avg. time p/question	2.3
Total Time (in minutes)	73292
Per Hour	60
Hours Worked (** **Activity 21**)	**1221.5**
***EFW 6**	31,866
Avg. time p/application	3.5
Total Time (in minutes)	111531
Per Hour	60
Hours Worked (** **Activity 22**)	**1858.9**
***EFW 6**	31,866
Avg. time p/evaluation	3.0
Total Time (in minutes)	95598
Per Hour	60
Hours Worked (** **Activity 23**)	**1593.3**
***EFW 8**	6,739
Avg. time p/application	4.5
Total Time (in minutes)	30326
Per Hour	60
Hours Worked (** **Activity 24**)	**505.4**
***EFW 7**	25,127
Avg. time p/application	5.7
Total Time (in minutes)	143224
Per Hour	60
Hours Worked (** **Activity 25**)	**2387.1**
***EFW 8**	6,739
Avg. time p/application	3.6
Total Time (in minutes)	24260
Per Hour	60
Hours Worked (** **Activity 26**)	**404.3**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

Staff	Title	*EFC Workload Multiplier					
		1				4	5
		**Activity Codes					
		11	12	13	14	15	16
Aguirre, Ana	Accounting Clerk III	1.0	2.0	1.0	1.0		1.0
Ainsworth, Karen	OAIII	1.5	2.0	3.0	1.0	5.0	2.0
Coppedge, Michael	Accounting Technician III						5.0
Curtis, Debra	OAIII	1.5	2.0	3.0	1.0	5.0	2.0
Dodd, Sherri	Accounting Clerk III	2.0	4.0	2.0	1.0	2.0	2.0
Ervin, Theresa	Accounting Clerk III	4.0	4.0	2.0	1.0	3.0	4.0
Ishizuka, Sau Wah	Accounting Technician III	2.0	2.0	2.0		2.0	1.0
Jimenez, Dale	Accounting Clerk III	5.0	4.0	3.0	3.0	6.0	9.0
Lane, Mary Jo	Accounting Clerk III	1.0		2.0	1.0	21.0	
Mason, Tomoko	Accounting Clerk I	3.0	1.0	3.0			
Mendoza, Yolanda	Accounting Technician I	1.0	2.0	3.0	5.0	5.0	1.0
Musacchie-Mabray, Leslie	Accounting Clerk III	1.0		2.0	1.0	21.0	
Nies, Linda	Accounting Supervisor	1.0	2.0	2.0		4.0	2.0
Stannard, Janice	Cashier	1.0	2.0	4.0		7.0	4.0
Sullivan, Cheryl	Accounting Supervisor	7.0	1.0	5.0			1.0
Tirado, Juan	Accounting Clerk III	2.0	3.0	1.0	2.0	4.0	2.0
Average		**2.3**	**2.4**	**2.5**	**1.7**	**7.1**	**2.8**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answering Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

			*EFC Workload Multiplier						
			1	2	1	4	5		
	Staff	Title	**Activity Codes 11	12	13	14	15	16	06-07 PHR
A	Aguirre, Ana	Accounting Clerk III	1.0	2.0	1.0	1.0		1.0	$35.52
A	Ainsworth, Karen	OAIII	1.5	2.0	3.0	1.0	5.0	2.0	$36.69
	Coppedge, Michael	Accounting Technician III						5.0	$42.27
A	Curtis, Debra	OAIII	1.5	2.0	3.0	1.0	5.0	2.0	$36.69
	Dodd, Sherri	Accounting Clerk III	2.0	4.0	2.0	1.0	2.0	2.0	$39.47
	Ervin, Theresa	Accounting Clerk III	4.0	4.0	2.0	1.0	3.0	4.0	$36.15
A	Ishizuka, Sau Wah	Accounting Technician III	2.0	2.0	2.0		2.0	1.0	$55.24
	Jimenez, Dale	Accounting Clerk III	5.0	4.0	3.0	3.0	6.0	9.0	$33.25
A	Lane, Mary Jo	Accounting Clerk III	1.0		2.0	1.0	21.0		$35.52
A	Mason, Tomoko	Accounting Clerk I	3.0	1.0	3.0				$35.52
A	Mendoza, Yolanda	Accounting Technician I	1.0	2.0	3.0	5.0	5.0	1.0	$52.28
A	Musacchie-Mabray, Leslie	Accounting Clerk III	1.0		2.0	1.0	21.0		$35.52
	Nies, Linda	Accounting Supervisor	1.0	2.0	2.0		4.0	2.0	$50.91
	Stannard, Janice	Cashier	1.0	2.0	4.0		7.0	4.0	$30.92
	Sullivan, Cheryl	Accounting Supervisor	7.0	1.0	5.0			1.0	50.27
A	Tirado, Juan	Accounting Clerk III	2.0	3.0	1.0	2.0	4.0	2.0	$35.52
	Average		**2.3**	**2.4**	**2.5**	**1.7**	**7.1**	**2.8**	**$40.11**

A: Average Used

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 12, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6	7	8	7	8	
		**Activity Codes					
		21	22	23	24	25	26
Aguilar, Norma	Financial Assistant	1.0	4.0	3.0	4.0	4.0	3.0
Cazares, Christina	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Clark, Joyce	Office Assistant	4.0	1.0		4.0	3.0	3.0
Cortes, Chris	Director, Financial Aid	1.0	5.0	3.0	6.0	14.0	6.0
Davis, Danielle	Office Assistant	4.0	1.0		4.0	3.0	3.0
Duerksen, Kathryn	Financial Aid Assistant	1.0	5.0	3.0	6.0	14.0	6.0
Farrell, Leslie	Office Assistant	4.0	1.0		4.0	3.0	3.0
Johnson, Cathie	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Johnson, Mikki	Finanicial Aid Assistant	1.0	4.0	3.0	4.0	4.0	3.0
Mathos, Mary	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Nygren, Linda	Financial Aid Assistant	1.0	5.0		6.0	14.0	6.0
Peralto, Yadira	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Rodriguez, Sandra J.	Office Assistant	1.0	5.0		6.0		
Rosa, Roy	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Shipley, Barbara	Office Assistant	1.0					
Silva, Jessica	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0
Themi, Evelyn	Office Assistant	1.0					
Vang, Nhia	Office Assistant	4.0	1.0		4.0	3.0	3.0
Average		**2.3**	**3.5**	**3.0**	**4.5**	**5.7**	**3.6**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 3
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2006-2007
Time Study

Staff	Title	6	7	8	7	8
		**Activity Codes				
		21	22	23	24	25	26

**Activity Codes

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.

22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.

23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.

24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.

25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.

26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

	Staff	Title	*EFW Workload Multiplier						06-07 PHR
			6			8	7	8	
			**Activity Codes						
			21	22	23	24	25	26	
	Aguilar, Norma	Financial Assistant	1.0	4.0	3.0	4.0	4.0	3.0	$51.54
A	Cazares, Christina	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$50.41
A	Clark, Joyce	Office Assistant	4.0	1.0		4.0	3.0	3.0	$36.69
	Cortes, Chris	Director, Financial Aid	1.0	5.0	3.0	6.0	14.0	6.0	$90.44
A	Davis, Danielle	Office Assistant	4.0	1.0		4.0	3.0	3.0	$36.69
	Duerksen, Kathryn	Financial Aid Assistant	1.0	5.0	3.0	6.0	14.0	6.0	$53.60
A	Farrell, Leslie	Office Assistant	4.0	1.0		4.0	3.0	3.0	$36.69
A	Johnson, Cathie	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$50.41
A	Johnson, Mikki	Finanicial Aid Assistant	1.0	4.0	3.0	4.0	4.0	3.0	$50.41
	Mathos, Mary	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$48.95
	Nygren, Linda	Financial Aid Assistant	1.0	5.0		6.0	14.0	6.0	$49.37
A	Peralto, Yadira	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$50.41
	Rodriguez, Sandra J.	Office Assistant	1.0	5.0	3.0	6.0			$37.44
A	Rosa, Roy	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$50.41
	Shipley, Barbara	Office Assistant	1.0						$35.68
A	Silva, Jessica	Financial Aid Assistant	3.0	4.0	3.0	4.0	4.0	3.0	$50.41
	Themi, Evelyn	Office Assistant	1.0						$36.96
A	Vang, Nhia	Office Assistant	4.0	1.0		4.0	3.0	3.0	**$36.69**
	Average		**2.3**	**3.5**	**3.0**	**4.5**	**5.7**	**3.6**	$47.40

A: Average Used

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 3A
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2000-01 through 2006-2007
Time Study

Staff	Title	6			8	7	8	06-07 PHR
		**Activity Codes						
		21	22	23	24	25	26	

**Activity Codes

21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.

22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.

23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.

24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.

25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.

26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
State Center Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals								
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1. Enrolled Students	64,348	67,056	69,882	75,704	80,611	76,738	77,283	79,235	76,921
EFC 2	1.8-1 2. Paid Enrollment fees	38,288	44,207	44,848	43,379	44,342	39,698	40,987	33,707	31,819
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	32,963	34,791	37,481	41,827	45,977	45,108	48,622	45,528	45,102
EFC 4	1.8-2 1. Delinquencies collections	N/A	2,818	13,720	23,797	20,170	36,077	30,277	26,100	33,997
EFC 5	1.8-2 2. Refunds	1,305	1,890	2,083	2,471	2,435	2,968	2820	2,534	1,816
EFW 6	1.8-3 1. Waivers Requested	X	22,223	22,848	26,252	29,475	31,637	32,948	33,196	31,866
EFW 7	1.8-3 2. Waivers Approved	X	14,264	19,482	22,680	24,201	24,599	25,154	27,004	25,127
EFW 8	1.8-3 (1-2 Waivers Denied	X	7,959	3,366	3,572	5,274	7,038	7,794	6,192	6,739

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home Wednesday, June 20, 2012

Student Demographics By Academic Year

Student Headcount
For Fresno City For 2006-2007
Data Current As Of June 20, 2012 01:39:24

Download The Result in Comma Delimited Format

Headcount
31,401

Back to Top of Page

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics By Academic Year

Student Headcount
For Reedley College For 2006-2007

Data Current As Of June 20, 2012 01:39:08

Download The Result In Comma Delimited Format

Headcount
18,130

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: State Center CCD Fiscal Year: 2006-07

Chris Cortes
Employee Name

Director of Financial Aid
Exact Position Title

RC- Financial Aid Office (559)638-0312
Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district=s certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/10/06	1A (1B) 2A 2B 3 4	Review/Update BOG Chap of Policy & Proc	4
7/10/06	1A 1B 2A (2B) 3 4	BOG/MIS Training @ Merced College	6
8/03/07	1A 1B 2A 2B (3) 4	Reviewing final reports/correcting errors	4
8/1/07	1A 1B 2A 2B 3 (4)	Verifying stats/correcting errors	60
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

05-06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes Date 9-25-07

If you have any questions, please contact Chris Cortes, at (559)638-0312

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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DEC 07 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

BSO - RC
Department/Location

Tina Aguirre
Employee Name

Accounting Clerk III
Exact Position Title

6038-0342
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	/					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tina Aguirre Date 8/15/07

If you have any questions, please contact _____, at _____

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A&R employees (check one)

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Admissions & Records - Willow
Department/Location

Karen Ainsworth
Employee Name

OA3
Exact Position Title

325-5200
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	X				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Ainsworth Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO/FCC
Department/Location

Michael Coppedge
Employee Name

Acct. Tech II
Exact Position Title

8709
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M. C. Date 12/5/07

If you have any questions, please contact _____, at _____

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A&R Employees (check one)

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Admissions & Records. Willow
Department/Location

Debra Curtis
Employee Name

OA III
Exact Position Title

559 325-5200 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1.5	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Debra Curtis Date 9-26-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO / FCC
Department/Location

Sherri Dodd
Employee Name

Account Clerk III
Exact Position Title

442-4600 x8711
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2:09	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4:19	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:52	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0:45	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1:52				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1:45					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sherri Dodd Date 12/5/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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DEC 07 2007
BY: _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO - FCC
Department/Location

Theresa Ervin
Employee Name

Acct Clerk III
Exact Position Title

8683
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3:52	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4:47	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1:53	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1:49	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2:39				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4:09					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Theresa Ervine by CK Sell Date 10/5/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Bus. Services office / Reedley College
Department/Location

Shu Wah Ishizuka
Employee Name

Accts Tech II
Exact Position Title

638-3641 ext 3450
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1.

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Shu Wah Ishizuka Date 8/15/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO/Fcc
Department/Location

Dale Jimenez
Employee Name

Fcc Clerk II
Exact Position Title

(559)442-4600
Telephone #

12mo/11mo/10mo/hrly
8 7/2 Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4.55	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.56	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.52	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.30	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5.65				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	9.06					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Dale Jimenez Date 10/5/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO / FCC
Department/Location

Mary Jo Lane
Employee Name

Accounting Clerk III
Exact Position Title

442-4600 ext 8706 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.57	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.17	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.52	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	21.03				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Jo Lane Date 10/4/07

If you have any questions, please contact Mary Jo Lane, at ext. 8706

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO / FCC
Department/Location

Tomoko Mason
Employee Name

Accounting Clerk I
Exact Position Title

8708
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tomoko Mason Date 10/5/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

BSO - REEDLEY
Department/Location

YOLANDA D. MENDOZA
Employee Name

ACCT TECH I
Exact Position Title

638-0342
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yolanda D. Mendoza Date 8-15-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO / FCC
Department/Location

Leslie Musacchio-Mabray
Employee Name

Account Clerk III
Exact Position Title

447-4600 ext 8707
Telephone #

~~Work~~ year length(circle) 12mo/11mo/10mo/hrly

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.57	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	—	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.17	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.52	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	21.03				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Leslie M Mabray Date 10-4-07

If you have any questions, please contact Leslie Mabray, at ext. 8707

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

RC - BSO
Department/Location

Linda Nies
Employee Name

Accounting Supervisor
Exact Position Title

638-3641 x3501
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	\					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Linda Nies Date 9-15-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Reedley College Busi Office
Department/Location

JANICE L STANDARD
Employee Name

CASHIER
Exact Position Title

638-0342 x3441
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	X				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	—					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janice L Standard Date 8/15/7

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

CBO
Department/Location

Carol Sullivan
Employee Name

Accounting Supervisor
Exact Position Title

442-4600 8705
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7:00	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1:00	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5:00	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1:00					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/5/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

BSO - Reedley
Department/Location

Juan Tirado
Employee Name

Acct Clerk III
Exact Position Title

638-0342
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Juan Tirado Date 8/15/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - FCC
Department/Location

Norma Aguilar
Employee Name

Financial Aid Asst. II
Exact Position Title

442-8245
Telephone #

12mo/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Norma Aguilar Date 9/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - FCC
Department/Location

Christina Cazares
Employee Name

Financial Aid Asst. I
Exact Position Title

442-8245
Telephone #

(12mo)/11mo/10mo/hrly
~~Work~~ year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - FCC
Department/Location

Joyce Clark
Employee Name

Office Asst. III
Exact Position Title

442-8245
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3		✓	✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Joyce Clark Date 9/27/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - Reedley College
Department/Location

Chris Cortes
Employee Name

Director of Financial Aid
Exact Position Title

(559) 638-0312
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) / 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Chris Cortes Date 9-25-07

If you have any questions, please contact Chris Cortes, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/ FCC
Department/Location

Danielle Davis
Employee Name

Office Asst. II
Exact Position Title

4428245
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/27/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - Reedley College
Department/Location

Kathryn Duerksen
Employee Name

Financial Aid Asst II
Exact Position Title

(559) 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Duerksen Date 9-26-07

If you have any questions, please contact Kathy Duerksen, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/FCC
Department/Location

Leslie Farrell
Employee Name

Office Asst. II
Exact Position Title

442-8245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Leslie Farrell Date 9-27-07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/FEC
Department/Location

Cathie Johnson
Employee Name

Financial Aid Asst. I
Exact Position Title

4428245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathie Johnson Date 9/27/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/FCC
Department/Location

Mikki Johnson
Employee Name

Financial Aid Asst. II
Exact Position Title

442-8245
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mikki Johnson Date 10/1/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid / FCC
Department/Location

Mary Mathos
Employee Name

Financial Aid Asst. I
Exact Position Title

4428245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Mary Mathos Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - Reedley College
Department/Location

Linda Nygren
Employee Name

Financial Aid Asst I
Exact Position Title

(559) 638-0312
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) / 07-08
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	14		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	6			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linda Nygren Date 09/26/07

If you have any questions, please contact Linda Nygren, at (559) 638-0312

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/FCC
Department/Location

Yadira Peralta
Employee Name

Financial Aid Asst. I
Exact Position Title

4928245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Yadira Peralta Date _____

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - Reedley College
Department/Location

SANDRA J. RODRIGUEZ
Employee Name

OFFICE ASSISTANT III
Exact Position Title

559 638-0312
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3	✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	6			✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra J. Rodriguez Date 9/26/07

If you have any questions, please contact ~~Chris~~ Sandra Rodriguez, at (559) 638-0312

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid - FCC
Department/Location

Roy Rosa
Employee Name

Financial Aid Asst. I
Exact Position Title

4428245
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Roy Rosa Date 4/27/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Admissions & Records - Madera
Department/Location

Barbara Shipley
Employee Name

OA III
Exact Position Title

6754851
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 06-07 / 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Shipley Date 9/10/07

If you have any questions, please contact Monica Cuevas, at 675-4852

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid/FCC
Department/Location

Jessica Silva
Employee Name

Financial Aid Asst I
Exact Position Title

442-8245
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 9/28/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Admission & Records - Madera
Department/Location

Evelyn Thomas
Employee Name

OA III
Exact Position Title

559-675-4811
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0	√		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Evelyn Thomas Date 9/10/07

If you have any questions, please contact Monica Owens, at 675-4852

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

State Center CCD
District

Financial Aid / FCC
Department/Location

Nhia Vang
Employee Name

Office Asst. II
Exact Position Title

442-8245
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4	✓		
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1	✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0		✓	
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4	✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3		✓	
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3			✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nhia Vang Date 9/27/07

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: STATE CENTER CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data Duplicated Headcount	FISCAL YEARS		
	~~05-6~~	06-7	~~07-8~~
1. Number of students enrolled each fiscal year. (Not FTE=s)			
Summer		12,452	
Fall		33,502	
Winter/ Intersession		—	
Spring		30,967	
Total		76,921	
2. Number of students who paid enrollment fees: (1-3)			
Summer		4,999	
Fall		13,604	
Winter/ Intersession		—	
Spring		13,216	
Total		31,819	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer FCC: 5,569 RC: 1,884		7,453	
Fall 13,598 6,300		19,898	
Winter/ Intersession — —		—	
Spring 11,965 5,786		17,751	
Total [illegible] [illegible]		45,102	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 11/30/07

Employee Name: (print) RON WALLS Position or Title ACCT/AUDITOR

If you have any questions, please contact ______________________, at ______________.

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________.

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EFCW 1.8-2 ✓

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: STATE CENTER CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	~~05-6~~	06-7	~~07-8~~
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		5,080	
Fall		13,782	
Winter/Intersession		—	
Spring		15,135	
Total		33,997	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total		1,816	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Walls Date 11/30/07

RON WALLS
Employee Name: (print)

ACCT/AUDITOR
Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: STATE CENTER CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data Unduplicated	FISCAL YEARS		
	~~05-6~~	06-7	~~07-8~~
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer (FCC: ~~6,161~~ / EC: ~~3,198~~)			
Fall (13,946 / ~~6,499~~)			
Winter/Intersession			
Spring (~~2,138~~ / ~~8,780~~)			
Total (22,245 / 9,621)		31,866	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer			
Fall			
Winter/Intersession			
Spring			
Total (16,402 / 8,725)		25,127	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Walls Date 11/30/07

RON WALLS — ACCT/AUDITOR

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: STATE CENTER CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	~~05-6~~	06-7	~~07-8~~
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 14,523,798	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 8,924,693	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 178,494	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer	29	181	
B. Fall	181	369	
C. Winter/Intersession		~~0~~	
D. Spring	166	016	
TOTAL x $0.91 per credit	342	675	

376,566

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Ron Walls Date 12/30/07

RON WALLS
Employee Name: (print)

ACT/AUDITOR
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates from FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: STATE CENTER CCD

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ACCOUNTING CLERK		$ 35.52
	AVERAGE ACCOUNTING TECHNICIAN		$ 52.58
	AVERAGE ASSOCIATE DEAN	$ 89.79	$ 95.11
	AVERAGE CUSTODIAN	$ 28.29	$ 29.96
	AVERAGE DEAN	$ 96.28	$ 101.98
	AVERAGE FINANCIAL AID ASSISTANT		$ 50.41
	AVERAGE DIRECTOR	$ 91.83	$ 97.27
	AVERAGE GROUNDSKEEPER I	$ 29.34	$ 31.08
	AVERAGE INSTRUCTOR	$ 76.98	$ 81.54
	AVERAGE OFFICE ASSISTANT		$ 36.69
	AVERAGE SECRETARY	$ 48.89	$ 51.78
	AVERAGE STUDENT AIDE	$ 7.75	$ 7.75
	AVERAGE VICE CHANCELLOR	$ 97.52	$ 103.29
ABBOTT, TONY	INSTRUCTOR	$ 71.14	$ 75.32

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
ABRAHAM, SAPRINA	ACCOUNTING CLERK III-CONFIDENTIAL	$ 37.53	$ 40.00
AGUILAR, NORMA	FINANCIAL AID ASS'T II	$ 44.49	$ 51.54
AHRENS, SHANNA	ACCOUNTING AUDITOR	$ 48.97	$ 53.87
ANDERSON, CHARLES	POLICE SERGEANT	$ 59.33	$ 64.74
AQUINO, FELIX	VICE CHANCELLOR-ED SERVICES & GRANTS (term 12/31/	$ 105.24	$ 115.47
BARTHOLD-McKAY, DORIS	ADMINISTRATIVE SECRETARY	$ 39.56	$ 42.20
BECK, ALLEN	INSTRUCTOR	$ 76.98	$ 81.81
BLACKWELDER, GENE	RC BUSINESS MANAGER	$ 100.35	$ 105.94
BRAVO, JUAN	MANAGER, BUILDING SERVICES	$ 55.65	$ 58.77
BRINKLEY, DOUGLAS	VICE CHANCELLOR, FINANCE & ADMINISTRATION	$ 107.41	$ 113.09
BURGESS, JIM	BUILDING SERVICES MANAGER	$ 51.51	$ 54.41
CALDWELL, CHRIS	POLICE OFFICER	$ 45.43	$ 52.20
CANNON, CANDY	FINANCIAL AID MANAGER	$ 56.08	$ 60.08
CANTU, ANTHONY	VICE PRESIDENT OF INSTRUCTION	$ 96.28	$ 102.04
CHIN, JAMES	DEAN OF INSTRUCTION	$ 89.79	$ 94.77
CHRISTEN, PENNY	ACCOUNT TECHNICIAN II (TERM 8/1/05		
CLEROU, DIANE	ASSOC DEAN, HR	$ 83.09	$ 87.72
COPPEDGE, MICHAEL	CASHIER	$ 36.26	$ 42.27
CORTES, CHRIS	DIRECTOR OF FINANCIAL AID	$ 83.43	$ 90.44

Name	Title	05-06	06-07
COUSINS, DAN	ACCOUNTING SUPERVISOR (TERM 3/31/06)	$ 59.89	
COVEY, PATTY	SECRETARY, EXEC VICE CHAN	$ 54.10	$ 57.17
CROW, TOM	CHANCELLOR	$ 133.74	$ 146.63
CUMMINGS, JOHN	DEAN, ADMISSIONS & RECORDS	$ 92.83	$ 99.79
DODD, SHERRI	ACCOUNT CLERK III	$ 36.91	$ 39.47
DOFFONEY, NED	COLLEGE PRESIDENT	$ 115.38	$ 121.50
DRAKE, CAROLYN	DEAN OF INSTRUCTION	$ 91.83	$ 96.91
DUERKSEN, KATHRYN	FINANCIAL AID ASS'T II	$ 50.73	$ 53.60
EDWARDS, JOAN	EXEC DIR FOUNDATION (TERM 6/30/06)	$ 98.63	
EMERZIAN, JANICE	DIRECTOR, ENABLER PROGRAM	$ 91.83	$ 96.91
ENG, ED	DIRECTOR OF FINANCE	$ 87.20	$ 91.98
ERVINE, TERESA	ACCOUNT CLERK III	$ 35.63	$ 36.15
FOTH, GLEN	DISTRICT MANAGER, GROUNDS SVCS	$ 53.31	$ 56.31
FOX, ROBERT	VICE PRESIDENT OF STUDENTS	$ 97.97	$ 105.24
GONZALES, MARISSA	PERSONNEL ASSISTANT-CLASSIFIED	$ 38.70	$ 49.64
GUERRA, MICHAEL	BUSINESS MANAGER	$ 99.69	$ 105.92
HIOCO, BARBARA	PRESIDENT-REEDLEY COLLEGE	$ 113.21	$ 119.22
HOPPER, LORRIE	ACCOUNTING TECH II (CHGED TO P/T 2/1/06)	$ 62.42	$ 54.62
HORTON, TIM	WAREHOUSE WORKER	$ 36.46	$ 39.43

Name	Title	05-06	06-07
HUTCHISON, KELLI	ACCOUNTING TECH I-CONFIDENTIAL	$ 43.48	$ 47.89
IKEDA, DEBBIE	VICE PRESIDENT OF INSTRUCTION	$ 96.82	$ 102.18
ISHIZUKA, SUSSETTE	ACCOUNT TECHNICIAN II	$ 51.58	$ 55.24
JIMENEZ, (WHITE) DALE	ACCOUNT CLERK II	$ 31.43	$ 33.25
KASER, PAUL	INSTRUCTOR	$ 75.95	$ 80.28
KERSHAW, TERRY	VICE CHANCELLOR-NORTH CENTERS	$ 106.10	$ 111.71
KILGORE, RICK	CUSTODIAN	$ 38.10	$ 41.42
KUBIN,CAROLINE	PROGRAMMER	$ 61.35	$ 64.78
MARTIN, SHEILA	INSTRUCTOR	$ 73.38	$ 77.56
MATHOS, MARY	FINANCIAL AID ASSISTANT I	$ 44.27	$ 48.95
MATZ, CLAUDETTE	SECRETARY, VICE CHAN	$ 48.89	$ 52.18
McSWAIN, HOLLY	OFFICE ASST III (TERM 7/1/05)		
MENDOZA, JANELL	ASSOCIATE BUSINESS MANAGER	$ 71.94	$ 77.97
MORGAN, ALANA	BENEFITS SPECIALIST	$ 49.04	$ 52.80
NICHOLS, GARY	FINANCIAL AID ASSISTANT I	$ 42.44	$ 47.55
NIES, LINDA	ACCOUNTING SUPERVISOR	$ 45.83	$ 50.91
NISHINAKA, RON	INSTRUCTOR	$ 74.05	$ 78.17
NYGREN, LINDA	FINANCIAL AID ASSISTANT I	$ 46.73	$ 49.37
O'HARE, EILEEN	LEGAL COUNSEL	$ 86.49	$ 91.50

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
PATTERSON, TERESA	EXEC DIR PUBLIC INFO	$ 91.44	$ 96.28
POLANCO, HENRY	CUSTODIAN	$ 32.97	$ 35.63
RAMON, FRANK	DIRECTOR OF FINANCIAL AID	$ 84.67	$ 89.36
RICHARDSON, DAVID	INSTRUCTOR	$ 60.67	$ 65.88
RIVERA, DONNA	ASSISTANT BOOKSTORE MGR	$ 65.66	$ 69.37
RODRIGUEZ, SANDRA	OFFICE ASSISTANT III	$ 35.79	$ 37.44
ROMERO, ANTHONY	UTILITY WORKER	$ 33.23	$ 35.38
ROTH, VICKI	PERSONNEL ASSISTANT-CERTIFICATED (TERM 7/31/06)	$ 47.62	$ 47.69
ROWE, RANDY	VICE CHANCELLOR, PERSONNEL	$ 97.52	$ 102.66
SANCHEZ, LINDA	ACCOUNT CLERK II	$ 29.16	$ 32.67
SCHOFIELD, WIL	ACCOUNTING MANAGER	$ 58.88	$ 66.18
SCOTT, RONALD	ATHLETIC DIRECTOR	$ 74.26	$ 78.40
SHIPLEY, BARBARA	OFFICE ASST III	$ 34.86	$ 35.68
SPEECE, BRIAN	ASST V.C. BUSINESS & OPS	$ 102.69	$ 108.12
SPRING, CINDY	EXEC. SECRETARY TO CHAN.(TERM 12/31/05)	$ 53.88	
STANNARD, JANICE L.	CASHIER	$ 25.15	$ 30.92
STOEMER, SHARON	ACCOUNTING TECH II	$ 52.05	$ 54.99

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
STOVALL, JAMES	POLICE SERGEANT	$ 62.71	$ 62.31
SULLIVAN, CHERYL	ACCOUNTING SUPERVISOR	$ 44.45	$ 50.27
THEIME, EVELYN	OFFICE ASST III	$ 34.77	$ 36.96
VOGT, RANDY	DIRECTOR OF PURCHASING	$ 73.20	$ 77.79
WALLS, WILLIAM (RON)	ACCOUNTANT/AUDITOR	$ 55.34	$ 59.77
WALZBERG, ANN	INSTRUCTOR	$ 76.07	$ 81.58
WILLHITE, DAN	BUYER	$ 45.48	$ 48.06
YATES, SUSAN	INSTRUCTOR	$ 79.59	$ 84.01

State Center Community College District
308/95 Enrollment F ollection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,103,506	$ 2,775,061	$ 2,593,976	$ 2,718,599	$ 3,710,030	$ 5,759,626	$ 5,831,406	$ 14,523,798
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,070	$ 55,501	$ 51,880	$ 54,372	$ 74,201	$ 115,193	$ 116,628	$ 290,476
1.8-4 line 4A	Enrollment Fees Waived	$ 3,206,475	$ 6,320,816	$ 3,708,191	$ 4,048,517	$ 6,346,697	$ 9,751,000	$ 10,377,035	$ 8,924,693
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020	$ 207,541	$ 178,494
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 224,453	For 00-01 through 04-05 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 20.00
Total # of credits	Line 4A divided by unit fee		574,619	337,108	368,047	405,022	417,780	399,116	376,566
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180	$ 363,196	$ 342,675
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 64,130	$ 126,416	$ 74,164	$ 80,970	$ 126,934	$ 195,020	$ 207,541	$ 178,494
(Line 4A X 7%)	7% of Fees Waived (99-00 o	$ 224,453							
1.8-4 5.	Credit Units Waived		$ 522,903	$ 306,768	$ 334,923	$ 368,570	$ 380,180	$ 363,196	$ 342,675
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 288,583**	**$ 649,319**	**$ 380,932**	**$ 415,893**	**$ 495,504**	**$ 575,200**	**$ 570,737**	**$ 521,169**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
2005-06 fees Summer and Fall $26.00 and spring $20.00. ($26.00+$26.00+$20.00=$24.00).
2006-07 fees are $20.00

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: State Center
COUNTY: Fresno

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$89,328,163	$84,764,337	$-1,070,601	$83,693,736
ENROLL FEE ADMIN (2%)	209,112	192,383	16,729	209,112
APPRENTICE ALLOWANCE	45,470	7,923	37,547	45,470
BASIC SKILLS	434,382	0	434,382	434,382
S.F.A.A.	1,270,844	1,169,177	101,667	1,270,844
E.O.P.S.	2,573,448	2,363,116	210,332	2,573,448
C.A.R.E.	293,600	270,112	23,488	293,600
D.S.P.S.	1,725,642	1,587,590	138,052	1,725,642
STATE HOSPITALS	0	0	0	0
CALWORKS	2,092,920	1,673,867	419,053	2,092,920
MATRICULATION (CREDIT)	1,686,408	1,546,896	139,512	1,686,408
MATRIC. (NONCREDIT)	42,087	41,136	951	42,087
FAC.& STAFF DIVERSITY	26,072	23,987	2,085	26,072
PART-TIME FAC. ALLO.	1,105,044	1,016,641	88,403	1,105,044
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	104,511	67,523	36,988	104,511
PLANT & INSTRUCTIONAL	299,400	275,448	23,952	299,400
SCHDL. MAINT. & REPAIR	299,427	275,473	23,954	299,427
TANF	274,146	252,215	21,931	274,146
ECON. DEVELOPMENT	949,025	695,541	101,640	797,181
NURSING EDUCATION	738,693	262,645	476,048	738,693
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	234,341	234,341	0	234,341
ONE TIME FUNDS				
TRANSITION PAYMENT	199,005	173,625	25,380	199,005
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	531,521	531,521	0	531,521
BASIC SKILLS -REAPPROP	427,850	427,850	0	427,850
CAR. TECH. TRAILER BIL	946,576	946,576	0	946,576
GEN. PUR. TRAILER BILL	1,851,840	1,851,840	0	1,851,840
INST. MATERIAL TRAILER	1,117,442	1,117,442	0	1,117,442
SCHLD.MAINT. TRAILER B	1,117,442	1,117,442	0	1,117,442
FACULTY STAFF DEV	118,952	118,952	0	118,952
TOTAL	$110,053,363	$103,015,599	$1,251,493	$104,267,092

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
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Sc[illegible]e 5A
State Center Co[illegible]ity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)			$ 118.96			$ 154.94	$ 683.28	
2	Staff Training	(04)(B)(1)(b)				$ 2,619.60			$ 672.40	$ 542.64
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)		$ 106.74	$ 118.96	$ 130.98	$ 144.48	$ 154.94	$ 168.10	
4	Waiving student fees	(04)(B)(2)(b)	$ 181,175.39	$ 232,968.53	$ 290,746.58	$ 355,838.75	$ 414,661.56	$ 492,242.49	$ 528,475.46	$ 377,801.70
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)		$ 2,134.80	$ 2,379.20	$ 2,619.60	$ 2,889.60	$ 3,098.80	$ 5,411.84	
6	EFCW - Fee Waiver Costs	Total	$ 181,175.39	$ 235,210.07	$ 293,363.70	$ 361,208.93	$ 417,695.64	$ 495,651.17	$ 535,411.08	$ 378,344.34
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 288,583.00	$ 649,319.00	$ 380,932.00	$ 415,893.00	$ 495,504.00	$ 575,200.00	$ 570,737.00	$ 521,169.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (107,407.61)	$ (414,108.93)	$ (87,568.30)	$ (54,684.07)	$ (77,808.36)	$ (79,548.83)	$ (35,325.92)	$ (142,824.66)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 181,175.39**	**$ 235,210.07**	**$ 293,363.70**	**$ 361,208.93**	**$ 417,695.64**	**$ 495,651.17**	**$ 535,411.08**	**$ 378,344.34**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

California Home Wednesday, June 20, 2012

Student Financial Aid Awards

Fresno City College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of June 20, 2012 01:40:00

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	200	53,023
BOGW - Part A-2 based on SSI recipient status	48	12,821
BOGW - Part A-3 based on general assistance recipient status	34	9,166
BOGW - Part A basis unreported	1,106	121,217
BOGW - Part B based on income standards	12,482	4,211,354
BOGW - Part C based on financial need	4,406	1,580,661
Fee Waiver – Dependent child of deceased or disabled Veteran	24	7,692

Total Amount = $ 5,995,934

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California Home

Wednesday, June 20, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Reedley College College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of June 20, 2012 01:40:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	24	6,691
BOGW - Part A-2 based on SSI recipient status	29	2,863
BOGW - Part A-3 based on general assistance recipient status	1	78
BOGW - Part A basis unreported	51	1,183
BOGW - Part B based on income standards	5,180	1,781,526
BOGW - Part C based on financial need	2,852	998,425
Fee Waiver – Dependent child of deceased or disabled Veteran	20	7,920

Total Amount = $ 2,798,686

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Victor Valley Community College District CC 36175

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Victor Valley Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC36175

(02) Claimant Name: Victor Valley Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 18422 Bear Valley Road

City: Victorville | State: CA | Zip Code: 92392-5849

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 268,300
Less: 10% Late Penalty		(14) $ 26,830
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 241,470
Due from State	(08)	(17) $ 241,470
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	1,402
(24) EFCW-1, (04)(A)(2)(a)(f)	217,297
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	2,398
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	47,733
(29) EFCW-1, (04)(B)(2)(c)(f)	2,706
(30) EFCW-1, (06)	46
(31) EFCW-1, (07)	123,424
(32) EFCW-1, (09)	73,823
(33) EFCW-1, (10)	52,838
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 7-2-07

Bruce Baron
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

State Controller's Office

Community College Mandated Cost Manual

Program 257	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Victor Valley Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 1,401.60	$ -	$ -	$ -	$ -	$ 1,401.60
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 217,297.47	$ -	$ -	$ -	$ -	$ 217,297.47
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 1,469.18	$ -	$ -	$ -	$ 929.00	$ 2,398.18
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 47,733.49	$ -	$ -	$ -	$ -	$ 47,733.49
c. Reporting BOG fee waiver data to CCC	$ 2,706.00	$ -	$ -	$ -	$ -	$ 2,706.00
5) Total Direct Costs	$ 270,607.74	$ -	$ -	$ -	$ 929.00	$ 271,536.74

direct Costs

6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	45.61%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 123,424.19
8) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 394,960.93

st Reduction

) Less: Enrollment Fee Revenue offset		$ 73,823.00
) Less: Enrollment Fee Waiver offsets		$ 52,837.67
Total Claimed Amount	[Line (08) - [Line (09) + Line (10)]]	$ 268,300.26

/ 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

'or Valley Community College District

(02) Fiscal Year

2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Osborne, Lori A&R Specialist	$29.20	48.0	$ 1,401.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,401.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
[illegible]r Valley Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$27.77	2,036.6	$ 56,556.38				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$27.77	3,698.1	$ 102,696.24				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$27.77	2,090.2	$ 58,044.85				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 217,297.47	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Victor Valley Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Murray, Jim	FA Specialist	$34.40	2.0	$ 68.80				
Chapman, Diane	FA Specialist	$37.98	8.0	$ 303.84				
Groom, Sharon	FA Director	$39.91	20.0	$ 798.20				
Foxworthy, Doug	FA Specialist	$37.37	2.0	$ 74.74				
Janisko, Gina	FA Specialist	$27.95	8.0	$ 223.60				
Registration fees for enrollment fee waiver seminars								
Registration Costs, Jim Murray	Seminar Fees	$1.00	10.0					$ 10.00
Registration Costs, Diane Chapman	Seminar Fees	$1.00	221.0					$ 221.00
Registration Costs, Sharon Groom	Seminar Fees	$1.00	482.0					$ 482.00
Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	8.0					$ 8.00
Registration Costs, Gina Janisko	Seminar Fees	$1.00	208.0					$ 208.00
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,469.18	$ -	$ -	$ -	$ 929.00

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
'or Valley Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waiving Enrollment Fees	$30.15	241.9	$ 7,293.29				
Receiving waiver applications Financial Aid Office Staff Waiving Enrollment Fees	$30.15	406.8	$ 12,265.02				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waiving Enrollment Fees	$30.15	362.8	$ 10,938.42				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waiving Enrollment Fees	$30.15	571.7	$ 17,236.76				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 47,733.49	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

tor Valley Community College District

(02) Fiscal Year

2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Moreno, Christina Senior Systems Analyst	$45.10	60.0	$ 2,706.00				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,706.00	$ -	$ -	$ -	$ -

New 04/06

Victor Valley Community College District

308/95 ENROLLMEN[illegible] COLLECTIONS/WAIVERS

[illegible]-2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
10/13/2004	6.00	Chapman, Diane	FA Specialist	$37.98	$227.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
11/4/2004	2.00	Chapman, Diane	FA Specialist	$37.98	$75.96	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Chapman, Diane Total**			$303.84		
04-05	2,036.60	Enrollment Office Staff	Collecting Fees	$27.77	$56,556.38	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	3,698.10	Enrollment Office Staff	Collecting Fees	$27.77	$102,696.24	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	2,090.20	Enrollment Office Staff	Collecting Fees	$27.77	$58,044.85	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	7,824.90	**Enrollment Office Staff Total**			$217,297.47		
04-05	241.90	Financial Aid Office Staff	Waiving Enrollment Fees	$30.15	$7,293.29	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	406.80	Financial Aid Office Staff	Waiving Enrollment Fees	$30.15	$12,265.02	Receiving waiver applications	Waiving student fees
04-05	362.80	Financial Aid Office Staff	Waiving Enrollment Fees	$30.15	$10,938.42	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	571.70	Financial Aid Office Staff	Waiving Enrollment Fees	$30.15	$17,236.76	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,583.20	**Financial Aid Office Staff Total**			$47,733.49		
11/4/2004	2.00	Foxworthy, Doug	FA Specialist	$37.37	$74.74	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Foxworthy, Doug Total**			$74.74		
9/21/2004	4.00	Groom, Sharon	FA Director	$39.91	$159.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
10/13/2004	6.00	Groom, Sharon	FA Director	$39.91	$239.46	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
11/4/2004	2.00	Groom, Sharon	FA Director	$39.91	$79.82	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
6/20/2005	8.00	Groom, Sharon	FA Director	$39.91	$319.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	20.00	**Groom, Sharon Total**			$798.20		
10/13/2004	6.00	Janisko, Gina	FA Specialist	$27.95	$167.70	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
11/4/2004	2.00	Janisko, Gina	FA Specialist	$27.95	$55.90	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Janisko, Gina Total**			$223.60		
04-05	60.00	Moreno, Christina	Senior Systems Analyst	$45.10	$2,706.00	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	60.00	**Moreno, Christina Total**			$2,706.00		
11/4/2004	2.00	Murray, Jim	FA Specialist	$34.40	$68.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Murray, Jim Total**			$68.80		
04-05	48.00	Osborne, Lori	A&R Specialist	$29.20	$1,401.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	48.00	**Osborne, Lori Total**			$1,401.60		
10/13/2004	200.00	Registration Costs, Diane Chapman	Seminar Fees	$1.00	$200.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
11/4/2004	21.00	Registration Costs, Diane Chapman	Seminar Fees	$1.00	$21.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	221.00	**Registration Costs, Diane Chapman Total**			$221.00		
11/4/2004	8.00	Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	$8.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	8.00	**Registration Costs, Doug Foxworthy Total**			$8.00		
10/13/2004	200.00	Registration Costs, Gina Janisko	Seminar Fees	$1.00	$200.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
11/4/2004	8.00	Registration Costs, Gina Janisko	Seminar Fees	$1.00	$8.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	208.00	**Registration Costs, Gina Janisko Total**			$208.00		
11/4/2004	10.00	Registration Costs, Jim Murray	Seminar Fees	$1.00	$10.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	10.00	**Registration Costs, Jim Murray Total**			$10.00		
9/21/2004	144.00	Registration Costs, Sharon Groom	Seminar Fees	$1.00	$144.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
10/13/2004	150.00	Registration Costs, Sharon Groom	Seminar Fees	$1.00	$150.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
11/4/2004	8.00	Registration Costs, Sharon Groom	Seminar Fees	$1.00	$8.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
6/20/2005	180.00	Registration Costs, Sharon Groom	Seminar Fees	$1.00	$180.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	482.00	**Registration Costs, Sharon Groom Total**			$482.00		
	10,485.10	**Grand Total**			$271,536.74		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$20,873,483		$20,873,483	$488,526	$20,384,957
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	1,286,979		1,286,979		1,286,979
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030	133,154		133,154		133,154
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	100,126		100,126		100,126
Library	6120	849,802		849,802	69,468	780,334
Media	6130	162,332		162,332	49,025	113,307
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190	239,706		239,706	1,141	238,565
Admissions and Records	6200	411,633		411,633		411,633
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	531,620		531,620		531,620
Matriculation and Student Assessment	6320	430,362		430,362	1,125	429,237
Transfer Programs	6330	61,013		61,013		61,013
Career Guidance	6340					
Other Student Counseling and Guidance	6390	12,375		12,375		12,375
Other Student Services	6400					
Disabled Students Programs & Services	6420	755,104		755,104	9,833	745,271
Subtotal		$25,847,689	$0	$25,847,689	$619,118	$25,228,571

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,058,163	$304,129	$754,034	$1,607	$752,427
Health Services	6440					
Student Personnel Admin.	6450	367,866		367,866		367,866
Financial Aid Administration	6460	635,055		635,055	75,564	559,491
Job Placement Services	6470	468,285		468,285	45,253	423,032
Veterans Services	6480	339		339		339
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	829,596		829,596	829,596	0
Custodial Services	6530	822,497		822,497	822,497	0
Grounds Maintenance and Repairs	6550	412,383		412,383	412,383	0
Utilities	6570	1,532,219		1,532,219	1,532,219	0
Other	6590	232,878		232,878	232,878	0
Planning, Policy Making, and Coordination	6600	2,080,147		2,080,147	2,080,147	0
General Inst. Support Services	6700					
Community Relations	6710	134,002		134,002	134,002	0
Fiscal Operations	6720	657,866		657,866	657,866	0
Human Resources Management	6730	891,200		891,200	891,200	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	25,664		25,664	25,664	0
Staff Diversity	6760	15,930		15,930	15,930	0
Logistical Services	6770	2,296,927		2,296,927	2,296,927	0
Management Information Systems	6780	1,892,697		1,892,697	1,892,697	0
Subtotal		$40,201,403	$304,129	$39,897,274	$12,565,548	$27,331,726

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	115,864		115,864		115,864
Community Use of Facilities	6830	124,369		124,369	7,324	117,045
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960	1,311		1,311		1,311
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Physical Property Acquisitions	7100					
(05) Total		$40,442,947	$304,129	$40,138,818	$12,572,872	$27,565,946
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				45.61%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual F ncial and Budget Report

Expe tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	55,710		11,052	51,972		118,734
Architecture and Environmental Design	0200						
Biological Sciences	0400	752,887		36,172			789,059
Business and Management	0500	816,520		4,117			820,637
Communications	0600						
Computer and Information Science	0700	364,178		212	34,576		398,966
Education	0800	667,987	274,795	168,743	3,454		1,114,979
Engineering and Related Industrial Tech.	0900	1,232,238		121,744	199,936		1,553,918
Fine and Applied Arts	1000	647,860		37,024			684,884
Foreign Language	1100	321,424		1,387			322,811
Health	1200	1,257,094	168,363	24,411	101,443		1,551,311
Consumer Education and Home Economics	1300	120,925	148,097	31,272			300,294
Law	1400						
Humanities (Letters)	1500	1,477,877		5,571			1,483,448
Library Science	1600						
Mathematics	1700	1,119,877		2,161			1,122,038
Military Studies	1800						
Physical Sciences	1900	562,551		13,946			576,497
Psychology	2000	364,242		407			364,649
Public Affairs and Services	2100	257,868		97,439	12,517		367,824
Social Sciences	2200	823,422		1,370			824,792
Commercial Services	3000	261,270		85,820			347,090
Interdisciplinary Studies	4900	7,082,974	820,139	42,020	84,628		8,029,761
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	101,791					101,791
Subtotal - Instructional Activities	**599**	18,288,695	1,411,394	684,868	488,526		20,873,483

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual F ncial and Budget Report

Expe tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		1,129,711	157,268			1,286,979
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030		133,154				133,154
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		1,262,865	157,268			1,420,133
Instructional Support Services (6100)							
Learning Center	6110	100,126					100,126
Library	6120		683,422	96,912	69,468		849,802
Media	6130		69,738	43,569	49,025		162,332
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190		238,565		1,141		239,706
Subtotal - Instructional Support Services	**6100**	100,126	991,725	140,481	119,634		1,351,966
Admissions and Records	**6200**		391,684	19,949			411,633
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		522,235	9,385			531,620
Matriculation and Student Assessment	6320		385,139	44,098	1,125		430,362
Transfer Programs	6330		56,438	4,575			61,013
Career Guidance	6340						
Other Student Counseling and Guidance	6390			12,375			12,375
Subtotal - Student Counseling and Guidance	**6300**		963,812	70,433	1,125		1,035,370

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Victor Valley Community College District | 990 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual F[illegible]ncial and Budget Report

Expe[illegible]tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		713,059	32,212	9,833		755,104
Extended Opportunity Prgms. & Services (EOPS)	6430		715,021	37,406	1,607	304,129	1,058,163
Health Services	6440						
Student Personnel Administration	6450		336,355	31,511			367,866
Financial Aid Administration	6460		601,794	(42,303)	75,564		635,055
Job Placement Services	6470		367,209	55,823	45,253		468,285
Veterans Services	6480			339			339
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,733,438	114,988	132,257	304,129	3,284,812
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		725,014	92,151	12,431		829,596
Custodial Services	6530		745,478	77,019			822,497
Grounds Maintenance and Repairs	6550		380,215	28,407	3,761		412,383
Utilities	6570			1,532,219			1,532,219
Other Operation and Maintenance of Plant	6590		150,373	82,505			232,878
Subtotal - Operation and Maintenance of Plant	**6500**		2,001,080	1,812,301	16,192		3,829,573
Planning, Policymaking, and Coordination	**6600**		1,114,459	942,694	22,994		2,080,147

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Victor Valley Community College District | 990 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		134,002				134,002
Fiscal Operations	6720		535,294	120,403	2,169		657,866
Human Resources Management	6730		614,436	275,119	1,645		891,200
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		24,419	1,245			25,664
Staff Diversity	6760			15,930			15,930
Logistical Services	6770		1,228,854	95,847	972,226		2,296,927
Management Information Systems	6780		854,002	1,019,562	19,133		1,892,697
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		3,391,007	1,528,106	995,173		5,914,286
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	33,984		81,880			115,864
Community Use Facilities	6830		107,358	9,687	7,324		124,369
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	33,984	107,358	91,567	7,324		240,233

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

Exper ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960			1,311			1,311
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**			1,311			1,311
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090						
Subtotal - Auxiliary Operations	**7000**						
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210			28,538			28,538
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			28,538			28,538
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					465,000	465,000
Student Aid	7320					167,203	167,203
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					632,203	632,203
TOTAL EXPENDITURES and OTHER OUTGO	**391**	18,422,805	14,368,822	5,592,504	1,783,225	936,332	41,103,688

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	32,157
Avg. time p/account	3.8
Total Time (in minutes)	122197
Per Hour	60
Hours Worked (** 11)	**2036.6**
***EFC 2 (Not provided - No substitute)**	
Avg. time p/student	4.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** 12)	**0.0**
***EFC 1**	32,157
Avg. time p/question	6.9
Total Time (in minutes)	221883
Per Hour	60
Hours Worked (** 13)	**3698.1**
***EFC 2 (Not provided - Used *EFC 1)**	32,157
Avg. time p/file	3.9
Total Time (in minutes)	125412
Per Hour	60
Hours Worked (** 14)	**2090.2**
***EFC 4 (Not provided - No substitute)**	
Avg. time p/account	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** 15)	**0.0**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** 16)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

EFC Workload Multiplier (Default)
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes***
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	6,597
Avg. time p/question	2.2
Total Time (in minutes)	14513
Per Hour	60
Hours Worked (** **21**)	**241.9**
***EFW 6 (Not provided - Used *EFW 7)**	6,597
Avg. time p/application	3.7
Total Time (in minutes)	24409
Per Hour	60
Hours Worked (** **22**)	**406.8**
***EFW 6 (Not provided - Used *EFW 7)**	6,597
Avg. time p/evaluation	3.3
Total Time (in minutes)	21770
Per Hour	60
Hours Worked (** **23**)	**362.8**
***EFW 8 (Not provided - No substitute)**	
Avg. time p/application	3.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	6,597
Avg. time p/application	5.2
Total Time (in minutes)	34304
Per Hour	60
Hours Worked (** **25**)	**571.7**
***EFW 8 (Not provided - No substitute)**	
Avg. time p/application	4.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

Conclusion: *Findings will go forward to the EFCW-2.*

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Allen-Vilasquez, Kenyona	A&R Technician	2	0.5	1	4	1	3
Avila, Silvia	A&R Technician	7	3	5	3		
Cardoza, Maria	A&R Technician	5	3	3	2		
Carpenter, Malia	Administrative Secretary I	3	3	7	3		1
Conrad, Michelle	Account Technician I	3	3	5	1	5	10
Dance, Tamara	Admissions Assistant	2.5	4	12	2.5	2	1
Garcia, Renee	Accounting Technician	10	10	10	10	10	10
Mohr, Diane	Office Assistant	2	2	18		0.5	1.5
Osborne, Lori	A&R Technician	2	2	9	3	1	2
Sharp, Ann Marie	Account Technician I	3.5	3.5	3.5	3.5	3.5	3.5
Suderno, Jean	A&R Technician	1	10	1	1		
Williams, Audrey	Records Evaluator	5		8	10		
Average		**3.8**	**4.0**	**6.9**	**3.9**	**3.3**	**4.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Various Enrollment Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Collection staff.
Source: EFCW 1.7-2 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.) Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Productive Hourly Rates							
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Allen-Vilasquez, Kenyona	A&R Technician	20.56	20.97	21.84	22.69	23.14	23.14	23.14	24.51
Avila, Silvia	A&R Technician	22.27	22.72	23.67	24.58	25.08	25.08	25.08	26.56
Cardoza, Maria	A&R Technician	21.4	21.83	22.74	23.62	24.09	24.09	24.09	25.52
Carpenter, Malia	Administrative Secretary I	21.41	21.84	22.75	23.63	24.10	24.10	24.10	25.53
Conrad, Michelle	Account Technician I	26.96	27.5	28.65	29.76	30.35	30.35	30.35	32.15
Dance, Tamara	Admissions Assistant	33.23	33.89	35.31	36.67	37.41	37.41	37.41	39.62
Garcia, Renee	Accounting Technician								
Mohr, Diane	Office Assistant	20.61	21.02	21.89	22.74	23.20	23.20	23.20	24.57
Osborne, Lori	A&R Technician	25.94	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Sharp, Ann Marie	Account Technician I	28.37	28.94	30.15	31.31	31.94	31.94	31.94	33.83
Suderno, Jean	A&R Technician	25.94	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Williams, Audrey	Records Evaluator								
Average		24.67	25.16	26.21	27.23	27.77	27.77	27.77	29.42

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years. Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		7			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Avila, Sylvia	A&R Technician	3					
Carpenter, Malia	Administrative Secretary I	1	1		3		
Chapman, Diane	Financial Aid Specialist	3	3	3	3	5	
Clark, Sandy	Financial Aid Specialist	2	4	2	1	4	4
Dance, Tamara	Admissions Assistant	2					
Davis, Barbara	Financial Aid Technician	2	4	2	1	4	4
Foxworthy, Doug	Financial Aid Specialist	5	5	12	16	15	10
Groom, Sharon	Financial Aid Specialist	2	4	2	1	4	4
Jordan, Ernestine	Financial Aid Technician	2	4	2	1	4	4
Mohr, Diane	Office Assistant	2.5					
Murray, Jim	Financial Aid Specialist	2	3	3	1	3	4
Navarrete, Elaine	Financial Aid Specialist	2	5	2	4	4	5
Osborne, Lori	A&R Technician	1					
Suderno, Jean	A&R Technician	1					
Underwood, Starla	Financial Aid Specialist	2	4	2	1	4	4
Average		**2.2**	**3.7**	**3.3**	**3.2**	**5.2**	**4.9**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Various Finacial Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Waiver staff.
Source: EFCW 1.7-3 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.) Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Avila, Sylvia	A&R Technician	22.72	23.67	24.58	25.08	25.08	25.08	26.56
Carpenter, Malia	Administrative Secretary I	21.84	22.75	23.63	24.10	24.10	24.10	25.53
Chapman, Diane	Financial Aid Specialist	34.41	35.85	37.24	37.98	37.98	37.98	40.23
Clark, Sandy	Financial Aid Specialist							
Dance, Tamara	Admissions Assistant	33.89	35.31	36.67	37.41	37.41	37.41	39.62
Davis, Barbara	Financial Aid Technician							
Foxworthy, Doug	Financial Aid Specialist	33.86	35.27	36.64	37.37	37.37	37.37	39.58
Groom, Sharon	Financial Aid Specialist							
Jordan, Ernestine	Financial Aid Technician	23.62	24.60	25.56	26.07	26.07	26.07	27.61
Mohr, Diane	Office Assistant	21.02	21.89	22.74	23.20	23.20	23.20	24.57
Murray, Jim	Financial Aid Specialist	31.17	32.47	33.73	34.40	34.40	34.40	36.44
Navarrete, Elaine	Financial Aid Specialist	18.97	19.76	20.53	20.94	20.94	20.94	22.18
Osborne, Lori	A&R Technician	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Suderno, Jean	A&R Technician	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Underwood, Starla	Financial Aid Specialist	33.37	34.76	36.11	36.83	36.83	36.83	39.01
Average		**27.32**	**28.46**	**29.56**	**30.15**	**30.15**	**30.15**	**31.93**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1. Enrolled Students	24,407	25,365	27,883	30,969	30,794	28,095	32,157
EFC 2	1.8-1	2. Paid Enrollment fees							
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)							
EFC 4	1.8-2	1. Delinquencies collections							
EFC 5	1.8-2	2. Refunds							
EFW 6	1.8-3	1. Waivers Requested	X						
EFW 7	1.8-3	2. Waivers Approved	X -	4,809	5,492	5,683	6,441	6,580	6,597
EFW 8	1.8-3 (1-2)	Waivers Denied	X						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2004 Summer Term

Data Current As Of May 14, 2007 02:21:52

Total Headcount	4,166

© 2001 State of California. California Community Colleges, Chancellor's Office

04-05 0. C

4,166.00 +
11,246.00 +
3,506.00 +
11,092.00 +
004.....
30,010.00 *

0. C

32,157.00 +
30,010.00 −
002.....
2,147.00 *

1-05

0. C

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2004 Fall Term

Data Current As Of May 14, 2007 02:22:03

Total Headcount	11,246

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2005 Winter Intersession

Data Current As Of May 14, 2007 02:22:16

Total Headcount	3,506

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2005 Spring Semester

Data Current As Of May 14, 2007 02:22:27

Total Headcount	11,092

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00/01 Enrollment Fee Collection / Waiver

MRP 1.6a

Employee Time Record Sheet for Mandated Costs of

~~**4867/75 Mandate Reimbursement Process**~~

Annual Reimbursement Claims

District: Victor Valley Com College Fiscal Year: 04/05

Drene E Chapman
Employee Name

Financial Aid Specialist
Exact Position Title

Fin. Aid
School/Department/Location

245-4271 X2308
Telephone #

12mo/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
10/13/04	1 2 3 (4) 5 6	Workshop		6	200.00 ✓
11/4/04	1 2 3 (4) 5 6	Workshop		2	21.00 ✓
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Drene E Chapman Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs 308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Victor Valley College Fiscal Year: ~~03-04~~ 04-05

Doug Foxworthy — Employee Name

Financial Specialist — Exact Position Title

Financial Aid — Department/Location

760-245-4271 x 2256 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/4/04	1A 1B 2A (2B) 3 4	CA Client	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

— see schedule above all actual times to see costs of ... 8 ... 8

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 6-11-07

If you have any questions, please contact ______, at ______

ASE SUBMIT THIS INFORMATION BY ______; TO ______

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MRP 1.6a

308/96 Enrollment Fee Collection / Waiver

Employee Time Record Sheet for Mandated Costs of

~~**486/75 Mandate Reimbursement Process**~~

Annual Reimbursement Claims

District: Victor Valley College Fiscal Year: 02 - 06

Sharon Groom
Employee Name

FA. Director
Exact Position Title

VVC/FA
School/Department/Location

7602454271
Telephone #

(12mo)/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

	Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
01-02	6/7/02	1 2 3 (4) 5 6	CCCSFAAA	BOG	4	96 ✓
02-03	4/11/03	1 2 3 4 5 6	"	BOG	2	8 ✓
04-05	4/21/04	1 2 3 4 5 6	FA Director Trn.	BOG	4	144 ✓
04-05	10/13/04	1 2 3 4 5 6	3CDVG	BOG	6	150 ✓
04-05	11/4/04	1 2 3 4 5 6	Ca client	BOG	2	8 ✓
04-05	6/20/05	1 2 3 4 5 6	FA Director Trn.	BOG	8	180 ✓
06-07	12/1/06	1 2 3 4 5 6	CCCSFAAA	BOG	6	103 ✓
06-07	12/3/06	1 2 3 4 5 6	CASFAA	BOG	6	119 ✓
		1 2 3 4 5 6				
		1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: VICTOR VALLEY COLLEGE Fiscal Year: 2003-04

GINA JANISKO — Employee Name

FINANCIAL AID SPECIALIST — Exact Position Title

FINANCIAL AID — Department/Location

760-245-4271 X2202 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
03-04 03/25/04	1A 1B 2A (2B) 3 4	DATATEL CONF.	2
4- 10/13/04	1A 1B 2A (2B) 3 4	3COUG CONF (DATATEL)	6
04-05 11/10/04	1A 1B 2A (2B) 3 4	CA CLIENT (DATATEL)	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

see schedule above and actual timeslip in our COSTS

$200

$18

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Groom for: Gina Janisko Date 06-12-07

If you have any questions, please contact Sharon Groom, at 760-245-4271 x 2449

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

1.6's, 1.7's &/or 1.8's used in multiple years

actual time sheet

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: VICTOR VALLEY COMMUNITY COLLEGE DISTRICT

CHRISTINA MORENO — SENIOR SYSTEMS ANALYST
Employee Name — Exact Position Title

MIS DEPARTMENT — 245-4271 ext 2376 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	25	25	25	25	25	40	60	60
TOTALS:	25	25	25	25	25	40	60	60

10987

BFAP
Christina
Mark
Ker

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christina Moreno Date 4/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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MRP 1.6a

1908/95 Enrollment Fee Collection/Waiver

Employee Time Record Sheet for Mandated Costs of

~~**486/75 Mandate Reimbursement Process**~~

Annual Reimbursement Claims

District: Victor Valley College Fiscal Year: 02-06 & 2007

Jim Murray
Employee Name

FA. Specialist
Exact Position Title

VVC / FA
School/Department/Location

760 245 4271
Telephone #

12mo/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

	Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
01-02	5/21/02	1 2 3 (4) 5 6	FA Workshop	BOG	2	$8 ✓
03	4/24/03	1 2 3 (4) 5 6	Datatel	BOG	2	$9 ✓
04-05	11/4/04	1 2 3 (4) 5 6	Cal. Grants/BOG	BOG	2	$10 ✓
06-07	11/6/06	1 2 3 (4) 5 6	3CDUG	BOG	8	$374 ✓
06-07	4/13/07	(1) 2 3 4 5 6	Collect Data	BOG	1.5	∅
06-07	4/16/07	(1) 2 3 4 5 6	" "	BOG	2	∅
06-07	4/17/07	(1) 2 3 4 5 6	" "	BOG	2	∅
06-07	4/18/07	(1) 2 3 4 5 6	" "	BOG	3	∅
06-07	4/19/07	(1) 2 3 4 5 6	" "	BOG	3	∅
06-07	4/2007	(1) 2 3 4 5 6	" "	BOG	2	∅

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Jim Murray Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Victor Valley

Lori Osborne — Employee Name

Admissions & Records Specialist — Exact Position Title

Admissions — College/Department/Location

760 245-4271 x2569 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	N/A	N/A	N/A	N/A	N/A	20.0	48.0	160.0
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College District
District

Admission Record Recruitment Bldg 52
Department/Location

Kenyona Allen-Velasquez
Employee Name

Admissions & Records Tech 50%.
Exact Position Title

(760) 245-4271 ext. 2695
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	30sec					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenyona Allen-Velasquez Date 4/20/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Silvia Avila
Employee Name

Department/Location

Admissions & Records Tech.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

A & R
Department/Location

District

Maria Cardoza
Employee Name

Admission & Registration Tech
Exact Position Title

(760) ~~[illegible]~~ 245-4271 ext 22917
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Cardoza Date 4-20-07

If you have any questions, please contact _____, at _____

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fwa leave by 4/20. J + 16B

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Community College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x2272
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

273
District

Bursar / Fiscal Serv
Department/Location

Michelle Conrad
Employee Name

Acct Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Conrad Date 4.10.07

If you have any questions, please contact X+ 2369, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

TAMARA DANCE
Employee Name

Records Evaluator
Exact Position Title

(760) 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.5 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tamara Dance Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal
Department/Location

Bruce Garcia
Employee Name

Accounting Tech
Exact Position Title

X 2371
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you *certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information.* This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Diane Mohr
Employee Name

Office Assistant
Exact Position Title

760 245-4271 x2315
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	18.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A ø					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that data for state mandates is actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions and Records
Department/Location

Lori Osborne
Employee Name

Admissions & Records Technician
Exact Position Title

760 245-4271 x2589 (12mo)/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	9.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Ann Marie Sharp
Employee Name

Acct tech I
Exact Position Title

760) 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.5 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3.5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Marie Sharp Date 4/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions and Records
Department/Location

Jean Suderno
Employee Name

Admissions & Record Technician
Exact Position Title

760 245-4271 ext 2678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Jean Suderno Date 4/20/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Comm College
District

A&R
Department/Location

AUDREY WILLIAMS
Employee Name

RECORDS EVALUATOR
Exact Position Title

2429
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 MIN	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	NA					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 m					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 m					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Audrey Williams Date 4/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Silvia Avila
Employee Name

Department/Location

Admissions & Records Tech
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3m				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Community College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x 2272
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 04/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Com. College
District

Financial Aid
Department/Location

Diane E Chapman
Employee Name

Financial Aid Specialist
Exact Position Title

245-4211x2308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane E Chapman Date 4/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC/FA
Department/Location

Sandy Clark
Employee Name

Financial Aid Specialist
Exact Position Title

760 2454271
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/28/05

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College — District
Admissions & Records — Department/Location
TAMARA DANCE — Employee Name
Records Evaluator — Exact Position Title
(760) 245-4571 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tamara Dance Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College — District

VVC/FA — Department/Location

Barbara Davis — Employee Name

FA. Tech — Exact Position Title

7602454271 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid
Department/Location

Doug Foxworthy
Employee Name

Financial Aid Specialist
Exact Position Title

(760) 245-4271 x 2254
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	12				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	16				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC/FA
Department/Location

Sharon Groom
Employee Name

Financial Aid Director
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

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Employee Signature _____ Date 4/23/05

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC / FA
Department/Location

Ernestine Jordan
Employee Name

Financial Aid Technician
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/02

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Diane Mohr
Employee Name

Office Assistant
Exact Position Title

760-245-4271 x2315
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	~~0~~ N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	~~0~~ N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	~~0~~ N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~0~~ N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	~~0~~ N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

FA
Department/Location

Jim Murray
Employee Name

FA Specialist
Exact Position Title

760 245 4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Com. College — District

Financial Aid — Department/Location

Elaine Navarrete — Employee Name

Financial Aid Specialist — Exact Position Title

(760) 245-4271 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Navarrete — Date 4/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Lori Osborne
Employee Name

Admissions & Records Technician
Exact Position Title

760 245-4271 x2569
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Jean Suderno
Employee Name

A & R Technician
Exact Position Title

760 245-4271 ext 2628
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	NA				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	NA				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	NA				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Suderno Date 4/20/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC / FA
Department/Location

Starla Underwood
Employee Name

Financial Aid Specialist
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: Victor Valley Comm College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	4,817	4,746	5,573	6,184	5,184	4259	4,661	5278
Fall	9,379	10,106	10,685	12,173	12,377	11,947	11,693	12,134
Winter/ Intersession	NA	NA	NA	NA	NA	NA	4,147	4,187
Spring	10,211	10,513	11,625	12,612	13,233	11,889	11,656	11,365
Total duplicated count	24,407	25,365	27,883	30,969	30,794	28,095	32,157	32,964
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Mark Clair Date 4-25-07

Mark Clair
Employee Name: (print)

Institutional Research Coordinator
Position or Title

If you have any questions, please contact _____, at _____.

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	4674	4864	5492	5683	6441	6580	6597	6719
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall	See attached							
Winter/Intersession	BOGW Schedule							
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Jim Murray Date 5/25/07

Employee Name: (print) Jim Murray

Position or Title FA Specialist

If you have any questions, please contact _____, at _____

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	1998-1999	1999-2000	2000-2001	2001-2002	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	
BOGW A	245	214	264	110	71	89	73	52	143	
BOGW B	1743	1808	2341	1873	1558	1558	839	219	574	
BOGW C	2686	2787	2887	3700	4812	4933	5686	6448	7113	
Total	4674	4809	5492	5683	6441	6580	6597	6719	7830	
BOGA & B X 1.25 min	2485	2528	3257	2479	2037	2059	1140	339	897	17221
BOGC X .25	672	697	722	925	1203	1234	1422	1612	1779	10266

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 941,337	$ 878,274	$ 1,091,767	$ 1,022,655	$ 1,118,851	$ 2,255,074	$ 2,436,122	$ 2,395,039
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

MPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that ou have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty f perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

mployee Signature: _____ Date _____

nployee Name: (print) _____ Position or Title _____

/e any questions, please contact _____, at _____.

EASE SUBMIT THIS INFORMATION BY _____; TO _____.

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CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2004-2005, DISTRICT: Victor Valley CCD, COLLEGE: Victor Valley

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
B1	0	0	0	0	0	0	0	0	0	0	0	0	6	1,974
B2	0	0	0	0	0	0	0	0	0	0	0	0	7	1,016
P	0	0	0	0	0	0	0	0	0	0	0	0	3	595
B4	0	0	0	0	0	0	0	0	0	0	0	0	72	30,288
BA	2,098	122,796	5,161	1,113,660	2,135	147,537	5,217	1,052,129	0	0	7,049	2,436,122	1	33
BB	0	0	0	0	0	0	0	0	0	0	0	0	1,558	363,038
BC	0	0	0	0	0	0	0	0	0	0	0	0	4,933	1,858,130
UNDUP B-TOTALS	2,098	122,796	5,161	1,113,660	2,135	147,537	5,217	1,052,129	0	0	7,049	2,436,122	6,198	2,255,074
GB	0	0	510	347,060	0	0	417	287,086	0	0	537	634,146	443	518,801
GC	0	0	107	24,984	0	0	85	20,520	0	0	114	45,504	116	45,000
GE	0	0	789	96,715	0	0	902	125,408	0	0	1,100	222,123	15	6,900
GF	0	0	85	31,870	0	0	96	49,944	0	0	122	81,814	99	73,286
GP	0	0	3,159	4,203,287	636	321,176	3,294	4,642,052	0	0	4,027	9,166,515	3,529	7,976,796
G	0	0	1,000	200,000	0	0	126	25,200	0	0	1,126	225,200	1,083	330,500
GU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GV	0	0	0	0	0	0	0	0	0	0	0	0	55	27,200

NOTES:

1. *BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type*
2. *AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received*
3. *YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.*
4. *Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.*

Report Run On: OCT 07, 2005

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2004-2005, DISTRICT: Victor Valley CCD, COLLEGE: Victor Valley

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
GW	0	0	0	0	0	0	0	0	0	0	0	0	0	0
UNDUP G-TOTALS	0	0	3,265	4,903,916	636	321,176	3,423	5,150,210	0	0	4,172	10,375,302	3,562	8,978,483
LI	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LE	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LG	0	0	474	713,595	0	0	498	729,268	0	0	586	1,442,863	508	1,217,540
LH	0	0	173	318,800	0	0	190	355,600	0	0	217	674,400	198	553,212
LI	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LL	0	0	28	54,000	0	0	34	66,000	0	0	38	120,000	39	106,383
LN	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LP	0	0	1	3,500	0	0	1	3,500	0	0	1	7,000	0	0
LS	0	0	74	109,396	0	0	87	127,099	0	0	97	236,495	95	225,247
UNDUP L-TOTALS	0	0	548	1,199,291	0	0	592	1,281,467	0	0	682	2,480,758	602	2,102,382
SF	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SV	0	0	0	0	0	0	0	0	0	0	0	0	312	274,619
SX	0	0	232	121,166	0	0	225	125,286	0	0	257	246,452	0	0

NOTES:

1. *BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type*
2. *AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received*
3. *YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.*
4. *Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.*

Report Run On: OCT 07, 2005

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2004-2005, DISTRICT: Victor Valley CCD, COLLEGE: Victor Valley

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
UNDUP S-TOTALS	0	0	232	121,166	0	0	225	125,286	0	0	257	246,452	312	274,619
WC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WL	0	0	37	35,205	0	0	34	34,170	0	0	37	69,375	0	0
WF	0	0	113	141,105	0	0	114	143,607	0	0	125	284,712	154	341,197
WU	0	0	16	25,222	0	0	14	18,950	0	0	16	44,172	0	0
UNDUP W-TOTALS	0	0	154	201,532	0	0	150	196,727	0	0	165	398,259	154	341,197
UNDUP TOTALS	2,098	122,796	5,369	7,539,565	2,158	468,713	5,406	7,805,819	0	0	7,256	15,936,893	6,426	13,951,755

NOTES:

1. *BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type*
2. *AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received*
3. *YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.*
4. *Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.*

Report Run On: OCT 07, 2005

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

1 Page(s) this memo
0 Page(s) attachment

MEMO TO FILE

DATE: June 13, 2007

BY: Sheryll Antonio

SUBJECT: Productive Hourly Rates
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1998-99 through 2005-06

Debbie DaCosta called on 6/6/07 and advised me of the following pay rate changes:

1998-1999	4.5%	2002-2003	2.0%	2006-2007	5.875%
1999-2000	2.0%	2003-2004	0%		
2000-2001	4.17%	2004-2005	0%		
2001-2002	3.87%	2005-2006	5.92%		

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

Payroll Information for Production Hourly Rate

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Arlene Greene	$58,225.82	$11,540.36	$8,100.00	$77,866.18	1800	$43.26
	Carlos Martinez	$44,233.88	$8,767.16	$8,100.00	$61,101.04	1800	$33.95
	Cynthia Wilson	$52,764.00	$10,457.82	$8,100.00	$71,321.82	1800	$39.62
	Gloria Johnson	$56,089.60	$11,116.96	$8,100.00	$75,306.56	1800	$41.84
	James (Doug) Hannaman	$54,828.00	$10,866.91	$8,100.00	$73,794.91	1800	$41.00
	Kyle Rotte	$54,244.00	$10,751.16	$8,100.00	$73,095.16	1800	$40.61
	Mitchell Greene	$67,606.56	$13,399.62	$8,100.00	$89,106.18	1800	$49.50
	Renay Butler	$36,664.00	$7,266.80	$8,100.00	$52,030.80	1800	$28.91
	Sheree Caldwell	$44,351.01	$8,790.37	$8,100.00	$61,241.38	1800	$34.02
	Suzanne McGowan	$47,354.51	$9,385.66	$8,100.00	$64,840.17	1800	$36.02

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified Mgmt (PERS)	Becky Millen	$76,236.00	$15,109.98	$9,822.00	$101,167.98	1800	$56.20
	Linda Cera	$58,655.10	$11,625.44	$9,822.00	$80,102.54	1800	$44.50
	Willie Pringle	$92,046.00	$18,243.52	$9,822.00	$120,111.52	1800	$66.73

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
ademic Mgmt (STRS)	William Schmidt	$109,764.00	$4,116.15	$9,822.00	$123,702.15	1800	$68.72

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Arlene Greene	$58,495.28	$12,096.82	$8,100.00	$78,692.10	1800	$43.72
	James (Doug) Hannaman	$57,099.90	$11,808.26	$8,100.00	$77,008.16	1800	$42.78
	Renay Butler	$38,512.00	$7,633.08	$8,100.00	$54,245.08	1800	$30.14
	Margaret Kagy	$52,678.74	$10,440.93	$8,100.00	$71,219.67	1800	$39.57
	Carlos Martinez	$44,449.65	$8,809.92	$8,100.00	$61,359.57	1800	$34.09
	Ray Navarro	$46,929.23	$9,301.37	$8,100.00	$64,330.60	1800	$35.74

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Marie Vidana-Barda	$52,515.90	$10,860.29	$8,100.00	$71,476.19	1800	$39.71
	JK (Kevin) Crowley	$52,796.25	$10,464.22	$8,100.00	$71,360.47	1800	$39.64

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified Mgmt (PERS)	Linda Cera	$58,655.10	$12,129.87	$10,137.00	$80,921.97	1800	$44.96
	Willie Pringle	$92,046.00	$19,035.11	$10,137.00	$121,218.11	1800	$67.34

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Mgmt (STRS)	Louis (Tom) O'Neil	$97,602.00	$11,712.24	$10,137.00	$119,451.24	1800	$66.36
	Willard Lewallen	$124,740.00	$14,968.80	$10,137.00	$149,845.80	1800	$83.25

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Faculty (STRS)	John Rude	$75,900.00	$9,108.00	$8,100.00	$93,108.00	1800	$51.73
	Juanita Chou	$84,650.00	$10,158.00	$8,100.00	$102,908.00	1800	$57.17
	Debra Blanchard	$72,100.00	$8,652.00	$8,100.00	$88,852.00	1800	$49.36
	Gary Menser	$81,950.00	$9,834.00	$8,100.00	$99,884.00	1800	$55.49
	Lisa Ellis	$72,400.00	$8,688.00	$8,100.00	$89,188.00	1800	$49.55

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Margaret Kagy	$56,073.10	$10,990.33	$8,100.00	$75,163.43	1800	$41.76
	Raymond Navarro	$49,947.51	$9,789.71	$8,100.00	$67,837.22	1800	$37.69
	Arlene Greene	$62,219.18	$12,194.96	$8,100.00	$82,514.14	1800	$45.84

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Margaret Kagy	$56,073.10	$10,990.33	$8,100.00	$75,163.43	1800	$41.76
	Diane Chapman	$53,767.25	$10,538.38	$8,100.00	$72,405.63	1800	$40.23
	Starla Underwood	$51,935.50	$10,179.36	$8,100.00	$70,214.86	1800	$39.01
	James (Jim) Murray	$48,072.00	$9,422.11	$8,100.00	$65,594.11	1800	$36.44
	Ernestine Jordan	$34,775.08	$6,815.92	$8,100.00	$49,691.00	1800	$27.61
	Douglas Foxworthy	$52,797.50	$10,348.31	$8,100.00	$71,245.81	1800	$39.58
	Michelle (Mickey) Conrad	$41,620.00	$8,157.52	$8,100.00	$57,877.52	1800	$32.15
	Annmarie Sharp	$44,146.55	$8,652.72	$8,100.00	$60,899.27	1800	$33.83
	Mark Clair	$64,576.64	$12,657.02	$8,100.00	$85,333.66	1800	$47.41
	Christina Moreno	$65,127.68	$12,765.03	$8,100.00	$85,992.71	1800	$47.77
	Lori Osborne	$39,781.26	$7,797.13	$8,100.00	$55,678.39	1800	$30.93
	Jean Suderno	$39,781.26	$7,797.13	$8,100.00	$55,678.39	1800	$30.93
	Diane Mohr	$30,199.00	$5,919.00	$8,100.00	$44,218.00	1800	$24.57
	Tamara Dance	$52,850.18	$10,358.64	$8,100.00	$71,308.82	1800	$39.62
	Rita Jackson	$37,320.00	$7,314.72	$8,100.00	$52,734.72	1800	$29.30
	Ernestine Jordan	$34,848.00	$6,830.21	$8,100.00	$49,778.21	1800	$27.65
	Elaine Navarrete	$26,616.00	$5,216.74	$8,100.00	$39,932.74	1800	$22.18
	Kenyona Allen-Velasquez	$30,120.00	$5,903.52	$8,100.00	$44,123.52	1800	$24.51
	Silvia Avila	$33,204.00	$6,507.98	$8,100.00	$47,811.98	1800	$26.56
	Malia Carpenter	$31,644.00	$6,202.22	$8,100.00	$45,946.22	1800	$25.53
	Maria Cardoza	$31,632.00	$6,199.87	$8,100.00	$45,931.87	1800	$25.52
	Robbie Richards	$52,797.50	$10,348.31	$8,100.00	$71,245.81	1800	$39.58
	Debra DaCosta	$47,391.82	$9,288.80	$8,100.00	$64,780.62	1800	$35.99
	Mitchell Green	$70,521.18	$13,822.15	$8,100.00	$92,443.33	1800	$51.36

To Sch 2A 05-06
To Sch 3A 05-06
To Sch 3AM 05-06

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

2005/2006 Classified Mgmt (PERS)	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
	Linda Cera	$62,391.60	$12,228.75	$10,624.00	$85,244.35	1800	$47.36
	Willie Pringle	$97,455.60	$19,101.30	$10,624.00	$127,180.90	1800	$70.66
	Bruce Baron	$128,392.00	$25,164.83	$10,624.00	$164,180.83	1800	$91.21
	Kathleen Farrand	$60,458.16	$11,849.80	$10,624.00	$82,931.96	1800	$46.07
	Cynthia Wilson	$57,315.36	$11,233.81	$10,624.00	$79,173.17	1800	$43.99
	Sharon Groom	$74,051.99	$14,514.19	$10,624.00	$99,190.18	1800	$55.11

2005/2006 Academic Mgmt (STRS)	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
	Willard Lewallen	$135,361.50	$16,243.38	$10,624.00	$162,228.88	1800	$90.13
	William (Bill) Schmidt	$113,904.00	$13,668.48	$10,624.00	$138,196.48	1800	$76.78
	John Rude	$109,569.24	$13,148.31	$10,624.00	$133,341.55	1800	$74.08

2005/2006 Academic Faculty (STRS)	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
	Peter Allan	$71,832.89	$8,619.95	$8,100.00	$88,552.84	1050	$97.45

$88,552 / (1,050 x 86.5%)

Prod. Hrs	1800
Annual Hrs	2080
%	86.5%

*watch for PERS members
2003/2004
FT Faculty (STRS)*

Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR
Raggedy Ann	$80,000.00	$6,600.00	$9,822.00	$96,422.00	1050	$106.12

$96,422 / (1,050 x 86.5%)

Prod. Hrs	1800
Annual Hrs	2080
%	86.5%

Schedule 3AA
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
PHRs

Purpose: To summarize productive hourly rates for employees with actual time that did not appear in sch. 2A or 3A.
Source: EFCW 1.6 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.) Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
***Clark, Sandra**	**FA Director**	**36.16**	**37.67**	**39.12**	**39.91**	**39.91**	**39.91**	**42.27**
Bandringa, Pearl	Account Tech. II	21.22	22.11	22.96	23.42	23.42	23.42	24.81
Groom, Sharon	FA Director	36.16	37.67	39.12	39.91	39.91	39.91	42.27
Janisko, Gina	FA Specialist	25.32	26.38	27.40	27.95	27.95	27.95	29.60
Moreno, Christina	Senior Systems Analyst	40.86	42.57	44.22	45.10	45.10	45.10	47.77
Ryan, Greg	FA Assoc. Director	27.22	28.36	29.45	30.04	30.04	30.04	31.82
Sanchez, Lilia	FA Counselor	25.31	26.37	27.39	27.94	27.94	27.94	29.59

***Note** - No 05-06 phr provided for this employee due to retirement -- gave her same phr's as Groom, Sharon - both are FA Directors.

Conclusion: Findings go forward to EFCW-2.

Highlighted data is for FY: 04-05
See actual timesheets below schedule

	Date	Conf	# of BOG hr.	Travel cost
	3/29/2004	Datatel 03/04	2	9
	10/13/2004	Datatel	2	
	11/4/2004	CA-C 04/05	6	200
	12/9/2005	cccsfaaa 05/06	2	21
			6	179
Elaine Navarrete				
	Date	Conf	# of BOG hr.	Travel cost
	4/3/2007	cccsfaaa	2	27
Pearl Bandringa				
	Date	Conf	# of BOG hr.	Travel cost
	10/11/2005	3CDUG	8	120
Delia Snead				
	Date	Conf	# of BOG hr.	Travel cost
	4/3/2007	cccsfaaa	2	27
Greg Ryan				
	Date	Conf	# of BOG hr.	Travel cost
	4/19/2006	cccsfaaa	4	10
	10/5/2005	New FAD	8	155
	6/13/2006	New FAD	6	95
	10/3/2006	New FAD	10	206
	6/12/2006	casfaa	2	5
	12/1/2006	cccsfaaa	6	99
	12/3/2006	cccsfaaa	6	108
Robbie Richards				
	Date	Conf	# of BOG hr.	Travel cost
	11/8/06/	3cdug	6	77
Starla Underwood				
	Date	Conf	# of BOG hr.	Travel cost
	5/21/2002	FA WS	2	8
Sharon Groom				
	Date	Conf	# of BOG hr.	Travel cost

Boardroom (cont)
-SMS

6/7/2002	cccsfaaa	4	96
4/11/2003	cccsfaaa	2	8
9/21/2004	NewFA	4	144
10/13/2004	3cug	6	150
11/4/2004	CAClient	2	8
6/20/2005	FADIRtrn	8	180
12/1/2006	cccsfaaa	6	103
12/3/2006	casfaa	6	119

Lilia Sanchez

Date	Conf	# of BOG hr.	Travel cost
4/19/2006	sp fling	4	31

Doug Foxworthy

Date	Conf	# of BOG hr.	Travel cost
3/29/2006	Datatel	2	9
4/5/2006	CCCAPPL	2	0
11/4/2004	Caclient	2	8

Sandy Clark

Date	Conf	# of BOG hr.	Travel cost
3/22/2002	region IX	2	22
3/11/2002	safers	8	202
2/25/2002	FA Dir	12	95
12/14/2001	cccsfaaa	14	413
4/1/2002	IX	8	204
8/26/2003	cccsfaaa	5	98
6/23/2003	chugadug	8	80
6/19/2003	IX	2	25
6/2/2003	cccsfaaa	8	110
4/25/2003	IX	2	31
4/24/2003	datatel	2	123
4/6/2003	COCO	10	304
2/28/2003	IX	2	31
12/12/2002	cccsfaaa	14	280
8/23/2002	IX	2	17
6/14/2002	IX	2	16

	6/6/2002	cccsfaaa	4	43
	11/3/2003	cccsfaaa	4	93
	9/26/2003	IX	2	18
	4/6/2004	cccsfaaa	2	29
	4/30/2004	IX	2	18
	6/1/2004	IX	2	18

Gina Janisko

Date	Conf	# of BOG hr.	Travel cost
3/29/2004	datatel	2	9
10/13/2004	3cdug	6	200
11/4/2004	ca client	2	8

Jim Murray

Date	Conf	# of BOG hr.	Travel cost
5/21/2002	FAWS	2	8
4/24/2003	datatel	2	9
11/4/2004	CG	2	10
11/6/2006	datatel	8	374

Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 05-06 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received				Not provided by client.		
p/E.C. 76300 (c)	2% of Revenue Rec'd.			See CCCCO website data at beginning of workpapers.			
1.8-4 line 4A	Enrollment Fees Waived	$ 878,274	$ 1,091,767	$ 1,022,655	$ 1,118,851	$ 2,255,074	$ 2,436,122
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 61,479			For 00-01 through 04-05 - unit fee		
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		99,251	92,968	101,713	143,910	104,375
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 61,479					
1.8-4 5.	Credit Units Waived		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 79,044**	**$ 112,153**	**$ 105,054**	**$ 114,936**	**$ 176,059**	**$ 143,703**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 2003-04: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 2004-2005: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Victor Valley
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$23,297,545	$21,009,735	$220,421	$21,230,156
ENROLL FEE ADMIN (2%)	73,823	63,487	10,336	73,823
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	365,637	-365,637	0
PARTNERSHIP FOR EXCEL.	1,345,349	1,157,000	188,349	1,345,349
S.F.A.A.	551,512	473,010	78,502	551,512
E.O.P.S.	790,332	678,307	112,025	790,332
C.A.R.E.	158,036	135,911	22,125	158,036
D.S.P.S.	661,298	565,935	95,363	661,298
STATE HOSPITALS	0	0	0	0
CALWORKS	450,678	387,583	63,095	450,678
MATRICULATION (CREDIT)	325,685	280,090	45,595	325,685
MATRIC. (NONCREDIT)	33,054	28,426	4,628	33,054
FAC. & STAFF DIVERSITY	13,158	9,354	3,804	13,158
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	398,461	342,676	55,785	398,461
BLOCK GRANT (ONE-TIME)	180,422	155,163	25,259	180,422
ECON. DEVELOPMENT	58,823	0	49,411	49,411
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	105,691	90,894	14,797	105,691
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	0	0	0	0
VTEA TITLE I C	430,935	336,130	25,855	361,985
PLANT & INSTRUCTIONAL	202,372	174,040	28,332	202,372
PRIOR YEAR CORRECTION	-509,370	-520,011	10,641	-509,370
TOTAL	$28,620,907	$25,764,927	$710,229	$26,475,156

FISCAL SERVICES: 06/23/05 16:14
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Sch[illegible]le 5A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5. Initial year claim 98-99 through 05-06.
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
	EFCW-1 B. 1. a.							
	EFCW-1 B. 1. b.				$ 3,358.16	$ 2,958.30	$ 1,199.15	$ 2,398.18
	EFCW-1 B. 2. a.							
	EFCW-1 B. 2. b.		$ 31,532.75	$ 37,515.97	$ 40,319.84	$ 46,608.89	$ 47,615.91	$ 47,733.49
	EFCW-1 B. 2. c.		$ 1,021.50	$ 1,064.25	$ 1,105.50	$ 1,127.50	$ 1,804.00	$ 2,706.00
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 32,554.25	$ 38,580.22	$ 44,783.50	$ 50,694.69	$ 50,619.06	$ 52,837.67
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$79,044.00	$112,153.00	$105,054.00	$114,936.00	$176,059.00	$143,703.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (46,489.75)	$ (73,572.78)	$ (60,270.50)	$ (64,241.31)	$ (125,439.94)	$ (90,865.33)
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 32,554.25**	**$ 38,580.22**	**$ 44,783.50**	**$ 50,694.69**	**$ 50,619.06**	**$ 52,837.67**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Victor Valley College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of May 14, 2007 02:06:14

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	7,049	2,436,122

Total Amount = $ 2,436,122

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

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Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 18, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8550

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Victor Valley Community College District CC 36175

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Victor Valley Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005
308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program **267**

AFFIX LABEL HERE

(01) Claimant Identification Number: CC36175

(02) Claimant Name: Victor Valley Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 18422 Bear Valley Road

City: Victorville | State: CA | Zip Code: 92392-5849

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 308,792
Less: 10% Late Penalty		(14) $ 30,879
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 277,913
Due from State	(08)	(17) $ 277,913
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	4,949
(24) EFCW-1, (04)(A)(2)(a)(f)	235,987
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	1,547
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	51,487
(29) EFCW-1, (04)(B)(2)(c)(f)	2,866
(30) EFCW-1, (06)	47
(31) EFCW-1, (07)	138,027
(32) EFCW-1, (09)	70,171
(33) EFCW-1, (10)	55,901
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 7-2-07

Bruce Baron
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

xTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Victor Valley Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 4,948.80	$ -	$ -	$ -	$ -	$ 4,948.80
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 235,986.64	$ -	$ -	$ -	$ -	$ 235,986.64
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 1,098.38	$ -	$ -	$ -	$ 449.00	$ 1,547.38
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 51,487.13	$ -	$ -	$ -	$ -	$ 51,487.13
c. Reporting BOG fee waiver data to CCC	$ 2,866.20	$ -	$ -	$ -	$ -	$ 2,866.20
(05) Total Direct Costs	$ 296,387.15	$ -	$ -	$ -	$ 449.00	$ 296,836.15

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	46.57%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 138,027.50
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 434,863.65
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 70,171.00
(10) Less: Enrollment Fee Waiver offsets		$ 55,900.71
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 308,791.94

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Osborne, Lori A&R Specialist	$30.93	160.0	$ 4,948.80				
(C Total ☒ Subtotal ☐ Page 1 of 1			$ 4,948.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$29.42	2,087.7	$ 61,420.13				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$29.42	3,790.9	$ 111,528.28				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$29.42	2,142.7	$ 63,038.23				
((Total ☒ Subtotal ☐		Page 1 of 1	$ 235,986.64	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Chapman, Diane	FA Specialist	$40.23	6.0	$ 241.38				
Bandringa, Pearl	Accounting Tech. II	$24.81	8.0	$ 198.48				
Ryan, Greg	FA Associate Director	$31.82	12.0	$ 381.84				
Foxworthy, Doug	FA Specialist	$39.58	4.0	$ 158.32				
Sanchez, Lilia	FA Counselor	$29.59	4.0	$ 118.36				
Registration fees for enrollment fee waiver seminars								
Registration Costs, Diane Chapman	Seminar Fees	$1.00	179.0					$ 179.00
Registration Costs, Greg Ryan	Seminar Fees	$1.00	110.0					$ 110.00
Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	9.0					$ 9.00
Registration Costs, Lilia Sanchez	Seminar Fees	$1.00	31.0					$ 31.00
Registration Costs, Pearl Ba	Seminar Fees	$1.00	120.0					$ 120.00
3) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,098.38	$ -	$ -	$ -	$ 449.00

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waiving Enrollment Fees	$31.93	246.4	$ 7,867.55				
Receiving waiver applications Financial Aid Office Staff Waiving Enrollment Fees	$31.93	414.3	$ 13,228.60				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waiving Enrollment Fees	$31.93	369.5	$ 11,798.14				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waiving Enrollment Fees	$31.93	582.3	$ 18,592.84				
Total ☒ Subtotal ☐		Page 1 of 1	$ 51,487.13	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Moreno, Christina Senior Systems Analyst	$47.77	60.0	$ 2,866.20				
Total ☒ Subtotal ☐		Page 1 of 1	$ 2,866.20	$ -	$ -	$ -	$ -

Victor Valley Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

05-2006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
10/11/2005	8.00	Bandringa, Pearl	Accounting Tech. II	$24.81	$198.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Bandringa, Pearl Total**			$198.48		
12/9/2005	6.00	Chapman, Diane	FA Specialist	$40.23	$241.38	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Chapman, Diane Total**			$241.38		
05-06	2,087.70	Enrollment Office Staff	Collecting Fees	$29.42	$61,420.13	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,790.90	Enrollment Office Staff	Collecting Fees	$29.42	$111,528.28	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,142.70	Enrollment Office Staff	Collecting Fees	$29.42	$63,038.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	8,021.30	**Enrollment Office Staff Total**			$235,986.64		
05-06	246.40	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$7,867.55	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	414.30	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$13,228.60	Receiving waiver applications	Waiving student fees
05-06	369.50	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$11,798.14	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	582.30	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$18,592.84	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,612.50	**Financial Aid Office Staff Total**			$51,487.13		
3/29/2006	2.00	Foxworthy, Doug	FA Specialist	$39.58	$79.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/5/2006	2.00	Foxworthy, Doug	FA Specialist	$39.58	$79.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Foxworthy, Doug Total**			$158.32		
05-06	60.00	Moreno, Christina	Senior Systems Analyst	$47.77	$2,866.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	60.00	**Moreno, Christina Total**			$2,866.20		
05-06	160.00	Osborne, Lori	A&R Specialist	$30.93	$4,948.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	160.00	**Osborne, Lori Total**			$4,948.80		
12/9/2005	179.00	Registration Costs, Diane Chapman	Seminar Fees	$1.00	$179.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	179.00	**Registration Costs, Diane Chapman Total**			$179.00		
3/29/2006	9.00	Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	$9.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	9.00	**Registration Costs, Doug Foxworthy Total**			$9.00		
4/19/2006	10.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$10.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
6/12/2006	5.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$5.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
6/13/2006	95.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$95.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	110.00	**Registration Costs, Greg Ryan Total**			$110.00		
4/19/2006	31.00	Registration Costs, Lilia Sanchez	Seminar Fees	$1.00	$31.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	31.00	**Registration Costs, Lilia Sanchez Total**			$31.00		
10/11/2005	120.00	Registration Costs, Pearl Bandringa	Seminar Fees	$1.00	$120.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	120.00	**Registration Costs, Pearl Bandringa Total**			$120.00		
4/19/2006	4.00	Ryan, Greg	FA Associate Director	$31.82	$127.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
6/12/2006	2.00	Ryan, Greg	FA Associate Director	$31.82	$63.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
6/13/2006	6.00	Ryan, Greg	FA Associate Director	$31.82	$190.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	12.00	**Ryan, Greg Total**			$381.84		
4/19/2006	4.00	Sanchez, Lilia	FA Counselor	$29.59	$118.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Sanchez, Lilia Total**			$118.36		
	10,336.80	**Grand Total**			$296,836.15		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$21,664,187		$21,664,187	$308,055	$21,356,132
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	538,555		538,555	22,069	516,486
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	1,097,245		1,097,245	27,208	1,070,037
Instructional Support Services	6100					
Learning Center	6110					
Library	6120	744,985		744,985	62,144	682,841
Media	6130	172,529		172,529	19,731	152,798
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	809,546		809,546	3,771	805,775
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	502,495		502,495	4,463	498,032
Matriculation and Student Assessment	6320	311,343		311,343	306	311,037
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	788,908	129	788,779	15,826	772,953
Subtotal		$26,629,793	$129	$26,629,664	$463,573	$26,166,091

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: Victor Valley Community College District

(02) Period of Claim: 2005-2006

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,107,891	$340,214	$767,677	$12	$767,665
Health Services	6440					
Student Personnel Admin.	6450	378,513		378,513	1,185	377,328
Financial Aid Administration	6460	1,239,115		1,239,115	63,465	1,175,650
Job Placement Services	6470	374,447		374,447	32,547	341,900
Veterans Services	6480	1,350		1,350		1,350
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	782,135		782,135	782,135	0
Custodial Services	6530	873,574		873,574	873,574	0
Grounds Maintenance and Repairs	6550	382,828		382,828	382,828	0
Utilities	6570	1,567,266		1,567,266	1,567,266	0
Other	6590	225,637		225,637	225,637	0
Planning, Policy Making, and Coordination	6600	1,815,581		1,815,581	1,815,581	0
General Inst. Support Services	6700					
Community Relations	6710	133,253		133,253	133,253	0
Fiscal Operations	6720	718,538		718,538	718,538	0
Human Resources Management	6730	1,673,398		1,673,398	1,673,398	0
Noninstructional Staff Benefits & Incentives	6740	137,409		137,409	137,409	0
Staff Development	6750	24,220		24,220	24,220	0
Staff Diversity	6760	5,851		5,851	5,851	0
Logistical Services	6770	2,622,942		2,622,942	2,622,942	0
Management Information Systems	6780	1,360,796		1,360,796	1,360,796	0
Subtotal		$42,054,537	$340,343	$41,714,194	$12,884,210	$28,829,984

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	607,574		607,574	607,574	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840					
Other Community Services & Economic Development	6890	117,989		117,989	5,593	112,396
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	146,322		146,322	1,386	144,936
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	82,875		82,875		82,875
Other Auxiliary Operations	7090	4,878		4,878		4,878
Physical Property Acquisitions	7100	87,753		87,753	87,753	0
(05) Total		$43,101,928	$340,343	$42,761,585	$13,586,516	$29,175,069
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				46.57%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	80,034		8,813	17,025		105,872
Architecture and Environmental Design	0200						
Biological Sciences	0400	670,567		53,311	16,983		740,861
Business and Management	0500	882,596		5,566	7,321		895,483
Communications	0600						
Computer and Information Science	0700	378,369		914	56,406		435,689
Education	0800	738,304	209,045	186,555	3,041		1,136,945
Engineering and Related Industrial Tech.	0900	1,264,845	1,077	153,123	133,346		1,552,391
Fine and Applied Arts	1000	718,493		33,318			751,811
Foreign Language	1100	330,574		304			330,878
Health	1200	1,442,939		46,329	53,538		1,542,806
Consumer Education and Home Economics	1300	161,002		15,064			176,066
Law	1400						
Humanities (Letters)	1500	1,422,372		7,250			1,429,622
Library Science	1600						
Mathematics	1700	1,160,667		1,413			1,162,080
Military Studies	1800						
Physical Sciences	1900	500,960		14,655			515,615
Psychology	2000	355,987		561			356,548
Public Affairs and Services	2100	256,688		28,876	16,352		301,916
Social Sciences	2200	810,636		725			811,361
Commercial Services	3000	179,280		82,364	1,277		262,921
Interdisciplinary Studies	4900	8,098,729	521,266	14,976	2,766		8,637,737
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	517,585					517,585
Subtotal - Instructional Activities	**599**	19,970,627	731,388	654,117	308,055		21,664,187

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFO A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe itures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		438,184	78,302	22,069		538,555
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		1,005,897	64,140	27,208		1,097,245
Subtotal - Instructional Administration	**6000**		1,444,081	142,442	49,277		1,635,800
Instructional Support Services (6100)							
Learning Center	6110						
Library	6120		607,294	75,547	62,144		744,985
Media	6130		112,385	40,413	19,731		172,529
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		719,679	115,960	81,875		917,514
Admissions and Records	**6200**		760,352	45,423	3,771		809,546
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		486,603	11,429	4,463		502,495
Matriculation and Student Assessment	6320		308,985	2,052	306		311,343
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		795,588	13,481	4,769		813,838

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		757,370	15,583	15,826	129	788,908
Extended Opportunity Prgms. & Services (EOPS)	6430		712,224	55,441	12	340,214	1,107,891
Health Services	6440						
Student Personnel Administration	6450		340,799	36,529	1,185		378,513
Financial Aid Administration	6460		874,479	301,171	63,465		1,239,115
Job Placement Services	6470		229,813	112,087	32,547		374,447
Veterans Services	6480			1,350			1,350
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,914,685	522,161	113,035	340,343	3,890,224
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		673,366	100,053	8,716		782,135
Custodial Services	6530		802,857	70,717			873,574
Grounds Maintenance and Repairs	6550		309,661	67,931	5,236		382,828
Utilities	6570			1,567,266			1,567,266
Other Operation and Maintenance of Plant	6590		156,594	69,043			225,637
Subtotal - Operation and Maintenance of Plant	**6500**		1,942,478	1,875,010	13,952		3,831,440
Planning, Policymaking, and Coordination	**6600**		1,233,037	574,910	7,634		1,815,581

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFO 'A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA

For Actual Year: 2004-05

Expe litures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		133,253				133,253
Fiscal Operations	6720		550,236	162,645	5,657		718,538
Human Resources Management	6730		644,537	1,028,861			1,673,398
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		137,409				137,409
Staff Development	6750		23,363	857			24,220
Staff Diversity	6760			5,851			5,851
Logistical Services	6770		976,195	539,824	1,106,923		2,622,942
Management Information Systems	6780		344,409	1,009,063	7,324		1,360,796
Other General Institutional Support Services	6790		483,689	47,740	76,145		607,574
Subtotal - General Institutional Support Services	**6700**		3,293,091	2,794,841	1,196,049		7,283,981
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		103,194	9,202	5,593		117,989
Subtotal - Community Services	**6800**		103,194	9,202	5,593		117,989

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFO[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe[illegible]itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		135,111	9,825	1,386		146,322
Farm Operations	6930						
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		135,111	9,825	1,386		146,322
Auxiliary Operations (7000)							
Contract Education	7010	65,994		16,881			82,875
Other Auxiliary Operations	7090			4,878			4,878
Subtotal - Auxiliary Operations	**7000**	65,994		21,759			87,753
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					46,378	46,378
Other Outgo	7330					6,320	6,320
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					52,698	52,698
TOTAL EXPENDITURES and OTHER OUTGO	**391**	20,036,621	14,072,684	6,779,131	1,785,396	393,041	43,066,873

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	32,964
Avg. time p/account	3.8
Total Time (in minutes)	125263
Per Hour	60
Hours Worked **(** 11)**	**2087.7**
***EFC 2 (Not provided - No substitute)**	
Avg. time p/student	4.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 12)**	**0.0**
***EFC 1**	32,964
Avg. time p/question	6.9
Total Time (in minutes)	227452
Per Hour	60
Hours Worked **(** 13)**	**3790.9**
***EFC 2 (Not provided - Used *EFC 1)**	32,964
Avg. time p/file	3.9
Total Time (in minutes)	128560
Per Hour	60
Hours Worked **(** 14)**	**2142.7**
***EFC 4 (Not provided - No substitute)**	
Avg. time p/account	3.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 15)**	**0.0**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6 (Not provided - Used *EFW 7)**	6,719
Avg. time p/question	2.2
Total Time (in minutes)	14782
Per Hour	60
Hours Worked **(** 21)**	**246.4**
***EFW 6 (Not provided - Used *EFW 7)**	6,719
Avg. time p/application	3.7
Total Time (in minutes)	24860
Per Hour	60
Hours Worked **(** 22)**	**414.3**
***EFW 6 (Not provided - Used *EFW 7)**	6,719
Avg. time p/evaluation	3.3
Total Time (in minutes)	22173
Per Hour	60
Hours Worked **(** 23)**	**369.5**
***EFW 8 (Not provided - No substitute)**	
Avg. time p/application	3.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 24)**	**0.0**
***EFW 7**	6,719
Avg. time p/application	5.2
Total Time (in minutes)	34939
Per Hour	60
Hours Worked **(** 25)**	**582.3**
***EFW 8 (Not provided - No substitute)**	
Avg. time p/application	4.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (See documentation in the 05-06 claim only.)
Findings:

		*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Allen-Vilasquez, Kenyona	A&R Technician	2	0.5	1	4	1	3
Avila, Silvia	A&R Technician	7	3	5	3		
Cardoza, Maria	A&R Technician	5	3	3	2		
Carpenter, Malia	Administrative Secretary I	3	3	7	3		1
Conrad, Michelle	Account Technician I	3	3	5	1	5	10
Dance, Tamara	Admissions Assistant	2.5	4	12	2.5	2	1
Garcia, Renee	Accounting Technician	10	10	10	10	10	10
Mohr, Diane	Office Assistant	2	2	18		0.5	1.5
Osborne, Lori	A&R Technician	2	2	9	3	1	2
Sharp, Ann Marie	Account Technician I	3.5	3.5	3.5	3.5	3.5	3.5
Suderno, Jean	A&R Technician	1	10	1	1		
Williams, Audrey	Records Evaluator	5		8	10		
Average		**3.8**	**4.0**	**6.9**	**3.9**	**3.3**	**4.0**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-2006
Average PHR for Various Enrollment Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Collection staff.
Source: EFCW 1.7-2 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.)
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Allen-Vilasquez, Kenyona	A&R Technician	20.56	20.97	21.84	22.69	23.14	23.14	23.14	24.51
Avila, Silvia	A&R Technician	22.27	22.72	23.67	24.58	25.08	25.08	25.08	26.56
Cardoza, Maria	A&R Technician	21.4	21.83	22.74	23.62	24.09	24.09	24.09	25.52
Carpenter, Malia	Administrative Secretary I	21.41	21.84	22.75	23.63	24.10	24.10	24.10	25.53
Conrad, Michelle	Account Technician I	26.96	27.5	28.65	29.76	30.35	30.35	30.35	32.15
Dance, Tamara	Admissions Assistant	33.23	33.89	35.31	36.67	37.41	37.41	37.41	39.62
Garcia, Renee	Accounting Technician								
Mohr, Diane	Office Assistant	20.61	21.02	21.89	22.74	23.20	23.20	23.20	24.57
Osborne, Lori	A&R Technician	25.94	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Sharp, Ann Marie	Account Technician I	28.37	28.94	30.15	31.31	31.94	31.94	31.94	33.83
Suderno, Jean	A&R Technician	25.94	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Williams, Audrey	Records Evaluator								
Average		24.67	25.16	26.21	27.23	27.77	27.77	27.77	29.42

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (See documentation in the 05-06 claim only.)
Findings:

		*EFW Workload Multiplier					
		7			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Avila, Sylvia	A&R Technician	3					
Carpenter, Malia	Administrative Secretary I	1	1		3		
Chapman, Diane	Financial Aid Specialist	3	3	3	3	5	
Clark, Sandy	Financial Aid Specialist	2	4	2	1	4	4
Dance, Tamara	Admissions Assistant	2					
Davis, Barbara	Financial Aid Technician	2	4	2	1	4	4
Foxworthy, Doug	Financial Aid Specialist	5	5	12	16	15	10
Groom, Sharon	Financial Aid Specialist	2	4	2	1	4	4
Jordan, Ernestine	Financial Aid Technician	2	4	2	1	4	4
Mohr, Diane	Office Assistant	2.5					
Murray, Jim	Financial Aid Specialist	2	3	3	1	3	4
Navarrete, Elaine	Financial Aid Specialist	2	5	2	4	4	5
Osborne, Lori	A&R Technician	1					
Suderno, Jean	A&R Technician	1					
Underwood, Starla	Financial Aid Specialist	2	4	2	1	4	4
Average		**2.2**	**3.7**	**3.3**	**3.2**	**5.2**	**4.9**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR for Various Finacial Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Waiver staff.
Source: EFCW 1.7-3 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.)
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
Avila, Sylvia	A&R Technician	22.72	23.67	24.58	25.08	25.08	25.08	26.56
Carpenter, Malia	Administrative Secretary I	21.84	22.75	23.63	24.10	24.10	24.10	25.53
Chapman, Diane	Financial Aid Specialist	34.41	35.85	37.24	37.98	37.98	37.98	40.23
Clark, Sandy	Financial Aid Specialist							
Dance, Tamara	Admissions Assistant	33.89	35.31	36.67	37.41	37.41	37.41	39.62
Davis, Barbara	Financial Aid Technician							
Foxworthy, Doug	Financial Aid Specialist	33.86	35.27	36.64	37.37	37.37	37.37	39.58
Groom, Sharon	Financial Aid Specialist Director							
Jordan, Ernestine	Financial Aid Technician	23.62	24.60	25.56	26.07	26.07	26.07	27.61
Mohr, Diane	Office Assistant	21.02	21.89	22.74	23.20	23.20	23.20	24.57
Murray, Jim	Financial Aid Specialist	31.17	32.47	33.73	34.40	34.40	34.40	36.44
Navarrete, Elaine	Financial Aid Specialist	18.97	19.76	20.53	20.94	20.94	20.94	22.18
Osborne, Lori	A&R Technician	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Suderno, Jean	A&R Technician	26.46	27.56	28.63	29.20	29.20	29.20	30.93
Underwood, Starla	Financial Aid Specialist	33.37	34.76	36.11	36.83	36.83	36.83	39.01
Average		**27.32**	**28.46**	**29.56**	**30.15**	**30.15**	**30.15**	**31.93**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments. (See documentation in the 05-06 claim only.)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	24,407	25,365	27,883	30,969	30,794	28,095	32,157	32,964
EFC 2	1.8-1	2. Paid Enrollment fees								
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)								
EFC 4	1.8-2	1. Delinquencies collections								
EFC 5	1.8-2	2. Refunds								
EFW 6	1.8-3	1. Waivers Requested	X							
EFW 7	1.8-3	2. Waivers Approved	X -	4,809	5,492	5,683	6,441	6,580	6,597	6,719
EFW 8	1.8-3 (1-2)	Waivers Denied	X							

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2005 Summer Term

Data Current As Of May 14, 2007 02:16:37

Total Headcount	3,921

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2005 Fall Term

Data Current As Of May 14, 2007 02:19:46

Total Headcount	11,626

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2006 Winter Intersession

Data Current As Of May 14, 2007 02:20:05

Total Headcount	3,908

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2006 Spring Semester

Data Current As Of May 14, 2007 02:20:23

Total Headcount	10,879

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
306/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Victor Valley Comm College Fiscal Year: 05-06

Pearl Bandenega
Employee Name

Accounting Tech II
Exact Position Title

Financial Aid
Department/Location

Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/1/05	1A 1B 2A 2B 3 4	3C Drug	8
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

- see schedule above all actual time for costs: $170

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pearl Bandenega Date 6/11/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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MRP 1.6a

00/05 Enrollment Fee Collection/Waiver

Employee Time Record Sheet for Mandated Costs of

~~**486/75 Mandate Reimbursement Process**~~

Annual Reimbursement Claims

District: Victor Valley Com College Fiscal Year: 05/06

Drene E Chapman
Employee Name

Financial Aid Specialist
Exact Position Title

Fin. Aid
School/Department/Location

245-4271 x2308
Telephone #

12mo/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
05-06 12/9/05	1 2 3 (4) 5 6	workshops		6	$179.00 ✓
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Drene E Chapman Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Victor Valley College Fiscal Year: 05-06

Doug Foxworthy — Employee Name

Financial Aid Specialist — Exact Position Title

Financial Aid — Department/Location

760-245-4271 x 2250 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
3/29/06	1A 1B 2A 2B 3 4	Datatel Conference	2
4/05/06	1A 1B 2A 2B 3 4	CCC APPL Conference	2
4/14/06	1A 1B 2A 2B 3 4	CA Client	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

see schedule about of actual timesheet for costs.
$9
$0

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

actual time sheet

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Victor Valley Community College District

Christina Moreno — Employee Name

Senior Systems Analyst — Exact Position Title

MIS Department — College/Department/Location

245-4271 ext 2376 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	25	25	25	25	25	40	60	60
TOTALS:	25	25	25	25	25	40	60	60

10987

BFAP
Christina
Mark
Ker

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Christina Moreno Date 4/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Victor Valley

Lori Osborne — Employee Name

Admissions & Records Specialist — Exact Position Title

Admissions — College/Department/Location

760 245-4271 x2569 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:	N/A	N/A	N/A	N/A	N/A	20.0	48.0	160.0
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-23-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: VLC Tur Valley College Fiscal Year: 05/06

Greg Ryan — Employee Name

Associate Director of FA — Exact Position Title

Fin. Aid — Department/Location

760-245-4271 x 2777 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/19/06	1A 1B 2A (2B) 3 4	CCCSFAA	4
5/05/06	1A 1B 2A (2B) 3 4	New FAD	8
6/13/06	1A 1B 2A (2B) 3 4	New FAD	6
6/14/06	1A 1B 2A (2B) 3 4	CASFAA	2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

We schedule above all actual timesheet for costs:
$10
$155
$95
$5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/12/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Victor Valley College Fiscal Year: 05-06

Lilia Sanchez — Employee Name

~~A~~ Counselor — Exact Position Title

Financial Aid — Department/Location

760-245-4271 — Telephone #

12mo/11mo/10mo/hrly — Work year length (circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
4/19/06	1A 1B 2A (2B) 3 4	Spring Fling	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

- see schedule above of actual timesheets for costs

$31

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature for Lilia Sanchez Date 6/14/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College District
District

Admission Record Recruitment Bldg 52
Department/Location

Kenyona Allen-Velasquez
Employee Name

Admissions & Records Tech 50%.
Exact Position Title

(760) 245-4271 ext. 26695
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	30sec					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenyona Allen-Velasquez Date 4/20/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Silvia Avila
Employee Name

Department/Location

Admissions & Records Tech.
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	7 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

A & R
Department/Location

Maria Cardoza
Employee Name

Admission & Registration Tech
Exact Position Title

(760) ~~[illegible]~~ 245-4271 ext 2297
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Cardoza Date 4-20-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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fwd serve by 4/20- J + 16B

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Community College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x2272
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	7					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

273
District

Bursar / Fiscal Serv
Department/Location

Michelle Conrad
Employee Name

Acct Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

Employee Signature M Conrad PLEASE USE BLUE INK

Date 4.10.07

If you have any questions, please contact x+ 2369, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

TAMARA DANCE
Employee Name

Records Evaluator
Exact Position Title

(760) 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.5 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2.5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tamara Dance Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal
Department/Location

Renee Garcia
Employee Name

Accounting Tech
Exact Position Title

X 2321
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. 06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	10 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Diane Mohr
Employee Name

Office Assistant
Exact Position Title

760 245-4271 x2315
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	**Workload Multiplier From 1.7-1(Check one)**				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	18.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	N/A 0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions and Records
Department/Location

Lori Osborne
Employee Name

Admissions & Records Technician
Exact Position Title

760 245-4271 X2589
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	9.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-20-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Ann Marie Sharp
Employee Name

Acct tech I
Exact Position Title

760) 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.5 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3.5 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3.5 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3.5 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ann Marie Sharp Date 4/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions and Records
Department/Location

Jean Suderno
Employee Name

Admissions & Record Technician
Exact Position Title

760 245-4271 ext 2678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Suderno Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Comm College
District

A&R
Department/Location

AUDREY WILLIAMS
Employee Name

RECORDS EVALUATOR
Exact Position Title

2429
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	NA					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	8 m					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10 m					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Audrey Williams Date 4/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

Silvia Avila
Employee Name

Department/Location

Admissions & Records Tech
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Community College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x 2272
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 04/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Com. College
District

Financial Aid
Department/Location

Diane E Chapman
Employee Name

Financial Aid Specialist
Exact Position Title

245-4271 x 2308
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane E Chapman Date 4/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC/FA
Department/Location

Sandy Clark
Employee Name

Financial Aid Specialist
Exact Position Title

760 245 4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/28/05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College — District
Admissions & Records — Department/Location
TAMARA DANCE — Employee Name
Records Evaluator — Exact Position Title
(760) 245-4571 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tamara Dance Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC/FA
Department/Location

Barbara Davis
Employee Name

FA. Tech
Exact Position Title

7608454271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid
Department/Location

Doug Foxworthy
Employee Name

Financial Aid Specialist
Exact Position Title

(760) 245-4271 x 2254
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	12				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	16				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC / FA
Department/Location

Sharon Groom
Employee Name

Financial Aid Director
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/10

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC / FA
Department/Location

Ernestine Jordan
Employee Name

Financial Aid Technician
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions + Records
Department/Location

Diane Mohr
Employee Name

office Assistant
Exact Position Title

760-245-4271 x2315
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	~~0~~ N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	~~0~~ N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	~~0~~ N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~0~~ N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	~~0~~ N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 4-23-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

FA
Department/Location

Jim Murray
Employee Name

FA Specialist
Exact Position Title

760 245 4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	3				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley Com. College — District

Financial Aid — Department/Location

Elaine Navarrete — Employee Name

Financial Aid Specialist — Exact Position Title

(760) 245-4271 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elaine Navarrete Date 4/23/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Lori Osborne
Employee Name

Admissions & Records Technician
Exact Position Title

760 245-4271 x2569
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1.0				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 4-20-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Jean Suderno
Employee Name

A & R Technician
Exact Position Title

760 245-4271 ext 2628
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	NA				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	NA				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	NA				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Suderno Date 4/20/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

VVC / FA
Department/Location

Starla Underwood
Employee Name

Financial Aid Specialist
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	4				

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Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Victor Valley Comm College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	4,817	4,746	5,573	6,184	5,184	4259	4,661	5,278
Fall	9,379	10,106	10,685	12,173	12,377	11,947	11,693	12,134
Winter/ Intersession	NA	NA	NA	NA	NA	NA	4,147	4,187
Spring	10,211	10,513	11,625	12,612	13,233	11,889	11,656	11,365
Total duplicated count	24,407	25,365	27,883	30,969	30,794	28,095	32,157	32,964
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession								
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 4-25-07

Mark Clair
Employee Name: (print)

Institutional Research Coordinator
Position or Title

If you have any questions, please contact _____, at _____

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								
Fall								
Winter/Intersession								
Spring								
Total	4674	4809	5492	5683	6441	6580	6597	6719
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								
Fall	See attached							
Winter/Intersession	BOGW Schedule							
Spring								
Total								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Jim Murray Date 5/25/07

Employee Name: (print) Jim Murray Position or Title FA Specialist

If you have any questions, please contact _____, at _____.

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	1998-1999	1999-2000	2000-2001	2001-2002	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	
BOGW A	245	214	264	110	71	89	73	52	143	
BOGW B	1743	1808	2341	1873	1558	1558	839	219	574	
BOGW C	2686	2767	2887	3700	4812	4933	5686	6448	7113	
Total	4674	4809	5492	5683	6441	6580	6597	6719	7830	
BOGA & B X 1.25 min	2465	2528	3257	2479	2037	2059	1140	339	897	17221
BOGC X .25	672	697	722	925	1203	1234	1422	1612	1779	10266

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 941,337	$ 878,274	$ 1,091,767	$ 1,022,655	$ 1,118,851	$ 2,255,074	$ 3,436,122	$ 2,395,039
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

No signature Need as of 6-19-07 -SH

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CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2005-2006, DISTRICT: Victor Valley CCD, COLLEGE: Victor Valley

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
B1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
B2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
B3	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0
BA	0	0	50	9,802	14	871	0	0	0	0	52	10,673	7,049	2,436,122
BB	0	0	199	35,724	84	7,059	0	0	0	0	219	42,783	0	0
BC	1,717	137,098	4,720	1,033,847	2,086	171,717	5,007	998,921	0	0	6,448	2,341,583	0	0
UNDUP B-TOTALS	1,717	137,098	4,969	1,079,373	2,184	179,647	5,007	998,921	0	0	6,528	2,395,039	7,049	2,436,122
GB	0	0	569	386,118	480	323,637	0	0	0	0	599	709,755	537	634,146
GC	0	0	118	26,136	81	18,072	0	0	0	0	124	44,208	114	45,504
GE	0	0	875	109,466	860	122,638	0	0	0	0	1,129	232,104	1,100	222,123
GF	0	0	119	43,279	129	43,581	0	0	0	0	163	86,860	122	81,814
GP	0	0	3,320	4,877,233	3,365	5,062,036	0	0	0	0	4,055	9,939,269	4,027	9,166,515
GS	0	0	1,463	292,600	0	0	0	0	0	0	1,463	292,600	1,126	225,200
GU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GV	0	0	185	632,015	184	630,551	0	0	0	0	187	1,262,566	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0
UNDUP G-TOTALS	0	0	3,544	6,366,847	3,603	6,200,515	0	0	0	0	4,296	12,567,362	4,172	10,375,302
LD	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LE	0	0	0	0	0	0	0	0	0	0	0	0	0	0

NOTES:

1. BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type

2. AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received

3. YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.

4. Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.

Report Run On: JAN 30, 2007

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2005-2006, DISTRICT: Victor Valley CCD, COLLEGE: Victor Valley

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
LG	0	0	459	675,862	444	646,356	0	0	0	0	522	1,322,218	586	1,442,863
LH	0	0	263	490,500	270	507,012	0	0	0	0	306	997,512	217	674,400
LI	0	0	0	0	0	0	0	0	0	0	0	0	0	0
[illegible]	0	0	49	90,289	46	86,439	0	0	0	0	61	176,728	38	120,000
LN	0	0	1	1,875	1	1,875	0	0	0	0	1	3,750	0	0
LP	0	0	1	1,250	1	1,250	0	0	0	0	1	2,500	1	7,000
LS	0	0	104	154,298	98	145,379	0	0	0	0	125	299,677	97	236,495
UNDUP L-TOTALS	0	0	566	1,414,074	553	1,388,311	0	0	0	0	652	2,802,385	682	2,480,758
SU	0	0	117	68,837	118	69,413	0	0	0	0	118	138,250	0	0
SV	0	0	209	90,712	217	98,671	0	0	0	0	227	189,383	0	0
SX	0	0	1	125	1	125	0	0	0	0	1	250	257	246,452
UNDUP S-TOTALS	0	0	312	159,674	321	168,209	0	0	0	0	331	327,883	257	246,452
WC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WE	0	0	24	16,959	23	13,189	0	0	0	0	24	30,148	37	69,375
WF	0	0	105	127,714	102	123,487	0	0	0	0	112	251,201	125	284,712
WU	0	0	18	25,076	24	34,240	0	0	0	0	24	59,316	16	44,172
[illegible]UP W-TOTALS	0	0	141	169,749	145	170,916	0	0	0	0	152	340,665	165	398,259
UNDUP TOTALS	1,717	137,098	5,344	9,189,717	4,451	8,107,598	5,007	998,921	0	0	6,848	18,433,334	7,256	15,936,893

NOTES:

1. BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type

2. AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received

3. YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.

4. Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.

Report Run On: JAN 30, 2007

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, President
5252 Balboa Avenue, Suite 900
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1 Page(s) this memo
0 Page(s) attachment

MEMO TO FILE

DATE: June 13, 2007

BY: Sheryll Antonio

SUBJECT: Productive Hourly Rates
308/95 Enrollment Fee Collections and Waivers
Fiscal Years: 1998-99 through 2005-06

Debbie DaCosta called on 6/6/07 and advised me of the following pay rate changes:

1998-1999	4.5%	2002-2003	2.0%	2006-2007	5.875%
1999-2000	2.0%	2003-2004	0%		
2000-2001	4.17%	2004-2005	0%		
2001-2002	3.87%	2005-2006	5.92%		

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Mgmt (STRS)	Louis (Tom) O'Neil	$97,602.00	$11,712.24	$10,137.00	$119,451.24	1800	$66.36
	Willard Lewallen	$124,740.00	$14,968.80	$10,137.00	$149,845.80	1800	$83.25

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Faculty (STRS)	John Rude	$75,900.00	$9,108.00	$8,100.00	$93,108.00	1800	$51.73
	Juanita Chou	$84,650.00	$10,158.00	$8,100.00	$102,908.00	1800	$57.17
	Debra Blanchard	$72,100.00	$8,652.00	$8,100.00	$88,852.00	1800	$49.36
	Gary Menser	$81,950.00	$9,834.00	$8,100.00	$99,884.00	1800	$55.49
	Lisa Ellis	$72,400.00	$8,688.00	$8,100.00	$89,188.00	1800	$49.55

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Margaret Kagy	$56,073.10	$10,990.33	$8,100.00	$75,163.43	1800	$41.76
	Raymond Navarro	$49,947.51	$9,789.71	$8,100.00	$67,837.22	1800	$37.69
	Arlene Greene	$62,219.18	$12,194.96	$8,100.00	$82,514.14	1800	$45.84

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Margaret Kagy	$56,073.10	$10,990.33	$8,100.00	$75,163.43	1800	$41.76
	Diane Chapman	$53,767.25	$10,538.38	$8,100.00	$72,405.63	1800	$40.23
	Starla Underwood	$51,935.50	$10,179.36	$8,100.00	$70,214.86	1800	$39.01
	James (Jim) Murray	$48,072.00	$9,422.11	$8,100.00	$65,594.11	1800	$36.44
	Ernestine Jordan	$34,775.08	$6,815.92	$8,100.00	$49,691.00	1800	$27.61
	Douglas Foxworthy	$52,797.50	$10,348.31	$8,100.00	$71,245.81	1800	$39.58
	Michelle (Mickey) Conrad	$41,620.00	$8,157.52	$8,100.00	$57,877.52	1800	$32.15
	Annmarie Sharp	$44,146.55	$8,652.72	$8,100.00	$60,899.27	1800	$33.83
	Mark Clair	$64,576.64	$12,657.02	$8,100.00	$85,333.66	1800	$47.41
	Christina Moreno	$65,127.68	$12,765.03	$8,100.00	$85,992.71	1800	$47.77
	Lori Osborne	$39,781.26	$7,797.13	$8,100.00	$55,678.39	1800	$30.93
	Jean Suderno	$39,781.26	$7,797.13	$8,100.00	$55,678.39	1800	$30.93
	Diane Mohr	$30,199.00	$5,919.00	$8,100.00	$44,218.00	1800	$24.57
	Tamara Dance	$52,850.18	$10,358.64	$8,100.00	$71,308.82	1800	$39.62
	Rita Jackson	$37,320.00	$7,314.72	$8,100.00	$52,734.72	1800	$29.30
	Ernestine Jordan	$34,848.00	$6,830.21	$8,100.00	$49,778.21	1800	$27.65
	Elaine Navarrete	$26,616.00	$5,216.74	$8,100.00	$39,932.74	1800	$22.18
	Kenyona Allen-Velasquez	$30,120.00	$5,903.52	$8,100.00	$44,123.52	1800	$24.51
	Silvia Avila	$33,204.00	$6,507.98	$8,100.00	$47,811.98	1800	$26.56
	Malia Carpenter	$31,644.00	$6,202.22	$8,100.00	$45,946.22	1800	$25.53
	Maria Cardoza	$31,632.00	$6,199.87	$8,100.00	$45,931.87	1800	$25.52
	Robbie Richards	$52,797.50	$10,348.31	$8,100.00	$71,245.81	1800	$39.58
	Debra DaCosta	$47,391.82	$9,288.80	$8,100.00	$64,780.62	1800	$35.99
	Mitchell Green	$70,521.18	$13,822.15	$8,100.00	$92,443.33	1800	$51.36

To Sch. 2A 05-06
To Sch. 3A 05-06
To Sch. 3A 05-06

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

ayroll Information for Production Hourly Rate

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Arlene Greene	$58,225.82	$11,540.36	$8,100.00	$77,866.18	1800	$43.26
	Carlos Martinez	$44,233.88	$8,767.16	$8,100.00	$61,101.04	1800	$33.95
	Cynthia Wilson	$52,764.00	$10,457.82	$8,100.00	$71,321.82	1800	$39.62
	Gloria Johnson	$56,089.60	$11,116.96	$8,100.00	$75,306.56	1800	$41.84
	James (Doug) Hannaman	$54,828.00	$10,866.91	$8,100.00	$73,794.91	1800	$41.00
	Kyle Rotte	$54,244.00	$10,751.16	$8,100.00	$73,095.16	1800	$40.61
	Mitchell Greene	$67,606.56	$13,399.62	$8,100.00	$89,106.18	1800	$49.50
	Renay Butler	$36,664.00	$7,266.80	$8,100.00	$52,030.80	1800	$28.91
	Sheree Caldwell	$44,351.01	$8,790.37	$8,100.00	$61,241.38	1800	$34.02
	Suzanne McGowan	$47,354.51	$9,385.66	$8,100.00	$64,840.17	1800	$36.02

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified Mgmt (PERS)	Becky Millen	$76,236.00	$15,109.98	$9,822.00	$101,167.98	1800	$56.20
	Linda Cera	$58,655.10	$11,625.44	$9,822.00	$80,102.54	1800	$44.50
	Willie Pringle	$92,046.00	$18,243.52	$9,822.00	$120,111.52	1800	$66.73

2003/2004	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
ademic Mgmt (STRS)	William Schmidt	$109,764.00	$4,116.15	$9,822.00	$123,702.15	1800	$68.72

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Arlene Greene	$58,495.28	$12,096.82	$8,100.00	$78,692.10	1800	$43.72
	James (Doug) Hannaman	$57,099.90	$11,808.26	$8,100.00	$77,008.16	1800	$42.78
	Renay Butler	$38,512.00	$7,633.08	$8,100.00	$54,245.08	1800	$30.14
	Margaret Kagy	$52,678.74	$10,440.93	$8,100.00	$71,219.67	1800	$39.57
	Carlos Martinez	$44,449.65	$8,809.92	$8,100.00	$61,359.57	1800	$34.09
	Ray Navarro	$46,929.23	$9,301.37	$8,100.00	$64,330.60	1800	$35.74

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified (PERS)	Marie Vidana-Barda	$52,515.90	$10,860.29	$8,100.00	$71,476.19	1800	$39.71
	JK (Kevin) Crowley	$52,796.25	$10,464.22	$8,100.00	$71,360.47	1800	$39.64

2004/2005	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified Mgmt (PERS)	Linda Cera	$58,655.10	$12,129.87	$10,137.00	$80,921.97	1800	$44.96
	Willie Pringle	$92,046.00	$19,035.11	$10,137.00	$121,218.11	1800	$67.34

Victor Valley Community College District
Annual Salaries/Benefits
Several Fiscal Years

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Classified Mgmt (PERS)	Linda Cera	$62,391.60	$12,228.75	$10,624.00	$85,244.35	1800	$47.36
	Willie Pringle	$97,455.60	$19,101.30	$10,624.00	$127,180.90	1800	$70.66
	Bruce Baron	$128,392.00	$25,164.83	$10,624.00	$164,180.83	1800	$91.21
	Kathleen Farrand	$60,458.16	$11,849.80	$10,624.00	$82,931.96	1800	$46.07
	Cynthia Wilson	$57,315.36	$11,233.81	$10,624.00	$79,173.17	1800	$43.99
	Sharon Groom	$74,051.99	$14,514.19	$10,624.00	$99,190.18	1800	$55.11

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Mgmt (STRS)	Willard Lewallen	$135,361.50	$16,243.38	$10,624.00	$162,228.88	1800	$90.13
	William (Bill) Schmidt	$113,904.00	$13,668.48	$10,624.00	$138,196.48	1800	$76.78
	John Rude	$109,569.24	$13,148.31	$10,624.00	$133,341.55	1800	$74.08

2005/2006	Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR sum(e/f)
Academic Faculty (STRS)	Peter Allan	$71,832.89	$8,619.95	$8,100.00	$88,552.84	1050	$97.45

$88,552 / (1,050 x 86.5%)

Prod. Hrs	1800
Annual Hrs	2080
%	86.5%

*watch for PERS members
2003/2004
FT Faculty (STRS)*

Name	Annual Salary	Mandatory Employer Costs	Annual Benefits	Total	Hrs/Yr	PHR
Raggedy Ann	$80,000.00	$6,600.00	$9,822.00	$96,422.00	1050	$106.12

$96,422 / (1,050 x 86.5%)

Prod. Hrs	1800
Annual Hrs	2080
%	86.5%

6/19/07

Mandated Costs
EFCW monthly salaries per request by Sheryl Antonio 6/15/07
05/06

Gina Janisko	$4310.00/mo	plus longevity $129.30
Pearl Bandringa	3722.00/mo	no longevity
Sharon Groom	6097.00/mo	plus longevity $243.88
Greg Ryan	4773.00/mo	no longevity
Sandra Clark (retired)		
Lilia Sanchez	(hourly certificated – 10 mo employee)	$4438.80

FA Spec.
Janisko
05-06
(Need 03-04 & 04-05)

0• C
4,310• +
129•3 +
4,439•3 *
4,439•3 ÷
150• =
29•59533333 *
29.60

Acct Tech II
Bandringa
05-06
(Need 05-06 only)

0• C
3,722• ÷
150• =
24•81333333 *

FA Director
Groom
05-06
(Need 01-02/02-03/ 04-05)

0• C
6,097• +
243•88 +
6,340•88 *
6,340•88 ÷
150• =
42•27253333 *

FA Assoc. Director
Ryan
05-06
(Need 05-06 only)

0• C
4,773• ÷
150• =
31•82 *

0• C

FA Counselor
Sanchez
05-06
(Need 05-06 only)

0• C
4,438•8 ÷
150• =
29•592 *

0• C

To: Cheryl Antonio
EFCW info
SixTen + Assoc
858-514-8645 fi

From: Debi DaCosta
Victor Valley College
760.245.4271 x 25
760 843.0621 Fax
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Schedule 3AA
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
PHRs

Purpose: To summarize productive hourly rates for employees with actual time that did not appear in sch. 2A or 3A.
Source: EFCW 1.6 and 05-06 phr's and fiscal year pay rate change percentages from client. (See documentation in the 05-06 claim only.) Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	Productive Hourly Rates						
		99-00	00-01	01-02	02-03	03-04	04-05	05-06
***Clark, Sandra**	**FA Director**	**36.16**	**37.67**	**39.12**	**39.91**	**39.91**	**39.91**	**42.27**
Bandringa, Pearl	Account Tech. II	21.22	22.11	22.96	23.42	23.42	23.42	24.81
Groom, Sharon	FA Director	36.16	37.67	39.12	39.91	39.91	39.91	42.27
Janisko, Gina	FA Specialist	25.32	26.38	27.40	27.95	27.95	27.95	29.60
Moreno, Christina	Senior Systems Analyst	40.86	42.57	44.22	45.10	45.10	45.10	47.77
Ryan, Greg	FA Assoc. Director	27.22	28.36	29.45	30.04	30.04	30.04	31.82
Sanchez, Lilia	FA Counselor	25.31	26.37	27.39	27.94	27.94	27.94	29.59

***Note** - No 05-06 phr provided for this employee due to retirement -- gave her same phr's as Groom, Sharon - both are FA Directors.

Conclusion: Findings go forward to EFCW-2.

Highlighted data is for FY: 05-06
See actual timesheets below schedule

	Date	Conf	# of BOG hr.	Travel cost
Brian Chapman	3/29/2004	Datatel	2	9
	10/13/2004	Datatel	6	200
	11/4/2004	CA-C	2	21
	12/9/2005	cccsfaaa	6	179
Elaine Navarrete	4/3/2007	cccsfaaa	2	27
Pearl Bandringa	10/11/2005	3CDUG	8	120
Delia Snead	4/3/2007	cccsfaaa	2	27
Greg Ryan	4/19/2006	cccsfaaa	4	10
	10/5/2005	New FAD	8	155
	6/13/2006	New FAD	6	95
	10/3/2006	New FAD	10	206
	6/12/2006	casfaa	2	5
	12/1/2006	cccsfaaa	6	99
	12/3/2006	cccsfaaa	6	108
Robbie Richards	11/8/06/	3cdug	6	77
Starla Underwood	5/21/2002	FA WS	2	8
Sharon Groom				

Sharon Groom (cont'd) – Exps

6/7/2002	cccsfaaa	4	96
4/11/2003	cccsfaaa	2	8
9/21/2004	NewFA	4	144
10/13/2004	3cug	6	150
11/4/2004	CAClient	2	8
6/20/2005	FADIRtrn	8	180
12/1/2006	cccsfaaa	6	103
12/3/2006	casfaa	6	119

Lilia Sanchez

Date	Conf	# of BOG hr.	Travel cost
4/19/2006	sp fling	4	31

Doug Foxworthy

Date	Conf	# of BOG hr.	Travel cost
3/29/2006	Datatel	2	9
4/5/2006	CCCAPPL	2	0
11/4/2004	Caclient	2	8

Sandy Clark

Date	Conf	# of BOG hr.	Travel cost
3/22/2002	region IX	2	22
3/11/2002	safers	8	202
2/25/2002	FA Dir	12	95
12/14/2001	cccsfaaa	14	413
4/1/2002	IX	8	204
8/26/2003	cccsfaaa	5	98
6/23/2003	chugadug	8	80
6/19/2003	IX	2	25
6/2/2003	cccsfaaa	8	110
4/25/2003	IX	2	31
4/24/2003	datatel	2	123
4/6/2003	COCO	10	304
2/28/2003	IX	2	31
12/12/2002	cccsfaaa	14	280
8/23/2002	IX	2	17
6/14/2002	IX	2	16

	6/6/2002	cccsfaaa	4	43
	11/3/2003	cccsfaaa	4	93
	9/26/2003	IX	2	18
	4/6/2004	cccsfaaa	2	29
	4/30/2004	IX	2	18
	6/1/2004	IX	2	18

Gina Janisko				
	Date	Conf	# of BOG hr.	Travel cost
	3/29/2004	datatel	2	9
	10/13/2004	3cdug	6	200
	11/4/2004	ca client	2	8

Jim Murray				
	Date	Conf	# of BOG hr.	Travel cost
	5/21/2002	FAWS	2	8
	4/24/2003	datatel	2	9
	11/4/2004	CG	2	10
	11/6/2006	datatel	8	374

Victor Valley Community College District
308/95 Enrollment F[illegible]ollection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4. (See in workpapers of 05-06 claim only.)
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client.						
p/E.C. 76300 (c)	2% of Revenue Rec'd.	See CCCCO website data at beginning of workpapers.						
1.8-4 line 4A	Enrollment Fees Waived	$878,274	$1,091,767	$1,022,655	$1,118,851	$2,255,074	$2,436,122	$2,395,039
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722	$ 47,901
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 61,479						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**	For 00-01 through 05-06 - unit fee	$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00
Total # of credits	Line 4A divided by unit fee		99,251	92,968	101,713	143,910	104,375	92,116
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981	$ 83,826
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722	$ 47,901
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 61,479						
1.8-4 5.	Credit Units Waived		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981	$ 83,826
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 79,044**	**$ 112,153**	**$ 105,054**	**$ 114,936**	**$ 176,059**	**$ 143,703**	**$ 131,727**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Victor Valley
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$27,516,453	$28,080,728	$-850,983	$27,229,745
EQUALIZATION	142,254	130,873	11,381	142,254
ENROLL FEE ADMIN (2%)	70,171	64,558	5,613	70,171
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	225,754	207,693	18,061	225,754
S.F.A.A.	542,225	497,774	44,451	542,225
E.O.P.S.	875,175	805,161	70,014	875,175
C.A.R.E.	181,993	165,562	16,431	181,993
D.S.P.S.	802,532	738,331	64,201	802,532
STATE HOSPITALS	0	0	0	0
CALWORKS	195,184	414,623	-219,439	195,184
MATRICULATION (CREDIT)	389,606	358,436	31,170	389,606
MATRIC. (NONCREDIT)	21,269	19,569	1,700	21,269
FAC.& STAFF DIVERSITY	14,907	12,604	2,303	14,907
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	398,461	366,584	31,877	398,461
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	222,992	205,152	17,840	222,992
ECON. DEVELOPMENT	0	0	0	0
TANF	58,000	97,235	-39,235	58,000
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	402,977	0	338,501	338,501
VTEA TITLE I C	402,977	80,381	258,120	338,501
NURSING CARE	179,424	0	179,424	179,424
PRIOR YEAR CORRECTION	761,619	761,619	0	761,619
TOTAL	$33,456,305	$33,040,645	$0	$33,040,645

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch e 5A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 to 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.								
	EFCW-1 B. 1. b.				$ 3,358.16	$ 2,958.30	$ 1,199.15	$ 2,398.18	$ 1,547.38
	EFCW-1 B. 2. a.		$ 31,532.75	$ 37,515.97	$ 40,319.84	$ 46,608.89	$ 47,615.91	$ 47,733.49	$ 51,487.13
	EFCW-1 B. 2. b.		$ 1,021.50	$ 1,064.25	$ 1,105.50	$ 1,127.50	$ 1,804.00	$ 2,706.00	$ 2,866.20
	EFCW-1 B. 2. c.		$ 32,554.25	$ 38,580.22	$ 44,783.50	$ 50,694.69	$ 50,619.06	$ 52,837.67	$ 55,900.71
1	Total EFCW - Fee Waiver Costs	EFCW-1	$79,044.00	$112,153.00	$105,054.00	$114,936.00	$176,059.00	$143,703.00	$131,727.00
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ (46,489.75)	$ (73,572.78)	$ (60,270.50)	$ (64,241.31)	$ (125,439.94)	$ (90,865.33)	$ (75,826.29)
3	Fee Waiver Costs to claim after offsets	L1 - L2							
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 32,554.25**	**$ 38,580.22**	**$ 44,783.50**	**$ 50,694.69**	**$ 50,619.06**	**$ 52,837.67**	**$ 55,900.71**

California Home

Monday, May 14, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Victor Valley College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 14, 2007 02:05:36

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	52	10,673
BOGW - Part B based on income standards	219	42,783
BOGW - Part C based on financial need	6,448	2,341,583

Total Amount = $ 2,395,039

Back to Top of Page

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05-06 CCCCO #s match data on schedule provided by client. - SEA

Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

October 18, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8611

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Victor Valley Community College District CC 36175

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Victor Valley Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers ***(AMENDED)*** 2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D. Brummell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC36175

(02) Claimant Name: Victor Valley Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 18422 Bear Valley Road

City: Victorville | State: CA | Zip Code: 92392-5849

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 308,792
Less: 10% Late Penalty		(14) $ 10,000
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 298,792
Due from State	(08)	(17) $ 298,792
Due to State		(18)

Reimbursement Claim Data	
(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	4,949
(24) EFCW-1, (04)(A)(2)(a)(f)	235,987
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	1,547
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	51,487
(29) EFCW-1, (04)(B)(2)(c)(f)	2,866
(30) EFCW-1, (06)	47
(31) EFCW-1, (07)	138,027
(32) EFCW-1, (09)	70,171
(33) EFCW-1, (10)	55,901
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Date: 10-11-07

Bruce Baron
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Victor Valley Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 4,948.80	$ -	$ -	$ -	$ -	$ 4,948.80
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 235,986.64	$ -	$ -	$ -	$ -	$ 235,986.64
3. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 1,098.38	$ -	$ -	$ -	$ 449.00	$ 1,547.38
3. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 51,487.13	$ -	$ -	$ -	$ -	$ 51,487.13
c. Reporting BOG fee waiver data to CCC	$ 2,866.20	$ -	$ -	$ -	$ -	$ 2,866.20
5) Total Direct Costs	$ 296,387.15	$ -	$ -	$ -	$ 449.00	$ 296,836.15

direct Costs		
6) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	46.57%
7) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 138,027.50
3) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 434,863.65
st Reduction		
) Less: Enrollment Fee Revenue offset		$ 70,171.00
) Le Enrollment Fee Waiver offsets		$ 55,900.71
) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 308,791.94

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
or Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection							
Osborne, Lori A&R Specialist	$30.93	160.0	$ 4,948.80				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 4,948.80	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$29.42	2,087.7	$ 61,420.13				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$29.42	3,790.9	$ 111,528.28				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$29.42	2,142.7	$ 63,038.23				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 235,986.64	$ -	$ -	$ -	$ -

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Chapman, Diane	FA Specialist	$40.23	6.0	$ 241.38				
Foxworthy, Doug	FA Specialist	$39.58	4.0	$ 158.32				
Bandringa, Pearl	Accounting Tech. II	$24.81	8.0	$ 198.48				
Ryan, Greg	FA Associate Director	$31.82	12.0	$ 381.84				
Sanchez, Lilia	FA Counselor	$29.59	4.0	$ 118.36				
Registration fees for enrollment fee waiver seminars								
Registration Costs, Diane Chapman	Seminar Fees	$1.00	179.0					$ 179.00
Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	9.0					$ 9.00
Registration Costs, Greg Ryan	Seminar Fees	$1.00	110.0					$ 110.00
Registration Costs, Lilia Sanchez	Seminar Fees	$1.00	31.0					$ 31.00
Registration Costs, Pearl Bandringa	Seminar Fees	$1.00	120.0					$ 120.00
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,098.38	$ -	$ -	$ -	$ 449.00

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
r Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$31.93	246.4	$ 7,867.55				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$31.93	414.3	$ 13,228.60				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$31.93	369.5	$ 11,798.14				
[illegible]ng approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$31.93	582.3	$ 18,592.84				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 51,487.13	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
r Valley Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Moreno, Christina Senior Systems Analyst	$47.77	60.0	$ 2,866.20				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 2,866.20	$ -	$ -	$ -	$ -

Victor Valley Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2005-2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
10/11/2005	8.00	Bandringa, Pearl	Accounting Tech. II	$24.81	$198.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Bandringa, Pearl Total**			$198.48		
12/9/2005	6.00	Chapman, Diane	FA Specialist	$40.23	$241.38	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Chapman, Diane Total**			$241.38		
05-06	2,087.70	Enrollment Office Staff	Collecting Fees	$29.42	$61,420.13	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	3,790.90	Enrollment Office Staff	Collecting Fees	$29.42	$111,528.28	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	2,142.70	Enrollment Office Staff	Collecting Fees	$29.42	$63,038.23	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	8,021.30	**Enrollment Office Staff Total**			$235,986.64		
05-06	246.40	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$7,867.55	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	414.30	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$13,228.60	Receiving waiver applications	Waiving student fees
05-06	369.50	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$11,798.14	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	582.30	Financial Aid Office Staff	Waiving Enrollment Fees	$31.93	$18,592.84	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,612.50	**Financial Aid Office Staff Total**			$51,487.13		
3/29/2006	2.00	Foxworthy, Doug	FA Specialist	$39.58	$79.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
4/5/2006	2.00	Foxworthy, Doug	FA Specialist	$39.58	$79.16	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Foxworthy, Doug Total**			$158.32		
05-06	60.00	Moreno, Christina	Senior Systems Analyst	$47.77	$2,866.20	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	60.00	**Moreno, Christina Total**			$2,866.20		
05-06	160.00	Osborne, Lori	A&R Specialist	$30.93	$4,948.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	160.00	**Osborne, Lori Total**			$4,948.80		
12/9/2005	179.00	Registration Costs, Diane Chapman	Seminar Fees	$1.00	$179.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	179.00	**Registration Costs, Diane Chapman Total**			$179.00		
3/29/2006	9.00	Registration Costs, Doug Foxworthy	Seminar Fees	$1.00	$9.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	9.00	**Registration Costs, Doug Foxworthy Total**			$9.00		
4/19/2006	10.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$10.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
6/12/2006	5.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$5.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
6/13/2006	95.00	Registration Costs, Greg Ryan	Seminar Fees	$1.00	$95.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	110.00	**Registration Costs, Greg Ryan Total**			$110.00		
4/19/2006	31.00	Registration Costs, Lilia Sanchez	Seminar Fees	$1.00	$31.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	31.00	**Registration Costs, Lilia Sanchez Total**			$31.00		
10/11/2005	120.00	Registration Costs, Pearl Bandringa	Seminar Fees	$1.00	$120.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	120.00	**Registration Costs, Pearl Bandringa Total**			$120.00		
4/19/2006	4.00	Ryan, Greg	FA Associate Director	$31.82	$127.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
6/12/2006	2.00	Ryan, Greg	FA Associate Director	$31.82	$63.64	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
6/13/2006	6.00	Ryan, Greg	FA Associate Director	$31.82	$190.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	12.00	**Ryan, Greg Total**			$381.84		
4/19/2006	4.00	Sanchez, Lilia	FA Counselor	$29.59	$118.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Sanchez, Lilia Total**			$118.36		
	10,336.80	**Grand Total**			$296,836.15		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$21,664,187		$21,664,187	$308,055	$21,356,132
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	538,555		538,555	22,069	516,486
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	1,097,245		1,097,245	27,208	1,070,037
Instructional Support Services	6100					
Learning Center	6110					
Library	6120	744,985		744,985	62,144	682,841
Media	6130	172,529		172,529	19,731	152,798
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	809,546		809,546	3,771	805,775
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	502,495		502,495	4,463	498,032
Matriculation and Student Assessment	6320	311,343		311,343	306	311,037
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	788,908	129	788,779	15,826	772,953
Subtotal		$26,629,793	$129	$26,629,664	$463,573	$26,166,091

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,107,891	$340,214	$767,677	$12	$767,665
Health Services	6440					
Student Personnel Admin.	6450	378,513		378,513	1,185	377,328
Financial Aid Administration	6460	1,239,115		1,239,115	63,465	1,175,650
Job Placement Services	6470	374,447		374,447	32,547	341,900
Veterans Services	6480	1,350		1,350		1,350
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	782,135		782,135	782,135	0
Custodial Services	6530	873,574		873,574	873,574	0
Grounds Maintenance and Repairs	6550	382,828		382,828	382,828	0
Utilities	6570	1,567,266		1,567,266	1,567,266	0
Other	6590	225,637		225,637	225,637	0
Planning, Policy Making, and Coordination	6600	1,815,581		1,815,581	1,815,581	0
General Inst. Support Services	6700					
Community Relations	6710	133,253		133,253	133,253	0
Fiscal Operations	6720	718,538		718,538	718,538	0
Human Resources Management	6730	1,673,398		1,673,398	1,673,398	0
Noninstructional Staff Benefits & Incentives	6740	137,409		137,409	137,409	0
Staff Development	6750	24,220		24,220	24,220	0
Staff Diversity	6760	5,851		5,851	5,851	0
Logistical Services	6770	2,622,942		2,622,942	2,622,942	0
Management Information Systems	6780	1,360,796		1,360,796	1,360,796	0
Subtotal		$42,054,537	$340,343	$41,714,194	$12,884,210	$28,829,984

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	607,574		607,574	607,574	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840					
Other Community Services & Economic Development	6890	117,989		117,989	5,593	112,396
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	146,322		146,322	1,386	144,936
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	82,875		82,875		82,875
Other Auxiliary Operations	7090	4,878		4,878		4,878
Physical Property Acquisitions	7100	87,753		87,753	87,753	0
(05) Total		$43,101,928	$340,343	$42,761,585	$13,586,516	$29,175,069
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				46.57%		
(07) Notes						

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual F[illegible]ancial and Budget Report

Expe[illegible]itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	80,034		8,813	17,025		105,872
Architecture and Environmental Design	0200						
Biological Sciences	0400	670,567		53,311	16,983		740,861
Business and Management	0500	882,596		5,566	7,321		895,483
Communications	0600						
Computer and Information Science	0700	378,369		914	56,406		435,689
Education	0800	738,304	209,045	186,555	3,041		1,136,945
Engineering and Related Industrial Tech.	0900	1,264,845	1,077	153,123	133,346		1,552,391
Fine and Applied Arts	1000	718,493		33,318			751,811
Foreign Language	1100	330,574		304			330,878
Health	1200	1,442,939		46,329	53,538		1,542,806
Consumer Education and Home Economics	1300	161,002		15,064			176,066
Law	1400						
Humanities (Letters)	1500	1,422,372		7,250			1,429,622
Library Science	1600						
Mathematics	1700	1,160,667		1,413			1,162,080
Military Studies	1800						
Physical Sciences	1900	500,960		14,655			515,615
Psychology	2000	355,987		561			356,548
Public Affairs and Services	2100	256,688		28,876	16,352		301,916
Social Sciences	2200	810,636		725			811,361
Commercial Services	3000	179,280		82,364	1,277		262,921
Interdisciplinary Studies	4900	8,098,729	521,266	14,976	2,766		8,637,737
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	517,585					517,585
Subtotal - Instructional Activities	**599**	19,970,627	731,388	654,117	308,055		21,664,187

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		438,184	78,302	22,069		538,555
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		1,005,897	64,140	27,208		1,097,245
Subtotal - Instructional Administration	**6000**		1,444,081	142,442	49,277		1,635,800
Instructional Support Services (6100)							
Learning Center	6110						
Library	6120		607,294	75,547	62,144		744,985
Media	6130		112,385	40,413	19,731		172,529
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		719,679	115,960	81,875		917,514
Admissions and Records	**6200**		760,352	45,423	3,771		809,546
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		486,603	11,429	4,463		502,495
Matriculation and Student Assessment	6320		308,985	2,052	306		311,343
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		795,588	13,481	4,769		813,838

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		757,370	15,583	15,826	129	788,908
Extended Opportunity Prgms. & Services (EOPS)	6430		712,224	55,441	12	340,214	1,107,891
Health Services	6440						
Student Personnel Administration	6450		340,799	36,529	1,185		378,513
Financial Aid Administration	6460		874,479	301,171	63,465		1,239,115
Job Placement Services	6470		229,813	112,087	32,547		374,447
Veterans Services	6480			1,350			1,350
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		2,914,685	522,161	113,035	340,343	3,890,224
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		673,366	100,053	8,716		782,135
Custodial Services	6530		802,857	70,717			873,574
Grounds Maintenance and Repairs	6550		309,661	67,931	5,236		382,828
Utilities	6570			1,567,266			1,567,266
Other Operation and Maintenance of Plant	6590		156,594	69,043			225,637
Subtotal - Operation and Maintenance of Plant	**6500**		1,942,478	1,875,010	13,952		3,831,440
Planning, Policymaking, and Coordination	**6600**		1,233,037	574,910	7,634		1,815,581

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		133,253				133,253
Fiscal Operations	6720		550,236	162,645	5,657		718,538
Human Resources Management	6730		644,537	1,028,861			1,673,398
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		137,409				137,409
Staff Development	6750		23,363	857			24,220
Staff Diversity	6760			5,851			5,851
Logistical Services	6770		976,195	539,824	1,106,923		2,622,942
Management Information Systems	6780		344,409	1,009,063	7,324		1,360,796
Other General Institutional Support Services	6790		483,689	47,740	76,145		607,574
Subtotal - General Institutional Support Services	**6700**		3,293,091	2,794,841	1,196,049		7,283,981
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		103,194	9,202	5,593		117,989
Subtotal - Community Services	**6800**		103,194	9,202	5,593		117,989

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		135,111	9,825	1,386		146,322
Farm Operations	6930						
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		135,111	9,825	1,386		146,322
Auxiliary Operations (7000)							
Contract Education	7010	65,994		16,881			82,875
Other Auxiliary Operations	7090			4,878			4,878
Subtotal - Auxiliary Operations	**7000**	65,994		21,759			87,753
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					46,378	46,378
Other Outgo	7330					6,320	6,320
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					52,698	52,698
TOTAL EXPENDITURES and OTHER OUTGO	**391**	20,036,621	14,072,684	6,779,131	1,785,396	393,041	43,066,873

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Six Ten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 25, 2008

CERTIFIED MAIL # 7006 3450 0000 3941 8703

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Victor Valley Community College District CC 36175

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Victor Valley Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC36175

(02) Claimant Name: Victor Valley Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 18422 Bear Valley Road

City: Victorville | State: CA | Zip Code: 92395-5850

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 410,600	(13) $ 373,302
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 373,302
Due from State	(08) $ 410,600	(17) $ 373,302
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	281,253
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	3,623
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	62,497
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	143,098
(32) EFCW-1, (09)	51,049
(33) EFCW-1, (10)	66,120
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1/22/08

Bruce Baron
Type or Print Name

Vice President, Administrative Services
Title

(38) Name of Contact Person for Claim

Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 57	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
Victor Valley Community College District	Reimbursement	X	2006-2007
	Estimated		

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 281,253.01	$ -	$ -	$ -	$ -	$ 281,253.01
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ 2,482.78	$ -	$ -	$ -	$ 1,140.00	$ 3,622.78
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 62,496.92	$ -	$ -	$ -	$ -	$ 62,496.92
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 346,232.71	$ -	$ -	$ -	$ 1,140.00	$ 347,372.71

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	41.33%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 143,097.98
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 490,470.69
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 51,049.00
(10) Enrollment Fee Waiver offsets		$ 66,119.70
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 373,301.99

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2006-2007

(0 nbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$34.05	3,355.3	$ 114,247.97				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$34.05	1,069.0	$ 36,399.45				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$34.05	2,475.2	$ 84,280.56				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$34.05	1,360.5	$ 46,325.03				
5) Total ☒ Subtotal ☐		Page 1 of 1	$ 281,253.01	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Victor Valley Community College District

(02) Fiscal Year: 2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Registration fees for enrollment fee waiver seminars								
Registration Costs, Elaine Na Registration Fees		$1.00	27.0					$ 27.00
Registration Costs, Delia Sne Registration Fees		$1.00	27.0					$ 27.00
Registration Costs, Greg Rya Registration Fees		$1.00	413.0					$ 413.00
Registration Costs, Robbie Ri Registration Fees		$1.00	77.0					$ 77.00
Registration Costs, Sharon G Registration Fees		$1.00	222.0					$ 222.00
Registration Costs, Jim Murra Registration Fees		$1.00	374.0					$ 374.00
Train district staff or attend training to implement procedures for waiver eligibility determination								
Groom, Sharon	Financial Aid Director	$62.40	12.0	$ 748.80				
Murray, Jim	Financial Aid Specialist	$40.95	8.0	$ 327.60				
Navarrete, Elaine	Financial Aid Specialist	$20.68	2.0	$ 41.36				
Richards, Robbie	Financial Aid Specialist	$44.53	6.0	$ 267.18				
Ryan, Greg	Associate Director, Financial Aid	$46.38	22.0	$ 1,020.36				
Snead, Lelia	Financial Aid Specialist	$38.74	2.0	$ 77.48				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,482.78	$ -	$ -	$ -	$ 1,140.00

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Victor Valley Community College District

(02) Fiscal Year: 2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$33.87	406.2	$ 13,757.99				
Receiving waiver applications							
Financial Aid Office Staff Various	$33.87	313.3	$ 10,611.47				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$33.87	661.5	$ 22,405.01				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$33.87	464.2	$ 15,722.45				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 62,496.92	$ -	$ -	$ -	$ -

rev 04/06

...ENROLLMENT FEE COLLECTIONS/WAIVERS
...006-2007
by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	3,355.30	Enrollment Office Staff	Various	$34.05	$114,247.97	Referencing student accounts and records	Calculating and collecting enrollment fe
06-07	1,069.00	Enrollment Office Staff	Various	$34.05	$36,399.45	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
06-07	2,475.20	Enrollment Office Staff	Various	$34.05	$84,280.56	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
06-07	1,360.50	Enrollment Office Staff	Various	$34.05	$46,325.03	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
	8,260.00	**Enrollment Office Staff Total**			$281,253.01		
06-07	406.20	Financial Aid Office Staff	Various	$33.87	$13,757.99	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	313.30	Financial Aid Office Staff	Various	$33.87	$10,611.47	Receiving waiver applications	Waiving student fees
06-07	661.50	Financial Aid Office Staff	Various	$33.87	$22,405.01	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	464.20	Financial Aid Office Staff	Various	$33.87	$15,722.45	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,845.20	**Financial Aid Office Staff Total**			$62,496.92		
12/1/2006	6.00	Groom, Sharon	Financial Aid Director	$62.40	$374.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
12/3/2006	6.00	Groom, Sharon	Financial Aid Director	$62.40	$374.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
	12.00	**Groom, Sharon Total**			$748.80		
11/6/2006	8.00	Murray, Jim	Financial Aid Specialist	$40.95	$327.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Murray, Jim Total**			$327.60		
4/3/2007	2.00	Navarrete, Elaine	Financial Aid Specialist	$20.68	$41.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Navarrete, Elaine Total**			$41.36		
4/3/2007	27.00	Registration Costs, Delia Sneed	Registration Fees	$1.00	$27.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	27.00	**Registration Costs, Delia Sneed Total**			$27.00		
4/3/2007	27.00	Registration Costs, Elaine Navarrete	Registration Fees	$1.00	$27.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	27.00	**Registration Costs, Elaine Navarrete Total**			$27.00		
10/3/2006	206.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$206.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
12/1/2006	99.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$99.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
12/3/2006	108.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$108.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	413.00	**Registration Costs, Greg Ryan Total**			$413.00		
11/6/2006	374.00	Registration Costs, Jim Murray	Registration Fees	$1.00	$374.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	374.00	**Registration Costs, Jim Murray Total**			$374.00		
11/8/2006	77.00	Registration Costs, Robbie Richards	Registration Fees	$1.00	$77.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
	77.00	**Registration Costs, Robbie Richards Total**			$77.00		
12/1/2006	103.00	Registration Costs, Sharon Groom	Registration Fees	$1.00	$103.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiver
12/3/2006	119.00	Registration Costs, Sharon Groom	Registration Fees	$1.00	$119.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee waiv
	222.00	**Registration Costs, Sharon Groom Total**			$222.00		
11/8/2006	6.00	Richards, Robbie	Financial Aid Specialist	$44.53	$267.18	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	6.00	**Richards, Robbie Total**			$267.18		
10/3/2006	10.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$463.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
12/1/2006	6.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$278.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
12/3/2006	6.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$278.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	22.00	**Ryan, Greg Total**			$1,020.36		
4/3/2007	2.00	Snead, Lelia	Financial Aid Specialist	$38.74	$77.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	2.00	**Snead, Lelia Total**			$77.48		
	11,297.20	**Grand Total**			$347,372.71		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$25,140,138		$25,140,138	$182,541	$24,957,597
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	668,264		668,264	7,745	660,519
Course and Curriculum Development	6020					
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	1,144,465		1,144,465	8,642	1,135,823
Instructional Support Services	6100					
Learning Center	6110					
Library	6120	819,926		819,926	64,482	755,444
Media	6130	168,832		168,832	22,011	146,821
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	905,208		905,208		905,208
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	430,294		430,294		430,294
Matriculation and Student Assessment	6320	71,519		71,519		71,519
Transfer Programs	6330					
Career Guidance	6340	59,723		59,723		59,723
Other Student Counseling and Guidance	6390	234,418		234,418		234,418
Other Student Services	6400					
Disabled Students Programs & Services	6420	935,583	82	935,501	17,829	917,672
Subtotal		$30,578,370	$82	$30,578,288	$303,250	$30,275,038

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,237,164	$417,939	$819,225	$5,685	$813,540
Health Services	6440					
Student Personnel Admin.	6450	1,308,653		1,308,653	228,029	1,080,624
Financial Aid Administration	6460	1,172,608		1,172,608	1,291	1,171,317
Job Placement Services	6470	30,854		30,854	165	30,689
Veterans Services	6480	3,149		3,149		3,149
Miscellaneous Student Services	6490					
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	715,278		715,278	715,278	0
Custodial Services	6530	856,962		856,962	856,962	0
Grounds Maintenance and Repairs	6550	276,486		276,486	276,486	0
Utilities	6570	1,868,075		1,868,075	1,868,075	0
Other	6590	249,697		249,697	249,697	0
Planning, Policy Making, and Coordination	6600	2,045,681		2,045,681	2,045,681	0
General Inst. Support Services	6700					
Community Relations	6710	133,147		133,147	133,147	0
Fiscal Operations	6720	1,025,704		1,025,704	1,025,704	0
Human Resources Management	6730	1,079,144		1,079,144	1,079,144	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	26,229		26,229	26,229	0
Staff Diversity	6760	9,124		9,124	9,124	0
Logistical Services	6770	2,658,927		2,658,927	2,658,927	0
Management Information Systems	6780	2,488,576		2,488,576	2,488,576	0
Subtotal		$47,763,828	$418,021	$47,345,807	$13,971,450	$33,374,357

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	220,565		220,565		220,565
Community Use of Facilities	6830	123,346		123,346	2,731	120,615
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	128,540		128,540	9,699	118,841
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960					
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	638		638		638
Physical Property Acquisitions	7100					
(05) Total		$48,236,917	$418,021	$47,818,896	$13,983,880	$33,835,016
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				41.33%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	88,532		5,714	14,033		108,279
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	606,163		40,953	11,133		658,249
Business and Management	0500	935,035		9,248	3,711		947,994
Communications	0600						
Information Technology	0700	402,389		10,868			413,257
Education	0800	725,217	283,862	210,396	10,389		1,229,864
Engineering and Industrial Tech.	0900	1,368,166		189,553	28,394		1,586,113
Fine and Applied Arts	1000	632,080		42,055	4,148		678,283
Foreign Language	1100	346,901		5,462			352,363
Health	1200	1,456,625		61,585	88,459		1,606,669
Family and Consumer Sciences	1300	181,601		15,915	876		198,392
Law	1400						
Humanities (Letters)	1500	1,492,151		5,252	896		1,498,299
Library Science	1600						
Mathematics	1700	1,194,205		1,892			1,196,097
Military Studies	1800						
Physical Sciences	1900	419,899		14,302			434,201
Psychology	2000	353,125		1,152			354,277
Public and Protective Services	2100	239,846		11,689	14,743		266,278
Social Sciences	2200	936,731		745			937,476
Commercial Services	3000	184,018		60,249	2,200		246,467
Interdisciplinary Studies	4900	8,977,317	599,155	10,525	3,559		9,590,556
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,837,024					2,837,024
Subtotal - Instructional Activities	**599**	23,377,025	883,017	697,555	182,541		25,140,138

** Salaries and Benefits of staff in noninstructional assignments

* Salaries and Benefits of instructors and instructional aides in instructional assignments

Victor Valley Community College District 990 District Code No.

CALIFORN' COMMUNITY COLLEGES
Annual Fi cial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		530,352	130,167	7,745		668,264
Course and Curriculum Development	6020						
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090		1,039,184	96,639	8,642		1,144,465
Subtotal - Instructional Administration	**6000**		1,569,536	226,806	16,387		1,812,729
Instructional Support Services (6100)							
Learning Center	6110						
Library	6120		647,821	107,623	64,482		819,926
Media	6130		117,525	29,296	22,011		168,832
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		765,346	136,919	86,493		988,758
Admissions and Records	**6200**		813,866	91,342			905,208
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		418,121	12,173			430,294
Matriculation and Student Assessment	6320		71,106	413			71,519
Transfer Programs	6330						
Career Guidance	6340		54,937	4,786			59,723
Other Student Counseling and Guidance	6390		217,720	16,698			234,418
Subtotal - Student Counseling and Guidance	**6300**		761,884	34,070			795,954

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		889,743	27,929	17,829	82	935,583
Extended Opportunity Prgms. & Services (EOPS)	6430		755,727	57,813	5,685	417,939	1,237,164
Health Services	6440						
Student Personnel Administration	6450		768,880	311,744	228,029		1,308,653
Financial Aid Administration	6460		1,023,505	147,812	1,291		1,172,608
Job Placement Services	6470		30,525	164	165		30,854
Veterans Services	6480			3,149			3,149
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		3,468,380	548,611	252,999	418,021	4,688,011
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		516,920	126,341	72,017		715,278
Custodial Services	6530		794,448	62,514			856,962
Grounds Maintenance and Repairs	6550		254,327	22,159			276,486
Utilities	6570			1,868,075			1,868,075
Other Operation and Maintenance of Plant	6590		160,104	89,593			249,697
Subtotal - Operation and Maintenance of Plant	**6500**		1,725,799	2,168,682	72,017		3,966,498
Planning, Policymaking, and Coordination	**6600**		1,238,603	800,246	6,832		2,045,681

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORN' COMMUNITY COLLEGES
Annual Fina..cial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		132,875	272			133,147
Fiscal Operations	6720		602,026	417,700	5,978		1,025,704
Human Resources Management	6730		674,159	380,033	24,952		1,079,144
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		2,490	23,739			26,229
Staff Diversity	6760			9,124			9,124
Logistical Services	6770		948,295	591,214	1,119,418		2,658,927
Management Information Systems	6780		1,098,659	1,340,778	49,139		2,488,576
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		3,458,504	2,762,860	1,199,487		7,420,851
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	106,270		114,295			220,565
Community Use Facilities	6830		109,536	11,079	2,731		123,346
Economic Development	6840						
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	106,270	109,536	125,374	2,731		343,911

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930		75,792	43,049	9,699		128,540
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960						
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	6900		75,792	43,049	9,699		128,540
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090			638			638
Subtotal - Auxiliary Operations	7000			638			638
Physical Property and Related Acquisitions (7100)	7100						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220					713,159	713,159
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200					713,159	713,159
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320					66,565	66,565
Other Outgo	7330					4,800	4,800
Subtotal - Transfers, Student Aid, and Other Outgo	7300					71,365	71,365
TOTAL EXPENDITURES and OTHER OUTGO	391	23,483,295	14,870,263	7,636,152	1,829,186	1,202,545	49,021,441

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	33,003
Avg. time p/account	6.1
Total Time (in minutes)	201318
Per Hour	60
Hours Worked (** **11**)	**3355.3**
***EFC 2**	14,577
Avg. time p/student	4.4
Total Time (in minutes)	64139
Per Hour	60
Hours Worked (** **12**)	**1069.0**
***EFC 1**	33,003
Avg. time p/question	4.5
Total Time (in minutes)	148514
Per Hour	60
Hours Worked (** **13**)	**2475.2**
***EFC 2**	14,577
Avg. time p/file	5.6
Total Time (in minutes)	81631
Per Hour	60
Hours Worked (** **14**)	**1360.5**
***EFC 4 (Not provided - No substitute)**	
Avg. time p/account	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **15**)	**0.0**
***EFC 5 (Not provided - no substitute)**	
Avg. time p/student	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,963
Avg. time p/question	3.5
Total Time (in minutes)	24371
Per Hour	60
Hours Worked (** **21**)	**406.2**
***EFW 6**	6,963
Avg. time p/application	2.7
Total Time (in minutes)	18800
Per Hour	60
Hours Worked (** **22**)	**313.3**
***EFW 6**	6,963
Avg. time p/evaluation	5.7
Total Time (in minutes)	39689
Per Hour	60
Hours Worked (** **23**)	**661.5**
***EFW 8**	0
Avg. time p/application	3.5
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **24**)	**0.0**
***EFW 7**	6,963
Avg. time p/application	4.0
Total Time (in minutes)	27852
Per Hour	60
Hours Worked (** **25**)	**464.2**
***EFW 8**	0
Avg. time p/application	4.8
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Allen-Velasquez, Kenyona	A&R Technician	5	2	1	5	2	2
Aragon, Linda	Technician	4	3	2	3		
Avila, Silvia	Admissions Record Technician	8	3	3	5		
Cardoza, Maria	A&R Technician	8	4	2	5		
Carpenter, Malia	Administrative Secretary	3	1	5	4		
Conrad, Michelle	Account Technician	5	3	6	3	3	8
DaCosta, Debra	Account Technician	2	1	2	2	3	1
Dance, Tammy	A&R Specialist	20	20	10	15	5	10
Duarte, Elizabeth	Placement Specialist	15	15	10	20		
Foxworthy, Doug	Admissions Specialist	5	2	5	2	1	1
Groom, Sharon	Director, financial aid	4		4			
Henning, Lorie	Account Technician	1	4	3	2	2	1
Hussing, Cathy	Account Technician	1	2	2	1	5	5
Kingman, Kelley	Account Technician	2	3	2	2	2	1
Lewis, Nancy	Account Technician	1	2	2	1	5	5
McCoy, Tonya	Account Technician	5	5	3	2	4	2
Mendoza, Hilda	A&R Technician	8	4	2	5		
Mohr, Diane	A&R Technician	3	1.5	15	1	0.5	1.5
Montgomery, Pat	Student Dev. Ctr. Specialist	20	10	3.5	20		
Moon, Greta	Director, A/R	3	2	3	2		1
Osborne, Lori	A&R Specialist	2	1	5	3		
Quesada, Gabriela	Student Dev. Ctr. Specialist	20	10	3.5	20		
Reyes-Garcia, Renee	Account Technician	2.5	2.5	2.5	2.5		17.5
Ropelato, Janet	Short Term Hourly	1	1	1	1	2	3
Ryan, Greg	Associate Director, FA			5			
Suderno, Jean	A&R Technician	2		10	1		
Vigil, Donna	A&R Technician	7.5	3	10	12	2	2
Average		**6.1**	**4.4**	**4.5**	**5.6**	**2.8**	**4.1**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR for Various Enrollment Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Collection staff.
Source: EFCW 1.7-2 and 06-07 phr's from client.
Findings:

Staff	Title	06-07
Allen-Vilasquez, Kenyona	A&R Technician	23.14
Aragon, Linda	A&R Technician	28.59
Avila, Silvia	A&R Technician	29.18
Cardoza, Maria	A&R Technician	30.11
Carpenter, Malia	Administrative Secretary	28.00
Conrad, Michelle	Account Technician I	32.85
DaCosta, Debra	Account Technician I	38.83
Dance, Tamara	A&R Specialist	43.04
Duarte, Elizabeth	Placement Specialist	31.77
Foxworthy, Douglas	A&R Specialist	38.62
Groom, Sharon	Director, financial Aid	62.40
Henning, Lorie	Account Technician	43.67
Hussing, Cathy	Account Technician	28.59
Kingman, Kelley	Account Technician	28.59
Lewis, Nancy	Account Technician	28.59
McCoy, Tonya	Account Technician	28.59
Mendoza, Hilda	A&R Technician	28.59
Mohr, Diane	Office Assistant	27.40
Montgomery, Pat	Student Dev. Ctr. Specialist	35.88
Moon, Greta	Director, Admissions & Records	62.40
Osborne, Lori	A&R Technician	35.77
Quesada, Gabriela	Student Dev. Ctr. Specialist	31.06
Reyes-Garcia, Renee	Account Technician	33.44
Ropelato, Janet	Short Term Hourly	7.50
Ryan, Greg	Associate Director, FA	46.38
Suderno, Jean	A&R Technician	32.68
Vigil, Donna	A&R Technician	33.78
Average		34.05

Conclusion: Findings go forward to EFCW-2.

Schedule 3
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Allen-Velasquez, Kenyona	A&R Technician	2.0					
Aragon, Linda	Technician	3.0					
Avila, Silvia	A&R Technician	3.0					
Cardoza, Maria	A&R Technician	3.0					
Carpenter, Malia	Administrative Secretary	2.0					
Conrad, Michelle	Account Technician	6.5					
DaCosta, Debra	Account Technician	0.5					
Dance, Tammy	A&R Specialist	10.0					
Duarte, Elizabeth	Placement Specialist	15.0					
Foxworthy, Doug	Admissions Specialist	1.0					
Groom, Sharon	Director, Financial Aid	4.0		10.0			15.0
Henning, Lorie	Account Technician	2.0					
Hussing, Cathy	Account Technician	1.0					
Jordan, Ernestine	FA Specialist	2.0	2.0	3.0	4.0	4.0	1.0
Kingman, Kelley	Account Technician	1.0					
Lewis, Nancy	Account Technician	1.5					
McCoy, Tonya	Account Technician	2.0	1.0				
Mendoza, Hilda	A&R Technician	3.0					
Mohr, Diane	A&R Technician	2.5					
Montgomery, Pat	Student Dev. Ctr. Specialist	3.0					
Moon, Greta	Director, A/R	2.0					
Murray, Jim	FA Specialist	2.0	2.0	3.0	4.0	4.0	1.0
Navarrete, Elaine	FA Specialist	5.0	3.0	3.0	5.0	5.0	2.0
Osborne, Lori	A&R Specialist	2.0					
Penland, Pamela	Administrative Secretary	5.0	5.0	4.0	5.0		
Quesada, Gabriela	Student Dev. Ctr. Specialist	5.0		5.0			
Ropelato, Janet	Short Term Hourly	2.0					
Ryan, Greg	Associate Director, Financial Aid	5.0	5.0	5.0	2.0	2.0	
Reyes-Garcia, Renee	Account Technician	1.0	1.0	12.5	1.0	5.0	5.0
Suderno, Jean	A&R Technician	1.0					
Vigil, Donna	A&R Technician	10.0					
Average		3.5	2.7	5.7	3.5	4.0	4.8

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Default)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Average PHR for Various Finacial Office Staff

Purpose: To summarize productive hourly rates for Enrollment Fee Waiver staff.
Source: EFCW 1.7-3 and 06-07 phr's from client.
Findings:

Staff	Title	PHR 06-07
Allen-Velasquez, Kenyona	A&R Technician	23.14
Aragon, Linda	Technician	28.59
Avila, Silvia	A&R Technician	29.18
Cardoza, Maria	A&R Technician	30.11
Carpenter, Malia	Administrative Secretary	28.00
Conrad, Michelle	Account Technician	32.85
DaCosta, Debra	Account Technician	38.83
Dance, Tammy	A&R Specialist	43.04
Duarte, Elizabeth	Placement Specialist	31.77
Foxworthy, Doug	Admissions Specialist	38.62
Groom, Sharon	Director, Financial Aid	62.40
Henning, Lorie	Account Technician	43.67
Hussing, Cathy	Account Technician	28.59
Jordan, Ernestine	FA Specialist	33.98
Kingman, Kelley	Account Technician	28.59
Lewis, Nancy	Account Technician	28.59
McCoy, Tonya	Account Technician	28.59
Mendoza, Hilda	A&R Technician	28.59
Mohr, diane	A&R Technician	27.40
Montgomery, Pat	Student Dev. Ctr. Specialist	35.88
Moon, Greta	Director, A/R	62.40
Murray, Jim	FA Specialist	40.95
Navarrete, Elaine	FA Specialist	20.68
Osborne, Lori	A&R Specialist	35.77
Penland, Pamela	Administrative Secretary	34.79
Quesada, Gabriela	Student Dev. Ctr. Specialist	31.06
Ropelato, Janet	Short Term Hourly	7.50
Ryan, Greg	Associate Director, Financial Aid	46.38
Reyes-Garcia, Renee	Account Technician	33.44
Sudemo, Jean	A&R Technician	32.68
Vigil, Donna	A&R Technician	33.78
Average		**33.87**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
Victor Valley Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3 and their attachments.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1. Enrolled Students	24,407	25,365	27,883	30,969	30,794	28,095	32,157	32,964	33,003
EFC 2	1.8-1	2. Paid Enrollment fees									14,577
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)									14,586
EFC 4	1.8-2	1. Delinquencies collections									
EFC 5	1.8-2	2. Refunds									
EFW 6	1.8-3	1. Waivers Requested	X								6,963
EFW 7	1.8-3	2. Waivers Approved	X =	4,809	5,492	5,683	6,441	6,580	6,597	6,719	6,963
EFW 8	1.8-3 (1-2)	Waivers Denied	X								0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday, April 24, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2006 Summer Term

Data Current As Of April 24, 2012 11:23:16

Total Headcount	4,842

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California Home Tuesday, April 24, 2012

Student Demographics

Student Total Headcount For Victor Valley
For 2006 Fall Term

Data Current As Of April 24, 2012 11:23:26

Total Headcount	10,860

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California Home Tuesday, April 24, 2012

Student Demographics

Student Total Headcount For Victor Valley
For 2007 Winter Intersession

Data Current As Of April 24, 2012 11:23:34

Total Headcount	3,956

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California Home

Tuesday, April 24, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Victor Valley
For 2007 Spring Semester

Data Current As Of April 24, 2012 11:23:42

Total Headcount	10,494

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MRP 1.6a

302/96 Enrollment Fee Collection / Waiver

Employee Time Record Sheet for Mandated Costs of

~~**4867/75 Mandate Reimbursement Process**~~

Annual Reimbursement Claims

District: Victor Valley College Fiscal Year: 02 - 06

Sharon Groom
Employee Name

FA. Director
Exact Position Title

VVC / FA
School/Department/Location

7602454271
Telephone #

(12mo)/11mo/10mo/hrly
Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
01-02 6/7/02	1 2 3 (4) 5 6	CCCSFAAA	BOG	4	96
02-03 4/11/03	1 2 3 4 5 6	"	BOG	2	8
04-05 9/21/04	1 2 3 4 5 6	FA Director Trn.	BOG	4	144
04-05 10/13/04	1 2 3 4 5 6	3CDVG	BOG	6	150
04-05 11/4/04	1 2 3 4 5 6	CurriculT	BOG	2	8
05-06 6/20/05	1 2 3 4 5 6	FA Director Trn.	BOG	8	180
06-07 12/1/06	1 2 3 (4) 5 6	CCCSFAAA	BOG	6	103
06-07 12/3/06	1 2 3 (4) 5 6	CaSFAA	BOG	6	119
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature _____ Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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2006/07 Enrollment Fee Collection / Waiver

MRP 1.6a

Employee Time Record Sheet for Mandated Costs of

~~4867/75 Mandate Reimbursement Process~~

Annual Reimbursement Claims

District: Victor Valley College

Fiscal Year: 06-07

Elaine Navarrete

Employee Name

Financial Aid Specialist

Exact Position Title

VVC/FA

School/Department/Location

Telephone #

12mo/11mo/10mo/hrly

Work year length

Reimbursable Activities: *Annual Reimbursement Claims* only.

- **Code 1** Staff time to collect and organize data to be used for claim preparation.
- **Code 2** Staff time and/or consultant cost to prepare state claim forms.
- **Code 3** Staff time and/or consultant cost for district inservice mandate reimbursement training.
- **Code 4** Staff time, seminar fees, travel and lodging expenses for outside of District mandate reimbursement training.
- **Code 5** Staff time to resolve payment disputes with the State Controller's Office.
- **Code 6** Other - describe fully.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe Activity:	Claim worked on:	Time in Hours	Materials Costs & Expenses:
06-07 4/3/07	1 2 3 (4) 5 6	CCCSFAAA	BOG	2	27 ✓
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				
	1 2 3 4 5 6				

Attach: All documentation available to substantiate reported time and expenses. This can include meeting agendas, seminar agendas, calendar notes, seminar expenses, travel expense and reimbursement, and supplies.

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify under penalty of perjury to be true and correct based on your personal knowledge or information." This information is used for cost accounting.

Employee Signature Elaine Navarrete Date 4/23/07

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Victor Valley Coll Fiscal Year: 06-07

Robbie Richards — Financial Aid
Employee Name — Exact Position Title

Fin. Aid.
Department/Location — Telephone # — 12mo/11mo/10mo/hrly Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11 8 06	1A 1B 2A 2B 3 4	Info regarding BOGG's	6
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

see sch in front of time sheet for similar see

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/1/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
3068/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Victor Valley College Fiscal Year: 06/07

Greg Ryan — Associate Director of FA
Employee Name — Exact Position Title

Fin. Aid — 760-245-4271 x.2377 — 12mo/11mo/10mo/hrly
Department/Location — Telephone # — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
10/31/06	1A 1B 2A (2B) 3 4	New FAD	10
12/1/06	1A 1B 2A (2B) 3 4	cccsfaaa	6
1/31/06	1A 1B 2A (2B) 3 4	cccsfaa	6
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

See sch. in front of time sheet for seminar fees

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/12/07

If you have any questions, please contact _____, at _____

ASE SUBMIT THIS INFORMATION BY _____; TO _____

RIGHT 2004 SixTen and Associates

EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
3098/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: VVC

Fiscal Year: ~~05-06~~ 06-07

Delia Snead
Employee Name

Fin Aid Specialist
Exact Position Title

Fin Aid
Department/Location

245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
~~10/1/05~~ 4/3/07	~~1A 1B 2A 2B 3 4~~ 1A 1B 2A 2B 3 4	~~CCCSF06~~ CCCSFAAA	2
/ /	1A 1B 2A 2B 3 4		2
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

See sch. in front of time sheets for seminar dates

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-12-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admission Records Registration
Department/Location

Kenyona Allen-Velasquez
Employee Name

Admissions & Records Technician 50%
Exact Position Title

(760) 245-4271 ex 2095 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenyona Allen Velasquez Date 9/25/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ : TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley — District

A & R / Bldg 52 — Department/Location

Linda Aragon — Employee Name

Technician — Exact Position Title

245-4271 x2579 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student acoount/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-20-07

If you have any questions, please contact 245-4271 x2579, at A & R.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

AR & R
Department/Location

Silvia Avila
Employee Name

Admissions Record Tech
Exact Position Title

760 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-27-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions Bldg.
Department/Location

Maria Cardoza
Employee Name

Admissions & Registration Technician
Exact Position Title

760-245-4271 ext 2297
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	/					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	/					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Cardoza Date 9/27/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x2272 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 09/28/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Services
Department/Location

Michelle Conrad
Employee Name

Account Tech I
Exact Position Title

2369
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5-7 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	8 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature MConrad Date 9.24.07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs / Bursar
Department/Location

Debra DaCosta
Employee Name

Accounting Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Debra DaCosta Date 9/24/01

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

ASR
Department/Location

Tammy Dance
Employee Name

Admissions & Records Specialist
Exact Position Title

X2429
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	**Workload Multiplier From 1.7-1(Check one)**				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	20					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid/Student Employment
Department/Location

Elizabeth Duarte
Employee Name

Placement Specialist
Exact Position Title

2244
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Duarte Date 10/11/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Doug Foxworthy
Employee Name

Admissions Specialist
Exact Position Title

760-245-4271 x2254
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
(06-07) 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 9-26-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

FINANCIAL AID
Department/Location

SHARON GROOM
Employee Name

DIRECTOR, FINANCIAL AID
Exact Position Title

X2449
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Groom Date 10-02-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs
Department/Location

Lorie Henning
Employee Name

Accounting Technician II
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/24/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Cathy Hussing
Employee Name

Accounting Technician I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for post accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cathy Hussing Date 9-25-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs
Department/Location

Kelley Kingman
Employee Name

Accounting Technician I
Exact Position Title

Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kelley R Kingman Date 9/24/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Nancy Lewis
Employee Name

Acctg Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1 min ~~5 sec.~~					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nancy Lewis Date 9/25/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal / Bursar
Department/Location

Donna McCan
Employee Name

Account Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Donna McCan Date 9/24/07

If you have any questions, please contact 760-245-4271, at 2782

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley District
District

A & R
Department/Location

Hilda Mendoza
Employee Name

A & R Technician
Exact Position Title

760/245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	8					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Hilda Mendoza Date 9/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Diane Mohr
Employee Name

A & R Technician
Exact Position Title

760- 245-4271 x 2315
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1.5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	.5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1.5					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Career & Transfer Services
Department/Location

Pat Montgomery
Employee Name

Student Development Center Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5 1/2					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	NA					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	NA					

enrollment fees | collection blue ink

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Montgomery Date 10-1-2007

If you have any questions, please contact _____ at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

A/R
Department/Location

Greta Moon
Employee Name

Director, A/R
Exact Position Title

X2373
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Greta Moon Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

AGR
Department/Location

Lori Osborne
Employee Name

Admissions & Records Specialist II
Exact Position Title

760 245 4271 x2569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	Ø					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	Ø					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 9-25-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid / Career/Transfer Services
Department/Location

Gabriela Quesada
Employee Name

Student Dev. Center Specialist
Exact Position Title

_____ 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20 mins					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 mins					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3½					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20 mins					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	n/a					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	n/a					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gabriela Quesada Date 10-01-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Services
Department/Location

Renee Reyes-Garcia
Employee Name

Acct Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2-3 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2-3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2-3 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2-3 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delisquent (telephone contact, written notices, collection agencies, small claims court, etc.)	/					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15-20 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 9-24-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs / Bursar
Department/Location

Janet Rapelato
Employee Name

Short Term Hourly
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length (circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	1					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Janet Rapelato Date 9/24/07

If we have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

FA
Department/Location

Greg Ryan
Employee Name

Assoc. Dir. of FA
Exact Position Title

760-245-4271 x. 2577
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	✓					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	✓					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	✓					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	✓					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	✓					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Greg Ryan Date 9/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
306/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Jean Suderno
Employee Name

Admissions & Records Technician
Exact Position Title

760 245 4271 ext 2678
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report. N/A						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) N/A						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record. N/A						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jean Suderno Date 9/25/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Donna Vigil
Employee Name

Admissions & Records Technician
Exact Position Title

245-4271 - 2267
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	**Workload Multiplier From 1.7-1(Check one)**				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5 to 10 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10 min					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	12 min					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/delisquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admission Records Registration
Department/Location

Kenyona Allen-Velasquez
Employee Name

Admissions & Records Technician 50%
Exact Position Title

(760)245-4271 ext ~~2625~~
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kenyona Allen Velasquez Date 9/25/2007

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

A & R / Bldg 52
Department/Location

Linda Aragon
Employee Name

TECHNICIAN
Exact Position Title

245-4271 x 2579
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
de 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9-21-07

If you have any questions, please contact 245-4271 x 2579, at A & R

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admission & Records
Department/Location

Silvia Avila
Employee Name

Admission & Records Tech.
Exact Position Title

(760) 245-4271 ext. 2720
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Silvia Avila Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College — Admissions/ Bldg 52
District — Department/Location

Maria Cardoza
Employee Name

Admissions & Registration Technician
Exact Position Title

(760) 245-4271 2297 — 12mo/11mo/10mo/hrly (circle)
Telephone # — Work year length(circle)

Fiscal Year: 06 07
99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Cardoza — Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions + Records
Department/Location

Malia Carpenter
Employee Name

Administrative Secretary I
Exact Position Title

(760) 245-4271 x2272 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 06-07
99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Malia Carpenter Date 09/28/07

If you have any questions, please contact _____, at _____

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Mckenny

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Services
Department/Location

Michelle Conrad
Employee Name

Account Tech I
Exact Position Title

23169
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. 06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5-8				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature M Conrad Date 9.24.07

If you have any questions, please contact _____, at _____

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Debi

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs / Bursar
Department/Location

Debra DaCosta
Employee Name

Accounting Technician I
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	.50				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	—				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature D DaCosta Date 9/24/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

A&R
Department/Location

Tammy Dance
Employee Name

Admissions & Records Specialist
Exact Position Title

X2429
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10.0				
de 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	n/a				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	n/a				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. *PLEASE USE BLUE INK*

Employee Signature _____ Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid / Student Employment
Department/Location

Elizabeth Duarte
Employee Name

Placement Specialist
Exact Position Title

2244
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Duarte Date 10/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Doug Foxworthy
Employee Name

Admissions Specialist
Exact Position Title

760-245-4271 x2254
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (06-07) 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Doug Foxworthy Date 9-26-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VICTOR VALLEY COLLEGE
District

FINANCIAL AID
Department/Location

Sharon Groom
Employee Name

DIRECTOR, FINANCIAL AID
Exact Position Title

X2449
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4				
de 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	0				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sharon Groom Date 10-02-07

If you have any questions, please contact _____, at _____

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Lorie

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs
Department/Location

Lorie Henning
Employee Name

Acct Tech II
Exact Position Title

Telephone # (12mo/11mo/10mo/hrly) Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding. 06-07

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	—				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/24/07

If you have any questions, please contact _____, at _____

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Cathy

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Cathy Hussing
Employee Name

Accounting Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	/				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	—				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cath Hussing Date 9-25-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

VVC
Department/Location

Ernestine Jordan
Employee Name

FA Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/1/07

If you have any questions, please contact _____, at _____

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Kelley

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Services
Department/Location

Kelley Kingman
Employee Name

Accounting Tech. I / Purchasing
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
de 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kelley Kingman Date 9/24/07

If you have any questions, please contact _____, at _____

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Nancy

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Bursar
Department/Location

Nancy Lewis
Employee Name

Accounting Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1½ min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	N/A				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	N/A				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	N/A				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nancy Lewis Date 9/25/07

If you have any questions, please contact _____, at _____

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Tonya

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Svcs / Bursar
Department/Location

Tonya McCoy
Employee Name

Accounting Technician I
Exact Position Title

245.4271 x 2782
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06/07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
de 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	0				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	0				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	0				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	0				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. *PLEASE USE BLUE INK*

Employee Signature Tonya McCoy Date 9/24/07

If you have any questions, please contact 760-245-4271, at 2782

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley District
District

A & R
Department/Location

Hilda Mendoza
Employee Name

A & R Technician
Exact Position Title

760-245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9/26/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley
District

Admissions & Records
Department/Location

Diane Mohr
Employee Name

A & R Technician
Exact Position Title

760-245-4271 x2315
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06/07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Mohr Date 9-27-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

~~Student~~ Career + Transfer Services
Department/Location

Pat Montgomery
Employee Name

Student Development Center Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 05-06 06-07 07-08

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	NA			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	NA			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	NA			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	NA			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	NA			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Patricia Montgomery Date 10-(-2006)

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College — District

A/R — Department/Location

Greta Moon — Employee Name

Director, A/R — Exact Position Title

X2373 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Greta Moon Date 9-27-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

VVC Financial Aid
Department/Location

Jim Murray
Employee Name

FA Specialist
Exact Position Title

760 245 4271
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	4				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	4				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 10/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

FA
Department/Location

Elaine MARKELL
Employee Name

FA SPECIALIST
Exact Position Title

2454211 x 2077
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	3				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	8				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2				

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Employee Signature Elaine Markell Date 10/1/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VICTOR VALLEY
District

A & R
Department/Location

Lori Osborne
Employee Name

Admissions & Records Specialist II
Exact Position Title

760 245 4271 x2569
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06/07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Lori Osborne Date 9-25-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid
Department/Location

Pamela Pentland
Employee Name

Administrative Secretary I
Exact Position Title

760 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	~~0~~				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	~~0~~				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Pamela Pentland Date 10-2-07

If you have any questions, please contact Sharon Groom at 760 245-4271 x 2211

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Financial Aid / Career / Transfer Services
Department/Location

Gabriela Quesada
Employee Name

Student Dev. Center Specialist
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 mins				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	n/a				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 mins				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	n/a				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	n/a				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	n/a				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gabriela Quesada Date 10-01-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Janet

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal / Bursar
Department/Location

Janet Ropelato
Employee Name

Short Term Hourly
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or decla of perjury under the laws of the State of California to be true and correct based on your personal information." This information is used for cost accounting purposes only. PLEASE USE B

Employee Signature Janet Ropelato Date 9/24

If you have any questions, please contact _____, at ___

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

$7.50 hr

gross 1396.65

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VVC
District

FA
Department/Location

Greg Ryan
Employee Name

Associate Director of FA
Exact Position Title

760-245-4271 x. 2333
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of time for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 9/26/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Renee

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Fiscal Services
Department/Location

Renee Reyes-Garcia
Employee Name

Acct Tech I
Exact Position Title

Telephone # 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1 min				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10-15 min				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 min				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5 min				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 min				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 9-24-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Jean Suderno
Employee Name ext 2678

Admissions & Records Technician
Exact Position Title

760 245-4271
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	1				
Code 22 Receiving Applications from students by mail, fax, puter online access, or in person, or in the form of eligibility information processed by the financial aid office. N/A					
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. N/A					
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. N/A					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. N/A					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. N/A					

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Employee Signature Jean Suderno Date 9/25/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Victor Valley College
District

Admissions & Records
Department/Location

Donna Vigil
Employee Name

Admissions & Records Technician
Exact Position Title

2207
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				
e 22 Receiving Applications from students by m... computer online access, or in person, or in the ... information processed by the financial ...					
Code 23 Evaluating Applica... documents for compliance wi...					
Code 24 Incomplete Applicatio... additional required information. H... suspense file until all information is ...					
Code 25 Approved Applications: Co... ...mentation and filing the information. Entering inform... ...into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

Donna Vigil
1 month only 06-07

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Employee Signature Donna Vigil Date 10/1/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		5281	
Fall		11,830	
Winter/ Intersession		4591	
Spring		11,301	
Total		33,003	
2. Number of students who paid enrollment fees:			
Summer		2065	
Fall		5733	
Winter/ Intersession		1479	
Spring		5300	
Total		14,577	
3 Number of students exempted from paying enrollment fees (BOGG, etc):			
Summer		2137	
Fall		5059	
Winter/ Intersession		2397	
Spring		4993	
Total		14,586	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Debra LaCosta Date 12/5/07

Employee Name: (print) Debra LaCosta

Position or Title Accounting Specialist

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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California Home

Friday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Victor Valley College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 11, 2008 12:44:04

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	73	53,148
BOGW - Part B based on income standards	378	281,914
BOGW - Part C based on financial need	6,512	2,203,209

Total 6,963

Total Amount = $ 2,538,271

Back to Top of Page

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Victor Valley Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$	$
2. Enrollment Fees Refunded	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$ 1,413,873	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 2,113,716.91	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer		5326.5	
B. Fall		31,447.5	
C. Winter/Intersession		6071	
D. Spring		29,088	
TOTAL x $0.91 per credit 71,933 x .91		$ 65,459.03	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Debra DeCosta Date 12/5/07

DeDra DeCosta
Employee Name: (print)

Accounting Specialist
Position or Title

If you have any questions, please contact _____ at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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PRODUCTIVE HOURLY RATES

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Victor Valley Community College District **Fiscal Years:**

Name	Title	05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT		$ 52.37
	AVERAGE DEAN		$ 82.09
	AVERAGE DIRECTOR		$ 70.82
SNEAD, Lelia	AVERAGE FINANCIAL AID SPECIALIST		$ 38.74
	AVERAGE SECRETARY		$ 32.70
	AVERAGE VICE PRESIDENT	$ 88.76	$ 97.19
ALLEN-VELASQUEZ, KENYONA	A&R TECHNICIAN	$ 24.51	$ 23.14
ARAGON, LINDA	A&R TECHNICIAN		$ 28.59
AVILA, SILVIA	A&R TECHNICIAN - BILINGUAL	$ 26.56	$ 29.18
BARON, BRUCE	VICE PRESIDENT OF ADMINISTRATIVE SERVICES	$ 91.21	$ 98.84
BOENHEIM, MARION	VICE PRESIDENT OF HUMAN RESOURCES		$ 90.62
CARDOZA, MARIA	A&R TECHNICIAN	$ 25.52	$ 30.11
CARPENTER, MALIA	ADMINISTRATIVE SECRETARY	$ 25.53	$ 28.00
CERA, LINDA	ADMIN ASSISTANT	$ 47.36	$ 50.01

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
CHAVEZ, ROCIO	HR ANALYST 06-07/ SENIOR HR ANALYST 07-08		$ 44.28
CLAIR, MARK	INSTRUCTIONAL RESEARCH COORDINATOR	$ 47.41	$ 50.39
CONRAD, MICHELLE (MICKEY)	ACCOUNT TECHNICIAN I	$ 32.15	$ 32.85
COOPER, JEFF	EXECUTIVE VICE PRESIDENT	$ 90.93	LEFT DISTRICT
DACOSTA, DEBRA	ACCOUNT TECHNICIAN I	$ 35.99	$ 38.83
DANCE, TAMARA	A&R SPECIALIST	$ 39.62	$ 43.04
DORVAL, JUDI	CITATION SPECIALIST		$ 33.20
DREW, REBECCA	ADMIN SECRETARY II		$ 37.39
DUARTE, ELIZABETH	PLACEMENT SPECIALIST		$ 31.77
FERRAND, KATHY	HR ANALYST	$ 46.07	LEFT DISTRICT
FOSTER, SHERRI	COORDINATOR, PAYROLL & BENEFITS	$ 38.98	$ 55.51
FOXWORTHY, DIANE	FINANCIAL AIDE SPECIALIST	$ 40.23	$ 45.47
FOXWORTHY, DOUGLAS	FINANCIAL AIDE SPECIALIST/ A&R SPECIALIST 06-07	$ 39.58	$ 38.62
GARCIA, STEPHEN	FACILITIES, CONSTRUCTION CONTRACTS		$ 79.80
GREEN, MITCHELL		$ 51.36	LEFT DISTRICT
GREENE, ARLENE	MAINTENANCE CLERICAL TECHNICIAN	$ 45.84	$ 47.79
GREULICH, BILL	DIRECTOR OF PUBLIC INFORMATION		$ 71.48
GROOM, SHARON	DIRECTOR, FINANCIAL AID		$ 62.40
HENNING, LORIE	ACCOUNT TECHNICIAN I		$ 43.67

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
HOWARD, JOHN	INTERNAL AUDITOR		LEFT DISTRICT
HUSSING,CATHY	ACCOUNT TECHNICIAN I		$ 28.59
HYLTON, CHRIS	DIRECTOR, MAINTENANCE & OPERATIONS	$ 46.10	$ 60.75
JACKSON, RITA		$ 29.30	LEFT DISTRICT
JORDAN, ERNESTINE	FINANCIAL AIDE TECHNICIAN	$ 27.61	$ 33.98
KINGMAN, KELLY	ACCOUNT TECHNICIAN I		$ 28.59
LEWALLEN, WILLARD	V.P. STUDENT SERVICES	$ 90.13	$ 95.54
LEWIS, NANCY	ACCOUNT TECHNICIAN I		$ 28.59
LUTHER, PAT	DIRECTOR OF NURSING		$ 74.15
McCOMAS, ANNETTE	ADMINISTRATIVE ASSISTANT	$ 43.49	$ 51.49
MCCOY, TONYA	ACCOUNT TECHNICIAN I		$ 28.59
MENDOZA, HILDA	A&R TECHNICIAN- BILINGUAL		$ 28.59
MOHR, DIANE	OFFICE ASSISTANT	$ 24.57	$ 27.40
MONTGOMERY, PAT	STUDENT DEV. CTR. SPECIALIST		$ 35.88
MOON, GRETA	DIRECTOR, ADMISSION-RECORDS		$ 62.40
MORENO, CHRISTINA	SENIOR SYSTEMS ANALYST	$ 47.77	$ 52.51
MURRAY, JAMES (JIM)	FINANCIAL AIDE SPECIALIST	$ 36.44	$ 40.95
NAVARRETE, ELAINE	FINANCIAL AIDE SPECIALIST	$ 22.18	$ 20.68
NAVARRO, RAYMOND	SENIOR INSTRUCTIONAL ASSISTANT	$ 37.69	$ 40.16

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
O'NEILL, TOM	DEAN OF HUMANITIES	$ 71.16	LEFT DISTRICT
OSBORNE, LORI	A&R TECHNICIAN	$ 30.93	$ 35.77
PENLAND, PAMELA	ADMINISTRATIVE SECRETARY		$ 34.79
PRINGLE, MARY	DIRECTOR OF FISCAL SERVICES		$ 81.68
PRINGLE, WILLIE	DIRECTOR OF STUDENT SERVICES	$ 70.66	$ 79.88
PRYSTOWSKY, RICHARD	EXECUTIVE VICE PRESIDENT	$ 86.58	LEFT DISTRICT
QUESADA, GABRIELA	STUDENT DEV. CTR. SPECIALIST		$ 31.06
REYES-GARCIA, RENEE	ACCOUNT TECHNICIAN I		$ 33.44
RICHARDS, ROBBIE	FINANCIAL AID SPECIALIST	$ 39.58	$ 44.53
ROOPELATO, JANET	SHORT TERM HOURLY		$ 7.50
RUDE, JOHN	DEAN, HUMANITIES, ARTS, SOCIAL SERVICES	$ 74.08	$ 82.09
RYAN, GREG	ASSOCIATE DIRECTOR, FA		$ 46.38
SCHMIDT, BILL	INTERIM HR DIRECTOR	$ 76.78	LEFT DISTRICT
SEWELL, ROBERT	DIRECTOR OF AUXILIARY SERVICES		$ 73.79
SHARP, ANNMARIE	ACCOUNT TECHNICIAN I	$ 33.83	$ 33.90
SNELL-GONZALES, SHIRLEY	ADMINISTRATIVE ASSISTANT		$ 46.52
SPENCER, PATRICIA	SUPERINTENDENT/PRESIDENT	$ 125.55	LEFT DISTRICT
SUDERNO, JEAN	A&R TECHNICIAN	$ 30.93	$ 32.68
THOMAS, JACK	CHIEF OF POLICE		$ 66.48

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
TORTORICI, MARIANNE	DEPUTY SUPT./EXEC VICE PRESIDENT, INSTRUCTION		$ 95.09
UNDERWOOD, STARLA	FINANCIAL AIDE SPECIALIST	$ 39.01	$ 42.19
VIGIL, DONNA	A & R TECHNICIAN		$ 33.78
WILLINGHAM, LAEL	ADMINI ASSISTANT		$ 54.72
WILSON, CINDY	HR ANALYST	$ 43.99	$ 47.81
ZELLERS, LOUIS	INTERM SUPT./PRESIDENT		106.98

Highlighted data is for FY: 06-07
See actual timesheets below schedule

Date	Conf	# of BOG hr.	Travel cost
Elaine Navarrete			
3/29/2004	Datatel 03/04	2	9
10/13/2004	Datatel 04/05	6	200
11/4/2004	CA-C	2	21
12/9/2005	cccsfaaa 05/06	6	179
Pearl Bandringa			
Date	Conf	# of BOG hr.	Travel cost
4/3/2007	cccsfaaa	2	27
Delia Snead			
Date	Conf	# of BOG hr.	Travel cost
10/11/2005	3CDUG	8	120
Greg Ryan			
Date	Conf	# of BOG hr.	Travel cost
4/3/2007	cccsfaaa	2	27
Robbie Richards			
Date	Conf	# of BOG hr.	Travel cost
4/19/2006	cccsfaaa	4	10
10/5/2005	New FAD	8	155
6/13/2006	New FAD	6	95
10/3/2006	New FAD	10	206
6/12/2006	casfaa	2	5
12/1/2006	cccsfaaa	6	99
12/3/2006	cccsfaaa	6	108
Starla Underwood			
Date	Conf	# of BOG hr.	Travel cost
11/8/06/	3cdug	6	77
Sharon Groom			
Date	Conf	# of BOG hr.	Travel cost
5/21/2002	FA WS	2	8

Shar ?. Broom (cont) — $??

	Date	Conf	# of BOG hr.	Travel cost
	6/7/2002	cccsfaaa	4	96
	4/11/2003	cccsfaaa	2	8
	9/21/2004	NewFA	4	144
	10/13/2004	3cug	6	150
	11/4/2004	CAClient	2	8
	6/20/2005	FADIRtrn	8	180
	12/1/2006	cccsfaaa	6	103
	12/3/2006	casfaa	6	119
Lilia Sanchez	Date	Conf	# of BOG hr.	Travel cost
	4/19/2006	sp fling	4	31
Doug Foxworthy	Date	Conf	# of BOG hr.	Travel cost
	3/29/2006	Datatel	2	9
	4/5/2006	CCCAPPL	2	0
	11/4/2004	Caclient	2	8
Sandy Clark	Date	Conf	# of BOG hr.	Travel cost
	3/22/2002	region IX	2	22
	3/11/2002	safers	8	202
	2/25/2002	FA Dir	12	95
	12/14/2001	cccsfaaa	14	413
	4/1/2002	IX	8	204
	8/26/2003	cccsfaaa	5	98
	6/23/2003	chugadug	8	80
	6/19/2003	IX	2	25
	6/2/2003	cccsfaaa	8	110
	4/25/2003	IX	2	31
	4/24/2003	datatel	2	123
	4/6/2003	COCO	10	304
	2/28/2003	IX	2	31
	12/12/2002	cccsfaaa	14	280
	8/23/2002	IX	2	17
	6/14/2002	IX	2	16

Sand Clark (cont'd)

6/6/2002	cccsfaaa	4	43
11/3/2003	cccsfaaa	4	93
9/26/2003	IX	2	18
4/6/2004	cccsfaaa	2	29
4/30/2004	IX	2	18
6/1/2004	IX	2	18

Gina Janisko

Date	Conf	# of BOG hr.	Travel cost
3/29/2004	datatel	2	9
10/13/2004	3cdug	6	200
11/4/2004	ca client	2	8

Jim Murray

Date	Conf	# of BOG hr.	Travel cost
5/21/2002	FAWS	2	8
4/24/2003	datatel	2	9
11/4/2004	CG	2	10
11/6/2006	datatel	8	374

Schedule 5

Victor Valley Community College District
308/95 Enrollment Collection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received			Not provided by client.					$ 1,413,873
p/E.C. 76300 (c)	2% of Revenue Rec'd.			See CCCCO website data at beginning of workpapers.					$ 28,277
1.8-4 line 4A	Enrollment Fees Waived	$878,274	$1,091,767	$1,022,655	$1,118,851	$2,255,074	$ 2,436,122	$ 2,395,039	$ 2,113,717
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722	$ 47,901	$ 42,274
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 61,479	For 00-01 through 05-06 - unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 26.00	$ 24.50
Total # of credits	Line 4A divided by unit fee		99,251	92,968	101,713	143,910	104,375	92,116	86,274
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981	$ 83,826	$ 78,509
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 17,565	$ 21,835	$ 20,453	$ 22,377	$ 45,101	$ 48,722	$ 47,901	$ 42,274
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 61,479							
1.8-4 5.	Credit Units Waived		$ 90,318	$ 84,601	$ 92,559	$ 130,958	$ 94,981	$ 83,826	$ 78,509
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 79,044**	**$ 112,153**	**$ 105,054**	**$ 114,936**	**$ 176,059**	**$ 143,703**	**$ 131,727**	**$ 120,783**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 2006-07Summer, fall and winter $26.00, spring $20.00. ($26.00+$26.00+$26.00+$20.00=Average of $24.50)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: Victor Valley
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$33,521,671	$28,500,300	$2,906,972	$31,407,272
ENROLL FEE ADMIN (2%)	51,049	46,965	4,084	51,049
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	143,023	0	143,023	143,023
S.F.A.A.	433,047	398,404	34,643	433,047
E.O.P.S.	938,314	858,794	79,520	938,314
C.A.R.E.	269,771	248,190	21,581	269,771
D.S.P.S.	842,785	775,363	67,422	842,785
STATE HOSPITALS	0	0	0	0
CALWORKS	545,197	450,982	94,215	545,197
MATRICULATION (CREDIT)	564,884	515,554	49,330	564,884
MATRIC. (NONCREDIT)	31,366	28,856	2,510	31,366
FAC.& STAFF DIVERSITY	13,972	12,855	1,117	13,972
PART-TIME FAC. ALLO.	398,461	366,584	31,877	398,461
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	103,016	94,774	8,242	103,016
SCHDL. MAINT. & REPAIR	103,025	94,783	8,242	103,025
TANF	114,084	104,958	9,126	114,084
ECON. DEVELOPMENT	0	0	0	0
NURSING EDUCATION	293,587	187,985	105,602	293,587
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	-1,544,374	-1,393,874	-150,500	-1,544,374
ONE TIME FUNDS				
TRANSITION PAYMENT	5,534	4,828	706	5,534
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	182,883	182,883	0	182,883
BASIC SKILLS -REAPPROP	134,223	134,223	0	134,223
CAR. TECH. TRAILER BIL	325,693	325,693	0	325,693
GEN. PUR. TRAILER BILL	637,171	637,171	0	637,171
INST. MATERIAL TRAILER	384,484	384,484	0	384,484
SCHLD.MAINT. TRAILER B	384,484	384,484	0	384,484
FACULTY STAFF DEV	40,929	40,929	0	40,929
TOTAL	$38,970,237	$33,424,930	$3,430,908	$36,855,838

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Victor Valley Community College District
308/95 Enrollm[illegible]ee Collection and Waivers
Fiscal [illegible]. 1999-00 to 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.									
	EFCW-1 B. 1. b.									
	EFCW-1 B. 2. a.				$ 3,358.16	$ 2,958.30	$ 1,199.15	$ 2,398.18	$ 1,547.38	$ 3,622.78
	EFCW-1 B. 2. b.		$ 31,532.75	$ 37,515.97	$ 40,319.84	$ 46,608.89	$ 47,615.91	$ 47,733.49	$ 51,487.13	$ 62,496.92
	EFCW-1 B. 2. c.		$ 1,021.50	$ 1,064.25	$ 1,105.50	$ 1,127.50	$ 1,804.00	$ 2,706.00	$ 2,866.20	
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 32,554.25	$ 38,580.22	$ 44,783.50	$ 50,694.69	$ 50,619.06	$ 52,837.67	$ 55,900.71	$ 66,119.70
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$79,044.00	$112,153.00	$105,054.00	$114,936.00	$176,059.00	$143,703.00	$131,727.00	$120,783.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ (46,489.75)	$ (73,572.78)	$ (60,270.50)	$ (64,241.31)	$ (125,439.94)	$ (90,865.33)	$ (75,826.29)	$ (54,663.30)
	Total	**Forward to**								
4	**Enrollment Fee Waiver Offset to Claim**	**EFCW -1**	**$ 32,554.25**	**$ 38,580.22**	**$ 44,783.50**	**$ 50,694.69**	**$ 50,619.06**	**$ 52,837.67**	**$ 55,900.71**	**$ 66,119.70**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Victor Valley College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 11, 2008 12:44:04

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	73	53,148
BOGW - Part B based on income standards	378	281,914
BOGW - Part C based on financial need	6,512	2,203,209

total 6,963

Total Amount = $ 2,538,271

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 11, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8918

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Victor Valley Community College District CC 36175

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Victor Valley Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007
308/95	Enrollment Fee Collection and Waivers	2007-2008

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC36175

Claimant Name: Victor Valley Community College District

County of Location: San Bernardino

Street Address or P.O. Box: 18422 Bear Valley Road

City: Victorville | State: CA | Zip Code: 92395-5850

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒

Fiscal Year of cost	(06)	(12) 2006-2007	(30) EFCW-1, (06)	60
Total Claimed Amount	(07)	(13) $ 436,282	(31) EFCW-1, (07)	206,078
Less: 10% Late Penalty, not to exceed $10,000		(14) $ 10,000	(32) EFCW-1, (09)	51,049
Less: Prior Claim Payment Received		(15) $ -	(33) EFCW-1, (10)	66,120
Net Claimed Amount		(16) $ 426,282	(34)	
Due State	(08)	(17) $ 426,282	(35)	
Due to State		(18)	(36)	

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	281,253
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	3,623
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	62,497
(29) EFCW-1, (04)(B)(2)(c)(f)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

Mary Prinzle — 2-9-09

~~Type or Baron~~ MARY PRINZLE — DIRECTOR, FISCAL SVCS

Type or Print Name — ~~Vice President, Administrative Services~~ Title

Name of Contact Person for Claim

Ter[illegible]nd Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

FAM-27 (New 04/06)

rogram 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

Claim

or Valley Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

Leave Blank

ct Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
alculating and collecting enrollment ees	$ 281,253.01	$ -	$ -	$ -	$ -	$ 281,253.01
. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
repar istrict policies & procedures r § IV	$ -	$ -	$ -	$ -	$ -	$ -
taff training (One time per employee)	$ 2,482.78	$ -	$ -	$ -	$ 1,140.00	$ 3,622.78
. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
dopting procedures, recording, and aintaining records	$ -	$ -	$ -	$ -	$ -	$ -
aiving student fees	$ 62,496.92	$ -	$ -	$ -	$ -	$ 62,496.92
porting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
Direct Costs	$ 346,232.71	$ -	$ -	$ -	$ 1,140.00	$ 347,372.71

Costs		
ect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	59.52%
Indirect Costs	[Line (06) x line (05)(a)]	$ 206,077.71
Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 553,450.42
uction		
Enrollment Fee Revenue offset		$ 51,049.00
Enrollment Fee Waiver offsets		$ 66,119.70
laim mount	[Line (08) - {Line (09) + Line (10)}]	$ 436,281.72

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Various	$34.05	3,355.3	$ 114,247.97				
Calculating total enrollment fee to be collected Enrollment Office Staff Various	$34.05	1,069.0	$ 36,399.45				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Various	$34.05	2,475.2	$ 84,280.56				
Updating written and computer records for enrollment fee information Enrollment Office Staff Various	$34.05	1,360.5	$ 46,325.03				
) Total ☒ Subtotal ☐		Page 1 of 1	$ 281,253.01	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Registration fees for enrollment fee waiver seminars								
Registration Costs, Elaine N Registration Fees		$1.00	27.0					$ 27.00
Registration Costs, Delia Sn Registration Fees		$1.00	27.0					$ 27.00
Registration Costs, Greg Ry Registration Fees		$1.00	413.0					$ 413.00
Registration Costs, Robbie F Registration Fees		$1.00	77.0					$ 77.00
Registration Costs, Sharon (Registration Fees		$1.00	222.0					$ 222.00
Registration Costs, Jim Murr Registration Fees		$1.00	374.0					$ 374.00
Train district staff or attend training to implement procedures for waiver eligibility determination								
Groom, Sharon	Financial Aid Director	$62.40	12.0	$ 748.80				
Murray, Jim	Financial Aid Specialist	$40.95	8.0	$ 327.60				
Navarrete, Elaine	Financial Aid Specialist	$20.68	2.0	$ 41.36				
Richards, Robbie	Financial Aid Specialist	$44.53	6.0	$ 267.18				
Ryan, Greg	Associate Director, Financial Aid	$46.39	22.0	$ 1,020.36				
Snead, Lelia	Financial Aid Specialist	$38.74	2.0	$ 77.48				
Total ☒ Subtotal ☐			Page 1 of 1	$ 2,482.78	$ -	$ -	$ -	$ 1,140.00

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Victor Valley Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$33.87	406.2	$ 13,757.99				
Receiving waiver applications Financial Aid Office Staff Various	$33.87	313.3	$ 10,611.47				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$33.87	661.5	$ 22,405.01				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$33.87	464.2	$ 15,722.45				
) Total ☒ Subtotal ☐		Page 1 of 1	$ 62,496.92	$ -	$ -	$ -	$ -

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006-2007
rt by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	3,355.30	Enrollment Office Staff	Various	$34.05	$114,247.97	Referencing student accounts and records	Calculating and collecting enroll
06-07	1,069.00	Enrollment Office Staff	Various	$34.05	$36,399.45	Calculating total enrollment fee to be collected	Calculating and collecting enroll
06-07	2,475.20	Enrollment Office Staff	Various	$34.05	$84,280.56	Answering student's questions regarding enrollment fee collection	Calculating and collecting enroll
06-07	1,360.50	Enrollment Office Staff	Various	$34.05	$46,325.03	Updating written and computer records for enrollment fee information	Calculating and collecting enroll
	8,260.00	**Enrollment Office Staff Total**			$281,253.01		
06-07	406.20	Financial Aid Office Staff	Various	$33.87	$13,757.99	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	313.30	Financial Aid Office Staff	Various	$33.87	$10,611.47	Receiving waiver applications	Waiving student fees
06-07	661.50	Financial Aid Office Staff	Various	$33.87	$22,405.01	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	464.20	Financial Aid Office Staff	Various	$33.87	$15,722.45	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,845.20	**Financial Aid Office Staff Total**			$62,496.92		
12/1/2006	6.00	Groom, Sharon	Financial Aid Director	$62.40	$374.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee wa
12/3/2006	6.00	Groom, Sharon	Financial Aid Director	$62.40	$374.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee wa
	12.00	**Groom, Sharon Total**			$748.80		
11/6/2006	8.00	Murray, Jim	Financial Aid Specialist	$40.95	$327.60	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee wa
	8.00	**Murray, Jim Total**			$327.60		
4/3/2007	2.00	Navarrete, Elaine	Financial Aid Specialist	$20.68	$41.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee wa
	2.00	**Navarrete, Elaine Total**			$41.36		
4/3/2007	27.00	Registration Costs, Delia Sneed	Registration Fees	$1.00	$27.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wa
	27.00	**Registration Costs, Delia Sneed Total**			$27.00		
4/3/2007	27.00	Registration Costs, Elaine Navarrete	Registration Fees	$1.00	$27.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wa
	27.00	**Registration Costs, Elaine Navarrete Total**			$27.00		
10/3/2006	206.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$206.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wa
12/1/2006	99.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$99.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wa
12/3/2006	108.00	Registration Costs, Greg Ryan	Registration Fees	$1.00	$108.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wai
	413.00	**Registration Costs, Greg Ryan Total**			$413.00		
11/6/2006	374.00	Registration Costs, Jim Murray	Registration Fees	$1.00	$374.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wai
	374.00	**Registration Costs, Jim Murray Total**			$374.00		
11/8/2006	77.00	Registration Costs, Robbie Richards	Registration Fees	$1.00	$77.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wai
	77.00	**Registration Costs, Robbie Richards Total**			$77.00		
12/1/2006	103.00	Registration Costs, Sharon Groom	Registration Fees	$1.00	$103.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wai
12/3/2006	119.00	Registration Costs, Sharon Groom	Registration Fees	$1.00	$119.00	Registration fees for enrollment fee waiver seminars	Staff training - enrollment fee wai
	222.00	**Registration Costs, Sharon Groom Total**			$222.00		
11/8/2006	6.00	Richards, Robbie	Financial Aid Specialist	$44.53	$267.18	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
	6.00	**Richards, Robbie Total**			$267.18		
10/3/2006	10.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$463.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
12/1/2006	6.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$278.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
12/3/2006	6.00	Ryan, Greg	Associate Director, Financial Aid	$46.38	$278.28	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
	22.00	**Ryan, Greg Total**			$1,020.36		
4/3/2007	2.00	Snead, Lelia	Financial Aid Specialist	$38.74	$77.48	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiv
	2.00	**Snead, Lelia Total**			$77.48		
	11,297.20	**Grand Total**			$347,372.71		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$26,264,404		$26,264,404	$1,061,828	$25,202,576
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	745,374		745,374		745,374
Course and Curriculum Development	6020	20		20		20
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	1,247,390		1,247,390	18,983	1,228,407
Instructional Support Services	6100					
Learning Center	6110					
Library	6120	901,601		901,601	107,376	794,225
Media	6130	136,994		136,994	17,669	119,325
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	761,448		761,448	16,418	745,030
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	724,599		724,599		724,599
Matriculation and Student Assessment	6320	664,280		664,280	6,688	657,592
Transfer Programs	6330					
Career Guidance	6340	63,215		63,215		63,215
Other Student Counseling and Guidance	6390	275,679		275,679	20,932	254,747
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,040,533		1,040,533	18,726	1,021,807
Subtotal		$32,825,537	$0	$32,825,537	$1,268,620	$31,556,917

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Victor Valley Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,349,886	$450,639	$899,247	$14,101	$885,146
Health Services	6440					
Student Personnel Admin.	6450	2,449,141		2,449,141	385,724	2,063,417
Financial Aid Administration	6460	1,130,707		1,130,707	808	1,129,899
Job Placement Services	6470	94,837		94,837	4,256	90,581
Veterans Services	6480	933		933		933
Miscellaneous Student Services	6490	528,133		528,133		528,133
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,055,074		1,055,074	1,055,074	0
Custodial Services	6530	961,613		961,613	961,613	0
Grounds Maintenance and Repairs	6550	448,097		448,097	448,097	0
Utilities	6570	1,574,852		1,574,852	1,574,852	0
Other	6590	232,423		232,423	232,423	0
Planning, Policy Making, and Coordination	6600	4,179,557		4,179,557	4,179,557	0
General Inst. Support Services	6700					
Community Relations	6710	144,923		144,923	144,923	0
Fiscal Operations	6720	1,032,550		1,032,550	1,032,550	0
Human Resources Management	6730	1,165,351		1,165,351	1,165,351	0
Noninstructional Staff Benefits & Incentives	6740	1,187,093		1,187,093	1,187,093	0
Staff Development	6750	45,564		45,564	45,564	0
Staff Diversity	6760	16,953		16,953	16,953	0
Logistical Services	6770	2,676,600		2,676,600	2,676,600	0
Management Information Systems	6780	1,422,445		1,422,445	1,422,445	0
Subtotal		$54,522,269	$450,639	$54,071,630	$17,816,604	$36,255,026

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST
INDIRECT COST RATE FOR COMMUNITY COLLEGES

FORM FAM-29C

(01) Claimant: Victor Valley Community College District

(02) Period of Claim: 2006-2007

(03) Expenditures by Activity

(04) Allowable Costs

Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	1,443,104		1,443,104	1,443,104	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	211,598		211,598	10,552	201,046
Community Use of Facilities	6830	122,367		122,367		122,367
Economic Development	6840					
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960	2,500		2,500	2,500	0
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090					
Depreciation or Use Allowance - Building					1,653,403	
Depreciation or Use Allowance - Equipment					844,606	
(05) Total		$56,301,838	$450,639	$55,851,199	$21,770,769	$36,578,439
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				59.52%		

(07) Notes

VICTOR VALLEY COMMUNITY COLLEGE DISTRICT

NOTES TO FINANCIAL STATEMENTS, Continued
June 30, 2007

NOTE 4 – CAPITAL ASSETS

The following is a schedule of capital asset additions and deletions for the year ending June 30, 2007:

Governmental Activities	Beginning Balance	Additions/ Adjustments	Deletions	Ending Balance
Land	$ 766,682	$ -	$ -	$ 766,682
Construction in progress	4,267,036	15,055,464	-	19,322,500
				-
Land Improvements	5,198,811	41,994	-	5,240,805
Buildings	50,244,412	1,128,652	-	51,373,064
Equipment	7,234,977	2,047,273	-	9,282,250
Total	67,711,918	18,273,383	-	85,985,301
Less Accumulated Depreciation:				
Land Improvements	2,880,782	129,936	-	3,010,718
Buildings	15,090,693	1,653,403	-	16,744,096
Equipment	5,253,493	844,606	-	6,098,099
Total depreciation	23,224,968	2,627,945	-	25,852,913
Total Capital Assets, net	$ 44,486,950	$ 15,645,438	$ -	$ 60,132,388

NOTE 5 – INTERFUND TRANSACTIONS

Interfund Receivables/Payables (Due to/Due From)
Interfund receivables and payable balances consist of amounts owed between funds as a result of the time lag between the date that: (1) interfund goods and services are provided or reimbursable expenditures occur; (2) transactions recorded in the accounting system; and (3) payments between funds occur. These interfund transactions have been eliminated through consolidation within the entity-wide financial statements.

Operating Transfers
Operating transfers between District are used to: (1) move revenues from the fund that statute or budget requires to collect them to the fund that statute or budget requires to expend them; and (2) move receipts restricted to debt service from the funds collecting the receipts to the debt service fund as debt service payments become due, to finance various programs accounted for in other funds in accordance with budgetary authorizations. These operating transfers have been eliminated through consolidation within the entity-wide financial statements.

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 31, 2007

CERTIFIED MAIL # 7006 3450 0000 3941 8574

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
West Kern Community College District CC 15255

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for West Kern Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D. J. Bramwell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC15255

(02) Claimant Name: West Kern Community College District

County of Location: Kern

Street Address or P.O. Box: 29 Emmons Park Drive

City: Taft | State: CA | Zip Code: 93268

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 70,205
Less: 10% Late Penalty		(14) $ 7,020
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 63,184
Due from State	(08)	(17) $ 63,184
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	43,127
(25) EFCW-1, (04)(B)(1)(a)(f)	22
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	1,085
(28) EFCW-1, (04)(B)(2)(b)(f)	35,132
(29) EFCW-1, (04)(B)(2)(c)(f)	2,359
(30) EFCW-1, (06)	38
(31) EFCW-1, (07)	31,317
(32) EFCW-1, (09)	11,448
(33) EFCW-1, (10)	31,389
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date**

William H. Duncan IV
Type or Print Name

Executive Vice President
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 37	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: West Kern Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ] Fiscal Year 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 43,126.96	$ -	$ -	$ -	$ -	$ 43,126.96
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 21.76	$ -	$ -	$ -	$ -	$ 21.76
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 1,085.48	$ -	$ -	$ -	$ -	$ 1,085.48
b. Waiving student fees	$ 35,131.80	$ -	$ -	$ -	$ -	$ 35,131.80
c. Reporting BOG fee waiver data to CCC	$ 2,358.76	$ -	$ -	$ -	$ -	$ 2,358.76
05) Total Direct Costs	$ 81,724.76	$ -	$ -	$ -	$ -	$ 81,724.76

ndirect Costs		
06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	38.32%
07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 31,316.93
08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 113,041.69
ost Reduction		
09) Less: Enrollment Fee Revenue offset		$ 11,448.00
0) L[illegible] Enrollment Fee Waiver offsets		$ 31,389.00
1) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 70,204.69

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Kern Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$12.92	1,001.4	$ 12,938.09				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$12.92	1,112.7	$ 14,376.08				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$12.92	1,223.9	$ 15,812.79				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 43,126.96	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
ast Kern Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Roberts, Gayle Director, Financial Aid	$43.51	0.5	$ 21.76				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 21.76	$ -	$ -	$ -	$ -

New 04/06

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS ACTIVITY COST DETAIL	FORM EFCW-2

(01) Claimant
West Kern Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance							
Kasper, Kevin — Programmer	$44.64	10.0	$ 446.40				
Sharp, Jodi — Financial Aid Tech. II	$26.30	10.0	$ 263.00				
Wingler, Barbara — Financial Aid Tech. II	$31.34	12.0	$ 376.08				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 1,085.48	$ -	$ -	$ -	$ -

New 04/06

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Kern Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waiving Enrollment Fees	$24.37	582.4	$ 14,193.09				
Receiving waiver applications Financial Aid Office Staff Waiving Enrollment Fees	$24.37	205.4	$ 5,005.60				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waiving Enrollment Fees	$24.37	415.8	$ 10,133.05				
ing students of additional documentation requirements and how to obtain information Financial Aid Office Staff Waiving Enrollment Fees	$24.37	137.8	$ 3,358.19				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waiving Enrollment Fees	$24.37	100.2	$ 2,441.87				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 35,131.80	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
East Kern Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Nicholas, Jim	Accountant/Director, Business Services	$36.82	5.5	$ 202.51				
Roberts, Gayle	Director, Financial Aid	$43.51	15.0	$ 652.65				
Kasper, Kevin	Programmer	$44.64	20.0	$ 892.80				
Teel, Amber	Information Systems Tech.	$30.54	20.0	$ 610.80				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 2,358.76	$ -	$ -	$ -	$ -

New 04/06

West Kern Community College District
308/95 ENROLLMENT F[illegible]OLLECTIONS/WAIVERS
2[illegible]05
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	1,001.40	Enrollment Office Staff	Collecting Fees	$12.92	$12,938.09	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	1,112.70	Enrollment Office Staff	Collecting Fees	$12.92	$14,376.08	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	1,223.90	Enrollment Office Staff	Collecting Fees	$12.92	$15,812.79	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	3,338.00	**Enrollment Office Staff Total**			$43,126.96		
04-05	582.40	Financial Aid Office Staff	Waiving Enrollment Fees	$24.37	$14,193.09	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	205.40	Financial Aid Office Staff	Waiving Enrollment Fees	$24.37	$5,005.60	Receiving waiver applications	Waiving student fees
04-05	415.80	Financial Aid Office Staff	Waiving Enrollment Fees	$24.37	$10,133.05	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	137.80	Financial Aid Office Staff	Waiving Enrollment Fees	$24.37	$3,358.19	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
04-05	100.20	Financial Aid Office Staff	Waiving Enrollment Fees	$24.37	$2,441.87	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,441.60	**Financial Aid Office Staff Total**			$35,131.80		
04-05	10.00	Kasper, Kevin	Programmer	$44.64	$446.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	20.00	Kasper, Kevin	Programmer	$44.64	$892.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	30.00	**Kasper, Kevin Total**			$1,339.20		
04-05	5.50	Nicholas, Jim	Accountant/Director, Business Services	$36.82	$202.51	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	5.50	**Nicholas, Jim Total**			$202.51		
04-05	0.50	Roberts, Gayle	Director, Financial Aid	$43.51	$21.76	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	15.00	Roberts, Gayle	Director, Financial Aid	$43.51	$652.65	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	15.50	**Roberts, Gayle Total**			$674.41		
04-05	10.00	Sharp, Jodi	Financial Aid Tech. II	$26.30	$263.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	10.00	**Sharp, Jodi Total**			$263.00		
04-05	20.00	Teel, Amber	Information Systems Tech.	$30.54	$610.80	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	20.00	**Teel, Amber Total**			$610.80		
04-05	12.00	Wingler, Barbara	Financial Aid Tech. II	$31.34	$376.08	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**Wingler, Barbara Total**			$376.08		
	4,872.60	**Grand Total**			$81,724.76		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$5,919,888		$5,919,888	$59,648	$5,860,240
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	341,530		341,530	2,630	338,900
Course and Curriculum Development	6020	382,674		382,674		382,674
Academic/Faculty Senate	6030	7,388		7,388		7,388
Other Instructional Administration & Instructional Governance	6090	3,305		3,305		3,305
Instructional Support Services	6100					
Learning Center	6110	250,780		250,780	1,054	249,726
Library	6120	263,134		263,134	39,692	223,442
Media	6130	768		768		768
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	82,249		82,249		82,249
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	329,239		329,239	36,957	292,282
Matriculation and Student Assessment	6320	323,441		323,441	46,298	277,143
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	270,143		270,143	1,769	268,374
Subtotal		$8,174,539	$0	$8,174,539	$188,048	$7,986,491

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$391,502	$36,484	$355,018	$120	$354,898
Health Services	6440					
Student Personnel Admin.	6450	202,311		202,311	6,004	196,307
Financial Aid Administration	6460	350,092		350,092	14,259	335,833
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	326,985		326,985	16,273	310,712
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	354,036		354,036	354,036	0
Custodial Services	6530	183,540		183,540	183,540	0
Grounds Maintenance and Repairs	6550	36,583		36,583	36,583	0
Utilities	6570	403,793		403,793	403,793	0
Other	6590	264,251		264,251	264,251	0
Planning, Policy Making, and Coordination	6600	543,546		543,546	543,546	0
General Inst. Support Services	6700					
Community Relations	6710					
Fiscal Operations	6720	552,995		552,995	552,995	0
Human Resources Management	6730	168,342		168,342	168,342	0
Noninstructional Staff Benefits & Incentives	6740	226,811		226,811	226,811	0
Staff Development	6750					
Staff Diversity	6760					
Logistical Services	6770	198,028		198,028	198,028	0
Management Information Systems	6780	757,538		757,538	757,538	0
Subtotal		$13,134,892	$36,484	$13,098,408	$3,914,167	$9,184,241

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	-11,785		-11,785	-11,785	0
Community Services and Economic Development	6800					
Community Recreation	6810	55,259		55,259		55,259
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	165,346		165,346	3,357	161,989
Other Community Services & Economic Development	6890	276,718		276,718	236,923	39,795
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920					
Farm Operations	6930					
Food Services	6940	118		118		118
Parking	6950	14		14		14
Student and Co-curricular Activities	6960	9,765		9,765		9,765
Student Housing	6970	132,582		132,582	254	132,328
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	1,620,233		1,620,233	38,919	1,581,314
Physical Property Acquisitions	7100	96,157		96,157	96,157	0
(05) Total		$15,479,299	$36,484	$15,442,815	$4,277,992	$11,164,823
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				38.32%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
ual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	224,751	268	6,375	4,137		235,531
Business and Management	0500	263,902	19,830	1,644			285,376
Communications	0600	21,337		227			21,564
Computer and Information Science	0700	190,161		8,169	17,319		215,649
Education	0800	222,544	277,152	77,112	4,720		581,528
Engineering and Related Industrial Tech.	0900	141,275	7,199	8,486	8,196		165,156
Fine and Applied Arts	1000	127,326	510	3,004	851		131,691
Foreign Language	1100	130,065		262			130,327
Health	1200	498,852	189,355	835,587	20,912		1,544,706
Consumer Education and Home Economics	1300	131,218	39,296	8,004	1,103		179,621
Law	1400						
Humanities (Letters)	1500	486,604		1,769	107		488,480
Library Science	1600						
Mathematics	1700	495,480	51,890	5,603	290		553,263
Military Studies	1800						
Physical Sciences	1900	45,944		6,465	1,718		54,127
Psychology	2000						
Public Affairs and Services	2100	35,208					35,208
Social Sciences	2200	382,384	1,494	825			384,703
Commercial Services	3000			59,537			59,537
Interdisciplinary Studies	4900	473,439	115,876	-14,706	295		574,904
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	278,517					278,517
Subtotal - Instructional Activities	**599**	4,149,007	702,870	1,008,363	59,648		5,919,888

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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West Kern Community College District 690 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010						
Course and Curriculum Development	6020		333,788	5,112	2,630		341,530
Academic/Faculty Senate	6030		339,406	43,268			382,674
Other Instruct. Admin. & Instruct. Governance	6090		7,288	100			7,388
Subtotal - Instructional Administration	**6000**		3,305				3,305
Instructional Support Services (6100)			683,787	48,480	2,630		734,897
Learning Center	6110	72,841	174,350	2,535	1,054		250,780
Library	6120		151,921	71,521	39,692		263,134
Media	6130		137	631			768
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	72,841	326,408	74,687	40,746		514,682
Admissions and Records	**6200**		77,552	4,697			82,249
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		259,271	33,011	36,957		329,239
Matriculation and Student Assessment	6320		243,381	33,762	46,298		323,441
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		502,652	66,773	83,255		652,680

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Kern Community College District | 690 | District Code No

Annual Financial and Budget Report

Expenditures by Activity

S10 Gene Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2003-04**

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		254,870	13,504	1,769		270,143
Extended Opportunity Prgms. & Services (EOPS)	6430		244,436	110,462	120	36,484	391,502
Health Services	6440						
Student Personnel Administration	6450		182,024	14,283	6,004		202,311
Financial Aid Administration	6460		287,820	48,013	14,259		350,092
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490						
Subtotal - Other Student Services	**6400**		279,675	31,037	16,273		326,985
Operation and Maintenance of Plant (6500)			1,248,825	217,299	38,425	36,484	1,541,033
Building Maintenance and Repairs	6510						
Custodial Services	6530		280,618	63,242	10,176		354,036
Grounds Maintenance and Repairs	6550		170,056	12,924	560		183,540
Utilities	6570		18,915	16,625	1,043		36,583
Other Operation and Maintenance of Plant	6590			403,793			403,793
Subtotal - Operation and Maintenance of Plant	**6500**			32,899	231,352		264,251
Planning, Policymaking, and Coordination	**6600**		469,589	529,483	243,131		1,242,203
			377,457	163,643	2,446		543,546

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

17 FEB 2005

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West Kern Community College District | 690 | District Code No.

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2003-04**

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED					
		SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710						
Fiscal Operations	6720		462,410	81,877	8,708		552,995
Human Resources Management	6730		139,147	25,899	3,296		168,342
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		226,811				226,811
Staff Development	6750						
Staff Diversity	6760						
Logistical Services	6770		52,843	145,185			198,028
Management Information Systems	6780		635,449	45,951	76,138		757,538
Other General Institutional Support Services	6790		(13,785)	2,000			(11,785)
Subtotal - General Institutional Support Services	**6700**		1,502,875	300,912	88,142		1,891,929
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		43,994	11,265			55,259
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840		7,437	154,552	3,357		165,346
Other Community Svcs. & Economic Development	6890		13,659	26,136	236,923		276,718
Subtotal - Community Services	**6800**		65,090	191,953	240,280		497,323

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFO[illegible] COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

Activity Classification	State Use Only (EDP)	S10 GENERAL FUND - COMBINED: SALARIES and BENEFITS Instructional* (1)	SALARIES and BENEFITS Noninstructional** (2)	Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920						
Farm Operations	6930						
Food Services	6940		43	75			118
Parking	6950			14			14
Student and Co-curricular Activities	6960		9,689	76			9,765
Student Housing	6970		132,143	185	254		132,582
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		141,875	350	254		142,479
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090			1,581,314		38,919	1,620,233
Subtotal - Auxiliary Operations	**7000**			1,581,314		38,919	1,620,233
Physical Property and Related Acquisitions (7100)	**7100**		1,136	6,000	89,021		96,157
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					4,971	4,971
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					4,971	4,971
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	4,221,848	6,100,116	4,193,954	887,978	80,374	15,484,270

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CCFS-311 *(Rev. 6/2001, er)*
11/03/04 9:40AM

West Kern Community College District | 690 | District Code No.

Schedule 1A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	22,253
Avg. time p/account	2.7
Total Time (in minutes)	60083
Per Hour	60
Hours Worked **(** 11)**	**1001.4**
***EFC 2 (not provided, no substitute)**	
Avg. time p/student	2.7
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 12)**	**0.0**
***EFC 1**	22,253
Avg. time p/question	3
Total Time (in minutes)	66759
Per Hour	60
Hours Worked **(** 13)**	**1112.7**
***EFC 1**	22,253
Avg. time p/file	3.3
Total Time (in minutes)	73435
Per Hour	60
Hours Worked **(** 14)**	**1223.9**
***EFC 4 (not provided, no substitute)**	
Avg. time p/account	10
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 15)**	**0.0**
***EFC 5 (not provided, no substitute)**	
Avg. time p/student	5
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

***EFC Workload Multiplier (Client provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	4,659
Avg. time p/question	7.5
Total Time (in minutes)	34943
Per Hour	60
Hours Worked (** **21**)	**582.4**
***EFW 7**	3,006
Avg. time p/application	4.1
Total Time (in minutes)	12325
Per Hour	60
Hours Worked (** **22**)	**205.4**
***EFW 7**	3,006
Avg. time p/evaluation	8.3
Total Time (in minutes)	24950
Per Hour	60
Hours Worked (** **23**)	**415.8**
***EFW 8**	1,653
Avg. time p/application	5
Total Time (in minutes)	8265
Per Hour	60
Hours Worked (** **24**)	**137.8**
***EFW 7**	3,006
Avg. time p/application	2
Total Time (in minutes)	6012
Per Hour	60
Hours Worked (** **25**)	**100.2**
***EFW 8**	1,653
Avg. time p/application **(not provided)**	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 to 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2 and attachment, about 04-05 regarding COTOP for code 15, from Crystal Brown.
Findings:

		*Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Brown, Crystal	Lead Cashier/Collection Tech. (98-99 to 00-01)	4	4	3	3	5	5
Brown, Crystal	Lead Cashier/Collection Tech. (01-02 to 05-06)	2	2	3	3	5	5
Jewell, Maureen	Cashier II	2	2	3	4	5	5
Average (for 99-99 to 03-04, and 05-06)		**2.7**	**2.7**	**3.0**	**3.3**	**5.0**	**5.0**
Average (for 04-05)						**10.0**	

***EFC Workload Multiplier (Client Provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 to 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff performing Collection Fee functions.
Source: PHR provided by client on EFCW 1.4 forms and schedule 3AA.
Findings:

Ref #	Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Sch. 3AA	Brown, Crystal	Lead Cashier/Collections Tech.		$14.05	$13.37	$13.27	$14.11	$14.69	$15.72	$19.79
Sch. 3AA	Jewell, Maureen	Cashier II							$10.12	$18.20
	Average	*	**$13.38**	**$14.05**	**$13.37**	**$13.27**	**$14.11**	**$14.69**	**$12.92**	**$19.00**

Conclusion: Findings go forward to EFCW-2.

*** Note -- 98-99 PHR is 99-00's PHR divided by 1.05%.**

Schedule 3
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 thru 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier					
		6	7	7	8	7	
		**Activity Codes					
		21	22	23	24	25	26
Brown, Elizabeth Jill	EOPS/CARE Sr. Secretary	10	4	15			
Buddell, Shirly	Financial Aid Tech. II	5	2	2	5	2	
Ferguson, Anita	Financial Aid Outreach Clerk	6	2	4			
Nevarez, Gracie		6	2				
Rawls, Korina	Job Placement/Finacial Aid Clerk	8	4	3			
Sharp, Jodi	Financial Aid Tech. II	5	2	2	5	2	
Williams, Sandra	EOPS/CARE Sr. Secretary	15	15	30			
Wingler, Barbara	Financial Aid Tech. II	5	2	2	5	2	
Average		**7.5**	**4.1**	**8.3**	**5.0**	**2.0**	

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 to 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff performing Enrollment Fee Waiver functions.
Source: PHRs provided by client on EFCW 1.4 forms and schedule 3AA.
Findings:

Ref #	Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1	Brown, Elizabeth Jill	EOPS/CARE Sr. Sec./Academic Advisor	$21.63	$23.80	$26.69	$30.15	$32.81	$33.80	$35.24
2	Buddell, Shirly	Financial Aid Tech. II	$24.88	$28.20	$30.75				
3	Ferguson, Anita	Financial Aid Outreach Clerk						$14.36	$15.76
Sch. 3AA	Nevarez, Gracie						$8.43	$11.27	$17.57
Sch. 3AA and 4	Rawls, Korina	Job Placement/Finacial Aid Clerk	$18.86	$22.86	$21.84	$24.05	$21.77	$22.40	$46.81
Sch. 3AA	Sharp, Jodi	Financial Aid Tech. II					$12.96	$26.30	$29.48
5	Williams, Sandra	EOPS/CARE Sr. Secretary	$21.10	$23.34	$25.93	$28.13	$30.13	$31.09	$32.42
6	Wingler, Barbara	Financial Aid Tech. II			$23.80	$25.94	$28.87	$31.34	$33.55
	Average		**$21.62**	**$24.55**	**$25.80**	**$27.07**	**$22.50**	**$24.37**	**$30.12**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. 98-99 data for EFC 1 is headcount from CCCCO website. (see back-up for 98-99 in 98-99 workpapers, see rest of back-up in 05-06 workpapers)
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	9,188	16,316	22,084	22,849	21,440	19,271	22,253	
EFC 2	1.8-1 2.	Paid Enrollment fees								
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X							
EFC 4	1.8-2 1.	Delinquencies collections								
EFC 5	1.8-2 2.	Refunds								
EFW 6	1.8-3 1.	Waivers Requested	X	2,303	1,598	1,724	3,258	3,956	4,659	
EFW 7	1.8-3 2.	Waivers Approved	X -	1,486	1,031	1,112	2,102	2,552	3,006	
EFW 8	1.8-3 1-2	Waivers Denied	X	817	567	612	1,156	1,404	1,653	

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Tuesday, April 24, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2004 Summer Term

Data Current As Of April 24, 2012 02:36:38

Total Headcount	4,950

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California Home

Tuesday, April 24, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2004 Fall Term

Data Current As Of April 24, 2012 02:37:08

Total Headcount	7,310

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California Home

Tuesday, April 24, 2012

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2005 Spring Semester

Data Current As Of April 24, 2012 02:37:21

Total Headcount	8,610

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Kern Community College

Kevin Kasper — Employee Name

Programmer — Exact Position Title

Information Services — College/Department/Location

661-763-7794 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			10	10	10	10	10	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.			20	20	20	20	20	
TOTALS:			30	30	30	30	30	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kasper — Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WEST KERN CCD Fiscal Year: _____

Jim Nicholas — Employee Name
ACCOUNTANT / DIRECTOR OF BUSINESS SERVICES — Exact Position Title

BUSINESS SERVICES — Department/Location
(661) 763-7713 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

	Date:	Activity Code (circle one):	Describe the activity:	Time in Hours	
05-06	04/ 06	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	5.5
	08/ 05	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	4	
	01/ 06	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
	09/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
04-05	08/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	5.5
	01/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
	09/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
	08/ 04	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	4	
03-04	04/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	6.5
	01/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
	09/ 03	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5	
	08/ 03	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	5	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jim Nicholas Date 05/01/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Copy - see original in 05-06 workpapers - SMA

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Kern Community College

Gayle Roberts — Employee Name

Director of Financial Aid / Admissions — Exact Position Title

Financial Aid — College/Department/Location

661-763-7763 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Duties: reading updates from Chancellors office - Updating BOG manual, etc.

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1: Time spent by staff to prepare and update policies and								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:	1/2	1/2	1/2	1/2	1/2	1/2	1/2	
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.	15	15	15	15	15	15	15	
TOTALS:	15½	15½	15½	15½	15½	15½	15½	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gayle Roberts Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Copy originals in 04-05 work papers

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WKCC

Jodi Shay — Financial Aid Tech II
Employee Name — Exact Position Title

Financial Aid Office — 765-2424 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.						10		
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:						10		

started working Jan 06

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jodi Shay — Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Kern Community College

Amber Teel — Employee Name

Info Systems Technician — Exact Position Title

Information Service — College/Department/Location

661-763-7795 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.				20hrs	20hrs	20hrs		
TOTALS:				20	20	20		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Amber Teel — Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Kern Community College

Barbara Wingler — Employee Name

Financial Aid Tech II — Exact Position Title

Taft College — College/Department/Location

661 763-7702 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours							
	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.								
A. Enrollment Collection Process:								
B. Enrollment Waiver Process:								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.				12	12	12	12	
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.								
TOTALS:				12	12	12	12	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Wingler Date 4.27.06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Head Cashier/Collections Technician
Exact Position Title

06176377 13
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06
different system

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Head Cashier/Collection Technician
Exact Position Title

6617637713
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Different system

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

u have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD — District

BUSINESS OFFICE — Department/Location

MAUREEN JEWELL — Employee Name

CASHIER II — Exact Position Title

763-7713 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maureen Jewell Date 4/21/06

you have any questions, please contact _____, at _____

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For the **school year 04/05** WKCCD participated in the COTOP program; collections thru the franchise tax board. Two statements had to be mailed to each delinquent student. Specific COTOP forms were needed to report each student by type of debt. For these **1800** students the time should be calculated as follows:

Code 15 will be **10** minutes. Workload multiplier **4**.

Crystal Brown
Lead Cashier/Collections Technician

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

EOPS (Taft College - SRA (see EFCW 1.4))
Department/Location

Elizabeth Jill Brown
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

(661) 763-7812
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

EOPS w/ 235 students

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				235
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				—
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				—
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Jill Brown Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid Office
Department/Location

Taft College - SEA (see EFCW 1.4)

Shirly Boddell
Employee Name

Financial Aid Tech II
Exact Position Title

661-763-7762
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature No longer employed Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid
Department/Location

Taft College - 08/09 (use EFCW 1.7)

Anita C Ferguson
Employee Name

Financial Aid Outreach Clerk
Exact Position Title

661 763-7745
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

outreach clerk Avg Students

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	2				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature Anita C Ferguson Date 4/28/06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Migrant Education
Department/Location

Gracie Nevarez
Employee Name

Exact Position Title

661-763-7823
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	other
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				300 Student per YR
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gracie Nevarez Date 4/27/06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCC (see EFCW 1.4) — Financial Aid (Taft College - see EFCW 1.4) — Korina Rawls - see EFCW 1.4

District — Department/Location — Employee Name

Korina Rawls — Job Placement / Financial Aid Clerk

Exact Position Title

661 763 7782 — 12mo/11mo/10mo/hrly — Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Telephone # — Work year length(circle) — Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

In addition to Shirley & Barbara

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Korina Rawls — Date 4/28/06

you have any questions, please contact _____, at

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCC.
District

Financial Aid Office
Department/Location

Jodi Sharp
Employee Name

Financial Aid Tech. II
Exact Position Title

765-2424
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

westec students only

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	(7)	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				150 students
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jodi Sharp Date 4/27/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Taft College - pgms (see EFCW 1, 4)

West Kern Community College
District

EOPS/CARE Office
Department/Location

Sandra Williams
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

661-763-7723
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

TAFT College
Department/Location

Barbara Wingler
Employee Name

Financial Aid Tech II
Exact Position Title

661 763-7762
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Wingler Date 4.27.06

ú have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: West Kern Community College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer		4325	5367	5650	5232	4568	4901	
Fall		4823	7659	8255	8376	5865	7535	
Winter/ Intersession	—	—	—	—	—	—	—	
Spring		7168	9058	8944	7832	8838	9817	
Total		16,316	22084	22849	21440	19271	22253	
2. Number of students who paid enrollment fees:								
Summer								
Fall								
Winter/ Intersession	—	—	—	—	—	—	—	
Spring								
Total								
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								
Fall								
Winter/ Intersession	—	—	—	—	—	—	—	
Spring								
Total								

BOGG received

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Gayle Roberts
Employee Name: (print)

Director of Financial Aid/Admissions
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Statistical Data	FISCAL YEARS					
	99-00	00-01	01-02	02-03	03-04	04-05
1) #students enrolled each Fiscal Year not FTEs						
Summer	4325	5367	5650	5232	4568	4901
Fall	4823	7659	8255	8376	5865	7535
Winter						
Spring	7168	9058	8944	7832	8838	9817
Total	16316	22084	22849	21440	19271	22253
2) Number of students who paid enrollment fees (NON-BOGG)						
Summer						
Fall						
Winter/Intersession						
Spring						
Total						
3) Number of students exempted from paying enrollment fees (BOGG, etc)						
Summer						
Fall						
Winter/Intersession						
Spring						
Total						

EFCW
1, 8-1
Back-up

```
$ ON ERROR THEN GOTO QUEBATCH_END
$ SET VERIFY=NOIMAGE
$ !
$ !      ****************************************
$ !      *            S T A T . B C F           *
$ !      *                                      *
$ !      *          ecfw stat batch 1           *
$ !      ****************************************
$ !
$ !
$ ! sourt thour the course file and get
$ ! all course for the date range, except the concurrent
$ ! master courses (section =C@/match)
$ ! save the pointer file so can break out the counts per
$ ! term. recall per semester, sort it, then use
$ ! regreport to extract counts
$ !
$ !
$ !*************************************************************
$ !                  O U T L I N E
$ !
$ ! Run    Program          Remarks
$ !O
$ ! <1>    DMS:SORT         -get all course for date range
$ ! <2>    DMS:SORT         -sort out the terms
$ ! <3>    REGREPORT        -see how many in the term
$ ! <4>    DMS:PRINT        -get a summary report
$ !OO
$ !

$    N:1
$ !*************************************************************
$ !
$ ! get all course for date range
$ ! don't include section=C*
$ !
$ run dms:sort
course/alternate=crs_stat0304

yes
startdate
07012003
06302004
section
c@/match

a and not b
$ !
$ !RN:2
$ !*************************************************************
$ !
$ ! sort out the terms
$ ! fdrmo crs_stat pointer file
$ !
   un dms:sort
:ou  e/pointer=crs_stat0304

es
ermcode
@2s/match
```

Statistical Data Form EFCW 1.8-1 #1

```
a
$ !
$ !RN:4
$ !*************************************************************
$ !
$ ! see how many in the term
$ !
$ run regreport
extract
student
yes
no

$ !
$ !RN:5
$ !*************************************************************
$ !
$ ! get a summary report
$ !
$ run dms:print
student/summary
0
1
count
7


55

crs_stat0304_fall

1
crs_stat0304_fall
y
-1
$ !
$ !END
$QUEBATCH_END:
$ STAT = $STATUS
$ SET NOON
$ IF "''F$MODE()'".NES."BATCH" THEN EXIT
$ IF F$SEARCH("TEMPORARY_FILES").NES."" THEN DELETE TEMPORARY_FILES
$ IF STAT.EQ.%X38120 THEN STAT = 1
$ EXIT 'STAT'
```

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		No way to gather info						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: West Kern Community College -Taft College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer		468			639	656	815	
Fall		935			1415	1479	1978	
Winter/Intersession		—			—	—	—	
Spring		1000			1209	1821	1866	
Total Estimated .55 accepted		2303	1598	1724	3258	3956	4659	
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer		302			409	423	526	
Fall		539			913	954	1276	
Winter/Intersession	—	—	—	—	—	—	—	
Spring		645			780	1175	1209	
Total		1.486	1,031	1112	2102	2552	3,006	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

EFCW 1.8-4

District: West Kern Community District - Taft College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 137,215	$ 142,945	$ 152,179	$ 189,372	$ 349,754	$ 559,624	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 2744	$ 2859	$ 3044	$ 3787	$ 6995	$ 11,181	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$ 9605						
5 Number of credit units for which enrollment fees were waived								
Summer					1819	2125 #11	2292 #18	
Fall					8347	8860 #18	10,293	
~~Winter/Intersession~~ total			12,995	13,834	—	—	—	
Spring					7050	9273	9622	
TOTAL x $0.91 per credit			11,825	12589	15,647	18,435	20,208	

Business office

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

C. le Roberts
Employee Name: (print)

Director of Financial Aid/Admissions
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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2002-2003

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2002-2003, DISTRICT: West Kern CCD, COLLEGE: Taft

↑ totals don't add up

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
B1	9	374	24	2,477	0	0	45	3,705	0	0	78 ~~54~~	6,556	86	5,27
B2	2	55	25	1,171	0	0	21	1,189	0	0	48 ~~28~~	2,415	55	2,16
B3	0	0	16	737	0	0	11	484	0	0	27 ~~16~~	1,221	0	
B4	4	275	8	847	0	0	10	946	0	0	22 ~~11~~	2,068	6	1,07
BA	0	0	0	0	0	0	0	0	0	0	0	0	0	
BB	248	12,133	494	39,396	0	0	344	25,476	0	0	1086 ~~631~~	77,005	562	60,75
BC	146	7,170	346	47,184	0	0	349	45,753	0	0	841 ~~487~~	100,107	416	82,913
UNDUP B-TOTALS	409	20,007	913	91,812	0	0	780	77,553	0	0	2102 ~~1,227~~	189,372	1,112	152,179
GB	0	0	38	23,544	0	0	36	22,754	0	0	74 ~~41~~	46,298	27	26,223
GC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GE	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GF	0	0	31	19,200	0	0	0	0	0	0	31	19,200	0	0
GP	0	0	256	375,696	0	0	267	400,941	35	18,489	523 ~~346~~	795,126	300	672,3
GS	0	0	70	18,150	0	0	115	28,725	0	0	186 ~~128~~	46,875	132	46,8
GU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GV	0	0	0	0	0	0	0	0	0	0	0	0	0	0

NOTES:

1. BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type
2. AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received
3. YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.
4. Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.

Report Run On: MAR 24, 2004

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2004-2005, DISTRICT: West Kern CCD, COLLEGE: Taft

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
GW	0	0	0	0	0	0	0	0	0	0	0	0	0	
UNDUP G-TOTALS	0	0	363	657,904	0	0	357	629,217	38	18,663	446	1,305,784	416	1,18
LD	0	0	0	0	0	0	0	0	0	0	0	0	0	
LE	0	0	0	0	0	0	0	0	0	0	0	0	0	
LG	0	0	0	0	0	0	0	0	0	0	0	0	0	
LH	0	0	0	0	0	0	0	0	0	0	0	0	0	
LI	0	0	0	0	0	0	0	0	0	0	0	0	0	
LL	0	0	0	0	0	0	0	0	0	0	0	0	0	
LN	0	0	0	0	0	0	0	0	0	0	0	0	0	
LP	0	0	0	0	0	0	0	0	0	0	0	0	0	
LS	0	0	0	0	0	0	0	0	0	0	0	0	0	
UNDUP L-TOTALS	0	0	0	0	0	0	0	0	0	0	0	0	0	
SU	0	0	86	40,662	0	0	88	45,529	0	0	124	86,191	135	85
SV	0	0	0	0	0	0	0	0	0	0	0	0	0	
SX	0	0	0	0	0	0	0	0	0	0	0	0	0	

NOTES:

1. *BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type*
2. *AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received*
3. *YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.*
4. *Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.*

Report Run On: DEC 02, 2005

CALIFORNIA COMMUNITY COLLEGES
MANAGEMENT INFORMATION SERVICES
FINANCIAL AID RECONCILIATION REPORT

Annual 2004-2005, DISTRICT: West Kern CCD, COLLEGE: Taft

	LEAD SUMMER CNT	LEAD SUMMER AMT $	FALL CNT	FALL AMT $	WINTER CNT	WINTER AMT $	SPRING CNT	SPRING AMT $	TRAIL SUMMER CNT	TRAIL SUMMER AMT $	CURRENT YEAR TOTAL CNT	CURRENT YEAR TOTAL AMT $	PRIOR YEAR TOTAL CNT	PRIOR YEAR TOTAL AMT $
UNDUP S-TOTALS	0	0	86	40,662	0	0	88	45,529	0	0	124	86,191	135	89,556
WC	0	0	0	0	0	0	0	0	0	0	0	0	6	
WE	4	1,455	11	3,412	0	0	11	11,286	0	0	15	16,153	9	12,045
WF	0	0	48	33,690	0	0	55	45,405	1	270	63	79,365	69	69,189
WU	1	297	174	115,345	0	0	188	170,294	1	54	223	285,990	272	342,029
UNDUP W-TOTALS	5	1,752	219	152,447	0	0	236	226,985	2	324	273	381,508	276	426,845
UNDUP TOTALS	526	43,004	1,369	1,118,641	0	0	1,297	1,151,925	40	18,987	2,080	2,332,557	1,729	2,046,781

NOTES:

1. *BOGW - Board Financial Assistance Programs reported in data element SF21 Student-Aid-Type*
2. *AMT $ - Total amount reported in SF22 Student-Aid-Amount-Received*
3. *YEAR TOTAL CNT - Unduplicated headcount of the award type for the year indicated.*
4. *Awards with more than 10% change of headcounts and prior year headcounts of more than 100 will appear on the exception letter.*

Report Run On: DEC 02, 2005

Schedule 3AA
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 to 2005-06
PHR'S

Purpose: To calculate PHR's for staff involved in EFCW.
Source: PHRs provided by client on schedule titled 'WKCCD-TAFT COLLEGE Annual Salary & Benefits'. (05-06 only)
Findings:

Staff	99-00 salary & benefits	99-00 PHRs	00-01 salary & benefits	00-01 PHRs	01-02 salary & benefits	01-02 PHRs	02-03 salary & benefits	02-03 PHRs	03-04 salary & benefits	03-04 PHRs	04-05 salary & benefits	04-05 PHRs	05-06 salary & benefits	05-06 PHRs
Brown, Crystal	25,298	$14.05	24,059	$13.37	23,884	$13.27	25,403	$14.11	26,449	$14.69	28,304	$15.72	35,614	$19.79
Jewell, Maureen									7,324	Not Used	18,211	$10.12	32,753	$18.20
Nevarez, Gracie					4,388	Not Used	5,993	Not Used	15,165	$8.43	20,283	$11.27	31,629	$17.57
Sharp, Jodi									23,327	$12.96	47,343	$26.30	53,070	$29.48
Rawls, Korina	16,973	$18.86	20,570	$22.86	19,653	$21.84	21,644	$24.05	19,594	$21.77	20,163	$22.40	42,130	$46.81
Wingler, Barbara					42,848	$23.80	46,695	$25.94	51,969	$28.87	56,413	$31.34	60,394	$33.55
Buddell, Shirley	44,792	$24.88	50,768	$28.20	55,345	$30.75								
Blair, Sheila	11,763	$13.07	13,161	$14.62	6,545	Not Used								
Kasper, Kevin														

Not Used -- Doesn't look like a full years salary.

Conclusion: Findings go forward to schedules 2A and 3A.

WKCCD-TAFT COLLEGE

Annual Salary & Benefits

Employee:	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Brown, Crystal	N/A	$25,298	$24,059	$23,884	$25,403	$26,449	$28,304	$35,614
Jewell, Maureen	N/A	N/A	N/A	N/A	N/A	$7,324	$18,211	$32,753
Nevarez, Gracie	N/A	N/A	N/A	$4,388	$5,993	$15,165	$20,283	$31,629
Sharp, Jodi	N/A	N/A	N/A	N/A	N/A	$23,327	$47,343	$53,070
Rawls, Korina	N/A	$16,973	$20,570	$19,653	$21,644	$19,594	$20,163	$42,130
Wingler, Barbara	N/A	N/A	N/A	$42,848	$46,695	$51,969	$56,413	$60,394
Buddell, Shirley	N/A	$44,792	$50,768	$55,345	N/A	N/A	N/A	N/A
Blair, Sheila	N/A	$11,763	$13,161	$6,545	N/A	N/A	N/A	N/A
Kasper, Kevin	N/A	N/A	N/A					

There is no data available in our payroll system for fiscal year 98-99. I was told it was too far back.

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

(1) Employee Name/or Job Class: Jill Brown - Have 1.7-3 w/ 99-00 & 00-01 circled -SMP

Title: Academic Advisor Location: Taft College

1.7-3 Title status – EOPS/CARE Sr. Secretary - SMP

See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E Prod. Rate B + C
98-99	$26,064	$9,263	2,384	$26,064/2,384= $14.82 /1800 = Not Needed-SMP
99-00	$28,832	$10,104	2,384	$38,936/2,384 = $16.63 /1800 = 21.63
00-01	$31,572	$11,268	2,384	$42,840/2,384 = $17.97 /1800 = 23.80
01-02	$35.248	$12,799	2,384	$48,047/2,384 = 20.15 /1800 = 26.69
02-03	$39.024	$15,249	2,384	$54,273/2,384 = $22.77 /1800 = 30.15
03-04	$39,784	$19,266	2,384	$59,051/2,384 = $24.77 /1800 = 32.81
04-05	$40,564	$20,268	2,384	$60,832/2,384 = $25.52 /1800 = 33.80
05-06	$42,120	$21,308	2,384	$63,428/2,384 = $26.61 /1800 = 35.24

Have a EFCW 1.6 for 00-01 only

Employee Name/or Job Class: Denise Earl – N/A

Title: Information Systems Technician/IS Data Specialist Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E Prod. Rate B + C
98-99	$29,496	$9,555	2,384	$39,051/2,384= $16.59
99-00	$32,084	$10,380	2,384	$42,464/2,384 = $18.04
00-01	$36,612	$11,712	2,384	$48,324/2,384 = $20.53 /1800 = 26.85
01-02	$36,948	$13,132	2,384	$50,080/2,384 = $21.00
02-03	$0	$0	n/a	$0
03-04	$0	$0	n/a	$0
04-05	$0	$0	n/a	$0
05-06	$0	$0	n/a	$0

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Anita Ferguson - Have 1.7-3 w/ 03-04 to 05-06 circled-SPA

Title: Financial Aid Outreach Clerk Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$6,319	$604	1,036	6,923/1,036 = $6.68 - Not used-SPA
04-05	$13,537	$1,338	1,036	14,875/1,036 = $14.36
05-06	$14,852	$1,479	1,036	16,331/1,036 = $15.76

used -SPA

Employee Name/or Job Class: [redacted] No 1.7-2 - but no PHR given for Crystal Brown & Maureen Jewell who turned in EFCW 1.7-2a. -SPA ← Now name Brown & Jewell on Sch 3AA -SPA

Title: Admissions Technician Location: Taft College

Not using that now that Brown & Jewell's PHRs rec'd -SPA

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$27,948	$16,902	2,384	$44,850/2,384 = $18.81 /1800 = 24.92
04-05	$29,940	$18,160	2,384	$48,100/2,384 = $20.18 /1800 = 26.72
05-06	$0	$0	n/a	$0

See attached Tape

(4) Employee Name/or Job Class: Korina Rawls Have L.7-3 w/ 99-00 thru 04-05 circled -gmk

Title: Financial Aid Clerk/Student Job Placement Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	See Sch 3AP ↓
98-99	$13,668	$1,162	1,036	$14,830/1036 = $14.31	N/A
99-00	$13,937	$1,185	1,036	$15,122/1036 = $14.60	16.38
00-01	$14,832	$1,305	1,036	$16,137/1,036 = $15.58	19.86
01-02	$15,562	$1,401	1,036	$16,962/1,036 = $16.37	18.97
02-03	$16.131	$1,026	1,036	$17,157/1,036 = $16.56	20.89
03-04	$16,331	$1,562	1,036	$17,892/1,036 = $17.27	18.91
04-05	$16,450	$1,626	1,036	$18,075.94/1,036 = $17.48	19.46
05-06	$17,077	$1,701	1,036	$18,778/1,036 = $18.12	40.67

*Note: Diff. Salary/Benefits Amounts given on Sch 3AP ÷ by 1036 -gmk

(6) Employee Name/or Job Class: Barbara Wingler Have L.7-3 w/ 01-02 to 04-05 circled -gmk

Title: Financial Aid Technician Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	See Sch 3AP ↓
98-99	$0	$0	n/a	$0	
99-00	$0	$0	n/a	$0	
00-01	$0	$0	n/a	$0	
01-02	$30,108	$12,336	2,384	$42,444/2,384 = $17.80	23.80
02-03	$33,192	$14,539	2,384	$47,731/2,384 = $20.02	25.94
03-04	$34,848	$14,649	2,384	$49,497/2,384 = $20.76	28.87
04-05	$37,320	$15,910	2,384	$53,230/2,384 = $22.33	31.34
05-06	$30,510	$16,027	1,600	$46,537/1,600 = $29.09	33.55

*Note: Diff. Salary/Benefits Amounts given on Sch 3AP ÷ by 1800 -gmk

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Sandi Liddell Williams – Have 1.7-3 w/ 01-02 thru 04-05 circled – SAA

Title: Sr. Secretary Evening College Location: Taft College Have 1.7-3 w/ 05-06 circled – SAA

Both Have some overlap – SAA

See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$12,398	$1,054	1,036	$13,452/1,036= $12.98 Not Needed
99-00	$27,948	$10,029	2,384	$37,977/2,384 = $15.93 / 1800 = 21.10
00-01	$30,816	$11,202	2,384	$42,018/2,384 = $17.63 / 1800 = 23.34
01-02	$33.984	$12,685	2,384	$46,669/2,384 = $19.57 / 1800 = 25.93
02-03	$35,776	$14,854	2,384	$50,630/2,384 = $21.24 / 1800 = 28.13
03-04	$35,776	$18,466	2,384	$54,242/2,384 = $22.75 / 1800 = 30.13
04-05	$36,496	$19,461	2,384	$55,957/2,384 = $23.47 / 1800 = 31.09
05-06	$37,876	$20,483	2,384	$58,359/2,384 = $24.48 / 1800 = 32.42

Employee Name/or Job Class: [redacted] No 1.7-2 – but no PHR given for Crystal Brown + Maureen Sewell who turned in EFCW 1.7-2's – SAA

Now have Brown & Sewell on Sch 3AA – SAA

Title: Admissions Technician Location: Taft College

Not using now that Brown & Sewell have PHR's (added) – SAA

See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$27.948	$12,142	2,384	$40,090/2,384 = $16.82 / 1800 = 22.27
02-03	$29,352	$14,072	2,384	$43,424/2,384 = $18.21 / 1800 = 24.12
03-04	$12,840	$6,197	1,036	$19,037/1,036 = $18.38 ← Not Used – SAA
04-05	$0	$0	$0	$0
05-06	$0	$0	$0	$0

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Gayle Roberts

Title: Director of Financial Aid Location: Taft College

Not used in average for various Financial Aid Staff - because we 1.7-3 turned in - See Have EFCW 1.6 for 99-00 to 04-05

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$40,800	$11,121	2,384	$51,921/2,384 = $21.78 /1800 = 28.85
00-01	$45,000	$12,450	2,384	$57,450/2,384 = $24.10 /1800 = 31.92
01-02	$45,000	$13,677	2,384	$58,677/2,384 = $24.61 /1800 = 32.60
02-03	$49,571	$16,533	2,384	$66,104/2,384 = $27.73 /1800 = 36.72
03-04	$49,771	$21,263	2,384	$71,033.54/2,384 = $29.80 /1800 = 39.46
04-05	$50,257	$22,191	2,384	$72,447/2,384 = $30.39 /1800 = 40.25 43.51
05-06	$53,180	$23,402	2,384	$76,582/2,384 = $32.12 /1800 = 42.55 45.38

See Attached Topic

Employee Name/or Job Class: Amber Walker Teel Have EFCW 1.6 for 02-03 to 04-05

Title: Information Systems Operator Location: Taft College

5 x Ten List

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$12,038	$1,059	1,036	$13,097/1,036 = $12.64 N/A
01-02	$27,936	$12,141	2,384	$40,077/2,384 = $16.81 N/A
02-03	$31,584	$14,343	2,384	$45,928/2,384 = $19.26 /1800 = 25.52
03-04	$33,168	$17,944	2,384	$51.111/2,384 = $21.44 /1800 = 28.40
04-05	$35,668	$19,297	2,384	$54,965/2,384 = $23.06 /1800 = 30.54
05-06	$38,872	$20,673	2,384	$59,545/2,384 = $24.98 N/A

See Attached Topic

Copy - see 04-05 sheet

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Kevin Kasper — Have EFCW 1.6 for 00-01 to 04-05

Title: Applications Programmer — Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$45,780	$13,747	2,384	$59,527/2,384 = ~~$24.97~~ / 1800 = 33.07
02-03	$50,472	$16,643	2,384	$67,115/2,384 = ~~$28.15~~ / 1800 = 37.29
03-04	$52,992	$21,906	2,384	$74,898/2,384 = ~~$31.42~~ / 1800 = 41.61
04-05	$56,860	$23,500	2,384	$80,360/2,384 = ~~$33.71~~ / 1800 = 44.64
05-06	$58,920	$24,497	2,384	$83,417/2,384 = $35.00 N/A

See Attached Tape ↓

÷ by 5% = 31.50 ↑ used for 00-01 see attached tape info

Employee Name/or Job Class: Pongpunt Pungchai — Have EFCW 1.6 for 01-02 only

Title: Information Systems Programmer — Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$34,932	$11,564	2,384	$46,496/2,384 = $19.50
01-02	$43,596	$52,315	2,384	$52,315/2,384 = ~~21.94~~ / 1800 = 29.06
02-03	$45,780	$16,072	2,384	$61,852/2,384 = $25.94
03-04	$50,472	$21,403	2,384	$71,875/2,384 = $30.15
04-05	$54,060	$22,945	2,384	$77,005/2,384 = $32.30
05-06	$56,112	$23,962	2,384	$80,074/2,384 = $33.59

See attached tape

Copy - see 04-05.SSA

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: JIM NICHOLAS — Have EFCW 1.6 for 03-04 to 05-06

Title: ACCOUNTANT / DIRECTOR Location: BUSINESS SERVICES

A. Fiscal Year	B. Annual ~~Monthly~~ Salary	C. Annual ~~Monthly~~ Benefits	D. Annual ~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
1-06/30 02-03	(53,200 x 3 mos.)	10,000 x 3 mos	1800 x 3 mos	35.11
03-04	53,200	11,000	1800	35.67
04-05	54,275	12,000	1800	36.82
- C. 01/06 05-06	57,000 x 7 mos / 70,200 x 5 mos	14,000 x 7 mos / 14,000 x 5 mos	1800 x 7 mos / 1800 x 5 mos	39.44 / 46.78 — See SixTen list = 51.53
06-06/30/06				

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: West Kern Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE ASSISTANT		
	AVERAGE DEAN		
	AVERAGE DIRECTOR		
	AVERAGE VICE PRESIDENT		
AGUNDEZ, ADRIAN	DIRECTOR OF MULTIMEDIA		$ 62.53
BAKER, CALVIN	COLLEGE FACILITIES MANAGER		
BLACK, SHERI	ACADEMIC ADVISOR		$ 37.94
BRETTSCHNEIDER, KIRK	MIS DIRECTOR-DECEASED	$ 68.39	Don't need him for 04/05
CAPELA, MIKE	SUPERVISOR, MAINT.	$ 60.52	$ 62.53
DARNELL, ROE	SUPERINTENDENT/PRESIDENT	$ 115.29	$ 135.12
DUNCAN, WILLIAM	VICE PRESIDENT ADMIN SVCS	$ 101.18	$ 105.65
HEGEMAN, DEBBIE	ADMINISTRATIVE ASSISTANT/STUDENT SVCS	$ 47.16	$ 49.07
JEWELL, MINDY	CASHIER		$ 30.60
KLEIN, SHELLEY	ADMINISTRATIVE ASSISTANT	$ 58.01	$ 59.92
LIPSCOMB, LORETTA	VICE PRESIDENT INSTRUCTION	$ 102.46	RETIRED
McMURRAY, BROCK	DEAN OF STUDENTS	$ 84.84	$ 88.51

MANDATE REIMBURSEMENT SERVICES

NICHOLAS, JIM	DIRECTOR, BUSINESS SERVICES		$ 51.53
NUNEZ, ABEL	VICE PRESIDENT STUDENT SERVICES	$ 101.18	$ 111.74
OLVERA, ADRIANA	FINANCIAL AID CLERK		$ 16.48
PARKINSON, MELISSA	ADMIN ASSISTANT	$ 41.14	$ 43.79
PETERS, JANA	HUMAN RESOURCES DIRECTOR	$ 50.74	$ 54.15
QUINTERO, GIL	SKILLED MAINTENANCE WORKER		$ 37.45
ROBERTS, GAYLE	DIRECTOR, FINANCIAL AIDE	$ 43.51	$ 45.58
SHARP, JODI	FINANCIAL AID TECHNICIAN		$ 31.16
YONG, HENRY	VICE PRESIDENT OF INSTRUCTION		$ 104.69

Schedule 5
West Kern Community College District
308/95 Enrollment F ollection and Waivers
Fiscal Years: 199s-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. Initial year claim 99-00 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received				Not supplied by client		
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 137,215	$ 142,945	$ 152,179	$ 189,372	$ 349,754	$ 559,074
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 9,605			For 00-01 through 05-06 - unit fee		
1.8-4 line 5	Summer				1,819	2,125	2,292
	Fall				8,347	8,860	10,293
	Winter/Interssion						
	Spring				7,050	9,273	9,622
	Total # of credits		12,995	13,834	17,216	20,258	22,207
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 9,605					
1.8-4 5	Credit Units Waived		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 12,349**	**$ 14,684**	**$ 15,633**	**$ 19,454**	**$ 25,430**	**$ 31,389**

CALIFORNIA COMMUNITY COLLEGES Exhibit B-2A
CATEGORICAL APPORTIONMENTS - PART I
2004-2005 SECOND PRINCIPAL APPORTIONMENT

16:14 Thursday, June 23, 2005

COUNTY	DISTRICT	FEE WAIVER ADMIN (2%)	STUDENT FINANCIAL AID ADMIN	E.O.P.S.	C.A.R.E.	D.S.P.S.	STATE HOSPITALS	TANF (GAIN)	CALWORKS
Alameda	Chabot-Las Positas	56,554	536,330	819,527	121,246	1,110,596	0	60,557	252,775
	Ohlone	14,430	221,446	344,584	49,421	928,265	0	16,564	71,597
	Peralta	123,010	1,104,423	2,514,892	562,850	2,090,297	0	263,688	1,162,991
Alameda		193,994	1,862,199	3,679,003	733,517	4,129,158	0	340,809	1,487,363
Butte	Butte	60,141	480,115	1,190,920	255,780	627,122	0	146,154	649,427
Contra Costa	Contra Costa	48,713	946,631	2,331,903	380,223	2,220,834	0	145,756	658,752
El Dorado	Lake Tahoe	3,776	116,053	130,975	26,665	446,934	0	12,500	42,269
Fresno	State Center	209,931	1,405,576	2,243,194	223,978	1,390,017	0	265,871	1,362,604
	West Hills	25,756	208,569	396,462	126,521	338,747	0	36,444	178,919
Fresno		235,687	1,614,145	2,639,656	350,499	1,728,764	0	302,315	1,541,523
Humboldt	Redwoods	37,808	320,198	822,646	129,887	1,021,606	0	47,141	205,021
Imperial	Imperial	50,884	291,105	1,010,508	133,042	495,194	0	68,026	318,115
Kern	Kern	139,386	911,591	2,063,004	327,289	1,934,146	494,290	163,733	707,738
	West Kern	11,448	130,994	258,549	43,466	243,283	0	45,632	194,719
Kern		150,834	1,042,585	2,321,553	370,755	2,177,429	494,290	209,365	902,457
Lassen	Lassen	9,361	121,648	346,962	68,566	353,016	0	27,797	120,893
Los Angeles	Antelope Valley	58,959	430,633	764,209	277,103	698,939	0	127,140	542,529
	Cerritos	109,137	826,127	965,722	93,612	1,108,374	0	116,555	523,565
	Citrus	47,151	387,951	768,469	210,200	556,563	0	64,219	290,670
	Compton	58,187	353,991	1,098,052	756,418	260,425	0	150,584	642,575
	El Camino	53,586	676,750	1,424,005	242,240	1,056,749	0	146,494	675,116
	Glendale	84,704	588,350	1,520,465	55,356	1,511,927	0	190,944	782,625
	Long Beach	152,403	992,751	1,791,382	252,407	994,409	0	250,344	1,068,270
	Los Angeles	660,888	5,119,629	10,819,448	1,318,500	4,941,174	0	1,070,766	4,955,843
	Mt. San Antonio	107,461	821,747	816,034	130,560	1,507,993	0	117,847	522,517
	Pasadena Area	136,323	874,148	1,314,668	139,562	928,385	0	122,821	530,893
	Rio Hondo	54,144	520,013	1,303,441	107,814	525,979	0	76,359	344,063
	Santa Clarita	28,976	294,754	405,178	53,646	531,256	0	23,961	84,510
	Santa Monica	74,711	776,770	1,090,305	98,357	1,177,733	0	87,954	400,181
Los Angeles		1,626,630	12,663,614	24,081,378	3,735,775	15,799,906	0	2,545,988	11,363,357
Marin	Marin	20,318	229,542	467,623	44,954	1,374,358	0	28,228	94,436

Sc[illegible]le 5A
West Kern County C[illegible]munity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 14.43	$ 15.96	$ 16.30	$ 18.36	$ 19.73	$ 21.76
2	Staff Training	(04)(B)(1)(b)						
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 892.86	$ 653.40	$ 616.30	$ 684.18	$ 762.54	$ 1,085.48
4	Waiving student fees	(04)(B)(2)(b)	$ 15,406.41	$ 12,142.44	$ 13,761.72	$ 27,289.27	$ 27,540.00	$ 35,131.80
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,017.55	$ 1,645.80	$ 1,731.60	$ 1,807.00	$ 2,223.96	$ 2,358.76
6	EFCW - Fee Waiver Costs	Total	$ 18,331.25	$ 14,457.60	$ 16,125.92	$ 29,798.81	$ 30,546.23	$ 38,597.80
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 12,349.00	$ 14,684.00	$ 15,633.00	$ 19,454.00	$ 25,430.00	$ 31,389.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 5,982.25	$ (226.40)	$ 492.92	$ 10,344.81	$ 5,116.23	$ 7,208.80
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 12,349.00**	**$ 14,457.60**	**$ 15,633.00**	**$ 19,454.00**	**$ 25,430.00**	**$ 31,389.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Taft College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of April 24, 2012 02:40:06

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	82	13,460
BOGW - Part A-2 based on SSI recipient status	33	6,219
BOGW - Part B based on income standards	1,083	193,537
BOGW - Part C based on financial need	759	342,013

Total Amount = $ 555,229

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

December 21, 2006

Claim File Copy

CERTIFIED MAIL # 7006 3450 0000 3941 8666

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
West Kern Community College District CC 15255

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for West Kern Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D T Brannell

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed __/__/__
(21) LRS Input __/__/__

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC15255
(02) Claimant Name: West Kern Community College District
County of Location: Kern
Street Address or P.O. Box: 29 Emmons Park Drive
City: Taft | State: CA | Zip Code: 93268

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 129,368
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 119,368
Due from State	(08)	(17) $ 119,368
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	91,360
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	35,430
(29) EFCW-1, (04)(B)(2)(c)(f)	283
(30) EFCW-1, (06)	34
(31) EFCW-1, (07)	43,611
(32) EFCW-1, (09)	10,882
(33) EFCW-1, (10)	30,435
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — **Date**: 12-17-07

William H. Duncan IV
Type or Print Name

Executive Vice President
Title

(38) Name of Contact Person for Claim
SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 17	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **West Kern Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2005-2006**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 91,359.60	$ -	$ -	$ -	$ -	$ 91,359.60
B. nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 35,430.11	$ -	$ -	$ -	$ -	$ 35,430.11
c. Reporting BOG fee waiver data to CCC	$ 283.42	$ -	$ -	$ -	$ -	$ 283.42
(05) Total Direct Costs	$ 127,073.13	$ -	$ -	$ -	$ -	$ 127,073.13

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.32%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 43,611.50
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 170,684.63
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 10,882.00
(10) Enrollment Fee Waiver offsets		$ 30,435.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 129,367.63

State Controller's Office

Community College Mandated Cost Manual

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Kern Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Fees	$19.00	1,136.2	$ 21,587.80				
Calculating total enrollment fee to be collected Enrollment Office Staff Collecting Fees	$19.00	1,011.6	$ 19,220.40				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Fees	$19.00	1,262.4	$ 23,985.60				
...g written and computer records for enrollment fee information Enrollment Office Staff Collecting Fees	$19.00	1,388.6	$ 26,383.40				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Office Staff Collecting Fees	$19.00	9.6	$ 182.40				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 91,359.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: Kern Community College District

(02) Fiscal Year: 2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff — Waiving Enrollment Fees	$29.24	466.9	$ 13,652.16				
Receiving waiver applications Financial Aid Office Staff — Waiving Enrollment Fees	$29.24	189.1	$ 5,529.28				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff — Waiving Enrollment Fees	$29.24	382.8	$ 11,193.07				
N[illegible] students of additional documentation requirements and how to obtain information Financial Aid Office Staff — Waiving Enrollment Fees	$29.24	80.7	$ 2,359.67				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff — Waiving Enrollment Fees	$29.24	92.2	$ 2,695.93				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 35,430.11	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Kern Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Nicholas, Jim Accountant/Director, Business Services	$51.53	5.5	$ 283.42				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 283.42	$ -	$ -	$ -	$ -

West Kern Community College District

308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS

.006

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	1,136.20	Enrollment Office Staff	Collecting Fees	$19.00	$21,587.80	Referencing student accounts and records	Calculating and collecting enrollment fe
05-06	1,011.60	Enrollment Office Staff	Collecting Fees	$19.00	$19,220.40	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
05-06	1,262.40	Enrollment Office Staff	Collecting Fees	$19.00	$23,985.60	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
05-06	1,388.60	Enrollment Office Staff	Collecting Fees	$19.00	$26,383.40	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
05-06	9.60	Enrollment Office Staff	Collecting Fees	$19.00	$182.40	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fe
	4,808.40	**Enrollment Office Staff Total**			$91,359.60		
05-06	466.90	Financial Aid Office Staff	Waiving Enrollment Fees	$29.24	$13,652.16	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	189.10	Financial Aid Office Staff	Waiving Enrollment Fees	$29.24	$5,529.28	Receiving waiver applications	Waiving student fees
05-06	382.80	Financial Aid Office Staff	Waiving Enrollment Fees	$29.24	$11,193.07	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	80.70	Financial Aid Office Staff	Waiving Enrollment Fees	$29.24	$2,359.67	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
05-06	92.20	Financial Aid Office Staff	Waiving Enrollment Fees	$29.24	$2,695.93	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,211.70	**Financial Aid Office Staff Total**			$35,430.11		
05-06	5.50	Nicholas, Jim	Accountant/Director, Business Services	$51.53	$283.42	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	5.50	**Nicholas, Jim Total**			$283.42		
	6,025.60	**Grand Total**			$127,073.13		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$6,262,933		$6,262,933	$116,702	$6,146,231
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	322,651		322,651	1,245	321,406
Course and Curriculum Development	6020	298,656		298,656		298,656
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090	733		733		733
Instructional Support Services	6100					
Learning Center	6110	514,069		514,069	5,440	508,629
Library	6120	231,457		231,457	18,364	213,093
Media	6130	301		301		301
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	90,005		90,005		90,005
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	316,138		316,138	16,434	299,704
Matriculation and Student Assessment	6320	310,948		310,948	2,166	308,782
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	303,158		303,158	20,593	282,565
Subtotal		$8,651,049	$0	$8,651,049	$180,944	$8,470,105

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$374,857	$22,621	$352,236	$4,790	$347,446
Health Services	6440					
Student Personnel Admin.	6450	223,986		223,986	22,895	201,091
Financial Aid Administration	6460	322,590		322,590	4,455	318,135
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	418,409		418,409	17,505	400,904
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	390,615		390,615	390,615	0
Custodial Services	6530	187,854		187,854	187,854	0
Grounds Maintenance and Repairs	6550	16,555		16,555	16,555	0
Utilities	6570	387,090		387,090	387,090	0
Other	6590	62,920		62,920	62,920	0
Planning, Policy Making, and Coordination	6600	582,223		582,223	582,223	0
General Inst. Support Services	6700					
Community Relations	6710					
Fiscal Operations	6720	562,915		562,915	562,915	0
Human Resources Management	6730	203,699		203,699	203,699	0
Noninstructional Staff Benefits & Incentives	6740	237,819		237,819	237,819	0
Staff Development	6750					
Staff Diversity	6760					
Logistical Services	6770	268,333		268,333	268,333	0
Management Information Systems	6780	798,179		798,179	798,179	0
Subtotal		$13,689,093	$22,621	$13,666,472	$3,928,791	$9,737,681

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	-5,225		-5,225	-5,225	0
Community Services and Economic Development	6800					
Community Recreation	6810	62,408		62,408	988	61,420
Community Service Classes	6820					
Community Use of Facilities	6830					
Economic Development	6840	110,707		110,707	214	110,493
Other Community Services & Economic Development	6890	54,359		54,359	14,784	39,575
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	21,956		21,956		21,956
Farm Operations	6930					
Food Services	6940					
Parking	6950					
Student and Co-curricular Activities	6960	13,594		13,594		13,594
Student Housing	6970	134,106		134,106		134,106
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	1,804,502		1,804,502	41,784	1,762,718
Physical Property Acquisitions	7100	96,142		96,142	96,142	0
(05) Total		$15,981,642	$22,621	$15,959,021	$4,077,478	$11,881,543
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.32%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	269,286	410	7,811	5,072		282,579
Business and Management	0500	265,646	17,842	2,916	1,485		287,889
Communications	0600	27,935		343			28,278
Computer and Information Science	0700	179,771		1,039			180,810
Education	0800	220,604	314,243	89,703	53,914		678,464
Engineering and Related Industrial Tech.	0900	141,745	13,454	28,157	16,121		199,477
Fine and Applied Arts	1000	140,547	227	8,658	2,770		152,202
Foreign Language	1100	134,908		1,319			136,227
Health	1200	522,527	193,138	962,552	23,826		1,702,043
Consumer Education and Home Economics	1300	138,318	18,110	11,103	2,393		169,924
Law	1400						
Humanities (Letters)	1500	498,487	11,285	2,981	499		513,252
Library Science	1600						
Mathematics	1700	461,470	37,144	4,092	4,630		507,336
Military Studies	1800						
Physical Sciences	1900	91,180		11,396	2,320		104,896
Psychology	2000						
Public Affairs and Services	2100	35,865					35,865
Social Sciences	2200	455,107	336	3,169	1,075		459,687
Commercial Services	3000						
Interdisciplinary Studies	4900	488,824	90,365	3,945	2,597		585,731
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	238,273					238,273
Subtotal - Instructional Activities	**599**	4,310,493	696,554	1,139,184	116,702		6,262,933

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		309,258	12,148	1,245		322,651
Course and Curriculum Development	6020		280,263	18,393			298,656
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090			733			733
Subtotal - Instructional Administration	**6000**		589,521	31,274	1,245		622,040
Instructional Support Services (6100)							
Learning Center	6110	279,737	226,716	2,176	5,440		514,069
Library	6120		156,504	56,589	18,364		231,457
Media	6130			301			301
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**	279,737	383,220	59,066	23,804		745,827
Admissions and Records	**6200**		80,809	9,196			90,005
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		273,336	26,368	16,434		316,138
Matriculation and Student Assessment	6320		264,870	43,912	2,166		310,948
Transfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		538,206	70,280	18,600		627,086

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Annual Financial and Budget Report

Expenditures by Activity

S1C neral Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		264,621	17,944	20,593		303,158
Extended Opportunity Prgms. & Services (EOPS)	6430		260,478	86,968	4,790	22,621	374,857
Health Services	6440						
Student Personnel Administration	6450		189,312	11,779	22,895		223,986
Financial Aid Administration	6460		281,733	36,402	4,455		322,590
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		345,522	55,382	17,505		418,409
Subtotal - Other Student Services	**6400**		1,341,666	208,475	70,238	22,621	1,643,000
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		338,166	32,864	19,585		390,615
Custodial Services	6530		171,799	15,561	494		187,854
Grounds Maintenance and Repairs	6550		1,819	14,184	552		16,555
Utilities	6570			387,090			387,090
Other Operation and Maintenance of Plant	6590			23,786	39,134		62,920
Subtotal - Operation and Maintenance of Plant	**6500**		511,784	473,485	59,765		1,045,034
Planning, Policymaking, and Coordination	**6600**		278,787	300,496	2,940		582,223

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710						
Fiscal Operations	6720		490,984	67,051	4,880		562,915
Human Resources Management	6730		151,630	52,005	64		203,699
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		237,819				237,819
Staff Development	6750						
Staff Diversity	6760						
Logistical Services	6770		53,895	198,160	16,278		268,333
Management Information Systems	6780		747,133	33,679	17,367		798,179
Other General Institutional Support Services	6790		(14,450)	3,000	6,225		(5,225)
Subtotal - General Institutional Support Services	**6700**		1,667,011	353,895	44,814		2,065,720
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		45,821	15,599	988		62,408
Community Service Classes	6820						
Community Use Facilities	6830						
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		1,783	108,710	214		110,707
Subtotal - Community Services	**6800**		36,558	3,017	14,784		54,359
			84,162	127,326	15,986		227,474

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		21,956				21,956
Farm Operations	6930						
Food Services	6940						
Parking	6950						
Student and Co-curricular Activities	6960		13,467	127			13,594
Student Housing	6970		132,676	1,430			134,106
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		168,099	1,557			169,656
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090			1,762,718	41,784		1,804,502
Subtotal - Auxiliary Operations	**7000**			1,762,718	41,784		1,804,502
Physical Property and Related Acquisitions (7100)	**7100**		284	6,000	89,858		96,142
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290			49,173			49,173
Subtotal - Long-Term Debt and Other Financing	**7200**			49,173			49,173
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	4,590,230	6,340,103	4,592,125	485,736	22,621	16,030,815

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	25248
Avg. time p/account	2.7
Total Time (in minutes)	68170
Per Hour	60
Hours Worked **(** 11)**	**1136.2**
***EFC 2**	22481
Avg. time p/student	2.7
Total Time (in minutes)	60699
Per Hour	60
Hours Worked **(** 12)**	**1011.6**
***EFC 1**	25248
Avg. time p/question	3.0
Total Time (in minutes)	75744
Per Hour	60
Hours Worked **(** 13)**	**1262.4**
***EFC 1**	25248
Avg. time p/file	3.3
Total Time (in minutes)	83318
Per Hour	60
Hours Worked **(** 14)**	**1388.6**
***EFC 4**	115
Avg. time p/account	5.0
Total Time (in minutes)	575
Per Hour	60
Hours Worked **(** 15)**	**9.6**
***EFC 5**	
Avg. time p/student	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

EFC Workload Multiplier (Client provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	3735
Avg. time p/question	7.5
Total Time (in minutes)	28013
Per Hour	60
Hours Worked (** **21**)	**466.9**
***EFW 7**	2767
Avg. time p/application	4.1
Total Time (in minutes)	11345
Per Hour	60
Hours Worked (** **22**)	**189.1**
***EFW 7**	2767
Avg. time p/evaluation	8.3
Total Time (in minutes)	22966
Per Hour	60
Hours Worked (** **23**)	**382.8**
***EFW 8**	968
Avg. time p/application	5.0
Total Time (in minutes)	4840
Per Hour	60
Hours Worked (** **24**)	**80.7**
***EFW 7**	2767
Avg. time p/application	2.0
Total Time (in minutes)	5534
Per Hour	60
Hours Worked (** **25**)	**92.2**
***EFW 8**	968
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **26**)	**0.0**

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 to 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2 and attachment, about 04-05 regarding COTOP for code 15, from Crystal Brown.
Findings:

		*Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Brown, Crystal	Lead Cashier/Collection Tech. (98-99 to 00-01)	4	4	3	3	5	5
Brown, Crystal	Lead Cashier/Collection Tech. (01-02 to 05-06)	2	2	3	3	5	5
Jewell, Maureen	Cashier II	2	2	3	4	5	5
Average (for 99-99 to 03-04, and 05-06)		**2.7**	**2.7**	**3.0**	**3.3**	**5.0**	**5.0**
Average (for 04-05)						***10.0***	

***EFC Workload Multiplier (Client Provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 to 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff performing Collection Fee functions.
Source: PHR provided by client on EFCW 1.4 forms and schedule 3AA.
Findings:

Ref #	Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Sch. 3AA	Brown, Crystal	Lead Cashier/Collections Tech.		$14.05	$13.37	$13.27	$14.11	$14.69	$15.72	$19.79
Sch. 3AA	Jewell, Maureen	Cashier II							$10.12	$18.20
	Average	*	**$13.38**	**$14.05**	**$13.37**	**$13.27**	**$14.11**	**$14.69**	**$12.92**	**$19.00**

Conclusion: Findings go forward to EFCW-2.

*** Note -- 98-99 PHR is 99-00's PHR divided by 1.05%.**

Schedule 3
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 thru 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*Multiplier					
		6	7	7	8	7	
		**Activity Codes					
		21	22	23	24	25	26
Brown, Elizabeth Jill	EOPS/CARE Sr. Secretary	10	4	15			
Buddell, Shirly	Financial Aid Tech. II	5	2	2	5	2	
Ferguson, Anita	Financial Aid Outreach Clerk	6	2	4			
Nevarez, Gracie	Mc Grant Educatio	6	2				
Rawls, Korina	Job Placement/Finacial Aid Clerk	8	4	3			
Sharp, Jodi	Financial Aid Tech. II	5	2	2	5	2	
Williams, Sandra	EOPS/CARE Sr. Secretary	15	15	30			
Wingler, Barbara	Financial Aid Tech. II	5	2	2	5	2	
Average		**7.5**	**4.1**	**8.3**	**5.0**	**2.0**	

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 to 2005-06
Average PHR'S

Purpose: To calculate an average PHR for staff performing Enrollment Fee Waiver functions.
Source: PHRs provided by client on EFCW 1.4 forms and schedule 3AA.
Findings:

Ref #	Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1	Brown, Elizabeth Jill	EOPS/CARE Sr. Sec./Academic Advisor	$21.63	$23.80	$26.69	$30.15	$32.81	$33.80	$35.24
2	Buddell, Shirly	Financial Aid Tech. II	$24.88	$28.20	$30.75				
3	Ferguson, Anita	Financial Aid Outreach Clerk						$14.36	$15.76
Sch. 3AA	Nevarez, Gracie						$8.43	$11.27	$17.57
Sch. 3AA and 4	Rawls, Korina	Job Placement/Finacial Aid Clerk	$18.86	$22.86	$21.84	$24.05	$21.77	$22.40	$46.81
Sch. 3AA	Sharp, Jodi	Financial Aid Tech. II					$12.96	$26.30	$29.48
5	Williams, Sandra	EOPS/CARE Sr. Secretary	$21.10	$23.34	$25.93	$28.13	$30.13	$31.09	$32.42
6	Wingler, Barbara	Financial Aid Tech. II			$23.80	$25.94	$28.87	$31.34	$33.55
	Average		**$21.62**	**$24.55**	**$25.80**	**$27.07**	**$22.50**	**$24.37**	**$30.12**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. 98-99 data for EFC 1 is headcount from CCCCO website. (see back-up for 98-99 in 98-99 workpapers, see rest of back-up in 05-06 workpapers) Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1 1.	Enrolled Students	9,188	16,316	22,084	22,849	21,440	19,271	22,253	25,248
EFC 2	1.8-1 2.	Paid Enrollment fees								22,481
EFC 3	1.8-1 3.	Exempted from enrollment fees (BOGG, etc.)	X							2,767
EFC 4	1.8-2 1.	Delinquencies collections								115
EFC 5	1.8-2 2.	Refunds								
EFW 6	1.8-3 1.	Waivers Requested	X	2,303	1,598	1,724	3,258	3,956	4,659	3,735
EFW 7	1.8-3 2.	Waivers Approved	X -	1,486	1,031	1,112	2,102	2,552	3,006	2,767
EFW 8	1.8-3 1-2	Waivers Denied	X	817	567	612	1,156	1,404	1,653	968

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2005 Summer Term

Data Current As Of May 08, 2012 01:19:25

Total Headcount	4,603

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2005 Fall Term

Data Current As Of May 08, 2012 01:16:42

Total Headcount	8,576

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California Home Tuesday, May 8, 2012

Student Demographics

Student Total Headcount For Taft
For 2006 Spring Semester

Data Current As Of May 08, 2012 01:16:54

Total Headcount	9,610

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST KERN CCD Fiscal Year: _____

JIM NICHOLAS — Employee Name
ACCOUNTANT / DIRECTOR OF BUSINESS SERVICES — Exact Position Title

BUSINESS SERVICES — Department/Location
(661) 763-7713 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
04/ 06	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
08/ 05	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	4
01/ 06	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
09/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
04/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
01/ 05	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
09/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
08/ 04	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	4
04/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
01/ 04	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
09/ 03	1A 1B 2A 2B 3 (4)	CCCCO ENROLLMENT FEE REVENUE REPORT	.5
08/ 03	1A 1B 2A 2B 3 (4)	INDEPENDENT AUDIT FIGURES / ENROLLMENT	5

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jim Nicholas Date 05/01/2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

BUSINESS OFFICE
Department/Location

MAUREEN JEWELL
Employee Name

CASHIER II
Exact Position Title

763-7713
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maureen Jewell Date 4/21/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Lead Cashier/Collection Technician
Exact Position Title

0617637713
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

different system

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Head Cashier/Collection Technician
Exact Position Title

6617637713
Telephone #

12mo/11mo/10mo/hrly (circle)
Work year length

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Different depts

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

see below

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

EOPS
Department/Location

Taft College SRA (see EFCW 1.7-4)

Elizabeth Jill Brown
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

(661) 763-7812
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

EOPS wtg 235 student

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				235
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				—
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				—
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Jill Brown Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid Office
Department/Location

Taft College - see A (see EFCW 1.7-4)

Shirly Buddell
Employee Name

Financial Aid Tech II
Exact Position Title

661-763-7762
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature No longer employed Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid
Department/Location

Anita C Ferguson
Employee Name

Financial Aid Outreach Clerk
Exact Position Title

661 763-7745
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anita C Ferguson Date 4/28/06

If you have any questions, please contact _____, at _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Migrant Education
Department/Location

Gracie Nevarez
Employee Name

Exact Position Title

661-763-7823
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	other
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				300 Student FTE-4R
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gracie Nevarez Date 4/27/06

If you have any questions, please contact _____, at

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCC
District

Financial Aid
Department/Location

Job Placement / Financial Aid Clerk
Exact Position Title

661 763 7782 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility an 1 filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/28/06

If you have any questions, please contact _____, at

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

(1) KCC.
District

Financial Aid Office
Department/Location

Jodi Sharp
Employee Name

Financial Aid Tech. II
Exact Position Title

765-2424
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

weekly students only

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	(7)	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				150 students
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jodi Sharp Date 4/27/06

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

EOPS/CARE Office
Department/Location

Taft College - from (see EFCW 1, 4)

Sandra Williams
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

661-763-7723
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Taft College-SAO (see EFCW 1.7-4)

West Kern Comm College
District

EOPS/CARE office
Department/Location

Sandra Williams
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

661-763-7723
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Williams Date 4-26-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Taft College
Department/Location

Barbara Wingler
Employee Name

Financial Aid Tech II
Exact Position Title

661 763-7763
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Wingler Date 4-27-06

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Westkern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS 05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer 05s-06s-07s			
Fall 05fs-06fs-07fs	5112	6536	6782
Winter/ Intersession	9296	10336	11376
Spring 05fs-06fs-07fs	X	X	X
Total	10840	11236	11632
2. Number of students who paid enrollment fees:	25248	28108	29790
Summer			
Fall	4634	5958	6782
Winter/ Intersession	8169	9176	10272
Spring	X	X	X
Total	9698	10217	10582
3. Number of students exempted from paying enrollment fees (BOGG, etc):	22501	25351	27636
Summer			
Fall	478	578	555
Winter/ Intersession	1127	1160	1104
Spring			
Total	1167	1019	1050
	2760	2757	2709

Fall 2007 estimate

Spring 2008 estimate

Fall 2007 estimate 11376 (0625-0525) = 1040 (0725+1040) = 11376 Actual as of 11-13-07 = 3700

Spring 2008 estimate 11632 (0635-0535) = 396 (0735+396) = 11632

estimate complete guess

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Melissa Parkinson Date 12-5-07

Employee Name: (print) Melissa Parkinson Position or Title Admin Assistant

If you have any questions, please contact Melissa Parkinson at (661) 763-7854

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall	18	43	143
Winter/Intersession	21	16	unable to determine
Spring	X	X	X
Total	76	214	unable to determine
2. Number of enrollment fee refunds processed as a result of change in waiver			
Summer			
Fall			
Wi			

EMPLOYEE CERTIFICATION: California requires that school district personnel maintain a record of data for state mandated reimbursement. Your signature on this form certifies that you have reported actual data as accurately as possible. State which you "certify (or declare) under penalty of perjury under the laws of the State of California" based on your personal knowledge or information." This information is used for cost accounting purposes. BLUE INK

Employee Signature: Melissa Parkinson Date 12-5-07

Employee Name: (print) Melissa Parkinson Position or Title Admin. Assistant

If you have any questions, please contact Melissa Parkinson, at (661)763-7854

PLEASE SUBMIT THIS INFORMATION BY _____: TO _____

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: _____

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								
Fall								
Winter/Intersession								
Spring								
Total								
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								
Fall								
Winter/Intersession								
Spring								
Total		No way to gather info						

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Westhaven Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer	645	780	749
Fall	1521	1566	1490
Winter/Intersession	—	—	
Spring	569	1376	1418
Total	3735	3722	3657
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer	478	578	555
Fall	1127	1160	1104
Winter/Intersession			
Spring	1162	1019	10504
Total	2767	2757	2709

Estimated 35%

35% est. of Annual

estimate complete guess

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal [illegible]

Melissa Partinson 12-5-07

Melissa Partinson

661-763-7854

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: West Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8 (7/1/07 - 12/6/07)
1. Enrollment Fees Collected	$1,128,937	$970,492	$444,227
2. Enrollment Fees Refunded (Do Not Track)	$ —	$ —	$ —
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 1,128,937	$ 970,492	$ 444,227
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 553,371	$ 450,420	$ 216,681
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 11,067	$ 9008	$ 4334
5 Number of credit units for which enrollment fees were waived.			
A. Summer	2612	2609	257
B. Fall	9468	11830	10434
C. ~~Winter/Intersession~~ No Winter session	0	0	0
D. Spring	9203	8082	142
TOTAL x $0.91 per credit	$26	$20	$20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge of information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Melissa Parkinson Date 12-6-07

Employee Name: (print) Melissa Parkinson Position or Title Admin Assistant

If you have any questions, please contact Melissa Parkinson at 661-763-

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Schedule 3AA
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 to 2005-06
PHR'S

Purpose: To calculate PHR's for staff involved in EFCW.
Source: PHRs provided by client on schedule titled 'WKCCD-TAFT COLLEGE Annual Salary & Benefits'.
Findings:

Staff	99-00 salary & benefits	99-00 PHRs	00-01 salary & benefits	00-01 PHRs	01-02 salary & benefits	01-02 PHRs	02-03 salary & benefits	02-03 PHRs	03-04 salary & benefits	03-04 PHRs	04-05 salary & benefits	04-05 PHRs	05-06 salary & benefits	05-06 PHRs
Brown, Crystal	25,298	$14.05	24,059	$13.37	23,884	$13.27	25,403	$14.11	26,449	$14.69	28,304	$15.72	35,614	$19.79
Jewell, Maureen									7,324	Not Used	18,211	$10.12	32,753	$18.20
Nevarez, Gracie					4,388	Not Used	5,993	Not Used	15,165	$8.43	20,283	$11.27	31,629	$17.57
Sharp, Jodi									23,327	$12.96	47,343	$26.30	53,070	$29.48
Rawls, Korina	16,973	$18.86	20,570	$22.86	19,653	$21.84	21,644	$24.05	19,594	$21.77	20,163	$22.40	42,130	$46.81
Wingler, Barbara					42,848	$23.80	46,695	$25.94	51,969	$28.87	56,413	$31.34	60,394	$33.55
Buddell, Shirley	44,792	$24.88	50,768	$28.20	55,345	$30.75								
Blair, Sheila	11,763	$13.07	13,161	$14.62	6,545	Not Used								
Kasper, Kevin														

Not Used -- Doesn't look like a full years salary.

Conclusion: Findings go forward to schedules 2A and 3A.

WKCCD-TAFT COLLEGE

Annual Salary & Benefits

Employee:	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Brown, Crystal	N/A	$25,298	$24,059	$23,884	$25,403	$26,449	$28,304	$35,614
Jewell, Maureen	N/A	N/A	N/A	N/A	N/A	$7,324	$18,211	$32,753
Nevarez, Gracie	N/A	N/A	N/A	$4,388	$5,993	$15,165	$20,283	$31,629
Sharp, Jodi	N/A	N/A	N/A	N/A	N/A	$23,327	$47,343	$53,070
Rawls, Korina	N/A	$16,973	$20,570	$19,653	$21,644	$19,594	$20,163	$42,130
Wingler, Barbara	N/A	N/A	N/A	$42,848	$46,695	$51,969	$56,413	$60,394
Buddell, Shirley	N/A	$44,792	$50,768	$55,345	N/A	N/A	N/A	N/A
Blair, Sheila	N/A	$11,763	$13,161	$6,545	N/A	N/A	N/A	N/A
Kasper, Kevin	N/A	N/A	N/A					

There is no data available in our payroll system for fiscal year 98-99. I was told it was too far back.

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: West Kern Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ADMINISTRATIVE ASSISTANT		
	AVERAGE DEAN		
	AVERAGE DIRECTOR		
	AVERAGE VICE PRESIDENT		
AGUNDEZ, ADRIAN	DIRECTOR OF MULTIMEDIA		$ 62.53
BAKER, CALVIN	COLLEGE FACILITIES MANAGER		
BLACK, SHERI	ACADEMIC ADVISOR		$ 37.94
BRETTSCHNEIDER, KIRK	MIS DIRECTOR-DECEASED	$ 68.39	Do not have for 04/05
CAPELA, MIKE	SUPERVISOR, MAINT.	$ 60.52	$ 62.53
DARNELL, ROE	SUPERINTENDENT/PRESIDENT	$ 115.29	$ 135.12
DUNCAN, WILLIAM	VICE PRESIDENT ADMIN SVCS	$ 101.18	$ 105.65
HEGEMAN, DEBBIE	ADMINISTRATIVE ASSISTANT/STUDENT SVCS	$ 47.16	$ 49.07
JEWELL, MINDY	CASHIER		$ 30.60
KLEIN, SHELLEY	ADMINISTRATIVE ASSISTANT	$ 58.01	$ 59.92
LIPSCOMB, LORETTA	VICE PRESIDENT INSTRUCTION	$ 102.46	RETIRED
McMURRAY, BROCK	DEAN OF STUDENTS	$ 84.84	$ 88.51

MA DATE REIMBURSEMENT SERVICES

NICHOLAS, JIM	DIRECTOR, BUSINESS SERVICES		$ 51.53
NUNEZ, ABEL	VICE PRESIDENT STUDENT SERVICES	$ 101.18	$ 111.74
OLVERA, ADRIANA	FINANCIAL AID CLERK		$ 16.48
PARKINSON, MELISSA	ADMIN ASSISTANT	$ 41.14	$ 43.79
PETERS, JANA	HUMAN RESOURCES DIRECTOR	$ 50.74	$ 54.15
QUINTERO, GIL	SKILLED MAINTENANCE WORKER		$ 37.45
ROBERTS, GAYLE	DIRECTOR, FINANCIAL AIDE	$ 43.51	$ 45.58
SHARP, JODI	FINANCIAL AID TECHNICIAN		$ 31.16
YONG, HENRY	VICE PRESIDENT OF INSTRUCTION		$ 104.69

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Jill Brown - Have 1.7-3 w/ 99-00 & 00-01 circled

Title: Academic Advisor Location: Taft College

1.7-3 Title Status - EOPS/CARE Sr. Secretary - SSA

See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Hours by D	E. Prod. Rate B + C
98-99	$26,064	$9,263	2,384	$26,064/2,384= $14.82 /1800 = Not Needed-ovr
99-00	$28,832	$10,104	2,384	$38,936/2,384 = $16.33 /1800 = 21.63
00-01	$31,572	$11,268	2,384	$42,840/2,384 = $17.97 /1800 = 23.80
01-02	$35,248	$12,799	2,384	$48,047/2,384 = 20.15 /1800 = 26.69
02-03	$39,024	$15,249	2,384	$54,273/2,384 = $22.77 /1800 = 30.15
03-04	$39,784	$19,266	2,384	$59,051/2,384 = $24.77 /1800 = 32.81
04-05	$40,564	$20,268	2,384	$60,832/2,384 = $25.52 /1800 = 33.80
05-06	$42,120	$21,308	2,384	$63,428/2,384 = $26.61 /1800 = 35.24

Have a Excel 1.6 for 00-01 only

Employee Name/or Job Class: Denise Earl -

Title: Information Systems Technician/IS Data Specialist Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Hours by D	E. Prod. Rate B + C
98-99	$29,496	$9,555	2,384	$39,051/2,384= $16.59
99-00	$32,064	$10,380	2,384	$42,464/2,384 = $18.04
00-01	$36,612	$11,712	2,384	$48,324/2,384 = $20.53 /1800 = 26.85
01-02	$36,948	$13,132	2,384	$50,080/2,384 = $21.00
02-03	$0	$0	n/a	$0
03-04	$0	$0	n/a	$0
04-05	$0	$0	n/a	$0
05-06	$0	$0	n/a	$0

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.4

Employee Name/or Job Class: Shirley Buddell — Have 1.7-3 of 99-00 circled -SAA

Title: Financial Aid Technician — Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	See Sch 3AA ↓
98-99	$30,972	$9,681	2,384	$40,653/2,384 = $17.05	N/A
99-00	$32,708	$10,433	2,384	$43,141/2,384 = $18.10	24.88
00-01	$34,848	$11,556	2,384	$46,405/2,384 = $19.47	28.20
01-02	$39,517	$13,183	2,384	$52,700/2,384 = $22.11	30.75
02-03	$0	$0	n/a	$0	
03-04	$0	$0	n/a	$0	
04-05	$0	$0	n/a	$0	
05-06	$0	$0	n/a	$0	

* Note: Diff Salary/Benefits amounts given on Sch 3AA ÷ by 1800 -SAA

Employee Name/or Job Class: Sheila Blair - Not needed - No EFCW 1.7-2, 1.7-3 or any EFCW 1.6 -SAA

Title: Financial Aid Clerk
Resigned: 1/14/02

Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	
98-99	$10,174	$865	1036	$11,038/1036 = $10.66	
99-00	$10,898	$926	1036	$11,824/1036= $11.41	
00-01	$12,016	$1,057	1,036	$13,073/1,036 = $12.62	
01-02	$6,307	$5,676	1,192	$7,499/1,192 = $6.29	Not used -SAA
02-03	$0	$0	n/a	$0	
03-04	$0	$0	n/a	$0	
04-05	$0	$0	n/a	$0	
05-06	$0	$0	n/a	$0	

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

(2) Employee Name/or Job Class: Anita Ferguson - Have 1.7-3 w/ 03-04 to 05-06 circled - SMA

Title: Financial Aid Outreach Clerk Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$6,319	$604	1,036	6,923/1,036 = ~~$6.68~~ - Not used - SMA
04-05	$13,537	$1,338	1,036	14,875/1,036 = $14.36
05-06	$14,852	$1,479	1,036	16,331/1,036 = $15.76

used - SMA

(1) Employee Name/or Job Class: [redacted] No 1.7-2 - but no PHR given for Crystal Brown & Maureen Jewell who turned in EFCW 1.7-2's. - SMA ← Now have Brown & Jewell on Sch 3A - SMA

Title: [redacted] Location: Taft College

Not using that now Brown & Jewell PHRs used - SMA

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$27,948	$16,902	2,384	$44,850/2,384 = ~~$18.81~~ /1800 = 24.92
04-05	$29,940	$18,160	2,384	$48,100/2,384 = ~~$20.18~~ /1800 = 26.72
05-06	$0	$0	n/a	$0

See Attached Tape

(4) Employee Name/or Job Class: Korina Rawls Have 1.7-3 w/ 99-00 thru 04-05 circled spk

Title: Financial Aid Clerk/Student Job Placement Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	See Sch 3AA ↓
98-99	$13,668	$1,162	1,036	$14,830/1036 = $14.31	N/A
99-00	$13,937	$1,185	1,036	$15,122/1036 = $14.60	16.38
00-01	$14,832	$1,305	1,036	$16,137/1,036 = $15.58	19.86
01-02	$15,562	$1,401	1,036	$16,962/1,036 = $16.37	18.97
02-03	$16.131	$1,026	1,036	$17,157/1,036 = $16.56	20.89
03-04	$16,331	$1,562	1,036	$17,892/1,036 = $17.27	18.91
04-05	$16,450	$1,626	1,036	$18,075.94/1,036 = $17.48	19.46
05-06	$17,077	$1,701	1,036	$18,778/1,036 = $18.12	40.67

~~* Note~~: Diff. Salary/Benefits Amounts given on sch 3AA ÷ by 1036 hrs

spk

(b) Employee Name/or Job Class: Barbara Wingler Have 1.7-3 w/ 01-02 to 04-05 circled spk

Title: Financial Aid Technician Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C	See Sch 3AA ↓
98-99	$0	$0	n/a	$0	
99-00	$0	$0	n/a	$0	
00-01	$0	$0	n/a	$0	
01-02	$30,108	$12,336	2,384	$42,444/2,384 = $17.80	23.80
02-03	$33,192	$14,539	2,384	$47,731/2,384 = $20.02	25.94
03-04	$34,848	$14,649	2,384	$49,497/2,384 = $20.76	28.87
04-05	$37,320	$15,910	2,384	$53,230/2,384 = $22.33	31.34
05-06	$30,510	$16,027	1,600	$46,537/1,600 = $29.09	33.55

~~* Note~~: Diff. Salary/Benefits Amounts given on sch 3AA ÷ by 1800 hrs

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.4

Employee Name/or Job Class: [redacted]

Title: [redacted] Admissions Technician 1998-2000
Academic Advisor 2000-2006

Location: Taft College

No 1.7-2 - but no PHR given for Crystal Brown & Maureen Jewell who turned in EFCW 1.7-2's. ← Now have Brown & Jewell on Sch 3AA

Not using now that Brown & Jewell's PHR's rec'd

See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
~~98-99~~	$30,216	$9,616	2,384		~~$39,832/2,384 = $16.64~~ /1800 = 22.13
~~99-00~~	$31,316	$10,315	2,384		~~$41,631/2,384 = $17.46~~ /1800 = 23.13
00-01	$34,848	$11,556	2,384		~~$46,405/2,384 = $19.47~~ /1800 = 25.78
01-02	$37,188	$12,974	2,384		~~$50,162/2,384 = $21.04~~ /1800 = 27.87
02-03	$39,024	$15,249	2,384		~~$54,273/2,384 = $22.77~~ /1800 = 30.15
03-04	$39,984	$19,307	2,384		~~$59,290/2,384 = $24.87~~ /1800 = 32.94
04-05	$40,764	$20,307	2,384		~~$61,071/2,384 = $25.62~~ /1800 = 33.93
05-06	$42,300	$21,327	2,384		~~$63,627/2,384 = $26.69~~ /1800 = 35.35

Employee Name/or Job Class: Adriana Olvera Not needed – No EFCW 1.7-2, 1.7-3 or any EFCW 1.6

Title: Financial Aid Clerk

Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0		n/a	$0
99-00	$0	$0		n/a	$0
00-01	$0	$0		n/a	$0
01-02	$0	$0		n/a	$0
02-03	$0	$0		n/a	$0
03-04	$0	$0		n/a	$0
04-05	$11,115	$1099		1,036	$12,214/1,036 = $11.79
05-06	$12,118	$1207		1,036	$13.325/1,036 = $12.86

Work in System - Last we have, Olvera's PHR as 16.48

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Sandi Liddell Williams – Have 1.7-3 w/ 01-02 thru 04-05 circled

Title: Sr. Secretary Evening College Location: Taft College Have 1.7-3 w/ 05-06 circled

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly	E. Prod. Rate B + C by D
98-99	$12,398	$1,054	1,036	$13,452/1,036= $12.98 Not Needed
99-00	$27,948	$10,029	2,384	$37,977/2,384 = $15.93 / 1800 = 21.10
00-01	$30,816	$11,202	2,384	$42,018/2,384 = $17.63 / 1800 = 23.34
01-02	$33,984	$12,685	2,384	$46,669/2,384 = $19.57 / 1800 = 25.93
02-03	$35,776	$14,854	2,384	$50,630/2,384 = $21.24 / 1800 = 28.13
03-04	$35,776	$18,466	2,384	$54,242/2,384 = $22.75 / 1800 = 30.13
04-05	$36,496	$19,461	2,384	$55,957/2,384 = $23.47 / 1800 = 31.09
05-06	$37,876	$20,483	2,384	$58,359/2,384 = $24.48 / 1800 = 32.42

Both have same averages. See Attached Tape

Employee Name/or Job Class: [redacted] No 1.7-2 – but no PHR given for Crystal Brown & Maureen Jewell who turned in EFCW 1.7-2's

Title: [redacted] Location: Taft College

Now have Brown & Jewell on Sch 3AA

Not using now that Brown & Jewell PHR's rec'd. See Attached Tape

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly	E. Prod. Rate B + C by D
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$27,948	$12,142	2,384	$40,090/2,384 = $16.82 / 1800 = 22.27
02-03	$29,352	$14,072	2,384	$43,424/2,384 = $18.21 / 1800 = 24.12
03-04	$12,840	$6,197	1,036	$19,037/1,036 = $18.38 ← Not Used
04-05	$0	$0	$0	$0
05-06	$0	$0	$0	$0

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Gayle Roberts

Title: Director of Financial Aid Location: Taft College

Not used in average for various Financial Aid Staff - because no 1.7-3 turned in - see Have EFCW 1-6 for 99-00 to 04-05

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$40,800	$11,121	2,384	$51,921/2,384 = $21.78 /1800 = 28.85
00-01	$45,000	$12,450	2,384	$57,450/2,384 = $24.10 /1800 = 31.92
01-02	$45,000	$13,677	2,384	$58,677/2,384 = $24.61 /1800 = 32.60
02-03	$49,571	$16,533	2,384	$66,104/2,384 = $27.73 /1800 = 36.72
03-04	$49,771	$21,263	2,384	$71,033.54/2,384 = $29.80 /1800 = 39.46
04-05	$50,257	$22,191	2,384	$72,447/2,384 = $30.39 /1800 = 40.25 43.51
05-06	$53,180	$23,402	2,384	$76,582/2,384 = $32.12 /1800 = 42.55 45.58

See Attached Sheet

Employee Name/or Job Class: Amber Walker Teel Have EFCW 1-6 for 02-03 to 04-05

Title: Information Systems Operator Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$12,038	$1,059	1,036	$13,097/1,036 = $12.64 N/A
01-02	$27,936	$12,141	2,384	$40,077/2,384 = $16.81 N/A
02-03	$31,584	$14,343	2,384	$45,928/2,384 = $19.26 /1800 = 25.52
03-04	$33,168	$17,944	2,384	$51.111/2,384 = $21.44 /1800 = 28.40
04-05	$35,668	$19,297	2,384	$54,965/2,384 = $23.06 /1800 = 30.54
05-06	$38,872	$20,673	2,384	$59,545/2,384 = $24.98 N/A

See Attached Sheet

Copy see 04-05 file

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.4

Employee Name/or Job Class: Kirk Brettschneider Have EFCW L 6 for 99-00 only - SCA

Title: Director of Information Services

Location: Taft College

See Attached Page

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$57,520	$11,937	2,384	$69,457/2,384= $29.13
99-00	$58,675	$12,641	2,384	$71,316/2,384 = $29.91 / 1800 = 39.62
00-01	$80,850	$15,605	2,384	$96,455/2,384 = $40.46
01-02	$80,850	$16,903	2,384	$97,753/2,384 = $41.00
02-03	$84,271	$20,758	2,384	$105,029/2,384 = $44.06
03-04	$84,271	$16,840	2,384	$101,111/2,384 = $42.41
04-05	$85,956	$29,272	2,384	$115,228/2,384 = $48.33
05-06	$0	$0	n/a	$0

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

EFCW 1.4

Employee Name/or Job Class: Kevin Kasper — Have EFCW 1.6 for 00-01 to 04-05

Title: Applications Programmer — Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$45,780	$13,747	2,384	$59,527/2,384 = ~~$24.97~~ / 1800 = 33.07
02-03	$50,472	$16,643	2,384	$67,115/2,384 = ~~$28.15~~ / 1800 = 37.29
03-04	$52,992	$21,906	2,384	$74,898/2,384 = ~~$31.42~~ / 1800 = 41.61
04-05	$56,860	$23,500	2,384	$80,360/2,384 = ~~$33.71~~ / 1800 = 44.64
05-06	$58,920	$24,497	2,384	$83,417/2,384 = $35.00 N/A

See Attached Tape ↓

÷ by 5% = 31.50 ↑ need for 2001 see attached tape

Employee Name/or Job Class: Pongpunt Pungchai — Have EFCW 1.6 for 01-02 only

Title: Information Systems Programmer — Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$34,932	$11,564	2,384	$46,496/2,384 = $19.50
01-02	$43,596	$52,315	2,384	$52,315/2,384 = ~~21.94~~ / 1800 = 29.06
02-03	$45,780	$16,072	2,384	$61,852/2,384 = $25.94
03-04	$50,472	$21,403	2,384	$71,875/2,384 = $30.15
04-05	$54,060	$22,945	2,384	$77,005/2,384 = $32.30
05-06	$56,112	$23,962	2,384	$80,074/2,384 = $33.59

See attached tape

Copy - see 04-05.xls

PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Duplicate this form for additional employees:

Employee Name/or Job Class: JIM NICHOLAS

Have EFCW 1-6 for 03-04 to 05-06

Title: ACCOUNTANT / DIRECTOR Location: BUSINESS SERVICES

A. Fiscal Year	B. Annual ~~Monthly~~ Salary	C. Annual ~~Monthly~~ Benefits	D. Annual ~~Monthly~~ Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
-06/30 02-03	(53,200 x 3 mos.)	10,000 x 3 mos	1800 x 3 mos	35.11
03-04	53,200	11,000	1800	35.67
04-05	54,275	12,000	1800	36.82
- 06/06	57,000 x 7 mos	14,000 x 7 mos	1800 x 7 mos	39.44
05-06 6-06/30/06	70,200 x 5 mos.	14,000 x 5 mos	1800 x 5 mos	46.78

SixTen list = 51.53

Employee Name/or Job Class: _____

Title: _____ Location: _____

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits	D. Annual /Monthly Hours	E. Prod. Rate B + C by D
98-99				
99-00				
00-01				
01-02				
02-03				
03-04				
04-05				
05-06				

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PROGRAM: 308/95 ENROLLMENT FEE COLLECTION AND WAIVERS EFCW 1.4

Employee Name/or Job Class: Carla Thurman LaCotts Not needed - No EFCW 1.7-2, 1.7-3 or any EFCW 1.6's -SM

Title: Financial Aid Clerk Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$10,698	$1,042	1,036	$11,940/1,036 = $11.53
04-05	$11,674	$1,154	1,036	$12,828/1,036 = $12.38
05-06	$12,722	$1,267	1,036	$13,989/1,036 = $13.50

Employee Name/or Job Class: Kandace Anderson Not needed - No EFCW 1.7-2, 1.7-3 or any EFCW 1.6's -SM

Title: Financial Aid Clek Location: Taft College

A. Fiscal Year	B. Annual /Monthly Salary	C. Annual /Monthly Benefits Hours	D. Annual /Monthly by D	E. Prod. Rate B + C
98-99	$0	$0	n/a	$0
99-00	$0	$0	n/a	$0
00-01	$0	$0	n/a	$0
01-02	$0	$0	n/a	$0
02-03	$0	$0	n/a	$0
03-04	$10,698	$1,042	1,036	$11,940/1,036= $11.53
04-05	$4,364	$431.34	380	$4,795/380 = $12.62
05-06	$0	$0	$0	$0

Schedule 5

West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. Initial year claim 99-00 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received				Not supplied by client			
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 137,215	$ 142,945	$ 152,179	$ 189,372	$ 349,754	$ 559,074	$ 553,371
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181	$ 11,067
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 9,605			For 00-01 through 05-06 - unit fee			
1.8-4 line 5	Summer				1,819	2,125	2,292	2,612
	Fall				8,347	8,860	10,293	9,468
	Winter/Interssion							
	Spring				7,050	9,273	9,622	9,203
	Total # of credits		12,995	13,834	17,216	20,258	22,207	21,283
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208	$ 19,368
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181	$ 11,067
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 9,605						
1.8-4 5	Credit Units Waived		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208	$ 19,368
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 12,349**	**$ 14,684**	**$ 15,633**	**$ 19,454**	**$ 25,430**	**$ 31,389**	**$ 30,435**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: West Kern
COUNTY: Kern

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$9,124,664	$8,096,542	$299,943	$8,396,485
EQUALIZATION	0	0	0	0
ENROLL FEE ADMIN (2%)	10,882	10,013	869	10,882
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	0	0	0	0
S.F.A.A.	135,216	123,325	11,891	135,216
E.O.P.S.	275,073	253,068	22,005	275,073
C.A.R.E.	43,040	39,596	3,444	43,040
D.S.P.S.	271,136	249,445	21,691	271,136
STATE HOSPITALS	0	0	0	0
CALWORKS	194,719	179,143	15,576	194,719
MATRICULATION (CREDIT)	389,737	354,878	34,859	389,737
MATRIC. (NONCREDIT)	7,300	6,716	584	7,300
FAC.& STAFF DIVERSITY	9,437	7,980	1,457	9,437
PART-TIME FAC. INS.	0	0	0	0
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. ALLO.	97,197	89,422	7,775	97,197
TELECOMMUNICATIONS	52,332	33,762	18,570	52,332
PLANT & INSTRUCTIONAL	100,000	92,000	8,000	100,000
ECON. DEVELOPMENT	158,158	132,854	-1	132,853
TANF	45,632	41,983	3,649	45,632
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	217,257	0	182,496	182,496
VTEA TITLE I C	217,257	243,328	-60,832	182,496
NURSING CARE	0	0	0	0
PRIOR YEAR CORRECTION	317,965	317,965	0	317,965
TOTAL	$11,667,002	$10,272,020	$571,976	$10,843,996

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Schedule 5A
West Kern County C[illegible]munity College District
308/95 Enrollment [illegible]ollection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 14.43	$ 15.96	$ 16.30	$ 18.36	$ 19.73	$ 21.76	
2	Staff Training	(04)(B)(1)(b)							
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 892.86	$ 653.40	$ 616.30	$ 684.18	$ 762.54	$ 1,085.48	
4	Waiving student fees	(04)(B)(2)(b)	$ 15,406.41	$ 12,142.44	$ 13,761.72	$ 27,289.27	$ 27,540.00	$ 35,131.80	$ 35,430.11
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,017.55	$ 1,645.80	$ 1,731.60	$ 1,807.00	$ 2,223.96	$ 2,358.76	$ 283.42
6	EFCW - Fee Waiver Costs	Total	$ 18,331.25	$ 14,457.60	$ 16,125.92	$ 29,798.81	$ 30,546.23	$ 38,597.80	$ 35,713.53
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 12,349.00	$ 14,684.00	$ 15,633.00	$ 19,454.00	$ 25,430.00	$ 31,389.00	$ 30,435.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 5,982.25	$ (226.40)	$ 492.92	$ 10,344.81	$ 5,116.23	$ 7,208.80	$ 5,278.53
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 12,349.00**	**$ 14,457.60**	**$ 15,633.00**	**$ 19,454.00**	**$ 25,430.00**	**$ 31,389.00**	**$ 30,435.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Taft College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of May 08, 2012 01:17:24

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	48	13,200
BOGW - Part A-2 based on SSI recipient status	58	5,353
BOGW - Part B based on income standards	1,040	205,323
BOGW - Part C based on financial need	753	323,343

Total Amount = $ 547,219

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 8, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8727

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
West Kern Community College District CC 15255

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for West Kern Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers 2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Dan Branvell

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number:	CC15255
(02) Claimant Name	West Kern Community College District
County of Location	Kern County
Street Address or P.O. Box	29 Emmons Park Drive
City / State / Zip Code	Taft / CA / 93268

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 302,600	(13) $ 275,171
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 275,171
Due from State	(08) $ 302,600	(17) $ 275,171
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	186,195
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	48,393
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	81,801
(32) EFCW-1, (09)	11,715
(33) EFCW-1, (10)	29,502
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date**

William H. Duncan IV
Type or Print Name

Executive Vice President
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 227	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: **West Kern Community College District**

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: **2006-2007**

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 186,194.88	$ -	$ -	$ -	$ -	$ 186,194.88
B. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 48,392.58	$ -	$ -	$ -	$ -	$ 48,392.58
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 234,587.46	$ -	$ -	$ -	$ -	$ 234,587.46

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.87%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 81,800.65
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 316,388.11
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 11,715.00
(10) Enrollment Fee Waiver offsets		$ 29,502.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 275,171.11

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ventura County Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Admissions and Record Office Staff Various	$34.61	1,264.9	$ 43,778.19				
Calculating total enrollment fee to be collected Admissions and Record Office Staff Various	$34.61	1,140.8	$ 39,483.09				
Answering student's questions regarding enrollment fee collection Admissions and Record Office Staff Various	$34.61	1,405.4	$ 48,640.89				
[illegible]ng written and computer records for enrollment fee information Admissions and Record Office Staff Various	$34.61	1,545.9	$ 53,503.60				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Admissions and Record Office Staff Various	$34.61	22.8	$ 789.11				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 186,194.88	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Kern Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$40.08	465.3	$ 18,649.22				
Receiving waiver applications							
Financial Aid Office Staff Various	$40.08	188.4	$ 7,551.07				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$40.08	381.4	$ 15,286.51				
ing students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$40.08	80.4	$ 3,222.43				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$40.08	91.9	$ 3,683.35				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 48,392.58	$ -	$ -	$ -	$ -

New 04/06

West Kern Community College District
308/95 ENROLLMEN[illegible]E COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	1,264.90	Admissions and Record Office Staff	Various	$34.61	$43,778.19	Referencing student accounts and records	Calculating and collecting enrollment fe
06-07	1,140.80	Admissions and Record Office Staff	Various	$34.61	$39,483.09	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fe
06-07	1,405.40	Admissions and Record Office Staff	Various	$34.61	$48,640.89	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fe
06-07	1,545.90	Admissions and Record Office Staff	Various	$34.61	$53,503.60	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fe
06-07	22.80	Admissions and Record Office Staff	Various	$34.61	$789.11	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fe
	5,379.80	**Admissions and Record Office Staff Total**			$186,194.88		
06-07	465.30	Financial Aid Office Staff	Various	$40.08	$18,649.22	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	188.40	Financial Aid Office Staff	Various	$40.08	$7,551.07	Receiving waiver applications	Waiving student fees
06-07	381.40	Financial Aid Office Staff	Various	$40.08	$15,286.51	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	80.40	Financial Aid Office Staff	Various	$40.08	$3,222.43	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	91.90	Financial Aid Office Staff	Various	$40.08	$3,683.35	Entering approved application information into district records; providing student award letter	Waiving student fees
	1,207.40	**Financial Aid Office Staff Total**			$48,392.58		
	6,587.20	**Grand Total**			$234,587.46		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$7,077,079		$7,077,079	$128,791	$6,948,288
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	369,146		369,146	11,329	357,817
Course and Curriculum Development	6020	355,814		355,814		355,814
Academic/Faculty Senate	6030	32,840		32,840		32,840
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	364,544		364,544	89,946	274,598
Library	6120	210,612		210,612		210,612
Media	6130	530		530		530
Museums and Galleries	6140					
Academic Information Systems and Technology	6150					
Other Instructional Support Services	6190					
Admissions and Records	6200	170,466		170,466	26,760	143,706
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	353,117		353,117	196	352,921
Matriculation and Student Assessment	6320	301,034		301,034	2,434	298,600
Transfer Programs	6330					
Career Guidance	6340					
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	270,839		270,839	-43,991	314,830
Subtotal		$9,506,021	$0	$9,506,021	$215,465	$9,290,556

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$389,291	-$105,435	$494,726	$1,726	$493,000
Health Services	6440					
Student Personnel Admin.	6450	274,645		274,645	21,316	253,329
Financial Aid Administration	6460	291,255		291,255	381	290,874
Job Placement Services	6470					
Veterans Services	6480					
Miscellaneous Student Services	6490	676,011		676,011	30,176	645,835
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	412,954		412,954	412,954	0
Custodial Services	6530	256,226		256,226	256,226	0
Grounds Maintenance and Repairs	6550	42,736		42,736	42,736	0
Utilities	6570	387,073		387,073	387,073	0
Other	6590	4,389		4,389	4,389	0
Planning, Policy Making, and Coordination	6600	748,503		748,503	748,503	0
General Inst. Support Services	6700					
Community Relations	6710					
Fiscal Operations	6720	640,526		640,526	640,526	0
Human Resources Management	6730	299,063		299,063	299,063	0
Noninstructional Staff Benefits & Incentives	6740	299,945		299,945	299,945	0
Staff Development	6750					
Staff Diversity	6760					
Logistical Services	6770	277,651		277,651	277,651	0
Management Information Systems	6780	985,182		985,182	985,182	0
Subtotal		$15,491,471	-$105,435	$15,596,906	$4,623,312	$10,973,594

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Kern Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	3,022		3,022	3,022	0
Community Services and Economic Development	6800					
Community Recreation	6810	81,105		81,105		81,105
Community Service Classes	6820	857		857		857
Community Use of Facilities	6830					
Economic Development	6840	130,526		130,526		130,526
Other Community Services & Economic Development	6890	94,055		94,055	36,761	57,294
Ancillary Services	6900					
Bookstores	6910	2,283		2,283		2,283
Child Development Center	6920	27,768		27,768		27,768
Farm Operations	6930					
Food Services	6940	14		14		14
Parking	6950					
Student and Co-curricular Activities	6960	61,534		61,534	31,317	30,217
Student Housing	6970	161,916		161,916		161,916
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010					
Other Auxiliary Operations	7090	2,129,543		2,129,543	-37,739	2,167,282
Physical Property Acquisitions	7100	97,690		97,690	97,690	0
(05) Total		$18,281,784	-$105,435	$18,387,219	$4,754,363	$13,632,856
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.87%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	362,121	209	24,413	16,457		403,200
Business and Management	0500	283,748	9,872	2,108	3,316		299,044
Communications	0600	5,834		271	3,969		10,074
Information Technology	0700	141,804			288		142,092
Education	0800	305,755	346,592	138,219	17,309		807,875
Engineering and Industrial Tech.	0900	160,267		17,453	8,965		186,685
Fine and Applied Arts	1000	139,101	583	6,030	7,665		153,379
Foreign Language	1100	139,200		430	70		139,700
Health	1200	553,022	189,288	1,036,677	32,313		1,811,300
Family and Consumer Sciences	1300	159,750	22,543	19,465	388		202,146
Law	1400						
Humanities (Letters)	1500	662,833		7,849	5,854		676,536
Library Science	1600						
Mathematics	1700	550,049	31,416	7,069	9,633		598,167
Mili tudies	1800						
Physical Sciences	1900	118,965	807	7,651	15,686		143,109
Psychology	2000						
Public and Protective Services	2100	38,040					38,040
Social Sciences	2200	487,881	2,541	1,134	298		491,854
Commercial Services	3000						
Interdisciplinary Studies	4900	552,937	91,865	7,504	6,580		658,886
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	314,992					314,992
Subtotal - Instructional Activities	**599**	4,976,299	695,716	1,276,273	[illegible]		7,077,079

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

West Kern Community College District **690** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		348,295	9,522	[illegible]		369,146
Course and Curriculum Development	6020		330,370	25,444			355,814
Academic/Faculty Senate	6030		32,840				32,840
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		711,505	34,966	11,329		757,800
Instructional Support Services (6100)							
Learning Center	6110		274,458	140	[illegible]		364,544
Library	6120		141,908	68,704			210,612
Media	6130			530			530
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150						
Other Instructional Support Services	6190						
Subtotal - Instructional Support Services	**6100**		416,366	69,374	89,946		575,686
Admissions and Records	**6200**		139,281	4,425	[illegible]		170,466
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		315,312	37,609	[illegible]		353,117
[illegible]culation and Student Assessment	6320		253,310	45,290	[illegible]		301,034
[illegible]nsfer Programs	6330						
Career Guidance	6340						
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		568,622	82,899	2,630		654,151

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Kern Community College District 690 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		283,138	31,692	[illegible]		270,839
Extended Opportunity Prgms. & Services (EOPS)	6430		267,143	14,987	[illegible]	[illegible]	389,291
Health Services	6440						
Student Personnel Administration	6450		217,183	36,146	[illegible]		274,645
Financial Aid Administration	6460		267,548	23,326	[illegible]		291,255
Job Placement Services	6470						
Veterans Services	6480						
Miscellaneous Student Services	6490		473,943	171,892	[illegible]		676,011
Subtotal - Other Student Services	**6400**		1,508,955	278,043	9,608	105,435	1,902,041
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		324,191	54,340	34,423		412,954
Custodial Services	6530		232,527	23,363	336		256,226
Grounds Maintenance and Repairs	6550		14	32,793	9,929		42,736
Utilities	6570			387,073			387,073
Other Operation and Maintenance of Plant	6590			4,389			4,389
Subtotal - Operation and Maintenance of Plant	**6500**		556,732	501,958	44,688		1,103,378
Pla[illegible], Policymaking, and Coordination	**6600**		408,071	329,828	10,604		748,503

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710						
Fiscal Operations	6720		526,651	109,001	4,874		640,526
Human Resources Management	6730		198,963	65,357	34,743		299,063
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		299,945				299,945
Staff Development	6750						
Staff Diversity	6760						
Logistical Services	6770		62,023	190,442	25,186		277,651
Management Information Systems	6780		749,427	160,704	75,051		985,182
Other General Institutional Support Services	6790		(228)	3,250			3,022
Subtotal - General Institutional Support Services	**6700**		1,836,781	528,754	139,854		2,505,389
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		49,441	31,664			81,105
Community Service Classes	6820			857			857
Community Use Facilities	6830						
Economic Development	6840		2,248	128,278			130,526
Community Svcs. & Economic Development	6890		42,906	14,388	36,761		94,055
Subtotal - Community Services	**6800**		94,595	175,187	36,761		306,543

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Kern Community College District | 690 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2005-06

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		2,283				2,283
Child Development Centers	6920		27,768				27,768
Farm Operations	6930						
Food Services	6940			14			14
Parking	6950						
Student and Co-curricular Activities	6960		28,450	1,767	[illegible]		61,534
Student Housing	6970		147,066	14,850			161,916
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		205,567	16,631	31,317		253,515
Auxiliary Operations (7000)							
Contract Education	7010						
Other Auxiliary Operations	7090		2,014,264	119,248	[illegible]	33,770	2,129,543
Subtotal - Auxiliary Operations	**7000**		2,014,264	119,248	(37,739)	33,770	2,129,543
Physical Property and Related Acquisitions (7100)	**7100**			6,000	[illegible]		97,690
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					13,230	13,230
Tax Revenue Anticipation Notes	7220						
Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					13,230	13,230
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	4,976,299	9,156,455	3,423,586	586,239	152,435	18,295,014

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection functions.
Source: Schedules 2 and 4
Findings:

***EFC 1**	28108
Avg. time p/account	2.7
Total Time (in minutes)	75892
Per Hour	60
Hours Worked **(** 11)**	**1264.9**
***EFC 2**	25351
Avg. time p/student	2.7
Total Time (in minutes)	68448
Per Hour	60
Hours Worked **(** 12)**	**1140.8**
***EFC 1**	28108
Avg. time p/question	3.0
Total Time (in minutes)	84324
Per Hour	60
Hours Worked **(** 13)**	**1405.4**
***EFC 1**	28108
Avg. time p/file	3.3
Total Time (in minutes)	92756
Per Hour	60
Hours Worked **(** 14)**	**1545.9**
***EFC 4**	273
Avg. time p/account	5.0
Total Time (in minutes)	1365
Per Hour	60
Hours Worked **(** 15)**	**22.8**
***EFC 5**	
Avg. time p/student	5.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

***EFC Workload Multiplier (Client provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: *Findings go forward to the EFCW-2.*

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waivers functions.
Source: Schedules 3 and 4
Findings:

***EFW 6**	3,722
Avg. time p/question	7.5
Total Time (in minutes)	27915
Per Hour	60
Hours Worked (** 21)	**465.3**
***EFW 7**	2,757
Avg. time p/application	4.1
Total Time (in minutes)	11304
Per Hour	60
Hours Worked (** 22)	**188.4**
***EFW 7**	2,757
Avg. time p/evaluation	8.3
Total Time (in minutes)	22883
Per Hour	60
Hours Worked (** 23)	**381.4**
***EFW 8**	965
Avg. time p/application	5.0
Total Time (in minutes)	4825
Per Hour	60
Hours Worked (** 24)	**80.4**
***EFW 7**	2,757
Avg. time p/application	2.0
Total Time (in minutes)	5514
Per Hour	60
Hours Worked (** 25)	**91.9**
***EFW 8**	
Avg. time p/application	
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** 26)	**0.0**

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to the EFCW-2.

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 to 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection functions.
Source: EFCW 1.7-2 and attachment, about 04-05 regarding COTOP for code 15, from Crystal Brown.
Backup in 2005-06 claim.
Findings:

		*Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Brown, Crystal	Lead Cashier/Collection Tech. (98-99 to 00-01)	4	4	3	3	5	5
Brown, Crystal	Lead Cashier/Collection Tech. (01-02 to 05-06)	2	2	3	3	5	5
Jewell, Maureen	Cashier II	2	2	3	4	5	5
Average (for 99-99 to 03-04, and 05-06)		**2.7**	**2.7**	**3.0**	**3.3**	**5.0**	**5.0**
Average (for 04-05)						**10.0**	

***EFC Workload Multiplier (Client Provided, except codes 11,13 and 14 used default multiplier 1 due to client not providing multiplier 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

Conclusion: Findings go forward to Schedule 1A.

****Activities**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-07
Average PHR'S

Purpose: To calculate an average PHR for staff performing Collection Fee functions.
Source: West Kern CCD PHR list.
Findings:

	Staff	Title	06-07
	Brown, Crystal	Lead Cashier/Collections Tech.	$34.61
	Jewell, Maureen	Cashier II	$34.61
	Average	*	**$34.61**

Conclusion: Findings go forward to EFCW-2.

Schedule 3
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1999-00 thru 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver functions.
Source: EFCW 1.7-3. Backup is in 2005-06 claim.
Findings:

Staff	Title	*Multiplier					
		6	7	7	8	7	
		**Activity Codes					
		21	22	23	24	25	26
Brown, Elizabeth Jill	EOPS/CARE Sr. Secretary	10	4	15			
Buddell, Shirly	Financial Aid Tech. II	5	2	2	5	2	
Ferguson, Anita	Financial Aid Outreach Clerk	6	2	4			
Nevarez, Gracie		6	2				
Rawls, Korina	Job Placement/Finacial Aid Clerk	8	4	3			
Sharp, Jodi	Financial Aid Tech. II	5	2	2	5	2	
Williams, Sandra	EOPS/CARE Sr. Secretary	15	15	30			
Wingler, Barbara	Financial Aid Tech. II	5	2	2	5	2	
Average		**7.5**	**4.1**	**8.3**	**5.0**	**2.0**	

***EFW Workload Multiplier (Client Provided, except code 24 used default multiplier 8)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Conclusion: Findings go forward to Schedule 1B

****Activities**
21- Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22- Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23- Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24- Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25- Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26- Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR'S

Purpose: To calculate an average PHR for staff performing Enrollment Fee Waiver func
Source: West Kern CCD PHR list.
Findings:

	Staff	Title	06-07
	Brown, Elizabeth Jill	EOPS/CARE Sr. Sec./Academic Advisor	$41.09
	Buddell, Shirly	Financial Aid Tech. II	$36.12
	Ferguson, Anita	Financial Aid Outreach Clerk	
	Nevarez, Gracie		
	Rawls, Korina	Job Placement/Finacial Aid Clerk	
	Sharp, Jodi	Financial Aid Tech. II	$36.12
	Williams, Sandra	EOPS/CARE Sr. Secretary	$50.93
	Wingler, Barbara	Financial Aid Tech. II	$36.12
	Average		**$40.08**

Conclusion: Findings go forward to EFCW-2.

Schedule 4
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers
Source: EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.

Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	9,188	16,316	22,084	22,849	21,440	19,271	22,253	25,248	28,801
EFC 2	1.8-1	2.	Paid Enrollment fees								22,481	25,351
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	X							2,767	2,757
EFC 4	1.8-2	1.	Delinquencies collections								115	273
EFC 5	1.8-2	2.	Refunds									
EFW 6	1.8-3	1.	Waivers Requested	X	2,303	1,598	1,724	3,258	3,956	4,659	3,735	3,722
EFW 7	1.8-3	2.	Waivers Approved	X	1,486	1,031	1,112	2,102	2,552	3,006	2,767	2,757
EFW 8	1.8-3	1-2	Waivers Denied	X	817	567	612	1,156	1,404	1,653	968	965

Conclusion: Findings go forward to Schedules 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2006 Summer Term

Data Current As Of January 22, 2008 11:57:52

Total Headcount	6,027

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Summer 6,027
FALL 9,627
SPRING 12,606
26,260 total

0• C
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5,027• +
9,627• +
12,606• +
26,260• =

California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2006 Fall Term

Data Current As Of January 22, 2008 11:57:45

Total Headcount	9,627

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Taft
For 2007 Spring Semester

Data Current As Of January 22, 2008 11:57:29

Total Headcount	10,606

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1.6's, 1.7's &/or 1.8's used in multiple years

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

BUSINESS OFFICE
Department/Location

MAUREEN JEWELL
Employee Name

CASHIER II
Exact Position Title

763-7713
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4/21/04

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Lead Cashier/Collections Technician
Exact Position Title

6617637713
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02 02-03 03-04 04-05 05-06

different system

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	4		✓			
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WKCCD
District

Business Office
Department/Location

Crystal Brown
Employee Name

Head Cashier/Collection Technic
Exact Position Title

6617637713
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Different dept

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		✓			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	3		✓			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Crystal J Brown Date 4/26/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

EOPS
Department/Location

Taft College - see EFCW 1.7-4

Elizabeth Jill Brown
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

(661) 763-7812
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

EOPS w/ 235 student

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10				235
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				—
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				—
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	✓				—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth Jill Brown Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid Office Taft College - 3rd A (see circle 1.4)
Department/Location

Shirley Buddell
Employee Name

Financial Aid Tech II
Exact Position Title

661-763-7762
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	.5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature No longer employed Date _____

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Financial Aid
Department/Location

Anita C Ferguson
Employee Name

Financial Aid Outreach Clerk
Exact Position Title

661 763-7745
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	4				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Anita C Ferguson Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Migrant Education
Department/Location

Gracie Nevarez
Employee Name

Exact Position Title

661-763-7823
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	other
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	6				300 student per yr
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	—				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Gracie Nevarez Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LMCC
District

Financial Aid
Department/Location

[redacted]
Employee Name

Job Placement / Financial Aid Clerk
Exact Position Title

661 763 7782 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	4		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility an filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [redacted] Date 4/28/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

LBKCC.
District

Financial Aid Office
Department/Location

Jodi Sharp
Employee Name

Financial Aid Tech. II
Exact Position Title

765-2424
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Westec students only

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	(7)	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5				150 students
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2				✓
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2				✓
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5				✓
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2				✓
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jodi Sharp Date 4/27/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the *average* amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Total College - 85m (see EFCW 1.4)

West Kern Community College
District

EOPS/Care Office
Department/Location

Sandra Williams
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

661-763-7723
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)			
		6	7	8	✓
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	—				
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	—				
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	—				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ______________________ Date 4/26/06

If you have any questions, please contact ______________________, at ______________

EASE SUBMIT THIS INFORMATION BY ______________; TO ______________________.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Taft College - SDA (see CALWORKS)

West Kern Comm College
District

EOPS/CARE office
Department/Location

Sandra Williams
Employee Name

EOPS/CARE Senior Secretary
Exact Position Title

661-763-7723
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 ~~01-02~~ 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15				
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	15				
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	30				
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.					
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.					
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Sandra Williams Date 4-26-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Kern Community College
District

Taft College
Department/Location

Barbara Wingler
Employee Name

Financial Aid Tech II
Exact Position Title

661 763-7763
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	2		✓		
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	2		✓		
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5		✓		
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Wingler Date 4-27-06

If you have any questions, please contact _____, at _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Westkern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS 05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTEs)			
Summer 05s-06s-07s			
Fall 05f-06f-07f	5112	6536	6782
Winter/ Intersession	9290	10336	11376
Spring 05s-06s-07s	X	X	X
Total	10840	11236	11632
2. Number of students who paid enrollment fees:	25248	28108	29790
Summer			
Fall Fall 2007 estimate	4634	5958	6782
Winter/ Intersession	8169	9176	10272
Spring Spring 2008 estimate	X	X	X
Total	9698	10217	10582
3. Number of students exempted from paying enrollment fees (BOGG, etc):	22481	25351	27636
Summer			
Fall	478	578	555
Winter/ Intersession	1127	116[illegible]	[illegible]
Spring			
Total	1162	10[illegible]	
	2760	275[illegible]	

Fall 2007 estimate
11376
(0625 - 0525)
= 1040
(0725 + 1040)
= 11376
Actual as of 4-13-07 = 3700

Spring 2008 estimate
11632
(0635 - 0535)
= 396
(0735 + 396)
= 11632

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record o
state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you h
actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under t
State of California to be true and correct based on your personal knowledge or information." This information is
accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Melissa Parkerson Date 12-

Employee Name: (print) Melissa Parkerson Position or Title Admin Asst

If you have any questions, please contact Melissa Parkerson at (661)-

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

1.8-1

6,536 +
10,336 +
11,236 +
28,108 *

5,958 +
9,176 +
10,217 +
25,351 *

578 +
1,150 +
1,019 +
2,747 *

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer			
Fall	18	43	143
Winter/Intersession	21	16	unable to determine
Spring	X	X	X
Total	76	214	unable to determine
		273	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer			
Fall			
Winter/Intersession			
Spring			
Total			

1.8-2

45 +
16 +
214 +
275 *

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of da state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the l State of California to be true and correct based on your personal knowledge or information." This information is used accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Melissa Parkinson Date 12-5-07

Employee Name: (print) Melissa Parkinson Position or Title Admin. Assistant

If you have any questions, please contact Melissa Parkinson, at (661) 763-7854

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: West Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

35%

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer	645	780	749
Fall	1521	1566	1490
Winter/Intersession	—	—	
	1369	1376	1418
	3735	3722	3657
...ollment fee waivers approved (BOGG, etc.)			
	478	578	555
	1127	1160	1104
...n			
	1162	1019	1050
	2767	2757	2709

estimate complete guess

0• C
#1
780• +
1,566• +
1,376• +
3,722• *
#2
578• +
1,160• +
1,019• +
2,757• *

...TION: The State of California requires that school district personnel maintain a record of ...n order for the district to receive reimbursement. Your signature on this form certifies that ... data or have provided a good faith estimate which you "certify (or declare) under penalty of ... the State of California to be true and correct based on your personal ...

Melissa Parkinson 12-5-07
Melissa Parkinson

661-763-7854

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: West Kern Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8 (7/1/07 - 12/6/07)
1. Enrollment Fees Collected	$1,128,937	$970,492	$444,227
2. Enrollment Fees Refunded (Do Not Track)	$ —	$ —	$ —
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$ 1,128,937	$ 970,492	$ 444,227
4A. Total Enrollment Fees Waived (BOGG, etc.)	$ 553,371	$ 450,420	$ 216,681
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$ 11,067	$ 9008	$ 4334
5 Number of credit units for which enrollment fees were waived.			
A. Summer	2412	2609	257
B. Fall	9468	11830	10434
C. ~~Winter/Intersession~~ No Winter session	0	0	0
D. Spring	9,203	8082	142
TOTAL x $0.91 per credit	$26	$20	$20

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Melissa Parkinson Date 12-6-07

Employee Name: (print) Melissa Parkinson Position or Title Admin Assistant

If you have any questions, please contact Melissa Parkinson at [illegible]

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: West Kern Community College District

Name	Title	Fiscal Years: 05-06	06-07
WILLIAMS, BARBARA	AVERAGE ADMINISTRATIVE ASSISTANT	$ 50.93	$ 50.93
	AVERAGE DEAN		$ 96.05
	AVERAGE DIRECTOR	$ 53.21	$ 53.21
	AVERAGE VICE PRESIDENT	$ 107.36	$ 116.00
AGUNDEZ, ADRIAN	DIRECTOR OF MULTIMEDIA	$ 62.53	$ 78.52
~~BLACK, SHERI~~ BROWN ELIZABETH	ACADEMIC ADVISOR	$ 37.94	$ 41.09
CAPELA, MIKE	SUPERVISOR, MAINT.	$ 62.53	$ 68.43
DARNELL, ROE	SUPERINTENDENT/PRESIDENT	$ 135.12	$ 147.94
DUNCAN, WILLIAM	VICE PRESIDENT ADMIN SVCS	$ 105.65	$ 114.66
HEGEMAN, DEBBIE	ADMINISTRATIVE ASSISTANT/STUDENT SVCS	$ 49.07	$ 53.22
JEWELL, MINDY BROWN CHRISTAL	CASHIER	$ 30.60	$ 34.61
KLEIN, SHELLEY	ADMINISTRATIVE ASSISTANT	$ 59.92	$ 65.57
McMURRAY, BROCK	DEAN OF STUDENTS	$ 88.51	$ 96.05
NICHOLAS, JIM	DIRECTOR, BUSINESS SERVICES	$ 51.53	$ 65.01
NUNEZ, ABEL	VICE PRESIDENT STUDENT SERVICES	$ 111.74	$ 121.29
OLVERA, ADRIANA	FINANCIAL AID CLERK	$ 16.48	Resigned

PARKINSON, MELISSA	ADMIN ASSISTANT	$ 43.79	$ 49.04
PETERS, JANA	HUMAN RESOURCES DIRECTOR	$ 54.15	$ 60.74
QUINTERO, GIL	SKILLED MAINTENANCE WORKER	$ 37.45	$ 40.59
ROBERTS, GAYLE	DIRECTOR, FINANCIAL AIDE	$ 45.58	$ 51.64
SHARP, JODI DUDDE SHIRLI	FINANCIAL AID TECHNICIAN WRINGLER SHARPA	$ 31.16	$ 36.12
YONG, HENRY	VICE PRESIDENT OF INSTRUCTION	$ 104.69	$ 113.62

Schedule 5
West Kern Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received				Not supplied by client				
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 137,215	$ 142,945	$ 152,179	$ 189,372	$ 349,754	$ 559,074	$ 553,371	$ 450,420
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181	$ 11,067	$ 9,008
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 9,605							
					For 00-01 through 06-07 - unit fee				
1.8-4 line 5	Summer				1,819	2,125	2,292	2612	2,609
	Fall				8,347	8,860	10,293	9468	11,830
	Winter/Interssion								
	Spring				7,050	9,273	9,622	9203	8,082
	Total # of credits		12,995	13,834	17,216	20,258	22,207	21,283	22,521
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208	$ 19,368	$ 20,494
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 2,744	$ 2,859	$ 3,044	$ 3,787	$ 6,995	$ 11,181	$ 11,067	$ 9,008
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 9,605							
1.8-4 5	Credit Units Waived		$ 11,825	$ 12,589	$ 15,667	$ 18,435	$ 20,208	$ 19,368	$ 20,494
Total Enrollment Fee Waiver Offset	**Forward to Sch. 5A**	**$ 12,349**	**$ 14,684**	**$ 15,633**	**$ 19,454**	**$ 25,430**	**$ 31,389**	**$ 30,435**	**$ 29,502**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT

EXHIBIT A

DISTRICT: West Kern
COUNTY: Kern

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$9,070,181	$8,375,979	$1,135,196	$9,511,175
ENROLL FEE ADMIN (2%)	11,715	10,777	938	11,715
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	30,713	0	30,713	30,713
S.F.A.A.	152,041	139,877	12,164	152,041
E.O.P.S.	292,010	268,650	23,360	292,010
C.A.R.E.	43,309	39,845	3,464	43,309
D.S.P.S.	302,520	278,319	24,201	302,520
STATE HOSPITALS	0	0	0	0
CALWORKS	158,647	257,771	-99,124	158,647
MATRICULATION (CREDIT)	694,059	638,535	55,524	694,059
MATRIC. (NONCREDIT)	12,138	11,167	971	12,138
FAC.& STAFF DIVERSITY	8,708	8,012	696	8,708
PART-TIME FAC. ALLO.	97,197	89,422	7,775	97,197
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	46,958	33,762	13,196	46,958
PLANT & INSTRUCTIONAL	100,000	92,000	8,000	100,000
SCHDL. MAINT. & REPAIR	100,000	92,000	8,000	100,000
TANF	64,940	59,744	5,196	64,940
ECON. DEVELOPMENT	0	0	0	0
NURSING EDUCATION	0	0	0	0
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	748,833	748,833	0	748,833
ONE TIME FUNDS				
TRANSITION PAYMENT	0	1,230,270	-1,230,270	0
TRANS.& ARTIC. -REAPPR	5,000	5,000	0	5,000
GEN. PURPOSE -REAPPROP	45,682	45,682	0	45,682
BASIC SKILLS -REAPPROP	50,000	50,000	0	50,000
CAR. TECH. TRAILER BIL	100,000	100,000	0	100,000
GEN. PUR. TRAILER BILL	159,158	159,158	0	159,158
INST. MATERIAL TRAILER	100,000	100,000	0	100,000
SCHLD.MAINT. TRAILER B	100,000	100,000	0	100,000
FACULTY STAFF DEV	10,223	10,223	0	10,223
TOTAL	$12,504,032	$12,945,026	$0	$12,945,026

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
J:\PBF\2006-07\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch. .e 5A
West Kern County Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW-1)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)	$ 14.43	$ 15.96	$ 16.30	$ 18.36	$ 19.73	$ 21.76		
2	Staff Training	(04)(B)(1)(b)								
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)	$ 892.86	$ 653.40	$ 616.30	$ 684.18	$ 762.54	$ 1,085.48		
4	Waiving student fees	(04)(B)(2)(b)	$ 15,406.41	$ 12,142.44	$ 13,761.72	$ 27,289.27	$ 27,540.00	$ 35,131.80	$ 35,430.11	$ 48,392.58
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)	$ 2,017.55	$ 1,645.80	$ 1,731.60	$ 1,807.00	$ 2,223.96	$ 2,358.76	$ 283.42	
6	EFCW - Fee Waiver Costs	Total	$ 18,331.25	$ 14,457.60	$ 16,125.92	$ 29,798.81	$ 30,546.23	$ 38,597.80	$ 35,713.53	$ 48,392.58
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 12,349.00	$ 14,684.00	$ 15,633.00	$ 19,454.00	$ 25,430.00	$ 31,389.00	$ 30,435.00	$ 29,502.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ 5,982.25	$ (226.40)	$ 492.92	$ 10,344.81	$ 5,116.23	$ 7,208.80	$ 5,278.53	$ 18,890.58
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 12,349.00**	**$ 14,457.60**	**$ 15,633.00**	**$ 19,454.00**	**$ 25,430.00**	**$ 31,389.00**	**$ 30,435.00**	**$ 29,502.00**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Taft College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 11:59:41

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	42	9,708
BOGW - Part A-2 based on SSI recipient status	68	8,853
BOGW - Part A basis unreported	43	16,608
BOGW - Part B based on income standards	830	166,125
BOGW - Part C based on financial need	710	275,357

1,693

Total Amount = $ 476,651

Back to Top of Page

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0 0
42 +
68 +
43 +
830 +
710 +
1,693 *

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

July 25, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8567

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
West Valley-Mission Community College District CC 43180

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for West Valley-Mission Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43180

(02) Claimant Name: West Valley-Mission Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 14000 Fruitvale Avenue

City: Saratoga | State: CA | Zip Code: 95070-5698

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2004-2005
Total Claimed Amount	(07)	(13) $ 1,251,324
Less: **10% Late Penalty**		(14) $ 125,132
Less: **Prior Claim Payment Received**		(15) $ -
Net Claimed Amount		(16) $ 1,126,192
Due from State	(08)	(17) $ 1,126,192
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	842
(23) EFCW-1, (04)(A)(1)(b)(f)	57,426
(24) EFCW-1, (04)(A)(2)(a)(f)	701,115
(25) EFCW-1, (04)(B)(1)(a)(f)	583
(26) EFCW-1, (04)(B)(1)(b)(f)	7,260
(27) EFCW-1, (04)(B)(2)(a)(f)	5,514
(28) EFCW-1, (04)(B)(2)(b)(f)	228,975
(29) EFCW-1, (04)(B)(2)(c)(f)	34,353
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	370,912
(32) EFCW-1, (09)	37,881
(33) EFCW-1, (10)	117,774
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Date 07-19-07

George Kozitza
Type or Print Name

Interim Vice Chancellor
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

State Controller's Office

Community College Mandated Cost Manual

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: West Valley-Mission Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 842.38	$ -	$ -	$ -	$ -	$ 842.38
b. Staff training (One time per employee)	$ 57,425.71	$ -	$ -	$ -	$ -	$ 57,425.71
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 701,114.83	$ -	$ -	$ -	$ -	$ 701,114.83
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 582.60	$ -	$ -	$ -	$ -	$ 582.60
b. Staff training (One time per employee)	$ 7,259.75	$ -	$ -	$ -	$ -	$ 7,259.75
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 5,514.24	$ -	$ -	$ -	$ -	$ 5,514.24
b. Waiving student fees	$ 228,975.00	$ -	$ -	$ -	$ -	$ 228,975.00
c. Reporting BOG fee waiver data to CCC	$ 34,352.52	$ -	$ -	$ -	$ -	$ 34,352.52
(05) Total Direct Costs	$ 1,036,067.03	$ -	$ -	$ -	$ -	$ 1,036,067.03

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	35.80%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 370,912.00
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,406,979.03
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 37,881.00
(10) Less: Enrollment Fee Waiver offsets		$ 117,774.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,251,324.03

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Ogilvie, Barbara A & R Supervisor II	$38.29	22.0	$ 842.38				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 842.38	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Belham, Elinor	Student Services Acct. Tech.	$26.15	110.0	$ 2,876.50				
De Los Reyes, Melissa	Student Records Advisor	$28.48	110.0	$ 3,132.80				
Estrada, Cynthia	Student Services Acct. Tech.	$26.15	40.0	$ 1,046.00				
Laulermilch, Jane	Student Services Tech.	$25.54	8.0	$ 204.32				
Le, Diemanh	Student Serv. Acct. Tech.	$26.15	110.0	$ 2,876.50				
Lino, Paulette	A and R Supervisor	$35.38	210.0	$ 7,429.80				
Lopes, Al	Student Serv. Acct. Tech.	$26.15	30.0	$ 784.50				
MacReynolds, Mellisa	Systems Analyst	$38.01	20.0	$ 760.20				
Ogilvie, Barbara	A & R Supervisor II	$38.29	65.0	$ 2,488.85				
Ramirez, Elizabeth	Student Services Tech.	$25.54	40.0	$ 1,021.60				
Riggs, Phyllis M.	Student Services Tech.-Cashier	$25.54	460.0	$ 11,748.40				
Sawyer, Henry	Senior Systems Analyst	$38.93	2.0	$ 77.86				
Tran, Kelvin	Student Services Tech.	$25.54	110.0	$ 2,809.40				
Tran, Thuy	Student Services Acct. Tech.	$26.15	8.0	$ 209.20				
Trinh, Tu-Lan	Student Records Advisor	$28.48	8.0	$ 227.84				
Vasquez, Nitha	Student Services Acct. Tech.	$26.15	110.0	$ 2,876.50				
Dasalla, Analiza	Sr. Student Services Tech.	$26.67	632.0	$ 16,855.44				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 57,425.71	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
Enrollment Office Staff	Collection of Enrollment Fees	$26.91	9,802.3	$ 263,779.89				
Estrada, Cynthia	Student Services Acct. Tech.	$26.15	20.0	$ 523.00				
Answering student's questions regarding enrollment fee collection								
Enrollment Office Staff	Collection of Enrollment Fees	$26.91	7,695.2	$ 207,077.83				
Updating written and computer records for enrollment fee information								
Enrollment Office Staff	Collection of Enrollment Fees	$26.91	8,336.5	$ 224,335.22				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
Ogilvie, Barbara	A & R Supervisor II	$38.29	141.0	$ 5,398.89				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 701,114.83	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Cantarero, Maritza Financial Aid Director	$48.55	12.0	$ 582.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 582.60	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant: West Valley-Mission Community College District

(02) Fiscal Year: 2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Baldwin, Daniel	Financial Aid Advisor	$28.48	4.0	$ 113.92				
Cantarero, Maritza	Financial Aid Director	$48.55	65.0	$ 3,155.75				
Franklin, Marta	Financial Aid Advisor	$28.48	8.0	$ 227.84				
Lopes, Al	Student Serv. Acct. Tech.	$26.15	20.0	$ 523.00				
McDonnell, Mike	Sr. Systems Analyst	$38.93	4.0	$ 155.72				
Nguyen, Linh	Systems Analyst	$38.01	80.0	$ 3,040.80				
Trinh, Lucy	Financial Aid Tech.	$28.48	1.5	$ 42.72				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 7,259.75	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) *Reimbursable Activities:* Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cantarero, Maritza	Financial Aid Director	$48.55	60.0	$ 2,913.00				
MacReynolds, Mellisa	Systems Analyst	$38.01	40.0	$ 1,520.40				
McDonnell, Mike	Sr. Systems Analyst	$38.93	8.0	$ 311.44				
Rodriguez, Thelma	Systems Analyst	$38.01	10.0	$ 380.10				
Sawyer, Henry	Senior Systems Analyst	$38.93	10.0	$ 389.30				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,514.24	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waving Enrollment Fees	$27.99	1,811.2	$ 50,695.49				
Receiving waiver applications Financial Aid Office Staff Waving Enrollment Fees	$27.99	2,378.9	$ 66,585.41				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waving Enrollment Fees	$27.99	1,730.1	$ 48,425.50				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waving Enrollment Fees	$27.99	1,628.2	$ 45,573.32				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Waving Enrollment Fees	$27.99	632.2	$ 17,695.28				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 228,975.00	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cantarero, Maritza	Financial Aid Director	$48.55	30.0	$ 1,456.50				
Nguyen, Linh	Systems Analyst	$38.01	250.0	$ 9,502.50				
Ogilvie, Barbara	A & R Supervisor II	$38.29	56.0	$ 2,144.24				
Riggs, Phyllis M.	Student Services Tech.-Cashier	$25.54	832.0	$ 21,249.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 34,352.52	$ -	$ -	$ -	$ -

New 04/06

West Valley-Missi[illegible] Community College District
308/95 ENROLLME[illegible]E COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	4.00	Baldwin, Daniel	Financial Aid Advisor	$28.48	$113.92	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	4.00	**Baldwin, Daniel Total**			$113.92		
04-05	110.00	Belham, Elinor	Student Services Acct. Tech.	$26.15	$2,876.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Belham, Elinor Total**			$2,876.50		
04-05	12.00	Cantarero, Maritza	Financial Aid Director	$48.55	$582.60	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
04-05	65.00	Cantarero, Maritza	Financial Aid Director	$48.55	$3,155.75	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	60.00	Cantarero, Maritza	Financial Aid Director	$48.55	$2,913.00	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
04-05	30.00	Cantarero, Maritza	Financial Aid Director	$48.55	$1,456.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	167.00	**Cantarero, Maritza Total**			$8,107.85		
04-05	632.00	Dasalla, Analiza	Sr. Student Services Tech.	$26.67	$16,855.44	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	632.00	**Danalla, Analiza Total**			$16,855.44		
04-05	110.00	De Los Reyes, Melissa	Student Records Advisor	$28.48	$3,132.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**De Los Reyes, Melissa Total**			$3,132.80		
04-05	9,802.30	Enrollment Office Staff	Collection of Enrollment Fees	$26.91	$263,779.89	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	7,695.20	Enrollment Office Staff	Collection of Enrollment Fees	$26.91	$207,077.83	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	8,336.50	Enrollment Office Staff	Collection of Enrollment Fees	$26.91	$224,335.22	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	25,834.00	**Enrollment Office Staff Total**			$695,192.94		
04-05	40.00	Estrada, Cynthia	Student Services Acct. Tech.	$26.15	$1,046.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	20.00	Estrada, Cynthia	Student Services Acct. Tech.	$26.15	$523.00	Referencing student accounts and records	Calculating and collecting enrollment fees
	60.00	**Estrada, Cynthia Total**			$1,569.00		
04-05	1,811.20	Financial Aid Office Staff	Waving Enrollment Fees	$27.99	$50,695.49	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	2,378.90	Financial Aid Office Staff	Waving Enrollment Fees	$27.99	$66,585.41	Receiving waiver applications	Waiving student fees
04-05	1,730.10	Financial Aid Office Staff	Waving Enrollment Fees	$27.99	$48,425.50	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,628.20	Financial Aid Office Staff	Waving Enrollment Fees	$27.99	$45,573.32	Entering approved application information into district records; providing student award letter	Waiving student fees
04-05	632.20	Financial Aid Office Staff	Waving Enrollment Fees	$27.99	$17,695.28	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	8,180.60	**Financial Aid Office Staff Total**			$228,975.00		
04-05	8.00	Franklin, Marta	Financial Aid Advisor	$28.48	$227.84	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Franklin, Marta Total**			$227.84		
04-05	8.00	Laulermilch, Jane	Student Services Tech.	$25.54	$204.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Laulermilch, Jane Total**			$204.32		
04-05	110.00	Le, Diemanh	Student Serv. Acct. Tech.	$26.15	$2,876.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Le, Diemanh Total**			$2,876.50		
04-05	210.00	Lino, Paulette	A and R Supervisor	$35.38	$7,429.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	210.00	**Lino, Paulette Total**			$7,429.80		
04-05	30.00	Lopes, Al	Student Serv. Acct. Tech.	$26.15	$784.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	20.00	Lopes, Al	Student Serv. Acct. Tech.	$26.15	$523.00	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	50.00	**Lopes, Al Total**			$1,307.50		
04-05	20.00	MacReynolds, Mellisa	Systems Analyst	$38.01	$760.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	40.00	MacReynolds, Mellisa	Systems Analyst	$38.01	$1,520.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	60.00	**MacReynolds, Mellisa Total**			$2,280.60		
04-05	4.00	McDonnell, Mike	Sr. Systems Analyst	$38.93	$155.72	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
04-05	8.00	McDonnell, Mike	Sr. Systems Analyst	$38.93	$311.44	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**McDonnell, Mike Total**			$467.16		
04-05	80.00	Nguyen, Linh	Systems Analyst	$38.01	$3,040.80	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver

West Valley-Mission Community College District
308/95 ENROLLM. FEE COLLECTIONS/WAIVERS
2004-2005
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	250.00	Nguyen, Linh	Systems Analyst	$38.01	$9,502.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	330.00	**Nguyen, Linh Total**			$12,543.30		
04-05	22.00	Ogilvie, Barbara	A & R Supervisor II	$38.29	$842.38	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
04-05	65.00	Ogilvie, Barbara	A & R Supervisor II	$38.29	$2,488.85	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	56.00	Ogilvie, Barbara	A & R Supervisor II	$38.29	$2,144.24	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
04-05	141.00	Ogilvie, Barbara	A & R Supervisor II	$38.29	$5,398.89	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	284.00	**Ogilvie, Barbara Total**			$10,874.36		
04-05	40.00	Ramirez, Elizabeth	Student Services Tech.	$25.54	$1,021.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	40.00	**Ramirez, Elizabeth Total**			$1,021.60		
04-05	460.00	Riggs, Phyllis M.	Student Services Tech.-Cashier	$25.54	$11,748.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	832.00	Riggs, Phyllis M.	Student Services Tech.-Cashier	$25.54	$21,249.28	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,292.00	**Riggs, Phyllis M. Total**			$32,997.68		
04-05	10.00	Rodriguez, Thelma	Systems Analyst	$38.01	$380.10	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	10.00	**Rodriguez, Thelma Total**			$380.10		
04-05	2.00	Sawyer, Henry	Senior Systems Analyst	$38.93	$77.86	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
04-05	10.00	Sawyer, Henry	Senior Systems Analyst	$38.93	$389.30	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	12.00	**Sawyer, Henry Total**			$467.16		
04-05	110.00	Tran, Kelvin	Student Services Tech.	$25.54	$2,809.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Tran, Kelvin Total**			$2,809.40		
04-05	8.00	Tran, Thuy	Student Services Accl. Tech.	$26.15	$209.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Tran, Thuy Total**			$209.20		
04-05	1.50	Trinh, Lucy	Financial Aid Tech.	$28.48	$42.72	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.50	**Trinh, Lucy Total**			$42.72		
04-05	8.00	Trinh, Tu-Lan	Student Records Advisor	$28.48	$227.84	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Trinh, Tu-Lan Total**			$227.84		
04-05	110.00	Vasquez, Nitha	Student Services Acct. Tech.	$26.15	$2,876.50	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Vasquez, Nitha Total**			$2,876.50		
	37,761.10	**Grand Total**			$1,036,067.03		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$38,072,734		$38,072,734	$293,002	$37,779,732
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	3,328,154		3,328,154	22	3,328,132
Course and Curriculum Development	6020	366,974		366,974		366,974
Academic/Faculty Senate	6030					
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	1,343,767		1,343,767	7,760	1,336,007
Library	6120	1,165,386		1,165,386	36,989	1,128,397
Media	6130	32,965		32,965	5,932	27,033
Museums and Galleries	6140	88,950		88,950		88,950
Academic Information Systems and Technology	6150	62,293		62,293		62,293
Other Instructional Support Services	6190	8,128		8,128		8,128
Admissions and Records	6200	1,663,349		1,663,349	30,658	1,632,691
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,714,750		3,714,750	2,583	3,712,167
Matriculation and Student Assessment	6320	500,684		500,684	17,014	483,670
Transfer Programs	6330					
Career Guidance	6340	352,657		352,657		352,657
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,920,211		1,920,211	143,411	1,776,800
Subtotal		$52,621,002	$0	$52,621,002	$537,371	$52,083,631

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,380,236	$765,304	$614,932	$17,529	$597,403
Health Services	6440	133,983		133,983		133,983
Student Personnel Admin.	6450	448,512		448,512		448,512
Financial Aid Administration	6460	337,521		337,521	11,196	326,325
Job Placement Services	6470	385,664		385,664		385,664
Veterans Services	6480	483,083		483,083		483,083
Miscellaneous Student Services	6490	1,205,371		1,205,371	7,054	1,198,317
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,691,577		1,691,577	1,691,577	0
Custodial Services	6530	2,060,168		2,060,168	2,060,168	0
Grounds Maintenance and Repairs	6550					
Utilities	6570	1,780,947		1,780,947	1,780,947	0
Other	6590	762,558		762,558	762,558	0
Planning, Policy Making, and Coordination	6600	2,700,611		2,700,611	2,700,611	0
General Inst. Support Services	6700					
Community Relations	6710	196,817		196,817	196,817	0
Fiscal Operations	6720	2,590,130		2,590,130	2,590,130	0
Human Resources Management	6730	1,092,738		1,092,738	1,092,738	0
Noninstructional Staff Benefits & Incentives	6740	2,002,406		2,002,406	2,002,406	0
Staff Development	6750	114,353		114,353	114,353	0
Staff Diversity	6760	209		209	209	0
Logistical Services	6770	2,407,184		2,407,184	2,407,184	0
Management Information Systems	6780	2,946,433		2,946,433	2,946,433	0
Subtotal		$77,341,503	$765,304	$76,576,199	$20,919,281	$55,656,918

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	9,862		9,862	9,862	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	628,478		628,478	4,619	623,859
Community Use of Facilities	6830					
Economic Development	6840	1,326,505		1,326,505	60,651	1,265,854
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	43,528		43,528		43,528
Farm Operations	6930					
Food Services	6940					
Parking	6950	299,267		299,267	23,293	275,974
Student and Co-curricular Activities	6960	608,781		608,781		608,781
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	226,184		226,184		226,184
Other Auxiliary Operations	7090	813		813		813
Physical Property Acquisitions	7100					
(05) Total		$80,484,921	$765,304	$79,719,617	$21,017,706	$58,701,911
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				35.80%		
(07) Notes						

CALIFOI A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe. itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200						
Biological Sciences	0400	1,050,979	51,988	57,215	14,269		1,174,451
Business and Management	0500	2,029,255	203,541	34,501			2,267,297
Communications	0600	69,599		5,019			74,618
Computer and Information Science	0700	1,731,592	443,649	99,396	76,833		2,351,470
Education	0800	3,198,075	249,412	267,752	120,619		3,835,858
Engineering and Related Industrial Tech.	0900	2,057,881	299,199	196,706	20,052		2,573,838
Fine and Applied Arts	1000	2,090,578	231,053	89,096	4,279		2,415,006
Foreign Language	1100	1,179,540	63,050	14,636			1,257,226
Health	1200	1,392,464	164,257	8,508			1,565,229
Consumer Education and Home Economics	1300	1,127,325	79,419	129,877	5,121		1,341,742
Law	1400	123,231	3,328	1,189			127,748
Humanities (Letters)	1500	5,653,050	340,680	20,044			6,013,774
Library Science	1600						
Mathematics	1700	3,443,411	114,554	30,516			3,588,481
Military Studies	1800						
Physical Sciences	1900	1,334,281	143,148	43,736	4,635		1,525,800
Psychology	2000	502,672	17,091	4,073			523,836
Public Affairs and Services	2100	792,459	446,777	412,575	3,228		1,655,039
Social Sciences	2200	3,039,455	208,207	22,094	480		3,270,236
Commercial Services	3000						
Interdisciplinary Studies	4900	211,204	445,436	233,201	43,486		933,327
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,577,758					1,577,758
Subtotal - Instructional Activities	**599**	32,604,809	3,504,789	1,670,134	293,002		38,072,734

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District | 490 | District Code No.

CALIFOR COMMUNITY COLLEGES
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Expe tures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,180,061	148,071	22		3,328,154
Course and Curriculum Development	6020		339,292	27,682			366,974
Academic/Faculty Senate	6030						
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		3,519,353	175,753	22		3,695,128
Instructional Support Services (6100)							
Learning Center	6110	532,278	748,614	55,115	7,760		1,343,767
Library	6120		959,817	168,580	36,989		1,165,386
Media	6130		11,231	15,802	5,932		32,965
Museums and Galleries	6140		82,278	6,672			88,950
Academic Information Systems and Tech.	6150		45,345	16,948			62,293
Other Instructional Support Services	6190		8,128				8,128
Subtotal - Instructional Support Services	**6100**	532,278	1,855,413	263,117	50,681		2,701,489
Admissions and Records	**6200**		1,548,354	84,337	30,658		1,663,349
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,634,047	78,120	2,583		3,714,750
Matriculation and Student Assessment	6320		421,319	62,351	17,014		500,684
Transfer Programs	6330						
Career Guidance	6340		266,254	86,403			352,657
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,321,620	226,874	19,597		4,568,091

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

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CALIFOR \ COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe. tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,677,172	99,628	143,411		1,920,211
Extended Opportunity Prgms. & Services (EOPS)	6430		555,072	42,331	17,529	765,304	1,380,236
Health Services	6440		130,598	3,385			133,983
Student Personnel Administration	6450		398,235	50,277			448,512
Financial Aid Administration	6460		267,260	59,065	11,196		337,521
Job Placement Services	6470		380,934	4,730			385,664
Veterans Services	6480		480,448	2,635			483,083
Miscellaneous Student Services	6490		1,020,934	177,383	7,054		1,205,371
Subtotal - Other Student Services	**6400**		4,910,653	439,434	179,190	765,304	6,294,581
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		916,757	726,054	48,766		1,691,577
Custodial Services	6530		1,972,010	88,158			2,060,168
Grounds Maintenance and Repairs	6550						
Utilities	6570			1,780,947			1,780,947
Other Operation and Maintenance of Plant	6590		550,489	195,238	16,831		762,558
Subtotal - Operation and Maintenance of Plant	**6500**		3,439,256	2,790,397	65,597		6,295,250
Planning, Policymaking, and Coordination	**6600**		1,756,756	813,480	130,375		2,700,611

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District 490 District Code No.

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SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expe. itures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		182,909	12,247	1,661		196,817
Fiscal Operations	6720		1,331,436	1,251,624	7,070		2,590,130
Human Resources Management	6730		732,906	354,560	5,272		1,092,738
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		2,002,406				2,002,406
Staff Development	6750		69,330	45,023			114,353
Staff Diversity	6760			209			209
Logistical Services	6770		2,049,760	307,964	49,460		2,407,184
Management Information Systems	6780		1,885,715	989,296	71,422		2,946,433
Other General Institutional Support Services	6790			3,142	6,720		9,862
Subtotal - General Institutional Support Services	**6700**		8,254,462	2,964,065	141,605		11,360,132
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	401,217	209,075	13,567	4,619		628,478
Community Use Facilities	6830						
Economic Development	6840		976,711	289,143	60,651		1,326,505
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	401,217	1,185,786	302,710	65,270		1,954,983

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expe[illegible]tures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		3,213	40,315			43,528
Farm Operations	6930						
Food Services	6940						
Parking	6950		220,369	55,605	23,293		299,267
Student and Co-curricular Activities	6960		475,072	133,709			608,781
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		698,654	229,629	23,293		951,576
Auxiliary Operations (7000)							
Contract Education	7010	30,512	139,650	56,022			226,184
Other Auxiliary Operations	7090			813			813
Subtotal - Auxiliary Operations	**7000**	30,512	139,650	56,835			226,997
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					(1,790)	(1,790)
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					(1,790)	(1,790)
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,132,348	1,132,348
Student Aid	7320					89,592	89,592
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,221,940	1,221,940
TOTAL EXPENDITURES and OTHER OUTGO	**391**	33,568,816	35,134,746	10,016,765	999,290	1,985,454	81,705,071

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District 490 District Code No.

Schedule 1A
West Valley-Mission
Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *04-05*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	54,966
Avg. time p/account	10.7
Total Time (in minutes)	588136
Per Hour	60
Hours Worked **(**Activity 11)**	**9802.3**
***EFC 2**	
Avg. time p/student	8.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(**Activity 12)**	**0.0**
***EFC 1**	54,966
Avg. time p/question	8.4
Total Time (in minutes)	461714
Per Hour	60
Hours Worked **(**Activity 13)**	**7695.2**
***EFC 1**	54,966
Avg. time p/file	9.1
Total Time (in minutes)	500191
Per Hour	60
Hours Worked **(**Activity 14)**	**8336.5**
***EFC 4**	
Avg. time p/account	14.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(**Activity 15)**	**0.0**
***EFC 5**	
Avg. time p/student	10.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** 16)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1AA
West Valley-Mission
Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *04-05*
Barbara Ogilvie

Purpose: To calculate the time worked by Barbara Ogilvie on Enrollment Fee Refunds.
Source: Schedules 2 and 4.
Findings:

Total approved Waivers	5647
10% done by B. Ogilvie	0.10
	564

***EFC 5**	564
Avg. time p/student	15
Total Time (in minutes)	8460
Per Hour	60
Hours Worked **(** 16)**	**141.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *01-02*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	5,519
Avg. time p/question	13.4
Total Time (in minutes)	73955
Per Hour	60
Hours Worked **(**Activity 21)**	**1232.6**
***EFW 6**	5,519
Avg. time p/application	17.6
Total Time (in minutes)	97134
Per Hour	60
Hours Worked **(**Activity 22)**	**1618.9**
***EFW 6**	5,519
Avg. time p/evaluation	12.8
Total Time (in minutes)	70643
Per Hour	60
Hours Worked **(**Activity 23)**	**1177.4**
***EFW 8**	
Avg. time p/application	23.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(**Activity 24)**	**0.0**
***EFW 7**	4,171
Avg. time p/application	17.3
Total Time (in minutes)	72158
Per Hour	60
Hours Worked **(**Activity 25)**	**1202.6**
***EFW 8**	1,348
Avg. time p/application	15.4
Total Time (in minutes)	20759
Per Hour	60
Hours Worked **(**Activity 26)**	**346.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (back-up in 05-06 only)
Findings:

		*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Belham, Eliner	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Brien, Diane	Student Services Tech.	5.0	5.0	10.0	5.0		
Dasalla, Analiza	Sr. Student Services Tech.	15.0	5.0	5.0	8.0	20.0	10.0
De Los Reyes, Melissa	Student Records Advisor	15.0	15.0	10.0	7.0	7.0	7.0
Estrada, Cynthia	Student Services Acct. Tech.	6.0	4.0	5.0	5.0	8.0	7.0
Lautermilch, Jane	Student Services Tech.	6.0	6.0	6.0	5.0		3.0
Le, Diemanh	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Lino, Paulette	A & R Supervisor	15.0	15.0	15.0	20.0	20.0	15.0
Lopez, Al	Student Services Acct. Tech.	5.0	7.0	5.0	6.0	6.0	6.0
Ramirez, Elizabeth	Student Services Tech.	3.0	3.0	3.0	1.0	5.0	
Riggs, Phyllis M.	Student Services Tech., Cashier	20.0	5.0	20.0	10.0	20.0	20.0
Tran, Kevin	Student Services Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Tran, Thuy	Student Services Acct. Tech.	5.0	9.0	3.0	4.0	7.0	3.0
Trinh, Tu-Lan	Student Records Advisor	6.0	7.0	4.0	5.0		
Vasquez, Nitha	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Average		**10.7**	**8.1**	**8.4**	**9.1**	**14.4**	**10.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

S Jule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Enrollment Office Staff.
Source: PHR Calculation Schedules.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Belham, Eliner	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Brien, Diane	Student Services Tech.	21.92	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Dasalla, Analiza	Senior Student Services Tech.	22.35	23.47	24.41	26.09	26.87	26.67	26.67	28.01
De Los Reyes, Melissa	Student Records Advisor	23.87	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Estrada, Cynthia	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Lautermilch, Jane	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Le, Diemanh	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Lino, Paulette	A & R Supervisor	28.41	29.83	32.39	34.61	35.65	35.38	35.38	37.16
Lopez, Al	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Ramirez, Elizabeth	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Riggs, Phyllis M.	Student Services Tech., Cashier	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Tran, Kelvin	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Tran, Thuy	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Trinh, Tu-Lan	Student Records Advisor	23.87	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Vasquez, Nitha	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Average		**22.51**	**23.60**	**24.63**	**26.33**	**27.11**	**26.91**	**26.91**	**28.27**

Conclusion: Findings go forward to EFCW -2

Schedule 3
West Valley Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (back-up in 05-06 only)
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Baldwin, Daniel	Financial Aid Advisor	4	6	3	9	5	7
DeLos Reyes,Amber	Financial Aid Tech.	30	60	18	50	15	15
Fitzgerald, Katy	Financial Aid Advisor	15	10	20	15	20	20
Franklin, Marta	Financial Aid Advisor	5	10	7	7	30	10
Galang, Roehl	Financial Aid Advisor	5	10	5	10	10	15
Kirkland, Rhonda	Interim Financial Aid Advisor	2	10	5		15	7
Lopez, Maria	Student Services Tech.	10	5	5	10	10	10
Nguyen, Ngolien	Financial Aid Tech.	30	20	20	30	20	15
Pelayo, Elizabeth	Financial Aid Outreach Spec.	2	5	10	40	10	30
Rancap, Marie	Student Services Tech.	30	60	40	60	40	30
Trinh, Lucy	Financial Aid Tech.	8	5	5	5		
Vuong, Ha M.	Financial Aid Advisor	20	10	15	20	15	10
Average		**13.4**	**17.6**	**12.8**	**23.3**	**17.3**	**15.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

S lule 3
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Financial Aid Office Staff.
Source: PHR Calculation Schedules.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Baldwin, Daniel	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
De Los Reyes,Amber	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Fitzgerald, Katy	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Franklin, Marta	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Galang, Roehl	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Kirkland, Rhonda	Interim Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Lopez, Maria	Student Services Tech.	22.49	23.39	25.58	25.74	25.54	25.54	26.83
Nguyen, Ngolien	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Pelayo, Elizabeth	Financial Aid Outreach Spec.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Rancap, Marie	Student Services Tech.	22.49	23.39	25.58	25.74	25.54	25.54	26.83
Trinh, Lucy	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Vuong, Ha M.	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Average		**24.64**	**25.63**	**27.49**	**28.21**	**27.99**	**27.99**	**29.41**

Conclusion: Findings go forward to EFCW-2

Schedule 4
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-06
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. (back-up in 05-06 only)
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	65,956	63,855	62,195	62,522	66,334	56,612	54,966	53,871
EFC 2	1.8-1	2.	Paid Enrollment fees	-							
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	-							
EFC 4	1.8-2	1.	Delinquencies collections	-							
EFC 5	1.8-2	2.	Refunds	-							
EFW 6	1.8-3	1.	Waivers Requested	X	*5732	*4829	5,519	6,448	7,205	8,110	8,113
EFW 7	1.8-3	2.	Waivers Approved	X	5,732	4,829	4,171	4,704	5,367	5,647	6,308
EFW 8	1.8-3 (1-2)		Waivers Denied	X			1,348	1,744	1,838	2,463	1,805

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***Used the number of Approved Waivers, (these numbers came from the Chancellor's website, as reported by the district)**

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4A
West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Number of Enrolled Students
98-99 through 04-05

Purpose: To calculate the number of Enrolled students
Source: Chancellors report. Initial year claim 98-99 through 05-06.
Findings:

Year	98-99		99-00		00-01		01-02		02-03		03-04		04-05	
Campus	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**
Summer	5,021	6,149	4,900	13,980	4,753	13,652	4,212	13,806	5,643	13,749	4,656	12,337	4,731	12,085
Fall	10,940	14,729	6,089	12,499	5,682	12,000	5,479	12,462	6,431	13,021	3,922	11,120	4,457	10,627
Spring	12,969	16,148	11,808	14,579	11,507	14,601	11,817	14,746	12,665	14,825	11,732	12,845	10,514	12,552
Total	28,930	37,026	22,797	41,058	21,942	40,253	21,508	41,014	24,739	41,595	20,310	36,302	19,702	35,264
Dist. Total	**65,956**		**63,855**		**62,195**		**62,522**		**66,334**		**56,612**		**54,966**	

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission For 2004 Summer Term

Data Current As Of June 25, 2007 09:47:40

Total Headcount	4,731

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For West Valley
For 2004 Summer Term

Data Current As Of June 25, 2007 09:57:16

Total Headcount	4,457

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Mission
For 2004 Fall Term

Data Current As Of June 25, 2007 09:50:27

Total Headcount	10,514

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2004 Fall Term

Data Current As Of June 25, 2007 09:57:25

Total Headcount	12,085

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Mission
For 2005 Spring Semester

Data Current As Of June 25, 2007 09:50:49

Total Headcount	10,627

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2005 Spring Semester

Data Current As Of June 25, 2007 09:57:37

Total Headcount	12,552

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Schedule 4B
West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Waivers Requested and Approved
99-00 through 04-05

Purpose: To calculate the number of enrollment waivers requested and approved.
Source: Chancellors report, Board of Governors Fee Waiver Report, and Fund Management Report. Initial year claim 98-99 through 05-06.
Findings:

Waivers Requested

Year	99-00		00-01		01-02		02-03		03-04		04-05	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V
A					75	33	57	48	124	57	126	59
B					1,153	906	2,359	1,599	2,685	1,823	3,150	2,274
C					1,875	1,477	1,302	1,083	1,322	1,194	1,242	1,259
Board of Gov. Report	2,959	2,427	2,581	1,942								
Total	2,959	2,427	2,581	1,942	3,103	2,416	3,718	2,730	4,131	3,074	4,518	3,592
Dist. Total	**5,386**		**4,523**		**5,519**		**6,448**		**7,205**		**8,110**	

Waivers Approved

Year	99-00		00-01		01-02		02-03		03-04		04-05	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V
	107	72	87	51	61	35	54	43	107	52	104	53
	1,049	784	1,033	684	989	823	1,682	1,219	1,905	1,384	2,161	1,685
	1,960	1,760	1,575	1,399	1,251	1,012	880	826	989	930	801	843
Total	3,116	2,616	2,695	2,134	2,301	1,870	2,616	2,088	3,001	2,366	3,066	2,581
Dist. Total	**5,732**		**4,829**		**4,171**		**4,704**		**5,367**		**5,647**	

AWARD: MBOGA Board of Governor's Waiver - A YEAR: 2004 SUM ONLY: Y INCL LOC: Y

04-05

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	1,800.00							
	3							
		1,800.00		1,800.00				
		3		3				
OFFICE '120' TOTALS:	1,800.00							
BUDGETED AMOUNT..:	3							
MAXIMUM BUDGET...:		1,800.00		1,800.00				
REMAINING BALANCE: -1,800.00		3		3				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	68,100.00							
	123							
		68,100.00		68,100.00				
		123		123				
OFFICE '122' TOTALS:	68,100.00							
BUDGETED AMOUNT..: 99,999,999	123							
MAXIMUM BUDGET...: 99,999,999		68,100.00		68,100.00				
REMAINING BALANCE: 99,931,899.00		123		123				
AWARD 'MBOGA' TOTALS:	69,900.00							
BUDGETED AMOUNT..: 99,999,999	126							
MAXIMUM BUDGET...: 99,999,999		69,900.00		69,900.00				
REMAINING BALANCE: 99,930,099.00		126		126				

AWARD: MBOGB - Board of Governor's Waiver - B YEAR: 2004 SUM ONLY: Y INCL LOC: Y

04-05

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	39,900.00							
	67							
		39,900.00		39,900.00				
		67		67				
OFFICE '120' TOTALS:	39,900.00							
BUDGETED AMOUNT..:	67							
MAXIMUM BUDGET...:		39,900.00		39,900.00				
REMAINING BALANCE: -40,500.00		67		67				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	1,776,850.63						600.00	
	3084						2	
		1,776,250.63		1,776,250.63				
		3083		3083				
OFFICE '122' TOTALS:	1,776,850.63						600.00	
BUDGETED AMOUNT..: 99,999,999	3084						2	
MAXIMUM BUDGET...: 99,999,999		1,776,250.63		1,776,250.63				
REMAINING BALANCE: 98,223,748.37		3083		3083				
AWARD 'MBOGB' TOTALS:	1,816,750.63						600.00	
BUDGETED AMOUNT..: 99,999,999	3151						2	
MAXIMUM BUDGET...: 99,999,999		1,816,150.63		1,816,150.63				
REMAINING BALANCE: 98,183,248.37		3150		3150				

AWARD: MBOGC - Board of Governor's Waiver - C YEAR: 2004 SUM ONLY: Y INCL LOC: Y

04-05

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	5,400.00							
	9							
		5,400.00		5,400.00				
		9		9				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	5,400.00							
MAXIMUM BUDGET...:	9							
REMAINING BALANCE: -5,400.00		5,400.00		5,400.00				
		9		9				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	657,450.00							
	1232							
		657,450.00		657,450.00				
		1232		1232				
OFFICE '122' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	657,450.00							
MAXIMUM BUDGET...: 99,999,999	1232							
REMAINING BALANCE: 99,342,549.00		657,450.00		657,450.00				
		1232		1232				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	600.00							
	1							
		600.00		600.00				
		1		1				
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..:	600.00							
MAXIMUM BUDGET...:	1							
REMAINING BALANCE: -600.00		600.00		600.00				

BOGW Req. 2004-2005

June 07 2007 FUND MANAGEMENT REPORT

AWARD: WBOGA - Board of Governor's Waiver - A YEAR: 2004 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	32,100.00							
	59							
		32,100.00		32,100.00				
		59		59				
OFFICE '123' TOTALS:	32,100.00							
BUDGETED AMOUNT..: 99,999,999	59							
MAXIMUM BUDGET...: 99,999,999		32,100.00		32,100.00				
REMAINING BALANCE: 99,967,899.00		59		59				
AWARD 'WBOGA' TOTALS:	32,100.00							
BUDGETED AMOUNT..: 99,999,999	59							
MAXIMUM BUDGET...: 99,999,999		32,100.00		32,100.00				
REMAINING BALANCE: 99,967,899.00		59		59				

BOGW A

AWARD: WBOGB - Board of Governor's Waiver - B YEAR: 2004 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	300.00							
	1							
		300.00		300.00				
		1		1				
OFFICE '122' TOTALS:	300.00							
BUDGETED AMOUNT..:	1							
MAXIMUM BUDGET...:								
REMAINING BALANCE: -300.00		300.00		300.00				
		1		1				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	1,284,146.00							
	2278							
		1,282,946.00		1,282,946.00				1,200.00
		2273		2273				5
OFFICE '123' TOTALS:	1,284,146.00							
BUDGETED AMOUNT..: 99,999,999	2278							
MAXIMUM BUDGET...: 99,999,999		1,282,946.00		1,282,946.00				1,200.00
REMAINING BALANCE: 98,717,053.00		2273		2273				5
AWARD 'WBOGB' TOTALS:	1,284,446.00							
BUDGETED AMOUNT..: 99,999,999	2279							
MAXIMUM BUDGET...: 99,999,999		1,283,246.00		1,283,246.00				1,200.00
REMAINING BALANCE: 98,716,753.00		2274		2274				5

BOG B

AWARD: WBOGC - Board of Governor's Waiver - C YEAR: 2004 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	1,500.00							
	3							
		1,500.00		1,500.00				
		3		3				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	1,500.00							
MAXIMUM BUDGET...:	3							
REMAINING BALANCE: -1,500.00		1,500.00		1,500.00				
		3		3				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	672,000.00							
	1257							
		671,400.00		671,400.00				600.00
		1256		1256				1
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	672,000.00							
MAXIMUM BUDGET...: 99,999,999	1257							
REMAINING BALANCE: 99,328,599.00		671,400.00		671,400.00				600.00
		1256		1256				1
AWARD 'WBOGC' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	673,500.00							
MAXIMUM BUDGET...: 99,999,999	1260							
REMAINING BALANCE: 99,327,099.00		672,900.00		672,900.00				600.00
		1259		1259				1

End of Report

WBOGWC

AWARD: MBOGC - Board of Governor's Waiver - C YEAR: 2004 SUM ONLY: Y INCL LOC: Y

04-05

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
		1		1				
AWARD 'MBOGC' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	663,450.00							
MAXIMUM BUDGET...: 99,999,999	1242							
REMAINING BALANCE: 99,336,549.00		663,450.00		663,450.00				
		1242		1242				

End of Report

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mission College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 19, 2007 11:11:01

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	104	38,158
BOGW - Part B based on income standards	2,161	772,690
BOGW - Part C based on financial need	801	271,013

Total Amount = $ 1,081,861

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

West Valley College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 07, 2007 04:20:55

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis *unreported*	53	18,497
BOGW - Part B based on income standards	1,685	583,529
BOGW - Part C based on financial need	843	312,666

Total Amount = $ 914,692

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission For 2004 Summer Term

Data Current As Of June 25, 2007 09:47:40

Total Headcount	4,731

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For West Valley
For 2004 Summer Term

Data Current As Of June 25, 2007 09:57:16

Total Headcount	4,457

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Mission For 2004 Fall Term

Data Current As Of June 25, 2007 09:50:27

Total Headcount	10,514

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2004 Fall Term

Data Current As Of June 25, 2007 09:57:25

Total Headcount	12,085

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CALIFORNIA COMMUNITY COLLEGES
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Student Demographics

Student Total Headcount For Mission
For 2005 Spring Semester

Data Current As Of June 25, 2007 09:50:49

Total Headcount	10,627

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2005 Spring Semester

Data Current As Of June 25, 2007 09:57:37

Total Headcount	12,552

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1.6's, 1.7's &/or 1.8's used in multiple years

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY - MISSION

DANIEL BALDWIN — Employee Name

FINANCIAL AID ADVISOR — Exact Position Title

WEST VALLEY COLLEGE — College/Department/Location

741-2494 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

. Enrollment Waiver Process: 0 0 16 12 8 4 4 0 0

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature _____ Date 4/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Elinor Belham — Employee Name

Student Services Acct Tech — Exact Position Title

Mission College (A&R) 408-855-5026 — College/Department/Location — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	(99-0)	(00-1)	(01-2)	(02-3)	(03-4)	(04-5)	(05-6)	(06-7)

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 220 hrs | 220 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elinor Belham Date 6-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wy/Me District

Maritza Cantarero — Employee Name

Financial Aid Director — Exact Position Title

West Valley College — College/Department/Location

741-2611 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: [SAFERS] FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:			18	18	15	12	12	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:	10	10	85	85	65	65	65	60	60
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	260	260	120	120	120	60	60	60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	32	40	40	40	90	80	50	50
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maritza Cantarero Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College

Amalia Bibat Dasalla — Employee Name

Senior Student Services Tech. — Exact Position Title

Admission & Records — College/Department/Location

855-8011 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	624	624	840	840	840	632	632	632	632
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA DE LOS REYES — Employee Name

STUDENT RECORDS ADVISOR — Exact Position Title

ADMISSIONS & RECORDS (MC) — College/Department/Location

(408) 855-5020 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	110	110	110	300	300	110	110	110	110
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wvmccd

Cynthia Estrada — Student Services Account Technician
Employee Name — Exact Position Title

West Valley College — (408) 741-2654 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	N/A	N/A	40	40	40	40	40	40	40
B. Enrollment Waiver Process:	N/A	N/A	N/A	20	20	20	20	20	20
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cynthia Estrada — Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Marta Franklin — Employee Name

Financial Aid Advisor — Exact Position Title

WVC Financial Aid — College/Department/Location

2495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:	0	0	24	8	8	8	8	8	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVM Mission Community

Jane Laudermilch — Employee Name

Student Service Tech — Exact Position Title

WVA + R. — College/Department/Location

2477 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ ___ 16 8 8 8 8 8 8

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Laudermilch Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission Community College

Diemanh Le — Employee Name

Student Services Acctat Tech — Exact Position Title

Mission College/A&R — College/Department/Location

408-855-5027 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.	HRS	HRS	HRS	HRS	HRS	HRS	HRS	HRS	HRS
A. Enrollment Collection Process:	~~220~~	110	220	220	110	110	110	110	110
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diemanh Le Date 06-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley - Mission Community College

Paulette Lino — Employee Name

A & R Supervisor — Exact Position Title

Mission College - A & R — College/Department/Location

(408) 855-5021 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:	210	210	420	420	210	210	210	210	210
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission

Al Lopez — Employee Name

Student Service Acct Tech II — Exact Position Title

WVC/cashier/A&R — College/Department/Location

741-2651 — Telephone #

(12mo)/ 1mo/10mo/hrly — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ~~30 30 30 30 30 30 30 10 30~~

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 30 30 30 30 30 30 30 30 30

B. Enrollment Waiver Process: 20 20 20 20 20 20 20 20 20

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Al Lopez — Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY - MISSION

MELISSA MACREYNOLDS — Employee Name

SYSTEMS ANALYST — Exact Position Title

INFORMATION SYSTEMS — College/Department/Location

408-741-4069 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- ~~Report time in hours~~

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:						40	20	20	
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

		40	80	—	40	40	120	40	

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:		40	80		80	60	140	40	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melissa MacReynolds — Date 6/11/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Mike McDonnell — Employee Name

Senior Systems Analyst — Exact Position Title

Information Systems — College/Department/Location

408 741 2675 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	-	-	-	80	8	8	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	4	4	4	20	8	8	8	8	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael McDonnell Date 6-8-07

If you have any questions, please contact Mike McDonnell, at 408 741-2675

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

LINH NGUYEN — Employee Name

Systems Analyst — Exact Position Title

Information Systems 741-2678 — College/Department/Location, Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:							80	80	16
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							250	250	256
TOTALS:							330	330	272

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh P. Nguyen Date 06/08/07

If you have any questions, please contact LINH NGUYEN, at 741-2678

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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How much time each year
Training, writing procedures etc

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Barbara Ogilvie — Employee Name
Supervisor A/R II — Exact Position Title

WVC/A+R/A+R — College/Department/Location
408-741-4630 — Telephone #
(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	Ø	18	18	18	18	22	22	22	22
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	Ø	65	85	85	65	65	65	65	65
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	48	48	48	48	48	56	56	56
TOTALS:	Ø	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV-Mission

Elizabeth Ramirez — Employee Name

Student Services Tech — Exact Position Title

WV A&R Saratoga — College/Department/Location

741-2536 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 40 150 | 40 150 | 40 150 | 40 150 | 40 ~~150~~ | 40 ~~150~~ | 40 150 | 40 150 | 40 150

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Ramirez — Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College District

Phyllis M. Riggs — Employee Name

Student Servs Tech-Cashier — Exact Position Title

Admissions/Mission College — College/Department/Location

8565009 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

832 832 832 832 832 832 832 832 832

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission CCD

Thelma Rodriguez — Employee Name

Systems Analyst — Exact Position Title

IS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:				40	80			40	80
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

			10	160	10	10	10	180	

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:			50	240	10	10	50	260	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Thelma Rodriguez Date 6/8/07

If you have any questions, please contact _____, at _____

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ON-LINE REGISTRATION AND CREDIT CARD PROCESSING VIA THE WEB

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

HENRY SAW YER — Employee Name

Senior System Analyst — Exact Position Title

Info. Systems — College/Department/Location

2677 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS - Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16		8	2	2		2
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			16	16	16	12	12	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:			32	16	24	12	12	10	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Henry Sawyer — Date 6.8.07

If you have any questions, please contact _____, at _____

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Billing tables for new system

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley + Mission College Dist

Kelvin Tran — Employee Name

Student Services Technic... — Exact Position Title

Mission College - A+R — College/Department/Location

408-855-5172 — Telephone #

~~12mo~~/11mo/10mo/~~hrly~~ — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:		110				360	110	110	110
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Com District

Thuy Tran — Employee Name

Student Services Acct Tech — Exact Position Title

WV / Adm / West Valley — College/Department/Location

_____ — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/6/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Lucy Trinh — Financial Aid Technician
Employee Name — Exact Position Title

WVC / FA / 2443
College/Department/Location — Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: — — — — — — — —

B. Enrollment Waiver Process: — — — — — — — —

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: 0 0 1-2 1-2 1-2 1-2 1-2 1-2 1-2 hrs.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Comm district

TU-LAN TRINH — Employee Name

Student Records Advisor — Exact Position Title

Records — College/Department/Location

(408)741-2537 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/07/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Student Services

Nitha I. Vasquez.

Acct. Technician

Employee Name / Exact Position Title

Mission College - ASR (408) 855-5228

College/Department/Location / Telephone # / (12mo/11mo/10mo/hrly) Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
	HRS	HRS	HRS	HRS	HRS	HRS	HRS	HRS	HRS
A. Enrollment Collection Process:	___	110	220	220	110	110	110	110	110
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha I. Vasquez Date 6-11-07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Admission & Records / WVC
Department/Location

Barbara Ogilvie
Employee Name

Supervisor A/R II
Exact Position Title

408-741-4630
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 (99-0) 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record "1" which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the "2" payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) "4"						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15 min. See back of page					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Barbara Symons

10% of Student's who receive BOGG waivers have problems receiving their BOGG, Because before it was implemented the student drops some or all classes. When this happens it negates the Bogg from completing In order for this process to be completed I must do research to find out what semesters should be rebilled and then switch screens & remove the "drops" from those semesters. Once the drops are removed then re-bill the student for those semesters. The next step would be to re-enter the drops into the student records. Once this is done if the student has not yet paid their fees they can do so at that time, if the student has paid ... an email must be sent to finance informing them to refund the student. Each student who must be rebilled in this fashion takes on average 15 minutes and can only be corrected by myself & the Director of Admissions & Record

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College District — Mission College AER Department/Location

Elinor Belham Employee Name — Student Services Acct Tech h Exact Position Title

408-855-5026 Telephone # — 12mo/11mo/10mo/hrly (12mo) Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Belham Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY MISSION COMM COLL DIST — District

ADMISSIONS & RECORDS — Department/Location

DIANE BRIEN — Employee Name

STUDENT SERVICES TECH. — Exact Position Title

408-741-2417 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-9 99-0 (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Brien — Date 06/06/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College
District

Admissions & Records
Department/Location

Arabia Bibat-Dasalla
Employee Name

Senior Student Services Tech.
Exact Position Title

855-8011
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	10					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY-MISSION
District

ADMISSIONS & RECORDS (MISSION COLL.)
Department/Location

MELISSA DE LOS REYES
Employee Name

STUDENT RECORDS ADVISOR
Exact Position Title

(408) 855-5020
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- Mission (wvmccd)
District

Cashiers / WVC
Department/Location

Cynthia Estrada
Employee Name

Student Services Account Technician
Exact Position Title

(408) 741-2654
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-Mission Community / ADMISSIONS + Records
District / Department/Location

JANE LAUTERMILCH / Student Services Tech
Employee Name / Exact Position Title

408 741-2477 / 12mo/11mo/10mo/hrly
Telephone # / Work year length(circle)

Fiscal Year: (98-9) (99-0) (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N A.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 MIN ~~N A~~					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Lautermilch Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College A&R - Mission College
District / Department/Location

Diemanh Ho
Employee Name

Student Services Account Tech
Exact Position Title

408-855-5027
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

A&R / Mission College
Department/Location

Paulette Lino
Employee Name

A&R Supervisor
Exact Position Title

(408) 855-5021
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY MISSION — District

CASHIER / W.U.C — Department/Location

AL LOPEZ — Employee Name

STUDENT SERVICE ACCOUNT TECH — Exact Position Title

741-2651 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-9) (99-0) (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- mission
District

Records WVC
Department/Location

Elizabeth Ramirez
Employee Name

Student Services Technician
Exact Position Title

408 741-2536
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	35					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Ramirez Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-Mission
District

Admissions – Missioncollege
Department/Location

PHYLLIS M. Riggs
Employee Name

Student Serv Tech-Cashier
Exact Position Title

(408) 855-5009
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20 mins					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	20					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a gooo faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact [redacted], at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley + Mission College District
District

Admissions + Records (Mission Coll
Department/Location

Kelvin Tran
Employee Name

Student Services Technician
Exact Position Title

408 - 855 - 5127
Telephone #

~~12mo~~/11mo/~~10mo~~/hrly
Work year length(circle)

Fiscal Year: 98-9 ~~99-0~~ 00-1 01-2 02-3
~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm District — District

Cashier / West Valley — Department/Location

Thuy Tran — Employee Name

Student Services Acct Tech — Exact Position Title

(408) 741-2662 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-6-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm. District — District
Records — Department/Location
IL-LAN TRINH — Employee Name
Student Records Advisor — Exact Position Title
(408) 741-2537 — Telephone #
12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7
Circle the years ~~for which you are responding~~.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06/02/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WUMCCK
District

Mission College A+R
Department/Location

Nitha T. Vasquez
Employee Name

Student Serv. Acct. Tech.
Exact Position Title

(408) 855-5078
Telephone #

~~12mo~~/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3
~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha T. Vasquez Date 6-11-07.

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY / MISSION
District

FINANCIAL AID
Department/Location

DANIEL BALDWIN
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

741-2494
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Baldwin Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley/Mission College — District

F.A.O - MC — Department/Location

Amber Delos Reyes — Employee Name

Financial Aid Tech — Exact Position Title

(408) 855-5066 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes** (per student)	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15-45			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	60-more			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15-20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	40-60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10-20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD West Valley-Mission
District

Financial Aid/Mission
Department/Location

Katy Fitzgerald
Employee Name

Financial Aid Advisor
Exact Position Title

408-855-5070
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katy Fitzgerald Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid
Department/Location

Marta Franklin
Employee Name

Financial Aid Advisor
Exact Position Title

x 2495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
* **Code 25** Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30	x 48 weeks		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

FINANCIAL AID – MC
Department/Location

ROEHL GALANG
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

408-855-5071
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 ~~02-03~~ 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-7-07

If you have any questions, please contact ROEHL GALANG, at 408-855-5071

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WMCCD - WV
District

Financial Aid
Department/Location

Rhonda Kirkland
Employee Name

Interim Financial Aid Advisor
Exact Position Title

2601
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.0			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10.0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5.0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 wk			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15.0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhonda Kirkland Date 6/15/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY - MVMCCD
District

FINANCIAL AID
Department/Location

MARIA LOPEZ
Employee Name

STUDENT SERVICE TECHNICIAN
Exact Position Title

408-741-2039
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lopez Date 6/6/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION
District

FINANCIAL AID - MISSION
Department/Location

NGOCLIEN NGUYEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

408-855-5068 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer. 30	20 - 45			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. 30	20-45			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. 20 Providing student with proof of eligibility and filing documents.	15-25			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. 15	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-07-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-Mission College
District

Financial Aid / WVC
Department/Location

Elizabeth T. Pelayo
Employee Name

Financial Aid Outreach Specialist
Exact Position Title

741-2660
Telephone #

(12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 (05-06) (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	40			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION COLLEGE
District

FINANCIAL AID / MC
Department/Location

MARIE RANCAP
Employee Name

STUDENT SERVICE TECH.
Exact Position Title

(408) 855-5054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20-40 (30)			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	more than 60 (60)			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	40			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	40			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-2-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid / WVC
Department/Location

Lucy Trinh
Employee Name

Financial Aid Technician
Exact Position Title

(408) 741-2443
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

If you have any questions, please contact (408) 741-2443, at WVC

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVmccd
District

Financial Aid Office / MC
Department/Location

HA M. VUONG
Employee Name

FA Advisor
Exact Position Title

855-5069
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Attachment 3

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: WEST VALLEY - MISSION CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of students enrolled each fiscal year. (Not FTE's)									
Summer	11,170	10,989	10,435	9,691	12,074	8,578	9,188	9,706	
Fall	25,669	25,789	25,159	25,023	26,414	24,089	22,549	21,251	
Winter/ Intersession									
Spring	29,117	27,078	26,501	27,208	27,846	23,965	23,179	22,914	
Total	65,956	63,856	62,195	62,522	66,334	56,632	54,916	53,871	
2. Number of students who paid enrollment fees:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									
3. Number of students exempted from paying enrollment fees (BOGG, etc):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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Revised May 2007

Attachment 4

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: WEST VALLEY - MISSION CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee accounts receivable requiring collections:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Valley-Mission

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		5386	4523	5519	6498	7205	8110	8113	8225
2. Number of enrollment fee waivers approved (BOGG, etc.):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		5732	4829	4171	4704	5367	5647	6508	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Mission College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2959	2581	3103	3718	4131	4518	4523	4678
2. Number of enrollment fee waivers approved (BOGG, etc.):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		3116	2695	2301	2616	3001	3064	3506	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Valley College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested: See attached									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2427	1942	2416	2730	3074	3592	3590	3557
2. Number of enrollment fee waivers approved (BOGG, etc.): See report submitted to date. Check with IS-									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2616	2134	1870	2088	2364	2581	2803	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Maritza Cantarero Date 6/7/07

Maritza Cantarero
Employee Name: (print)

FA Director
Position or Title

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: WVM

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 231,172	$ 149,947	$ 231,216	$ 277,126	$ 193,740	$ 491,558	$ 208,913
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 4,623	$ 2,999	$ 4,624	$ 5,543	$ 3,875	$ 9,831	$ 4,178
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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PHR Schedule 1
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year *04-05*

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Belham, Elinor	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Brien, Diane	Student Services Tech.	Class	52	3234	597	**25.54**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3376	624	**26.67**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3606	666	**28.48**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Lautermilch, Jane	Student Services Tech.	Class	52	3234	597	**25.54**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Lino, Paulette	A&R Supervisor I	Supvr	16	4479	828	**35.38**
Lopez, Al	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3234	597	**25.54**
Riggs, Phyllis	Student Services Tech.	Class	52	3234	597	**25.54**
Tran Kelvin	Student Services Tech.	Class	52	3234	597	**25.54**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Trinh, Lucy	Student Records Advisor	Class	57	3606	666	**28.48**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3311	612	**26.15**

PHR Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year *04-05*

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Baldwin, Daniel	Financial Aid Advisor	Class	57	3606	666	**28.48**
De Los Reyes, Amber	Financial Aid Tech.	Class	57	3606	666	**28.48**
Fitzgerald, Katy	Financial Aid Advisor	Class	57	3606	666	**28.48**
Franklin, Marta	Financial Aid Advisor	Class	57	3606	666	**28.48**
Galang, Roehl	Financial Aid Advisor	Class	57	3606	666	**28.48**
Kirkland, Rhonda	Interim Financial Aid Advisor	Class	57	3606	666	**28.48**
Lopez, Maria	Student Services Tech.	Class	52	3234	597	**25.54**
Nguyen, Ngolien	Financial Aid Tech.	Class	57	3606	666	**28.48**
Pelayo, Elizabeth	Financial Outreach Specialist	Class	57	3606	666	**28.48**
Rancap, Maria	Student Services Tech.	Class	52	3234	597	**25.54**
Trinh, Lucy	Financial Aid Tech.	Class	57	3606	666	**28.48**
Vuong, Ha M.	Financial Aid Advisor	Class	57	3606	666	**28.48**

PHR Schedule 3
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year 2004-05

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections and Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office and PHR Schedule.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Baldwin, Daniel	Financial Aid Advisor	Class	57	3606	666	**28.48**
Belham, Elinor	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Cantarero, Maritza	Financial Aid Director	Supvr	32	6146	1136	**48.55**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3376	624	**26.67**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3606	666	**28.48**
Enrollment Office Staff	Collection of Enrollment Fees	PHR Sch. 1	----------			**26.87**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Finacial Aid Office Staff	Waving Enrollment Fees	PHR Sch. 2	----------			**27.99**
Franklin, Marta	Financial Aid Advisor	Class	57	3606	666	**28.48**
Lautermilch, Jane	Student Services Tech.	Class	52	3234	597	**25.54**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Lino, Paulette	A&R Supervisor	Supvr	16	4479	828	**35.38**
Lopez, Al	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
MacReynolds, Melissa	Systems Analyst	Class	70	4813	889	**38.01**
McDonnell, Mike	Sr. Systems Analyst	Class	71	4929	911	**38.93**
Nguyen, Linh	Systems Analyst	Class	70	4813	889	**38.01**
Ogilvie, Barbara	A&R Supervisor II	Supvr	20	4847	896	**38.29**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3234	597	**25.54**
Riggs, Phyllis	Student Services Tech.	Class	52	3234	597	**25.54**
Rodriguez, Thelma	Systems Analyst	Class	70	4813	889	**38.01**
Sawyer, Henry	Sr. Systems Analyst	Class	71	4929	911	**38.93**
Tran Kelvin	Student Services Tech.	Class	52	3234	597	**25.54**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3311	612	**26.15**
Trinh, Lucy	Student Records Advisor	Class	57	3606	666	**28.48**
Trinh, Tu-Lan	Student Records Advisor	Class	57	3606	666	**28.48**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3311	612	**26.15**

Adopted: June 19, 2003
Effective: July 1, 2004

Human Resources Department
WEST VALLEY–MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue
Saratoga, CA 95070

2004–2005 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary	Hourly
Administrative Assistant	57	3,170 – 3,771	$19.51
Administrative Specialist–Instruction	62	3,531 – 4,209	$21.72
Administrative Specialist–Personnel	62	3,531 – 4,209	$21.72
Career Placement Advisor	57	3,170 – 3,771	$19.51
Career/Transfer Advisor	59	3,311 – 3,939	$20.37
Child Development Center Specialist I	43	2,362 – 2,792	$14.53
Child Development Center Specialist II	48	2,620 – 3,103	$16.12
Child Development Center Specialist III	53	2,915 – 3,450	$17.93
College Recruitment Specialist	57	3,170 - 3,771	$19.51
College Webmaster	80	5,267 – 6,342	$32.41
Community Access Coordinator/TV Producer	61	3,450 – 4,116	$21.24
Computer Graphic Specialist	58	3,234 – 3,854	$19.90
Computer Operations Specialist	63	3,606 – 4,308	$22.19
Coordinator of Parking and Traffic	54	2,976 – 3,531	$18.31
Desktop Publishing Specialist	50	2,729 – 3,234	$16.79
Desktop Support Technician	67	3,939 – 4,710	$24.22
Duplicating Services Specialist	48	2,620 – 3,103	$16.12
Educational Testing Specialist	54	2,976 – 3,531	$18.31
EOPS/CARE Specialist	59	3,311 – 3,939	$20.37
EOPS Specialist	57	3,170 – 3,771	$19.51
Financial Aid Advisor	57	3,170 – 3,771	$19.51
Financial Aid Special Services Technician (BFAP)	52	2,850 - 3,376	$17.54
Financial Aid Outreach Specialist (BFAP)	57	3,170 - 3,771	$19.51
Financial Analyst	68	4,028 – 4,813	$24.81
Financial Assistant (Assignment: Accounts Payable)	53	2,915 – 3,450	$17.93
Financial Technician–Payroll	57	3,170 – 3,771	$19.51
Financial Technician	57	3,170 – 3,771	$19.51
Grants Assistant – Foster and Kinship Care	57	3,170 - 3,771	$19.51
Graphic Designer	61	3,450 – 4,116	$21.24
HelpDesk/Computer Operations Specialist	70	4,209 – 5,040	$25.89
International Student Advisor	57	3,170 - 3,771	$19.51
Instructional Assistant – Adaptive Physical Education	53	2,915 – 3,450	$17.93
Instructional Assistant – Business	53	2,915 – 3,450	$17.93
Instructional Assistant – Child Development	53	2,915 – 3,450	$17.93
Instructional Assistant – Court Reporting	53	2,915 – 3,450	$17.93
Instructional Assistant – DSPS	53	2,915 – 3,450	$17.93
Instructional Assistant – Foreign Language	53	2,915 – 3,450	$17.93
Instructional Assistant – Music	53	2,915 – 3,450	$17.93
Instructional Laboratory Technician – Art	54	2,976 – 3,531	$18.31
Instructional Laboratory Technician – Business	54	2,976 – 3,531	$18.31
Instructional Laboratory Technician – Computer Science	54	2,976 – 3,531	$18.31
Instructional Laboratory Technician – LATC	54	2,976 – 3,531	$18.31

Instructional Laboratory Technician – Mathematics	54	2,976 – 3,531	$18.31
Instructional Laboratory Technician – Nursing	54	2,976 – 3,531	$18.31
Instructional Lab Technician – Printing	54	2,976 – 3,531	$18.31
Instructional Laboratory Technician – Science	54	2,976 – 3,531	$18.31

Adopted: June 19, 2003

Effective: July 1, 2004

2004–2005 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary	Hourly
Instructional Laboratory Technician – Theatre Arts Costumer	54	2,976 – 3,531	$18.31
Instructional Systems Computer Resource Specialist	66	3,854 – 4,605	$23.73
Instructional Technology Producer/Director	66	3,854 – 4,605	$23.73
Library/Media Technician	54	2,976 – 3,531	$18.31
Microcomputer Technical Specialist	63	3,606 – 4,308	$22.19
Network/Communication Specialist	72*	4,402 – 5,267	$27.07
Office Assistant	50	2,729 – 3,234	$16.79
Office Coordinator	54	2,976 – 3,531	$18.31
Offset Printer	51	2,792 – 3,311	$17.16
Performing Arts Technical Director	64	3,688 – 4,402	$22.71
Program Assistant	54	2,976 – 3,531	$18.31
Program Coordinator	57	3,170 – 3,771	$19.51
Program Specialist – DSPS	59	3,311 – 3,939	$20.37
Program Specialist – Hospitality Management	57	3,170 – 3,771	$19.51
Program Specialist – Work Exp./Work–Based Learning Prog	57	3,170 – 3,771	$19.51
Programmer	65	3,771 – 4,500	$23.19
Programmer Analyst	70	4,209 – 5,040	$25.89
Receptionist	44	2,409 – 2,850	$14.83
Registered Nurse	71	4,308 – 5,158	$26.51
Research Analyst	75	4,710 - 5,655	$28.98
Research Technician	61	3,450 – 4,116	$21.24
Senior Administrative Assistant	59	3,311 – 3,939	$20.37
Senior Buyer	62	3,531 – 4,209	$21.72
Senior Desktop Support Technician	72	4,402 – 5,267	$27.07
Senior Office Coordinator	57	3,170 – 3,771	$19.51
Senior Programmer/Analyst	71	4,308 – 5,158	$26.51
Senior Student Services Technician	54	2,976 – 3,531	$18.31
Senior Telecommunications Systems Administrator	72	4,402 – 5,267	$27.07
Server Systems Administrator (WINDOWS/NT)	81	5,392 – 6,487	$33.19
Student Records Advisor	57	3,170 – 3,771	$19.51
Student Services Account Technician	53	2,915 – 3,450	$17.93
Student Services Technician	52	2,850 – 3,376	$17.54
Telecommunications/Audiovisual Maintenance Specialist	70	4,209 – 5,040	$25.89
Telephone Operator	41	2,271 – 2,678	$13.97
Telephone Systems Administrator	65	3,771 – 4,500	$23.19
~~Tram Driver/Mobility Assistant~~	~~44~~	~~2,409 – 2,850~~	~~$14.83~~
Transfer/Career Advisor	57	3,170 – 3,771	$19.51
TV/AV Operations Coordinator	66	3,854 – 4,605	$23.73
Web Administrator	80	5,267 – 6,342	$32.41
Workforce Program Advisor	57	3,170 – 3,771	$19.51

*Temporary adjustment to range 82 for recruiting purposes.

Adopted: June 19, 2003
Effective: July 1, 2004

Office of Human Resources
WEST VALLEY–MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue
Saratoga, CA 95070

2004-2005 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	HOURLY	A	B	C	D	E	F*	G*
21	$9.45	1,535	1,586	1,665	1,720	1,783	1,873	1,966
22	$9.64	1,563	1,621	1,685	1,748	1,821	1,912	2,008
23	$9.75	1,586	1,650	1,720	1,783	1,856	1,949	2,046
24	$9.97	1,621	1,685	1,748	1,821	1,895	1,991	2,090
25	$10.16	1,650	1,720	1,783	1,856	1,931	2,027	2,129
26	$10.38	1,685	1,748	1,821	1,895	1,971	2,069	2,172
27	$10.59	1,720	1,783	1,856	1,931	2,004	2,104	2,209
28	$10.77	1,748	1,821	1,895	1,971	2,046	2,149	2,256
29	$10.98	1,783	1,856	1,931	2,004	2,089	2,193	2,303
30	$11.20	1,821	1,895	1,971	2,046	2,138	2,245	2,357
31	$11.42	1,856	1,931	2,004	2,089	2,177	2,286	2,401
32	$11.65	1,895	1,971	2,046	2,138	2,219	2,330	2,446
33	$11.89	1,931	2,004	2,089	2,177	2,271	2,384	2,503
34	$12.13	1,971	2,046	2,138	2,219	2,316	2,432	2,554
35	$12.34	2,004	2,089	2,177	2,271	2,362	2,480	2,604
36	$12.58	2,046	2,140	2,219	2,316	2,409	2,529	2,655
37	$12.85	2,089	2,177	2,271	2,362	2,459	2,582	2,711
38	$13.16	2,138	2,219	2,316	2,409	2,509	2,634	2,766
39	$13.38	2,177	2,271	2,362	2,459	2,563	2,691	2,826
40	$13.66	2,219	2,316	2,409	2,509	2,620	2,751	2,889
41	$13.97	2,271	2,362	2,459	2,563	2,678	2,812	2,953
42	$14.26	2,316	2,409	2,509	2,620	2,729	2,866	3,009
43	$14.53	2,362	2,459	2,563	2,678	2,792	2,932	3,078
44	$14.83	2,409	2,509	2,620	2,729	2,850	2,993	3,143
45	$15.12	2,459	2,562	2,678	2,792	2,915	3,061	3,213
46	$15.44	2,509	2,620	2,728	2,850	2,976	3,125	3,281
47	$15.78	2,563	2,678	2,792	2,915	3,037	3,189	3,348
48	$16.12	2,620	2,728	2,850	2,976	3,103	3,258	3,421
49	$16.47	2,678	2,792	2,915	3,037	3,170	3,329	3,495
50	$16.79	2,729	2,850	2,976	3,103	3,234	3,396	3,566
51	$17.16	2,792	2,915	3,037	3,170	3,311	3,476	3,650
52	$17.54	2,850	2,976	3,103	3,234	3,376	3,545	3,722
53	$17.93	2,915	3,037	3,170	3,311	3,450	3,622	3,804
54	$18.31	2,976	3,103	3,234	3,376	3,531	3,708	3,893
55	$18.68	3,037	3,170	3,311	3,450	3,606	3,787	3,977
56	$19.09	3,103	3,234	3,376	3,531	3,688	3,872	4,066
57	$19.51	3,170	3,311	3,450	3,606	3,771	3,960	4,158
58	$19.90	3,234	3,376	3,531	3,688	3,854	4,047	4,249
59	$20.37	3,311	3,450	3,606	3,771	3,939	4,135	4,342
60	$20.77	3,376	3,531	3,688	3,854	4,028	4,230	4,441

*In order to be eligible for steps F and G, the employee must have completed five years of service, after July 1, 1998, at the previous step.

Adopted: June 19, 2003
Effective: July 1, 2004

2004-2005 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	HOURLY	A	B	C	D	E	F*	G*
61	$21.24	3,450	3,606	3,771	3,939	4,116	4,322	4,538
62	$21.72	3,531	3,688	3,854	4,028	4,209	4,419	4,640
63	$22.19	3,606	3,771	3,939	4,116	4,308	4,523	4,750
64	$22.71	3,688	3,854	4,028	4,209	4,402	4,623	4,854
65	$23.19	3,771	3,939	4,116	4,308	4,500	4,725	4,961
66	$23.73	3,854	4,028	4,209	4,402	4,605	4,835	5,077
67	$24.22	3,939	4,116	4,308	4,500	4,710	4,945	5,192
68	$24.81	4,028	4,209	4,402	4,602	4,813	5,054	5,307
69	$25.32	4,116	4,308	4,500	4,710	4,931	5,177	5,436
70	$25.89	4,209	4,402	4,602	4,813	5,040	5,292	5,557
71	$26.51	4,308	4,500	4,710	4,929	5,158	5,416	5,686
72	$27.07	4,402	4,602	4,813	5,040	5,267	5,530	5,807
73	$27.70	4,500	4,710	4,929	5,158	5,392	5,662	5,944
74	$28.34	4,605	4,813	5,040	5,266	5,523	5,799	6,088
75	$28.98	4,710	4,931	5,158	5,392	5,655	5,938	6,234
76	$29.61	4,813	5,040	5,267	5,523	5,779	6,068	6,371
77	$30.36	4,931	5,158	5,392	5,655	5,913	6,208	6,519
78	$31.02	5,040	5,267	5,523	5,779	6,050	6,352	6,670
79	$31.74	5,158	5,392	5,655	5,913	6,200	6,509	6,835
80	$32.41	5,267	5,523	5,779	6,050	6,342	6,660	6,993
81	$33.19	5,392	5,655	5,913	6,200	6,487	6,812	7,152
82	$34.00	5,523	5,779	6,050	6,342	6,652	6,985	7,334
83	$34.78	5,655	5,913	6,200	6,487	6,801	7,141	7,499
84	$35.56	5,779	6,050	6,342	6,652	6,956	7,303	7,668
85	$36.39	5,913	6,200	6,487	6,801	7,121	7,478	7,852
86	$37.22	6,050	6,342	6,652	6,956	7,296	7,661	8,044
87	$38.15	6,200	6,487	6,801	7,121	7,468	7,841	8,233
88	$39.02	6,342	6,652	6,956	7,296	7,646	8,029	8,430
89	$39.92	6,487	6,801	7,121	7,468	7,818	8,209	8,620
90	$40.94	6,652	6,956	7,296	7,646	8,007	8,407	8,827

*In order to be eligible for steps F and G, the employee must have completed five years of service, after July 1, 1998, at the previous step.

Adopted: June 19, 2003
Effective: July 1, 2004

Human Resources Department
WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue
Saratoga, CA 95070

2004-2005 SUPERVISORS SALARY SCHEDULE
(40-HOUR WEEK)

Job Classification – Group A	Range	Salary	Hourly
Admissions and Records Director	24	4,536 - 5,514	$ 26.18
Admissions and Records Supervisor I	16	3,871 - 4,707	$ 22.34
Admissions and Records Supervisor II	20	4,191 - 5,095	$ 24.16
Custodial Supervisor	10	3,438 - 4,176	$ 19.84
District Custodial Manager	31	5,213 - 6,333	$ 30.07
District Grounds Manager	31	5,213 - 6,333	$ 30.07
District Warehouse Services Supervisor	13	3,651 - 4,433	$ 21.05
Finance Supervisor – Payroll	19	4,109 - 4,995	$ 23.71
Financial Aid Director	32	5,315 - 6,460	$ 30.68
Financial Aid Supervisor II	20	4,191 - 5,095	$ 24.16
Microcomputer Support Supervisor	39	6,107 - 7,419	$ 35.23
Network/Communications Supervisor	40	6,228 - 7,571	$ 35.91
Printing Services Manager	21	4,272 - 5,195	$ 24.65
Public Safety Supervisor	34	5,531 - 6,721	$ 31.92
Senior Applications and Database Administrator	42	6,471 - 7,876	$ 37.39
Senior Network Architect and IS Security Analyst	44	6,741 - 8,192	$ 38.89
Senior Systems Analyst	42	6,471 - 7,876	$ 37.39
Student Activities Director	24	4,536 - 5,514	$ 26.18
Student Records Supervisor	13	3,651 - 4,433	$ 21.05
Student Recruitment Supervisor	16	3,871 - 4,707	$ 22.34
Student Services Office Supervisor	18	4,027 - 4,895	$ 23.24
Systems Analyst	31	5,213 - 6,333	$ 30.07
UNIX Systems Administrator	38	5,984 - 7,277	$ 34.53

2004-2005 SUPERVISORS UNIT

Range	Hourly	A	B	C	D	E	F*	G*
10	$19.84	3,438	3,609	3,789	3,979	4,176	4,383	4,602
11	$20.24	3,509	3,682	3,863	4,056	4,259	4,472	4,695
12	$20.65	3,579	3,751	3,942	4,141	4,345	4,563	4,791
13	$21.05	3,651	3,829	4,018	4,220	4,433	4,654	4,886
14	$21.48	3,721	3,907	4,100	4,306	4,521	4,748	4,986
15	$21.90	3,797	3,986	4,180	4,391	4,612	4,844	5,085
16	$22.34	3,871	4,060	4,265	4,479	4,707	4,942	5,188
17	$22.80	3,953	4,147	4,355	4,568	4,799	5,038	5,290
18	$23.24	4,027	4,230	4,437	4,659	4,895	5,140	5,396
19	$23.71	4,109	4,315	4,527	4,749	4,995	5,244	5,506
20	$24.16	4,191	4,401	4,618	4,847	5,095	5,349	5,618
21	$24.65	4,272	4,486	4,712	4,945	5,195	5,455	5,728
22	$25.18	4,362	4,575	4,804	5,042	5,299	5,563	5,841
23	$25.65	4,449	4,668	4,902	5,140	5,407	5,678	5,961
24	$26.18	4,536	4,759	5,000	5,243	5,514	5,790	6,078
25	$26.70	4,629	4,851	5,102	5,350	5,623	5,903	6,199
26	$27.24	4,721	4,949	5,203	5,453	5,736	6,023	6,325
27	$27.79	4,815	5,047	5,306	5,565	5,850	6,141	6,449
28	$28.33	4,911	5,147	5,413	5,674	5,967	6,267	6,581
29	$29.30	5,079	5,329	5,599	5,872	6,175	6,484	6,810
30	$29.48	5,109	5,357	5,630	5,911	6,208	6,519	6,847
31	$30.07	5,213	5,469	5,746	6,023	6,333	6,649	6,983
32	$30.68	5,315	5,574	5,858	6,146	6,460	6,783	7,122
33	$31.28	5,420	5,687	5,973	6,271	6,589	6,919	7,265
34	$31.92	5,531	5,799	6,094	6,394	6,721	7,056	7,409
35	$32.53	5,641	5,917	6,217	6,521	6,855	7,199	7,559
36	$33.20	5,756	6,033	6,340	6,652	6,994	7,346	7,713
37	$33.86	5,871	6,153	6,470	6,784	7,136	7,494	7,869
38	$34.53	5,984	6,278	6,599	6,922	7,277	7,639	8,021
39	$35.23	6,107	6,401	6,726	7,060	7,419	7,790	8,179
40	$35.91	6,228	6,530	6,864	7,203	7,571	7,950	8,348
41	$36.64	6,351	6,659	6,999	7,346	7,723	8,108	8,513
42	$37.39	6,477	6,791	7,141	7,493	7,876	8,271	8,684
43	$38.13	6,608	6,929	7,283	7,642	8,033	8,434	8,856
44	$38.89	6,741	7,066	7,429	7,795	8,192	8,604	9,034
45	$39.66	6,875	7,209	7,578	7,951	8,358	8,777	9,213
46	$40.45	7,014	7,357	7,730	8,112	8,525	8,950	9,398
47	$41.27	7,153	7,503	7,885	8,273	8,695	9,130	9,588
48	$42.10	7,297	7,652	8,042	8,438	8,869	9,314	9,779
49	$42.93	7,443	7,806	8,204	8,608	9,048	9,499	9,975
50	$43.79	7,592	7,962	8,369	8,780	9,228	9,688	10,174
51	$35.23	7,745	8,121	8,538	8,954	9,412	9,883	10,378
52	$45.57	7,900	8,283	8,707	9,133	9,602	10,082	10,587
53	$46.47	8,057	8,448	8,882	9,316	9,794	10,285	10,798
54	$47.42	8,217	8,617	9,059	9,503	9,989	10,490	11,014
55	$48.35	8,381	8,790	9,239	9,692	10,190	10,699	11,235

NOTE: This salary schedule reflects agreed realignments designed to insure that the supervisors earn at least 10% more than the highest paid, regularly-assigned subordinate.

*In order to be eligible for steps F and G, the employee must have completed five years of service, after July 1, 1998, at the previous step.

Schedule 3

West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers					
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 837,172	$ 693,467	$ 731,216	$ 877,216	$ 1,193,734	$ 1,996,553
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,602	For 00-01 through 05-06 - unit fee				
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34
Total # of credits	Line 4A divided by unit fee		63,042	66,474	79,746	76,179	85,542
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843
Summary							
1.8-4 line 4B.	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,602					
1.8-4 5.	Credit Units Waived		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,345**	**$ 71,237**	**$ 75,115**	**$ 90,113**	**$ 93,198**	**$ 117,774**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 03-04 fees: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 04-05 fees: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Victor Valley
COUNTY: San Bernardino

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$23,297,545	$21,009,735	$220,421	$21,230,156
ENROLL FEE ADMIN (2%)	73,823	63,487	10,336	73,823
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	365,637	-365,637	0
PARTNERSHIP FOR EXCEL.	1,345,349	1,157,000	188,349	1,345,349
S.F.A.A.	551,512	473,010	78,502	551,512
E.O.P.S.	790,332	678,307	112,025	790,332
C.A.R.E.	158,036	135,911	22,125	158,036
D.S.P.S.	661,298	565,935	95,363	661,298
STATE HOSPITALS	0	0	0	0
CALWORKS	450,678	387,583	63,095	450,678
MATRICULATION (CREDIT)	325,685	280,090	45,595	325,685
MATRIC. (NONCREDIT)	33,054	28,426	4,628	33,054
FAC.& STAFF DIVERSITY	13,158	9,354	3,804	13,158
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	398,461	342,676	55,785	398,461
BLOCK GRANT (ONE-TIME)	180,422	155,163	25,259	180,422
ECON. DEVELOPMENT	58,823	0	49,411	49,411
TELECOMMUNICATIONS	53,103	31,560	21,543	53,103
TANF	105,691	90,894	14,797	105,691
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	0	0	0	0
VTEA TITLE I C	430,935	336,130	25,855	361,985
PLANT & INSTRUCTIONAL	202,372	174,040	28,332	202,372
PRIOR YEAR CORRECTION	-509,370	-520,011	10,641	-509,370
TOTAL	$28,620,907	$25,764,927	$710,229	$26,475,156

FISCAL SERVICES: 06/23/05 16:14
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Sch e 5A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5 Initial year claim 98-99 through 05-06.
Findings:

Re	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
	EFCW-1 B. 1. a.			$ 799.92	$ 854.82	$ 733.80	$ 582.60	$ 586.60
	EFCW-1 B. 1. b.		$ 869.60	$ 5,338.11	$ 9,478.53	$ 5,677.57	$ 5,520.55	$ 7,259.75
	EFCW-1 B. 2. a.		$ 11,055.64	$ 7,590.24	$ 10,270.44	$ 14,629.52	$ 5,431.24	$ 5,514.24
	EFCW-1 B. 2. b.		$ 143,823.68	$ 126,038.10	$ 153,325.47	$ 183,675.31	$ 203,739.22	$ 228,975.00
	EFCW-1 B. 2. c.		$ 29,796.00	$ 31,474.08	$ 36,677.68	$ 35,267.20	$ 23,087.20	$ 34,352.52
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 185,544.92	$ 171,240.45	$ 210,606.94	$ 239,983.40	$ 238,360.81	$ 276,688.11
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 75,345.00	$ 71,237.00	$ 75,115.00	$ 90,113.00	$ 93,198.00	$ 117,774.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 110,199.92	$ 100,003.45	$ 135,491.94	$ 149,870.40	$ 145,162.81	$ 158,914.11
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 75,345.00**	**$ 71,237.00**	**$ 75,115.00**	**$ 90,113.00**	**$ 93,198.00**	**$ 117,774.00**

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mission College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 19, 2007 11:11:01

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	104	38,158
BOGW - Part B based on income standards	2,161	772,690
BOGW - Part C based on financial need	801	271,013

Total Amount = $ 1,081,861

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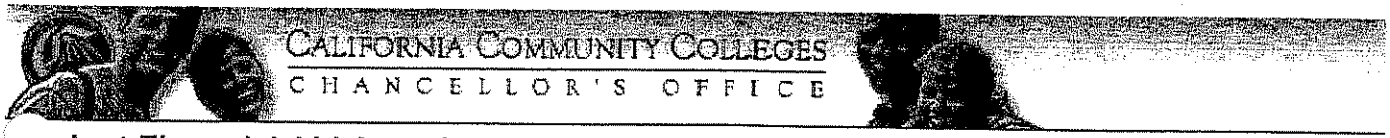

ıdent Financial Aid Awards

West Valley College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of June 07, 2007 04:20:55

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	53	18,497
BOGW - Part B based on income standards	1,685	583,529
BOGW - Part C based on financial need	843	312,666

Total Amount = $ 914,692

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Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

November 20, 2007

CERTIFIED MAIL #7006 3450 0000 3941 8628

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
West Valley-Mission Community College District CC 43180

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for West Valley-Mission Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43180

(02) Claimant Name: West Valley-Mission Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 14000 Fruitvale Avenue

City: Saratoga | State: CA | Zip Code: 95070-5698

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☒
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☐
Fiscal Year of cost	(06)	(12) 2005-2006
Total Claimed Amount	(07)	(13) $ 1,327,423
Less : 10% Late Penalty		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,317,423
Due from State	(08)	(17) $ 1,317,423
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	885
(23) EFCW-1, (04)(A)(1)(b)(f)	61,835
(24) EFCW-1, (04)(A)(2)(a)(f)	722,110
(25) EFCW-1, (04)(B)(1)(a)(f)	510
(26) EFCW-1, (04)(B)(1)(b)(f)	8,518
(27) EFCW-1, (04)(B)(2)(a)(f)	8,986
(28) EFCW-1, (04)(B)(2)(b)(f)	241,297
(29) EFCW-1, (04)(B)(2)(c)(f)	37,106
(30) EFCW-1, (06)	38
(31) EFCW-1, (07)	406,225
(32) EFCW-1, (09)	37,141
(33) EFCW-1, (10)	122,908
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date

George Kozitza — 10/18/07

George Kozitza
Type or Print Name

Interim Vice Chancellor
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

State Controller's Office

Community College Mandated Cost Manual

Program ^97	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:
West Valley-Mission Community College District

(02) Type of Claim
Reimbursement [X]
Estimated [ ]

Fiscal Year
2005-2006

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 884.62	$ -	$ -	$ -	$ -	$ 884.62
b. Staff training (One time per employee)	$ 61,834.63	$ -	$ -	$ -	$ -	$ 61,834.63
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 722,109.69	$ -	$ -	$ -	$ -	$ 722,109.69
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 509.90	$ -	$ -	$ -	$ -	$ 509.90
b. Staff training (One time per employee)	$ 8,518.48	$ -	$ -	$ -	$ -	$ 8,518.48
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 8,986.32	$ -	$ -	$ -	$ -	$ 8,986.32
b. Waiving student fees	$ 241,297.29	$ -	$ -	$ -	$ -	$ 241,297.29
c. Reporting BOG fee waiver data to CCC	$ 37,106.32	$ -	$ -	$ -	$ -	$ 37,106.32
(05) Total Direct Costs	$ 1,081,247.25	$ -	$ -	$ -	$ -	$ 1,081,247.25

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	37.57%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 406,224.59
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,487,471.84
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 37,141.00
(10) Less: Enrollment Fee Waiver offsets		$ 122,908.00
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,327,422.84

Rev 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [X] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Ogilvie, Barbara A & R Supervisor II	$40.21	22.0	$ 884.62				
(05) Total [X] Subtotal [ ]		Page 1 of 1	$ 884.62	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: *Check only **one** box per form to identify the activity being claimed.*

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Betham, Elinor	Student Services Acct. Tech.	$27.47	110.0	$ 3,021.70				
De Los Reyes, Melissa	Student Records Advisor	$29.92	110.0	$ 3,291.20				
Estrada, Cynthia	Student Services Acct. Tech.	$27.47	40.0	$ 1,098.80				
Lautermilch, Jane	Student Services Tech.	$26.83	8.0	$ 214.64				
Le, Diemanh	Student Serv. Acct. Tech.	$27.47	110.0	$ 3,021.70				
Lino, Paulette	A and R Supervisor	$37.16	210.0	$ 7,803.60				
Lopes, Al	Student Serv. Acct. Tech.	$27.47	30.0	$ 824.10				
MacReynolds, Melissa	Systems Analyst	$39.93	20.0	$ 798.60				
Ogilvie, Barbara	A & R Supervisor II	$40.21	65.0	$ 2,613.65				
Ramirez, Elizabeth	Student Services Tech.	$26.83	40.0	$ 1,073.20				
Riggs, Phyllis M.	Student Services Tech.-Cashier	$26.83	460.0	$ 12,341.80				
Rodriguez, Thelma	Systems Analyst	$39.93	40.0	$ 1,597.20				
Tran, Kelvin	Student Services Tech.	$26.83	110.0	$ 2,951.30				
Tran, Thuy	Student Services Acct. Tech.	$27.47	8.0	$ 219.76				
Trinh, Tu-Lan	Student Records Advisor	$29.92	8.0	$ 239.36				
Vasquez, Nitha	Student Services Acct. Tech.	$27.47	110.0	$ 3,021.70				
Dasalla, Analiza	Sr. Student Services Tech.	$28.01	632.0	$ 17,702.32				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 61,834.63	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records								
Enrollment Office Staff	Collection of Enrollment Fees	$28.27	9,607.0	$ 271,589.89				
Answering student's questions regarding enrollment fee collection								
Enrollment Office Staff	Collection of Enrollment Fees	$28.27	7,541.9	$ 213,209.51				
Updating written and computer records for enrollment fee information								
Enrollment Office Staff	Collection of Enrollment Fees	$28.27	8,170.4	$ 230,977.21				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment								
Ogilvie, Barbara	A & R Supervisor II	$40.21	157.5	$ 6,333.08				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 722,109.69	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Cantarero, Maritza Financial Aid Director	$50.99	10.0	$ 509.90				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 509.90	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
Estrada, Cynthia	Student Services Acct. Tech.	$27.47	20.0	$ 549.40				
Franklin, Marta	Financial Aid Advisor	$29.92	8.0	$ 239.36				
Lopes, Al	Student Serv. Acct. Tech.	$27.47	20.0	$ 549.40				
McDonnell, Mike	Sr. Systems Analyst	$40.89	4.0	$ 163.56				
Nguyen, Linh	Systems Analyst	$39.93	80.0	$ 3,194.40				
Petayo, Elizabeth	Financial Outreach Specialist	$29.92	24.0	$ 718.08				
Trinh, Lucy	Financial Aid Tech.	$29.92	1.5	$ 44.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 8,518.48	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
MacReynolds, Melissa	Systems Analyst	$39.93	120.0	$ 4,791.60				
McDonnell, Mike	Sr. Systems Analyst	$40.89	8.0	$ 327.12				
Rodriguez, Thelma	Systems Analyst	$39.93	10.0	$ 399.30				
Sawyer, Henry	Senior Systems Analyst	$40.89	10.0	$ 408.90				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 8,986.32	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Waving Enrollment Fees	$29.41	1,811.9	$ 53,287.98				
Receiving waiver applications Financial Aid Office Staff Waving Enrollment Fees	$29.41	2,379.8	$ 69,989.92				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Waving Enrollment Fees	$29.41	1,730.8	$ 50,902.83				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Waving Enrollment Fees	$29.41	1,818.8	$ 53,490.91				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Waving Enrollment Fees	$29.41	463.3	$ 13,625.65				
(05) Total ☒ Subtotal ☐	Page 1 of 1		$ 241,297.29	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cantarero, Maritza	Financial Aid Director	$50.99	50.0	$ 2,549.50				
Nguyen, Linh	Systems Analyst	$39.93	250.0	$ 9,982.50				
Ogilvie, Barbara	A & R Supervisor II	$40.21	56.0	$ 2,251.76				
Riggs, Phyllis M.	Student Services Tech.-Cashier	$26.83	832.0	$ 22,322.56				
(05) Total ☒ Subtotal ☐		Page 1 of 1		$ 37,106.32	$ -	$ -	$ -	$ -

New 04/06

West Valley-Mission Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	110.00	Belham, Elinor	Student Services Acct. Tech.	$27.47	$3,021.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Belham, Elinor Total**			$3,021.70		
05-06	10.00	Cantarero, Maritza	Financial Aid Director	$50.99	$509.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
05-06	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
05-06	50.00	Cantarero, Maritza	Financial Aid Director	$50.99	$2,549.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	180.00	**Cantarero, Maritza Total**			$9,178.20		
05-06	632.00	Dasalla, Analiza	Sr. Student Services Tech.	$28.01	$17,702.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	632.00	**Danalla, Analiza Total**			$17,702.32		
05-06	110.00	De Los Reyes, Melissa	Student Records Advisor	$29.92	$3,291.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**De Los Reyes, Melissa Total**			$3,291.20		
05-06	9,607.00	Enrollment Office Staff	Collection of Enrollment Fees	$28.27	$271,589.89	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	7,541.90	Enrollment Office Staff	Collection of Enrollment Fees	$28.27	$213,209.51	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	8,170.40	Enrollment Office Staff	Collection of Enrollment Fees	$28.27	$230,977.21	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	25,319.30	**Enrollment Office Staff Total**			$715,776.61		
05-06	40.00	Estrada, Cynthia	Student Services Acct. Tech.	$27.47	$1,098.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	20.00	Estrada, Cynthia	Student Services Acct. Tech.	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	60.00	**Estrada, Cynthia Total**			$1,648.20		
05-06	1,811.90	Financial Aid Office Staf	Waving Enrollment Fees	$29.41	$53,287.98	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	2,379.80	Financial Aid Office Staf	Waving Enrollment Fees	$29.41	$69,989.92	Receiving waiver applications	Waiving student fees
05-06	1,730.80	Financial Aid Office Staf	Waving Enrollment Fees	$29.41	$50,902.83	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	1,818.80	Financial Aid Office Staf	Waving Enrollment Fees	$29.41	$53,490.91	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	463.30	Financial Aid Office Staf	Waving Enrollment Fees	$29.41	$13,625.65	In case of denied applications, reviewing and evaluating information if denial is appealed by stuc	Waiving student fees
	8,204.60	**Financial Aid Office Staff Total**			$241,297.29		
05-06	8.00	Franklin, Marta	Financial Aid Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Franklin, Marta Total**			$239.36		
05-06	8.00	Lautermilch, Jane	Student Services Tech.	$26.83	$214.64	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Lautermilch, Jane Total**			$214.64		
05-06	110.00	Le, Diemanh	Student Serv. Acct. Tech.	$27.47	$3,021.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Le, Diemanh Total**			$3,021.70		
05-06	210.00	Lino, Paulette	A and R Supervisor	$37.16	$7,803.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	210.00	**Lino, Paulette Total**			$7,803.60		
05-06	30.00	Lopes, Al	Student Serv. Acct. Tech.	$27.47	$824.10	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	20.00	Lopes, Al	Student Serv. Acct. Tech.	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	50.00	**Lopes, Al Total**			$1,373.50		
05-06	20.00	MacReynolds, Melissa	Systems Analyst	$39.93	$798.60	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	120.00	MacReynolds, Melissa	Systems Analyst	$39.93	$4,791.60	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	140.00	**MacReynolds, Melissa Total**			$5,590.20		
05-06	4.00	McDonnell, Mike	Sr. Systems Analyst	$40.89	$163.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	8.00	McDonnell, Mike	Sr. Systems Analyst	$40.89	$327.12	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	12.00	**McDonnell, Mike Total**			$490.68		
05-06	80.00	Nguyen, Linh	Systems Analyst	$39.93	$3,194.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
05-06	250.00	Nguyen, Linh	Systems Analyst	$39.93	$9,982.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	330.00	**Nguyen, Linh Total**			$13,176.90		

West Valley-Mission Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	22.00	Ogilvie, Barbara	A & R Supervisor II	$40.21	$884.62	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
05-06	65.00	Ogilvie, Barbara	A & R Supervisor II	$40.21	$2,613.65	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	56.00	Ogilvie, Barbara	A & R Supervisor II	$40.21	$2,251.76	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
05-06	157.50	Ogilvie, Barbara	A & R Supervisor II	$40.21	$6,333.08	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	300.50	**Ogilvie, Barbara Total**			$12,083.11		
05-06	24.00	Petayo, Elizabeth	Financial Outreach Specialist	$29.92	$718.08	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	24.00	**Petayo, Elizabeth Total**			$718.08		
05-06	40.00	Ramirez, Elizabeth	Student Services Tech.	$26.83	$1,073.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	40.00	**Ramirez, Elizabeth Total**			$1,073.20		
05-06	460.00	Riggs, Phyllis M.	Student Services Tech.-Cashier	$26.83	$12,341.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	832.00	Riggs, Phyllis M.	Student Services Tech.-Cashier	$26.83	$22,322.56	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,292.00	**Riggs, Phyllis M. Total**			$34,664.36		
05-06	40.00	Rodriguez, Thelma	Systems Analyst	$39.93	$1,597.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
05-06	10.00	Rodriguez, Thelma	Systems Analyst	$39.93	$399.30	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	50.00	**Rodriguez, Thelma Total**			$1,996.50		
05-06	10.00	Sawyer, Henry	Senior Systems Analyst	$40.89	$408.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	10.00	**Sawyer, Henry Total**			$408.90		
05-06	110.00	Tran, Kelvin	Student Services Tech.	$26.83	$2,951.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Tran, Kelvin Total**			$2,951.30		
05-06	8.00	Tran, Thuy	Student Services Acct. Tech.	$27.47	$219.76	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Tran, Thuy Total**			$219.76		
05-06	1.50	Trinh, Lucy	Financial Aid Tech.	$29.92	$44.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.50	**Trinh, Lucy Total**			$44.88		
05-06	8.00	Trinh, Tu-Lan	Student Records Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Trinh, Tu-Lan Total**			$239.36		
05-06	110.00	Vasquez, Nitha	Student Services Acct. Tech.	$27.47	$3,021.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Vasquez, Nitha Total**			$3,021.70		
	37,437.90	**Grand Total**			$1,081,247.25		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$41,159,911		$41,159,911	$365,087	$40,794,824
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	3,375,587		3,375,587	4,032	3,371,555
Course and Curriculum Development	6020	428,315		428,315		428,315
Academic/Faculty Senate	6030	78,438		78,438		78,438
Other Instructional Administration & Instructional Governance	6090	21,262		21,262		21,262
Instructional Support Services	6100					
Learning Center	6110	1,538,902		1,538,902	7,796	1,531,106
Library	6120	1,286,319		1,286,319	62,867	1,223,452
Media	6130	230,616		230,616	35,155	195,461
Museums and Galleries	6140	32,291		32,291		32,291
Academic Information Systems and Technology	6150	390,678		390,678	27,450	363,228
Other Instructional Support Services	6190	189,151		189,151		189,151
Admissions and Records	6200	1,636,491		1,636,491	35,375	1,601,116
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,767,153		3,767,153	14,737	3,752,416
Matriculation and Student Assessment	6320	596,947		596,947	8,866	588,081
Transfer Programs	6330					
Career Guidance	6340	365,055		365,055		365,055
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,034,837	31,713	2,003,124	59,173	1,943,951
Subtotal		$57,131,953	$31,713	$57,100,240	$620,538	$56,479,702

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,504,959	$732,949	$772,010	$7,285	$764,725
Health Services	6440	1,273		1,273		1,273
Student Personnel Admin.	6450	731,210		731,210	2,162	729,048
Financial Aid Administration	6460	1,132,736		1,132,736	31,261	1,101,475
Job Placement Services	6470	322,728		322,728		322,728
Veterans Services	6480	231,348		231,348		231,348
Miscellaneous Student Services	6490	1,133,505		1,133,505	9,552	1,123,953
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,561,612		1,561,612	1,561,612	0
Custodial Services	6530	2,143,246		2,143,246	2,143,246	0
Grounds Maintenance and Repairs	6550					
Utilities	6570	2,102,916		2,102,916	2,102,916	0
Other	6590	973,357		973,357	973,357	0
Planning, Policy Making, and Coordination	6600	6,469,830		6,469,830	6,469,830	0
General Inst. Support Services	6700					
Community Relations	6710	232,846		232,846	232,846	0
Fiscal Operations	6720	2,527,306		2,527,306	2,527,306	0
Human Resources Management	6730	1,246,767		1,246,767	1,246,767	0
Noninstructional Staff Benefits & Incentives	6740					
Staff Development	6750	218,332		218,332	218,332	0
Staff Diversity	6760	28,520		28,520	28,520	0
Logistical Services	6770	2,595,780		2,595,780	2,595,780	0
Management Information Systems	6780	3,041,044		3,041,044	3,041,044	0
Subtotal		$85,331,268	$764,662	$84,566,606	$23,812,354	$60,754,252

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	65,513		65,513	65,513	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	733,839		733,839	4,921	728,918
Community Use of Facilities	6830	123,298		123,298	63,523	59,775
Economic Development	6840	1,474,554		1,474,554	48,467	1,426,087
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	136,565		136,565		136,565
Farm Operations	6930					
Food Services	6940					
Parking	6950	409,102		409,102	141,811	267,291
Student and Co-curricular Activities	6960	599,259		599,259	1,787	597,472
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	283,681		283,681		283,681
Other Auxiliary Operations	7090	12,319		12,319	2,660	9,659
Physical Property Acquisitions	7100					
(05) Total		$89,169,398	$764,662	$88,404,736	$24,141,036	$64,263,700
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				37.57%		
(07) Notes						

CALIFOR. A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	83,085	3,004	72			86,161
Biological Sciences	0400	1,241,633	55,513	71,703	1,850		1,370,699
Business and Management	0500	2,182,762	206,487	39,940	22		2,429,211
Communications	0600	93,484		3,726			97,210
Computer and Information Science	0700	1,988,764	364,049	78,283	73,118		2,504,214
Education	0800	3,882,832	277,791	389,791	217,044		4,767,458
Engineering and Related Industrial Tech.	0900	1,488,634	211,593	160,398	-663		1,859,962
Fine and Applied Arts	1000	2,515,721	157,424	96,224			2,769,369
Foreign Language	1100	1,312,365	44,442	8,725			1,365,532
Health	1200	1,563,415	161,486	8,863			1,733,764
Consumer Education and Home Economics	1300	1,325,779	120,360	111,070	511		1,557,720
Law	1400	151,107	9,275	276			160,658
Humanities (Letters)	1500	6,271,171	355,441	25,521			6,652,133
Library Science	1600	3,908					3,908
Mathematics	1700	3,400,651	137,054	29,812			3,567,51
Military Studies	1800						
Physical Sciences	1900	1,438,609	134,254	29,074			1,601,937
Psychology	2000	689,742	18,458	3,815			712,015
Public Affairs and Services	2100	995,690	564,301	489,632	24,752		2,074,375
Social Sciences	2200	2,580,385	207,010	26,326			2,813,721
Commercial Services	3000						
Interdisciplinary Studies	4900	589,174	280,692	261,324	48,453		1,179,643
Instruct. Staff-Retir's Bnfts & Retire. Incents.	5900	1,852,704					1,852,704
Subtotal - Instructional Activities	**599**	35,651,615	3,308,634	1,834,575	365,087		41,159,911

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,148,560	222,995	4,032		3,375,5
Course and Curriculum Development	6020		404,215	24,100			428,315
Academic/Faculty Senate	6030		76,743	1,695			78,438
Other Instruct. Admin. & Instruct. Governance	6090		13,419	7,843			21,262
Subtotal - Instructional Administration	**6000**		3,642,937	256,633	4,032		3,903,602
Instructional Support Services (6100)							
Learning Center	6110	599,416	876,476	55,214	7,796		1,538,902
Library	6120		1,072,702	150,750	62,867		1,286,319
Media	6130		173,471	21,990	35,155		230,616
Museums and Galleries	6140		25,356	6,935			32,291
Academic Information Systems and Tech.	6150		349,693	13,535	27,450		390,678
Other Instructional Support Services	6190		188,684	467			189,151
Subtotal - Instructional Support Services	**6100**	599,416	2,686,382	248,891	133,268		3,667,957
Admissions and Records	**6200**		1,518,252	82,864	35,375		1,636,49[illegible]
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,668,537	83,879	14,737		3,767,153
Matriculation and Student Assessment	6320		530,287	57,794	8,866		596,947
Transfer Programs	6330						
Career Guidance	6340		296,921	68,134			365,055
Other Student Counseling and Guidance	6390						
Subtotal - Student Counseling and Guidance	**6300**		4,495,745	209,807	23,603		4,729,155

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,805,217	138,734	59,173	31,713	2,034,8[illegible]
Extended Opportunity Prgms. & Services (EOPS)	6430		724,301	40,424	7,285	732,949	1,504,959
Health Services	6440		1,273				1,273
Student Personnel Administration	6450		675,766	53,282	2,162		731,210
Financial Aid Administration	6460		758,250	343,225	31,261		1,132,736
Job Placement Services	6470		318,075	4,653			322,728
Veterans Services	6480		229,206	2,142			231,348
Miscellaneous Student Services	6490		904,195	219,758	9,552		1,133,505
Subtotal - Other Student Services	**6400**		5,416,283	802,218	109,433	764,662	7,092,596
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		859,276	697,814	4,522		1,561,612
Custodial Services	6530		2,055,266	87,980			2,143,246
Grounds Maintenance and Repairs	6550						
Utilities	6570			2,102,916			2,102,916
Other Operation and Maintenance of Plant	6590		540,533	420,374	12,450		973,3[illegible]
Subtotal - Operation and Maintenance of Plant	**6500**		3,455,075	3,309,084	16,972		6,781,131
Planning, Policymaking, and Coordination	**6600**		4,223,807	2,050,925	195,098		6,469,830

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR...A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		214,418	18,428			232,8.
Fiscal Operations	6720		1,346,894	1,137,462	42,950		2,527,306
Human Resources Management	6730		732,186	498,764	15,817		1,246,767
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740						
Staff Development	6750		38,289	179,462	581		218,332
Staff Diversity	6760			28,520			28,520
Logistical Services	6770		2,247,486	243,836	104,458		2,595,780
Management Information Systems	6780		2,094,253	687,412	259,379		3,041,044
Other General Institutional Support Services	6790		28,522	33,747	3,244		65,513
Subtotal - General Institutional Support Services	**6700**		6,702,048	2,827,631	426,429		9,956,108
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820		698,216	30,702	4,921		733,839
Community Use Facilities	6830		47,558	12,217	63,523		123,29.
Economic Development	6840		1,047,527	378,560	48,467		1,474,55.
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**		1,793,301	421,479	116,911		2,331,691

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR...A COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2004-05**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		29,217	107,348			136,565
Farm Operations	6930						
Food Services	6940						
Parking	6950		212,544	54,747	141,811		409,102
Student and Co-curricular Activities	6960		463,315	134,157	1,787		599,259
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		705,076	296,252	143,598		1,144,926
Auxiliary Operations (7000)							
Contract Education	7010	28,690	61,811	193,180			283,681
Other Auxiliary Operations	7090			9,659	2,660		12,319
Subtotal - Auxiliary Operations	**7000**	28,690	61,811	202,839	2,660		296,000
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330					1,277,317	1,277,317
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,277,317	1,277,317
TOTAL EXPENDITURES and OTHER OUTGO	**391**	36,279,721	38,009,351	12,543,198	1,572,466	2,041,979	90,446,715

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1 A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 05-06
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	53,871
Avg. time p/account	10.7
Total Time (in minutes)	576420
Per Hour	60
Hours Worked (****Activity 11**)	**9607.0**
***EFC 2**	
Avg. time p/student	8.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 12**)	**0.0**
***EFC 1**	53,871
Avg. time p/question	8.4
Total Time (in minutes)	452516
Per Hour	60
Hours Worked (****Activity 13**)	**7541.9**
***EFC 1**	53,871
Avg. time p/file	9.1
Total Time (in minutes)	490226
Per Hour	60
Hours Worked (****Activity 14**)	**8170.4**
***EFC 4**	
Avg. time p/account	14.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 15**)	**0.0**
***EFC 5**	
Avg. time p/student	10.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1AA
West Valley-Mission
Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 05-06
Barbara Ogilvie

Purpose: To calculate the time worked by Barbara Ogilvie on Enrollment Fee Refunds.
Source: Schedules 2 and 4.
Findings:

Total approved Waivers	6308
10% done by B. Ogilvie	0.10
	630

***EFC 5**	630
Avg. time p/student	15
Total Time (in minutes)	9450
Per Hour	60
Hours Worked **(** 16)**	**157.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 05-06
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	8,113
Avg. time p/question	13.4
Total Time (in minutes)	108714
Per Hour	60
Hours Worked (****Activity 21)**	**1811.9**
***EFW 6**	8,113
Avg. time p/application	17.6
Total Time (in minutes)	142789
Per Hour	60
Hours Worked (****Activity 22)**	**2379.8**
***EFW 6**	8,113
Avg. time p/evaluation	12.8
Total Time (in minutes)	103846
Per Hour	60
Hours Worked (****Activity 23)**	**1730.8**
***EFW 8**	
Avg. time p/application	23.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24)**	**0.0**
***EFW 7**	6,308
Avg. time p/application	17.3
Total Time (in minutes)	109128
Per Hour	60
Hours Worked (****Activity 25)**	**1818.8**
***EFW 8**	1,805
Avg. time p/application	15.4
Total Time (in minutes)	27797
Per Hour	60
Hours Worked (****Activity 26)**	**463.3**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Default)**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Belham, Eliner	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Brien, Diane	Student Services Tech.	5.0	5.0	10.0	5.0		
Dasalla, Analiza	Sr. Student Services Tech.	15.0	5.0	5.0	8.0	20.0	10.0
De Los Reyes, Melissa	Student Records Advisor	15.0	15.0	10.0	7.0	7.0	7.0
Estrada, Cynthia	Student Services Acct. Tech.	6.0	4.0	5.0	5.0	8.0	7.0
Lautermilch, Jane	Student Services Tech.	6.0	6.0	6.0	5.0		3.0
Le, Diemanh	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Lino, Paulette	A & R Supervisor	15.0	15.0	15.0	20.0	20.0	15.0
Lopez, Al	Student Services Acct. Tech.	5.0	7.0	5.0	6.0	6.0	6.0
Ramirez, Elizabeth	Student Services Tech.	3.0	3.0	3.0	1.0	5.0	
Riggs, Phyllis M.	Student Services Tech., Cashier	20.0	5.0	20.0	10.0	20.0	20.0
Tran, Kelvin	Student Services Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Tran, Thuy	Student Services Acct. Tech.	5.0	9.0	3.0	4.0	7.0	3.0
Trinh, Tu-Lan	Student Records Advisor	6.0	7.0	4.0	5.0		
Vasquez, Nitha	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Average		**10.7**	**8.1**	**8.4**	**9.1**	**14.4**	**10.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Sch e 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Enrollment Office Staff.
Source: PHR Calculation Schedules. Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Belham, Eliner	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Brien, Diane	Student Services Tech.	21.92	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Dasalla, Analiza	Senior Student Services Tech.	22.35	23.47	24.41	26.09	26.87	26.67	26.67	28.01
De Los Reyes, Melissa	Student Records Advisor	23.87	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Estrada, Cynthia	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Lautermilch, Jane	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Le, Diemanh	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Lino, Paulette	A & R Supervisor	28.41	29.83	32.39	34.61	35.65	35.38	35.38	37.16
Lopez, Al	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Ramirez, Elizabeth	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Riggs, Phyllis M.	Student Services Tech., Cashier	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Tran, Kelvin	Student Services Tech.	21.42	22.49	23.39	24.99	25.74	25.54	25.54	26.83
Tran, Thuy	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Trinh, Tu-Lan	Student Records Advisor	23.87	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Vasquez, Nitha	Student Services Acct. Tech.	21.92	23.01	23.94	25.58	26.35	26.15	26.15	27.47
Average		**22.51**	**23.60**	**24.63**	**26.33**	**27.11**	**26.91**	**26.91**	**28.27**

Conclusion: Findings go forward to EFCW -2

Schedule 3
West Valley Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06: One time study used for all years.
Documentation in 05-06 claim only.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Baldwin, Daniel	Financial Aid Advisor	4	6	3	9	5	7
DeLos Reyes,Amber	Financial Aid Tech.	30	60	18	50	15	15
Fitzgerald, Katy	Financial Aid Advisor	15	10	20	15	20	20
Franklin, Marta	Financial Aid Advisor	5	10	7	7	30	10
Galang, Roehl	Financial Aid Advisor	5	10	5	10	10	15
Kirkland, Rhonda	Interim Financial Aid Advisor	2	10	5		15	7
Lopez, Maria	Student Services Tech.	10	5	5	10	10	10
Nguyen, Ngolien	Financial Aid Tech.	30	20	20	30	20	15
Pelayo, Elizabeth	Financial Aid Outreach Spec.	2	5	10	40	10	30
Rancap, Marie	Student Services Tech.	30	60	40	60	40	30
Trinh, Lucy	Financial Aid Tech.	8	5	5	5		
Vuong, Ha M.	Financial Aid Advisor	20	10	15	20	15	10
Average		**13.4**	**17.6**	**12.8**	**23.3**	**17.3**	**15.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Financial Aid Office Staff.
Source: PHR Calculation Schedules. Initial year claim 98-99 through 05-06.
Findings:

Staff	Title	99-00	00-01	01-02	02-03	03-04	04-05	05-06
Baldwin, Daniel	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
De Los Reyes,Amber	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Fitzgerald, Katy	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Franklin, Marta	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Galang, Roehl	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Kirkland, Rhonda	Interim Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Lopez, Maria	Student Services Tech.	22.49	23.39	25.58	25.74	25.54	25.54	26.83
Nguyen, Ngolien	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Pelayo, Elizabeth	Financial Aid Outreach Spec.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Rancap, Marie	Student Services Tech.	22.49	23.39	25.58	25.74	25.54	25.54	26.83
Trinh, Lucy	Financial Aid Tech.	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Vuong, Ha M.	Financial Aid Advisor	25.07	26.07	27.87	28.70	28.48	28.48	29.92
Average		**24.64**	**25.63**	**27.49**	**28.21**	**27.99**	**27.99**	**29.41**

Conclusion: Findings go forward to EFCW-2

Schedule 4
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-06
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. (back-up in 05-06 only)
Initial year claim 98-99 through 05-06.
Findings:

*Workload Multiplier	Source			Totals							
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1.	Enrolled Students	65,956	63,855	62,195	62,522	66,334	56,612	54,966	53,871
EFC 2	1.8-1	2.	Paid Enrollment fees	-							
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	-							
EFC 4	1.8-2	1.	Delinquencies collections	-							
EFC 5	1.8-2	2.	Refunds	-							
EFW 6	1.8-3	1.	Waivers Requested	X	*5732	*4829	5,519	6,448	7,205	8,110	8,113
EFW 7	1.8-3	2.	Waivers Approved	X	5,732	4,829	4,171	4,704	5,367	5,647	6,308
EFW 8	1.8-3	(1-2)	Waivers Denied	X			1,348	1,744	1,838	2,463	1,805

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***Used the number of Approved Waivers, (these numbers came from the Chancellor's website, as reported by the district)**

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 4A
West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Number of Enrolled Students
98-99 through 05-06

Purpose: To calculate the number of Enrolled students
Source: Chancellors report.
Findings:

Year	98-99		99-00		00-01		01-02		02-03		03-04		04-05		05-06	
Campus	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**	**M C**	**W V**
Summer	5,021	6,149	4,900	13,980	4,753	13,652	4,212	13,806	5,643	13,749	4,656	12,337	4,731	12,085	4,502	11,461
Fall	10,940	14,729	6,089	12,499	5,682	12,000	5,479	12,462	6,431	13,021	3,922	11,120	4,457	10,627	5,204	10,952
Spring	12,969	16,148	11,808	14,579	11,507	14,601	11,817	14,746	12,665	14,825	11,732	12,845	10,514	12,552	9,790	11,962
Total	28,930	37,026	22,797	41,058	21,942	40,253	21,508	41,014	24,739	41,595	20,310	36,302	19,702	35,264	19,496	34,375
Dist. Total	**65,956**		**63,855**		**62,195**		**62,522**		**66,334**		**56,612**		**54,966**		**53,871**	

05-06

June 21 2007 FUND MANAGEMENT REPORT Page 1

AWARD: MBOGA - Board of Governor's Waiver - A YEAR: 2005 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	900.00							
	2							
		900.00		900.00				
		2		2				
OFFICE '120' TOTALS:	900.00							
BUDGETED AMOUNT..:	2							
MAXIMUM BUDGET...:		900.00		900.00				
REMAINING BALANCE: -900.00		2		2				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	137,746.00						0.00	
	242						1	
		137,746.00		137,746.00				
		242		242				
OFFICE '122' TOTALS:	137,746.00						0.00	
BUDGETED AMOUNT..: 99,999,999	242						1	
MAXIMUM BUDGET...: 99,999,999		137,746.00		137,746.00				
REMAINING BALANCE: 99,862,253.00		242		242				
AWARD 'MBOGA' TOTALS:	138,646.00						0.00	
BUDGETED AMOUNT..: 99,999,999	244						1	
MAXIMUM BUDGET...: 99,999,999		138,646.00		138,646.00				
REMAINING BALANCE: 99,861,353.00		244		244				

AWARD: MBOGB - Board of Governor's Waiver - B YEAR: 2005 SUM ONLY: Y INCL LOC: Y

05-06

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	10,200.00							
	20							
		10,200.00		10,200.00				
		20		20				
OFFICE '120' TOTALS:	10,200.00							
BUDGETED AMOUNT..:	20							
MAXIMUM BUDGET...:		10,200.00		10,200.00				
REMAINING BALANCE: -10,200.00		20		20				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	1,741,430.00						600.00	
	3071						4	
		1,740,830.00		1,740,830.00				
		3070		3070				
OFFICE '122' TOTALS:	1,741,430.00						600.00	
BUDGETED AMOUNT..: 99,999,999	3071						4	
MAXIMUM BUDGET...: 99,999,999		1,740,830.00		1,740,830.00				
REMAINING BALANCE: 98,259,169.00		3070		3070				
AWARD 'MBOGB' TOTALS:	1,751,630.00						600.00	
BUDGETED AMOUNT..: 99,999,999	3091						4	
MAXIMUM BUDGET...: 99,999,999		1,751,030.00		1,751,030.00				
REMAINING BALANCE: 98,248,969.00		3090		3090				

AWARD: MBOGC - Board of Governor's Waiver - C YEAR: 2005 SUM ONLY: Y INCL LOC: Y

05-06

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	1,800.00							
	3							
		1,800.00		1,800.00				
		3		3				
OFFICE '120' TOTALS:	1,800.00							
BUDGETED AMOUNT..:	3							
MAXIMUM BUDGET...:		1,800.00		1,800.00				
REMAINING BALANCE: -1,800.00		3		3				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	647,474.00						300.00	
	1187						1	
		647,174.00		647,174.00				
		1186		1186				
OFFICE '122' TOTALS:	647,474.00						300.00	
BUDGETED AMOUNT..: 99,999,999	1187						1	
MAXIMUM BUDGET...: 99,999,999		647,174.00		647,174.00				
REMAINING BALANCE: 99,352,825.00		1186		1186				
AWARD 'MBOGC' TOTALS:	649,274.00						300.00	
BUDGETED AMOUNT..: 99,999,999	1190						1	
MAXIMUM BUDGET...: 99,999,999		648,974.00		648,974.00				
REMAINING BALANCE: 99,351,025.00		1189		1189				

End of Report

AWARD: WBOGA - Board of Governor's Waiver - A YEAR: 2005 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	53,592.00							
	103							
		35,592.00		35,592.00				18,000.00
		66		66				37
OFFICE '123' TOTALS:	53,592.00							
BUDGETED AMOUNT..: 99,999,999	103							
MAXIMUM BUDGET...: 99,999,999								
REMAINING BALANCE: 99,964,407.00		35,592.00		35,592.00				18,000.00
		66		66				37
AWARD 'WBOGA' TOTALS:	53,592.00							
BUDGETED AMOUNT..: 99,999,999	103							
MAXIMUM BUDGET...: 99,999,999								
REMAINING BALANCE: 99,964,407.00		35,592.00		35,592.00				18,000.00
		66		66				37

AWARD: WBOGB - Board of Governor's Waiver - B YEAR: 2005 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION '' TOTALS:								
LOCATION 'DIST' TOTALS:	3,600.00							
	7							
		3,600.00		3,600.00				
		7		7				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	3,600.00							
MAXIMUM BUDGET...:	7							
REMAINING BALANCE: -3,600.00		3,600.00		3,600.00				
		7		7				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	300.00							
	1							
		300.00		300.00				
		1		1				
OFFICE '122' TOTALS:								
BUDGETED AMOUNT..:	300.00							
MAXIMUM BUDGET...:	1							
REMAINING BALANCE: -300.00		300.00		300.00				
		1		1				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:								

AWARD: WBOGB - Board of Governor's Waiver - B YEAR: 2005 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
	1,288,152.00							
	2331							
		1,285,752.00		1,285,752.00				2,400.00
		2326		2326				5
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	1,288,152.00							
MAXIMUM BUDGET...: 99,999,999	2331							
REMAINING BALANCE: 98,714,247.00		1,285,752.00		1,285,752.00				2,400.00
		2326		2326				5
AWARD 'WBOGB' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	1,292,052.00							
MAXIMUM BUDGET...: 99,999,999	2339							
REMAINING BALANCE: 98,710,347.00		1,289,652.00		1,289,652.00				2,400.00
		2334		2334				5

AWARD: WBOGC - Board of Governor's Waiver - C YEAR: 2005 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	1,200.00							
	2							
		1,200.00		1,200.00				
		2		2				
OFFICE '120' TOTALS:	1,200.00							
BUDGETED AMOUNT..:	2							
MAXIMUM BUDGET...:								
REMAINING BALANCE: -1,200.00		1,200.00		1,200.00				
		2		2				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	659,368.00							
	1191							
		659,068.00		659,068.00				300.00
		1188		1188				3
OFFICE '123' TOTALS:	659,368.00							
BUDGETED AMOUNT..: 99,999,999	1191							
MAXIMUM BUDGET...: 99,999,999		659,068.00		659,068.00				300.00
REMAINING BALANCE: 99,340,585.00		1188		1188				3
AWARD 'WBOGC' TOTALS:	660,568.00							
BUDGETED AMOUNT..: 99,999,999	1193							
MAXIMUM BUDGET...: 99,999,999		660,268.00		660,268.00				300.00
REMAINING BALANCE: 99,339,385.00		1190		1190				3

End of Report

Schedule 4B
West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Waivers Requested and Approved
99-00 through 05-06

Purpose: To calculate the number of enrollment waivers requested and approved.
Source: Chancellors report, Board of Governors Fee Waiver Report, and Fund Management Report.
Findings:

Waivers Requested

Year	99-00		00-01		01-02		02-03		03-04		04-05		05-06	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V
A					75	33	57	48	124	57	126	59	244	66
B					1,153	906	2,359	1,599	2,685	1,823	3,150	2,274	3,090	2,334
C					1,875	1,477	1,302	1,083	1,322	1,194	1,242	1,259	1,189	1,190
Board of Gov. Report	2,959	2,427	2,581	1,942										
Total	2,959	2,427	2,581	1,942	3,103	2,416	3,718	2,730	4,131	3,074	4,518	3,592	4,523	3,590
Dist. Total	**5,386**		**4,523**		**5,519**		**6,448**		**7,205**		**8,110**		**8,113**	

Waivers Approved

Year	99-00		00-01		01-02		02-03		03-04		04-05		05-06	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V
	107	72	87	51	61	35	54	43	107	52	104	53	232	70
	1,049	784	1,033	684	989	823	1,682	1,219	1,905	1,384	2,161	1,685	2,370	1,792
	1,960	1,760	1,575	1,399	1,251	1,012	880	826	989	930	801	843	904	940
Total	3,116	2,616	2,695	2,134	2,301	1,870	2,616	2,088	3,001	2,366	3,066	2,581	3,506	2,802
Dist. Total	**5,732**		**4,829**		**4,171**		**4,704**		**5,367**		**5,647**		**6,308**	

California Home

Mond

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission
For 2005 Summer Term

Data Current As Of June 25, 2007 09:50:59

Total Headcount	4,502

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2005 Summer Term

Data Current As Of June 25, 2007 09:57:47

Total Headcount	5,204

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission
For 2005 Fall Term

Data Current As Of June 25, 2007 09:51:09

Total Headcount	9,790

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2005 Fall Term

Data Current As Of June 25, 2007 09:57:55

Total Headcount	11,461

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California Home

Mond

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission
For 2006 Spring Semester

Data Current As Of June 25, 2007 09:51:24

Total Headcount	10,952

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2006 Spring Semester

Data Current As Of June 25, 2007 09:58:10

Total Headcount	11,962

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Elinor Belham — Employee Name

Student Services Acct Tech — Exact Position Title

Mission College (ARR) 408-855-5026 — College/Department/Location — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 220 hrs | 220 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elinor Belham Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wy/Me District

Maritza Cantarero Financial Aid Director

Employee Name Exact Position Title

West Valley College 741-2611 12mo/11mo/10mo/hrly

College/Department/Location Telephone # Work year length

Typical Reimbursable Activities: [SAFERS] FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	18	18	15	12	12	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	10	10	85	85	65	65	65	60	60
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	260	260	120	120	60	60	60	60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	32	40	40	40	90	30	50	50
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maritza Cantarero Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College

Amalia Bibbs Dorantes — Employee Name

Senior Student Services Tech. — Exact Position Title

Admission & Records — College/Department/Location

855-8011 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 629 624 840 840 840 632 632 632 632

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA DE LOS REYES — Employee Name

STUDENT RECORDS ADVISOR — Exact Position Title

ADMISSIONS & RECORDS (MC) — College/Department/Location

(408) 855-5020 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	110	110	110	300	300	110	110	110	110
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wvmccd

Cynthia Estrada — Student Services Account Technician

Employee Name — Exact Position Title

West Valley College — (408) 741-2654 — 12mo/11mo/10mo/hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	N/A	N/A	40	40	40	40	40	40	40
* B. Enrollment Waiver Process:	N/A	N/A	N/A	20	20	20	20	20	20
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cynthia Estrada — Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Marta Franklin — Employee Name

Financial Aid Advisor — Exact Position Title

WVC Financial Aid — College/Department/Location

2495 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: — — — — — — — — —

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: 0 0 24 8 8 8 8 8 8

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVC Mission Community

Jane Laulesmick — Employee Name

Student Service Tech — Exact Position Title

UVA&R. — College/Department/Location

2477 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ ___ 16 8 8 8 8 8 8

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Laulesmick Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission Community College

Diemanh Le — Employee Name

Student Services Acctat Tech — Exact Position Title

Mission College/A&R — College/Department/Location

408-855-5027 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
A. Enrollment Collection Process:	~~220~~ HRS	110 HRS	220 HRS	220 HRS	110 HRS	110 HRS	110 HRS	110 HRS	110 HRS
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diemanh Le — Date 06-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley - Mission Community College

Paulette Lino — Employee Name

A & R Supervisor — Exact Position Title

Mission College - A & R — College/Department/Location

(408) 855-5021 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	210	210	420	420	210	210	210	210	210
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission

Al Lopez — Employee Name

Student Service Acct Tech H — Exact Position Title

WVC/cashier/A&R — College/Department/Location

741-2651 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:	30	30	30	30	30	30	30	30	30
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:	30	30	30	30	30	30	30	30	30
B. Enrollment Waiver Process:	20	20	20	20	20	20	20	20	20

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Al Lopez Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA MACREYNOLDS — Employee Name

SYSTEMS ANALYST — Exact Position Title

INFORMATION SYSTEMS — College/Department/Location

408-741-4069 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	40	20	20	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	40	80	—	40	40	120	40
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	40	80	—	80	60	140	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melissa MacReynolds — Date 01/11/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Mike McDonnell — Employee Name

Senior Systems Analyst — Exact Position Title

Information Systems — College/Department/Location

408 741 2675 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	-	-	-	80	8	8	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	4	4	4	20	8	8	8	8	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael McDonnell Date 6-8-07

If you have any questions, please contact Mike McDonnell, at 408 741-2675

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

LINH NGUYEN — Employee Name

Systems Analyst — Exact Position Title

Information Systems 741-2678 — College/Department/Location, Telephone #

(12mo/11mo/10mo/hrly) — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:							80	80	16
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.							250	250	256
TOTALS:							330	330	272

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh P. Nguyen Date 06/08/07

If you have any questions, please contact LINH NGUYEN, at 741-2678

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How much time each year Training, writing procedures etc

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Barbara Ogilvie — Employee Name

Supervisor A/R II — Exact Position Title

WVC/A+R/A+R — College/Department/Location

408-741-4630 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	Ø	18	18	18	18	22	22	22	22
B. Enrollment Waiver Process:	Ø								
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	Ø	65	85	85	65	65	65	65	65
B. Enrollment Waiver Process:	Ø								
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø								
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	48	48	48	48	48	56	56	56
TOTALS:	Ø								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College

Elizabeth T. Pelayo — Financial Aid Outreach Specialist
Employee Name — Exact Position Title

WVC / Financial Aid / — 741-2660 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ 24 hrs 24 hrs

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo — Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV-Mission

Elizabeth Ramirez — Employee Name

Student Services Tech — Exact Position Title

WV A&R Saratoga — College/Department/Location

741-2536 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:	40 150	40 150	40 150	40 150	40 150	40 150	40 150	40 150	40 150
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ERamirez — Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College District

Phyllis M. Riggs — Employee Name

Student Servs Tech-Cashier — Exact Position Title

Admissions/Mission College — College/Department/Location

8565009 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

8 32 8 32 8 32 8 32 8 32 8 32 8 32 8 32 8 32

TOTALS: ___ ___ ___ ___ ___ ___ 832 832 832

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission CCD

Thelma Rodriguez
Employee Name

Systems Analyst
Exact Position Title

IS
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	40	80	—	40	80	
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	—	10	160	10	10	10	180
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	50	240	10	10	50	260

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Thelma Rodriguez Date 6/8/07

If you have any questions, please contact _____, at _____

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ON-LINE REGISTRATION AND CREDIT CARD PROCESSING VIA THE WEB

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

HENRY SAWYER — Employee Name

Senior System Analyst — Exact Position Title

Info. Systems — College/Department/Location

2677 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	16	—	8	2	2	—	2
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	16	16	16	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	32	16	24	12	12	10	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Henry Sawyer Date 6.8.07

If you have any questions, please contact _____, at _____

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Billing tables for new system

Revised May 2007

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley + Mission College Dist

Kelvin Tran — Employee Name

Student Services Technic... — Exact Position Title

Mission College - A+R — College/Department/Location

408-855-5172 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:		110				360	110	110	110
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Com District

THUY TRAN — Employee Name

Student Services Acct Tech — Exact Position Title

WV / A&R / West Valley — College/Department/Location

_____ — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	___	___	16	8	8	8	8	8	8
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/6/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Lucy Trinh — Employee Name

Financial Aid Technician — Exact Position Title

WVC / FA / — College/Department/Location

2443 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: — — — — — — — —

B. Enrollment Waiver Process: — — — — — — — —

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: — — — — — — — —

B. Enrollment Waiver Process: 0 0 1-2 ~~1-2~~ ~~1-2~~ ~~1-2~~ ~~1-2~~ ~~1-2~~ ~~1-2~~ hrs.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Comm district

TU-LAN TRINH — Employee Name

Student Records Advisor — Exact Position Title

Records — College/Department/Location

(408)741-2537 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/07/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WKMCCD

Willie I. Vasquez.
Employee Name

STUDENT SERVICES ACCT. TECHNICIAN
Exact Position Title

Mission College - A&R. (408) 855-5028
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in ~~hours~~

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 110 HRS 220 HRS 220 HRS 110 HRS 110 HRS 110 HRS 110 HRS 110 HRS

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Willie I. Vasquez Date 6-11-07

If you have any questions, please contact _____, at _____

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Student Tech's

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Admission & Records/WVC
Department/Location

Barbara Ogilvie
Employee Name

Supervisor A/R II
Exact Position Title

408-741-4630
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record "1" which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the "2" payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) "4"						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15 min. See back of page					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

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Barbara Ugiliute

10% of Students who receive BOGG waivers have problems receiving their BOGG, Because before it was implemented the student drops some or all classes. When this happens it negates the Bogg from completing In order for this process to be completed I must do research to find out what semesters should be rebilled and then switch screens & remove the "drops" from those semesters. Once the drops are removed then re-bill the student for those semesters. The next step would be to re-enter the drops into the student records. Once this is done if the student has not yet paid their fees they can do so at that time, if the student has paid... an email must be sent to finance informing them to refund the student. Each student who must be rebilled in this fashion takes on average 15 minutes and can only be corrected by myself & the Director of Admissions & Record

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College / Mission College AER
District / Department/Location

Elinor Belham
Employee Name

Student Services Acct Tech
Exact Position Title

408-855-5026
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elinor Belham Date 6-11-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY MISSION COMM COLL DIST — District

ADMISSIONS & RECORDS — Department/Location

DIANE BRIEN — Employee Name

STUDENT SERVICES TECH. — Exact Position Title

408-741-2417 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Brien — Date 06/06/07

If you have any questions, please contact _____, at _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College
District

Admissions & Records
Department/Location

Araceli Bibat-Dasalla
Employee Name

Senior Student Services Tech.
Exact Position Title

855-8011
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY-MISSION
District

ADMISSIONS & RECORDS (MISSION COLL.)
Department/Location

MELISSA DE LOS REYES
Employee Name

STUDENT RECORDS ADVISOR
Exact Position Title

(408) 855-5020
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- Mission (wvmccd)
District

Cashiers / WVC
Department/Location

Cynthia Estrada
Employee Name

Student Services Account Technician
Exact Position Title

408) 741-2654
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community — District
ADMISSIONS + Records — Department/Location
JANE LAUTERMILCH — Employee Name
Student Services Tech — Exact Position Title
408 741-2477 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-9) 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 MIN ~~N/A~~					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Lautermilch Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College A&R - Mission College
District / Department/Location

Diemanh Ho
Employee Name

Student Services Account Tech
Exact Position Title

408-855-5027
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-9) (99-0) (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

A&R / Mission College
Department/Location

Paulette Lind
Employee Name

A&R Supervisor
Exact Position Title

(408) 855-5021
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST Valley Mission — District
Cashier / W.U.C — Department/Location
Al Lopez — Employee Name
Student Service Account Tech — Exact Position Title
741-2651 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: (98-9) 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- MISSION
District

Records WVC
Department/Location

Elizabeth Ramirez
Employee Name

Student Services Technician
Exact Position Title

408 741-2536
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	~~3~~ 5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Ramirez Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-MISSION
District

Admissions - MISSION college
Department/Location

PHYLLIS M. Riggs
Employee Name

Student Serv Tech - Cashier
Exact Position Title

(408) 855-5009
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20 mins					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	20					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley + Mission College District
District

Admissions + Records (Mission Coll
Department/Location

Kelvin Tran
Employee Name

Student Services Technician
Exact Position Title

408-855-5127
Telephone #

~~12mo~~/11mo/10mo/~~hrly~~ (circle)
Work year length(circle)

Fiscal Year: 98-9 ~~99-0~~ 00-1 01-2 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/2007

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm District — District
Cashier / West Valley — Department/Location
Thuy Tran — Employee Name
Student Services Acct Tech — Exact Position Title
(408) 741-2662 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-6-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm. District — District
Records — Department/Location
TU-LAN TRINH — Employee Name
Student Records Advisor — Exact Position Title
(408) 741-2537 — Telephone #
12mo/11mo/10mo/hrly ~~Work~~ year length(circle)
Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7
Circle the years ~~for which you are responding~~.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06/07/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Mission College A+R
Department/Location

Nitha T. Vasquez
Employee Name

Student Servs Acct. Tech.
Exact Position Title

(408) 855-5026
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha T. Vasquez Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY / MISSION
District

FINANCIAL AID
Department/Location

DANIEL BALDWIN
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

741-2494
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	7			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel J Baldwin Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley/Mission College — District
F.A.O - MC — Department/Location
Amber Delos Reyes — Employee Name
Financial Aid Tech — Exact Position Title
(408) 855-5066 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes** (Per Student / Per Application)	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15-45			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	60-more			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15-20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	40-60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10-20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-7-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD West Valley-Mission
District

Financial Aid/Mission
Department/Location

Katy Fitzgerald
Employee Name

Financial Aid Advisor
Exact Position Title

408-855-5070
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katy Fitzgerald Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid
Department/Location

Marta Franklin
Employee Name

Financial Aid Advisor
Exact Position Title

x 2495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
* **Code 25** Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30	x 48 weeks		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

FINANCIAL AID – MC
Department/Location

ROEHL GALANG
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

408-855-5071
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-7-07

If you have any questions please contact ROEHL GALANG, at 408-855-5071

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD - WV
District

Financial Aid
Department/Location

Rhonda Kirkland
Employee Name

Interim Financial Aid Advisor
Exact Position Title

2601
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06) (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.0			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10.0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5.0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 WK			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15.0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 WK			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhonda Kirkland Date 6/6/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY - MIMICO
District

FINANCIAL AID
Department/Location

MARIA LOPEZ
Employee Name

STUDENT SERVICE TECHNICIAN
Exact Position Title

408-741-2039
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lopez Date 6/6/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION
District

FINANCIAL AID - MISSION
Department/Location

NGOCLIEN NGUYEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

408-855-5068 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20 - 45 (30)			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20-45 (30)			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15-25			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. (15)	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Ngoclien Nguyen Date 06-07-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-Mission College
District

Financial Aid / WVC
Department/Location

Elizabeth T. Pelayo
Employee Name

Financial Aid Outreach Specialist
Exact Position Title

741-2660
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	40			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo Date 4/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION COLLEGE
District

FINANCIAL AID / MC
Department/Location

MARIE RANCAP
Employee Name

STUDENT SERVICE TECH.
Exact Position Title

(408) 855-5054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20-40			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	MORE THAN 60			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	40			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	40			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.6.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid / WVC
Department/Location

Lucy Trinh
Employee Name

Financial Aid Technician
Exact Position Title

(408) 741-2443
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

If you have any questions, please contact (408) 741-2443, at WVC

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVmccd
District

Financial Aid Office / MC
Department/Location

HA M. VUONG
Employee Name

FA Advisor
Exact Position Title

855-5069
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06) (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Attachment 3

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS

ENROLLMENT STATISTICS REPORT

District: WEST VALLEY - MISSION CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of students enrolled each fiscal year. (Not FTE's)									
Summer	11,170	10,989	10,435	9,691	12,074	8578	9,188	9,706	
Fall	25,669	25,708	25,159	25,123	26,414	24,089	22,999	21,251	
Winter/ Intersession									
Spring	29,117	27,078	26,501	27,208	27,846	23,965	23,179	22,914	
Total	65,956	63,855	62,195	62,522	66,334	56,642	54,966	53,871	
2. Number of students who paid enrollment fees:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									
3. Number of students exempted from paying enrollment fees (BOGG, etc):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Attachment 4

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: WEST VALLEY - MISSION CCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee accounts receivable requiring collections:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Valley-Mission

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		5386	4523	5519	6498	7205	8110	8113	8225
2. Number of enrollment fee waivers approved (BOGG, etc.):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		5732	4829	4171	4704	5367	5647	6508	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: Mission College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested:									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2959	2581	3103	3718	4131	4518	4523	4678
2. Number of enrollment fee waivers approved (BOGG, etc.):									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		3116	2695	2301	2616	3041	3046	3506	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Employee Name: (print) _____ Position or Title _____

If you have any questions, please contact _____, at _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: West Valley College

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
1. Number of enrollment fee waivers requested: See attached									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2427	1942	2416	2730	3074	3592	3590	3557
2. Number of enrollment fee waivers approved (BOGG, etc.): See report submitted to date. Check with IS-									
Summer									
Fall									
Winter/ Intersession									
Spring									
Total		2616	2134	1870	2088	2364	2581	2803	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: Maritza Cantarero Date 6/7/07

Maritza Cantarero — Employee Name: (print)

FA Director — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: ______________________________

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$ 837,177	$ 693,447	$ 731,216	$ 877,138	$ 1,193,784	$ 1,996,558	$ 2,083,579
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$ 16743	$ 13869	$ 14624	$ 17543	$ 23875	$ 39931	$ 41672
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: ______________________________ Date ______________

______________________________ ______________________________
Employee Name: (print) Position or Title

If you have any questions, please contact ______________________________, at ______________.

PLEASE SUBMIT THIS INFORMATION BY ______________; TO ______________________________.

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PHR Schedule 1
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year 05-06

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Belham, Elinor	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Brien, Diane	Student Services Tech.	Class	52	3397	628	**26.83**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3546	655	**28.01**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3788	700	**29.92**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lautermilch, Jane	Student Services Tech.	Class	52	3397	628	**26.83**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lino, Paulette	A&R Supervisor	Supvr	16	4705	869	**37.16**
Lopez, Al	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3397	628	**26.83**
Riggs, Phyllis	Student Services Tech.	Class	52	3397	628	**26.83**
Tran Kelvin	Student Services Tech.	Class	52	3397	628	**26.83**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Trinh, Lucy	Student Records Advisor	Class	57	3788	700	**29.92**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3478	643	**27.47**

PHR Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year *05-06*

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Baldwin, Daniel	Financial Aid Advisor	Class	57	3788	700	**29.92**
De Los Reyes, Amber	Financial Aid Tech.	Class	57	3788	700	**29.92**
Fitzgerald, Katy	Financial Aid Advisor	Class	57	3788	700	**29.92**
Franklin, Marta	Financial Aid Advisor	Class	57	3788	700	**29.92**
Galang, Roehl	Financial Aid Advisor	Class	57	3788	700	**29.92**
Kirkland, Rhonda	Interim Financial Aid Advisor	Class	57	3788	700	**29.92**
Lopez, Maria	Student Services Tech.	Class	52	3397	628	**26.83**
Nguyen, Ngolien	Financial Aid Tech.	Class	57	3788	700	**29.92**
Pelayo, Elizabeth	Financial Outreach Specialist	Class	57	3788	700	**29.92**
Rancap, Maria	Student Services Tech.	Class	52	3397	628	**26.83**
Trinh, Lucy	Financial Aid Tech.	Class	57	3788	700	**29.92**
Vuong, Ha M.	Financial Aid Advisor	Class	57	3788	700	**29.92**

PHR Schedule 3
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year 2005-06

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections and Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office and PHR Schedules 1 & 2.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Belham, Elinor	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Brien, Diane	Student Services Tech.	Class	52	3397	628	**26.83**
Cantarero, Maritza	Financial Aid Director	Supvr	32	6456	1193	**50.99**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3546	655	**28.01**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3788	700	**29.92**
Enrollment Office Staff	Collection of Enrollment Fees	PHR Sch. 1	----------			**28.27**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Finacial Aid Office Staff	Waving Enrollment Fees	PHR Sch. 2	----------			**29.41**
Franklin, Marta	Financial Aid Advisor	Class	57	3788	700	**29.92**
Lautermilch, Jane	Student Services Tech.	Class	52	3397	628	**26.83**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lino, Paulette	A&R Supervisor	Supvr	16	4705	869	**37.16**
Lopez, Al	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
MacReynolds, Melissa	Systems Analyst	Class	70	5055	934	**39.93**
McDonnell, Mike	Sr. Systems Analyst	Class	71	5177	957	**40.89**
Nguyen, Linh	Systems Analyst	Class	70	5055	934	**39.93**
Ogilvie, Barbara	A&R Supervisor II	Supvr	20	5091	941	**40.21**
Petayo, Elizabeth	Financial Outreach Specialist	Class	57	3788	700	**29.92**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3397	628	**26.83**
Riggs, Phyllis	Student Services Tech.	Class	52	3397	628	**26.83**
Rodriguez, Thelma	Systems Analyst	Class	70	5055	934	**39.93**
Sawyer, Henry	Sr. Systems Analyst	Class	71	5177	957	**40.89**
Tran Kelvin	Student Services Tech.	Class	52	3397	628	**26.83**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Trinh, Lucy	Student Records Advisor	Class	57	3788	700	**29.92**
Trinh, Tu-Lan	Student Records Advisor	Class	57	3788	700	**29.92**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3478	643	**27.47**

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue, Saratoga, CA 95070

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Administrative Assistant	57	3,330	-	4,368	$20.49
Administrative Specialist – Instruction	62	3,709	-	4,873	$22.82
Administrative Specialist – Personnel	62	3,709	-	4,873	$22.82
Alternate Media / Instructional Support Assistant	59	3,478	-	4,560	$21.40
Career / Transfer Advisor	59	3,478	-	4,560	$21.40
Career Placement / Workforce Development Advisor	59	3,478	-	4,560	$21.40
Child Development Center Specialist I	43	2,481	-	3,233	$15.27
Child Development Center Specialist II	48	2,752	-	3,593	$16.94
Child Development Center Specialist III	53	3,062	-	3,996	$18.84
College Recruitment Specialist	57	3,330	-	4,368	$20.49
College Webmaster	80	5,533	-	7,346	$34.05
Community Access Coordinator / TV Producer	61	3,624	-	4,766	$22.30
Computer Graphic Specialist	58	3,397	-	4,463	$20.90
Computer Operations Specialist	63	3,788	-	4,990	$23.31
Coordinator of Parking and Traffic	54	3,126	-	4,089	$19.24
Desktop Publishing Specialist	50	2,866	-	3,746	$17.64
Desktop Support Technician	67	4,137	-	5,454	$25.46
Duplicating Services Specialist	48	2,752	-	3,593	$16.94
Educational Testing Specialist	54	3,126	-	4,089	$19.24
EOPS / CARE Specialist	59	3,478	-	4,560	$21.40
EOPS Specialist	57	3,330	-	4,368	$20.49
Financial Aid Advisor	57	3,330	-	4,368	$20.49
Financial Aid Outreach Specialist (BFAP)	57	3,330	-	4,368	$20.49
Financial Aid Special Services Technician (BFAP)	52	2,994	-	3,909	$18.42
Financial Analyst	68	4,231	-	5,574	$26.04
Financial Assistant (Assignment: Accounts Payable)	53	3,062	-	3,996	$18.84
Financial Technician	57	3,330	-	4,368	$20.49
Financial Technician – Payroll	57	3,330	-	4,368	$20.49
Grant Assistant – Foster & Kinship Care	57	3,330	-	4,368	$20.49
Graphic Designer	61	3,624	-	4,766	$22.30
HelpDesk / Computer Operations Specialist	70	4,421	-	5,838	$27.21
Instructional Assistant – Adaptive Physical Education	53	3,062	-	3,996	$18.84
Instructional Assistant – Business	53	3,062	-	3,996	$18.84
Instructional Assistant – Child Development	53	3,062	-	3,996	$18.84
Instructional Assistant – Court Reporting	53	3,062	-	3,996	$18.84
Instructional Assistant – DSPS	53	3,062	-	3,996	$18.84
Instructional Assistant – Foreign Language	53	3,062	-	3,996	$18.84
Instructional Assistant – Music	53	3,062	-	3,996	$18.84

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Instructional Laboratory Technician – Art	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Business	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Computer Science	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Foreign Language & ESL	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – LATC	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Mathematics	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Nursing	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Printing	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Science	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Theatre Arts Costumer	54	3,126	-	4,089	$19.24
Instructional Systems Computer Resources Specialist	66	4,049	-	5,333	$24.92
Instructional Technology Producer / Director	66	4,049	-	5,333	$24.92
Internal Auditor	76	5,055	-	6,692	$31.11
International Student Advisor	57	3,330	-	4,368	$20.49
Library / Media Technician	54	3,126	-	4,089	$19.24
Microcomputer Technical Specialist	63	3,788	-	4,990	$23.31
Network / Communication Specialist	72	4,624	-	6,100	$28.46
Office Assistant	50	2,866	-	3,746	$17.64
Office Coordinator	54	3,126	-	4,089	$19.24
Offset Printer	51	2,933	-	3,834	$18.05
Performing Arts Technical Director	64	3,874	-	5,099	$23.84
Principal Accountant	76	5,055	-	6,692	$31.11
Program Assistant	54	3,126	-	4,089	$19.24
Program Coordinator	57	3,330	-	4,368	$20.49
Program Specialist	57	3,330	-	4,368	$20.49
Program Specialist – DSPS	59	3,478	-	4,560	$21.40
Program Specialist – Hospitality Management	57	3,330	-	4,368	$20.49
Program Specialist – Work Exp. / Work-Based Learning Program	57	3,330	-	4,368	$20.49
Programmer	65	3,961	-	5,211	$24.38
Programmer Analyst	70	4,421	-	5,838	$27.21
Receptionist	44	2,530	-	3,301	$15.57
Registered Nurse	81	5,664	-	7,513	$34.86
Research Analyst	75	4,947	-	6,548	$30.44
Research Technician	61	3,624	-	4,766	$22.30
Senior Administrative Assistant	59	3,478	-	4,560	$21.40
Senior Buyer	62	3,709	-	4,873	$22.82
Senior Desktop Support Technician	72	4,624	-	6,100	$28.46
Senior Office Coordinator	57	3,330	-	4,368	$20.49
Senior Programmer / Analyst	71	4,525	-	5,973	$27.85
Senior Student Services Technician	54	3,126	-	4,089	$19.24
Senior Telecommunications Systems Administrator	72	4,624	-	6,100	$28.46
Server Systems Administrator (WINDOWS / NT)	81	5,664	-	7,513	$34.86

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Student Records Advisor	57	3,330	-	4,368	$20.49
Student Services Account Technician	53	3,062	-	3,996	$18.84
Student Services Technician	52	2,994	-	3,909	$18.42
Telecommunications / Audiovisual Maintenance Specialist	70	4,421	-	5,838	$27.21
Telephone Operator	41	2,386	-	3,102	$14.68
Telephone Systems Administrator	65	3,961	-	5,211	$24.38
Title V Student Services Coordinator	72	4,624	-	6,100	$28.46
Tram Driver / Mobility Assistant	44	2,530	-	3,301	$15.57
Transfer / Career Advisor	57	3,330	-	4,368	$20.49
TV / AV Operations Coordinator	66	4,421	-	5,838	$27.21
Web Administrator	80	5,533	-	7,346	$34.05
Workforce Program Advisor	57	3,330	-	4,368	$20.49

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT

2005 – 2006 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	RATE	A	B	C	D	E	F*	G*
21	$9.92	1,612	1,666	1,749	1,806	1,873	1,968	2,065
22	$10.10	1,642	1,702	1,770	1,836	1,913	2,008	2,109
23	$10.25	1,666	1,734	1,806	1,873	1,950	2,047	2,149
24	$10.47	1,702	1,770	1,836	1,913	1,991	2,091	2,195
25	$10.67	1,734	1,806	1,873	1,950	2,028	2,129	2,236
26	$10.89	1,770	1,836	1,913	1,991	2,071	2,174	2,282
27	$11.11	1,806	1,873	1,950	2,028	2,105	2,210	2,320
28	$11.30	1,836	1,913	1,991	2,071	2,149	2,257	2,370
29	$11.53	1,873	1,950	2,028	2,105	2,194	2,304	2,419
30	$11.77	1,913	1,991	2,071	2,149	2,245	2,358	2,476
31	$12.00	1,950	2,028	2,105	2,194	2,287	2,401	2,522
32	$12.25	1,991	2,071	2,149	2,245	2,331	2,447	2,569
33	$12.48	2,028	2,105	2,194	2,287	2,386	2,504	2,629
34	$12.74	2,071	2,149	2,245	2,331	2,433	2,554	2,683
35	$12.95	2,105	2,194	2,287	2,386	2,481	2,605	2,735
36	$13.22	2,149	2,247	2,331	2,433	2,530	2,656	2,789
37	$13.50	2,194	2,287	2,386	2,481	2,583	2,712	2,848
38	$13.82	2,245	2,331	2,433	2,530	2,635	2,766	2,906
39	$14.07	2,287	2,386	2,481	2,583	2,693	2,827	2,968
40	$14.34	2,331	2,433	2,530	2,635	2,752	2,890	3,035
41	$14.68	2,386	2,481	2,583	2,693	2,813	2,954	3,102
42	$14.97	2,433	2,530	2,635	2,752	2,866	3,011	3,161
43	$15.27	2,481	2,583	2,693	2,813	2,933	3,079	3,233
44	$15.57	2,530	2,635	2,752	2,866	2,994	3,144	3,301
45	$15.90	2,583	2,692	2,813	2,933	3,062	3,216	3,375
46	$16.22	2,635	2,752	2,865	2,994	3,126	3,282	3,447
47	$16.57	2,693	2,813	2,933	3,062	3,190	3,350	3,516
48	$16.94	2,752	2,865	2,994	3,126	3,259	3,423	3,593
49	$17.31	2,813	2,933	3,062	3,190	3,330	3,496	3,671
50	$17.64	2,866	2,994	3,126	3,259	3,397	3,567	3,746
51	$18.05	2,933	3,062	3,190	3,330	3,478	3,651	3,834
52	$18.42	2,994	3,126	3,259	3,397	3,546	3,723	3,909
53	$18.84	3,062	3,190	3,330	3,478	3,624	3,804	3,996
54	$19.24	3,126	3,259	3,397	3,546	3,709	3,895	4,089
55	$19.63	3,190	3,330	3,478	3,624	3,788	3,978	4,178
56	$20.06	3,259	3,397	3,546	3,709	3,874	4,067	4,271
57	$20.49	3,330	3,478	3,624	3,788	3,961	4,160	4,368
58	$20.90	3,397	3,546	3,709	3,874	4,049	4,250	4,463
59	$21.40	3,478	3,624	3,788	3,961	4,137	4,343	4,560
60	$21.82	3,546	3,709	3,874	4,049	4,231	4,443	4,664

*In order to be eligible for Steps F and G, the employee must have completed five years of services, after July 1, 1998, at the previous step.

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT

2005 – 2006 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	RATE	A	B	C	D	E	F*	G*
61	$22.30	3,624	3,788	3,961	4,137	4,323	4,540	4,766
62	$22.82	3,709	3,874	4,049	4,231	4,421	4,642	4,873
63	$23.31	3,788	3,961	4,137	4,323	4,525	4,751	4,990
64	$23.84	3,874	4,049	4,231	4,421	4,624	4,856	5,099
65	$24.38	3,961	4,137	4,323	4,525	4,727	4,963	5,211
66	$24.92	4,049	4,231	4,421	4,624	4,837	5,078	5,333
67	$25.46	4,137	4,323	4,525	4,727	4,947	5,194	5,454
68	$26.04	4,231	4,421	4,624	4,834	5,055	5,309	5,574
69	$26.60	4,323	4,525	4,727	4,947	5,179	5,438	5,710
70	$27.21	4,421	4,624	4,834	5,055	5,294	5,559	5,838
71	$27.85	4,525	4,727	4,947	5,177	5,418	5,689	5,973
72	$28.46	4,624	4,834	5,055	5,294	5,533	5,808	6,100
73	$29.09	4,727	4,947	5,177	5,418	5,664	5,948	6,243
74	$29.77	4,837	5,055	5,294	5,532	5,801	6,091	6,395
75	$30.44	4,947	5,179	5,418	5,664	5,940	6,237	6,548
76	$31.11	5,055	5,294	5,533	5,801	6,070	6,374	6,692
77	$31.87	5,179	5,418	5,664	5,940	6,211	6,521	6,847
78	$32.58	5,294	5,533	5,801	6,070	6,355	6,673	7,006
79	$33.34	5,418	5,664	5,940	6,211	6,512	6,837	7,179
80	$34.05	5,533	5,801	6,070	6,355	6,661	6,996	7,346
81	$34.86	5,664	5,940	6,211	6,512	6,814	7,155	7,513
82	$35.70	5,801	6,070	6,355	6,661	6,988	7,337	7,703
83	$36.55	5,940	6,211	6,512	6,814	7,144	7,500	7,877
84	$37.35	6,070	6,355	6,661	6,988	7,307	7,671	8,055
85	$38.22	6,211	6,512	6,814	7,144	7,480	7,855	8,248
86	$39.11	6,355	6,661	6,988	7,307	7,664	8,048	8,449
87	$40.07	6,512	6,814	7,144	7,480	7,845	8,236	8,648
88	$40.99	6,661	6,988	7,307	7,664	8,031	8,433	8,855
89	$41.93	6,814	7,144	7,480	7,845	8,212	8,623	9,054
90	$43.00	6,988	7,307	7,664	8,031	8,410	8,831	9,272

*In order to be eligible for Steps F and G, the employee must have completed five years of services, after July 1, 1998, at the previous step.

Adopted: April 19, 2007
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue
Saratoga, CA 95070

2005-2006 SUPERVISORS SALARY SCHEDULE
(40-HOUR WEEK)

Job Classification – Group A	Range	Salary	Hourly
Admissions and Records Director	24	4,765 - 6,384	$ 27.50
Admissions and Records Supervisor I	16	4,066 - 5,449	$ 23.46
Admissions and Records Supervisor II	20	4,402 - 5,901	$ 25.38
Custodial Supervisor	10	3,611 - 4,834	$ 20.84
Director, Student Activities and Campus Center	24	4,765 - 6,384	$ 27.50
District Custodial Manager	31	5,476 - 7,335	$ 31.58
District Grounds Manager	31	5,476 - 7,335	$ 31.58
District Warehouse Services Supervisor	13	3,835 - 5,132	$ 22.11
Finance Supervisor – Payroll	19	4,316 - 5,784	$ 24.91
Financial Aid Director	32	5,583 - 7,481	$ 32.23
Financial Aid Supervisor II	20	4,402 - 5,901	$ 25.38
International Student Services Coordinator	12	3,759 - 5,032	$ 21.69
Network / Communications Supervisor	40	6,542 - 8,769	$ 37.72
Printing Services Manager	21	4,487 - 6,017	$ 25.90
Public Safety Supervisor	34	5,810 - 7,782	$ 33.53
Senior Applications and Database Administrator	42	6,803 - 9,122	$ 39.27
Senior Network Architect and IS Security Analyst	44	7,081 - 9,489	$ 40.85
Senior Systems Analyst	42	6,803 - 9,122	$ 39.27
Student Records Supervisor	13	3,835 - 5,132	$ 22.11
Student Recruitment Supervisor	16	4,066 - 5,449	$ 23.46
Student Services Office Supervisor	18	4,230 - 5,668	$ 24.41
Systems Analyst	31	5,476 - 7,335	$ 31.58
UNIX Server Administrator	38	6,286 - 8,425	$ 36.28

2005-2006 SUPERVISORS UNIT

Range	Hourly	A	B	C	D	E	F*	G*
10	$20.84	3,611	3,791	3,980	4,180	4,386	4,604	4,834
11	$21.26	3,686	3,868	4,058	4,260	4,474	4,697	4,932
12	$21.69	3,759	3,940	4,141	4,350	4,564	4,793	5,032
13	$22.11	3,835	4,022	4,221	4,433	4,656	4,889	5,132
14	$22.56	3,909	4,104	4,307	4,523	4,749	4,987	5,237
15	$23.00	3,988	4,187	4,391	4,612	4,844	5,088	5,341
16	$23.46	4,066	4,265	4,480	4,705	4,944	5,191	5,449
17	$23.95	4,152	4,356	4,574	4,798	5,041	5,292	5,557
18	$24.41	4,230	4,443	4,661	4,894	5,142	5,399	5,668
19	$24.91	4,316	4,532	4,755	4,988	5,247	5,508	5,784
20	$25.38	4,402	4,623	4,851	5,091	5,352	5,619	5,901
21	$25.90	4,487	4,712	4,949	5,194	5,457	5,730	6,017
22	$26.45	4,582	4,806	5,046	5,296	5,566	5,843	6,135
23	$26.95	4,673	4,903	5,149	5,399	5,680	5,964	6,261
24	$27.50	4,765	4,999	5,252	5,507	5,792	6,082	6,384
25	$28.05	4,862	5,095	5,359	5,620	5,906	6,201	6,511
26	$28.61	4,959	5,198	5,465	5,728	6,025	6,327	6,644
27	$29.19	5,058	5,301	5,573	5,845	6,145	6,451	6,774
28	$29.75	5,159	5,406	5,686	5,960	6,268	6,583	6,913
29	$30.77	5,335	5,598	5,881	6,168	6,486	6,811	7,153
30	$30.96	5,366	5,627	5,914	6,209	6,521	6,848	7,192
31	$31.58	5,476	5,745	6,036	6,327	6,652	6,984	7,335
32	$32.23	5,583	5,855	6,153	6,456	6,786	7,125	7,481
33	$32.85	5,693	5,974	6,274	6,587	6,921	7,268	7,631
34	$33.53	5,810	6,091	6,401	6,716	7,060	7,412	7,782
35	$34.17	5,925	6,215	6,530	6,850	7,200	7,562	7,940
36	$34.87	6,046	6,337	6,660	6,987	7,346	7,716	8,102
37	$35.57	6,167	6,463	6,796	7,126	7,496	7,872	8,266
38	$36.28	6,286	6,594	6,932	7,271	7,644	8,024	8,425
39	$37.00	6,415	6,724	7,065	7,416	7,793	8,183	8,591
40	$37.72	6,542	6,859	7,210	7,566	7,953	8,351	8,769
41	$38.49	6,671	6,995	7,352	7,716	8,112	8,517	8,942
42	$39.27	6,803	7,133	7,501	7,871	8,273	8,688	9,122
43	$40.05	6,941	7,278	7,650	8,027	8,438	8,859	9,302
44	$40.85	7,081	7,422	7,803	8,188	8,605	9,038	9,489
45	$41.66	7,222	7,572	7,960	8,352	8,779	9,219	9,677
46	$42.48	7,368	7,728	8,120	8,521	8,955	9,401	9,872
47	$43.35	7,514	7,881	8,282	8,690	9,133	9,590	10,071
48	$44.22	7,665	8,038	8,447	8,863	9,316	9,783	10,272
49	$45.09	7,818	8,199	8,617	9,042	9,504	9,978	10,478
50	$46.00	7,975	8,363	8,791	9,223	9,693	10,176	10,687
51	$37.00	8,135	8,530	8,968	9,405	9,886	10,381	10,901
52	$47.87	8,298	8,700	9,146	9,593	10,086	10,590	11,121
53	$48.81	8,463	8,874	9,330	9,786	10,288	10,803	11,342
54	$49.81	8,631	9,051	9,516	9,982	10,492	11,019	11,569
55	$50.78	8,803	9,233	9,705	10,180	10,704	11,238	11,801

NOTE: This salary schedule reflects agreed realignments designed to insure that the supervisors earn at least 10% more than the highest paid, regularly-assigned subordinate.

*In order to be eligible for steps F and G, the employee must have completed five years of service, after July 1, 1998, at the previous step.

Schedule 5
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office. Initial year claim 98-99 through 05-06.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers						
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 837,172	$ 693,467	$ 731,216	$ 877,216	$ 1,193,734	$ 1,996,553	$ 2,083,575
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,602	For 00-01 through 05-06 - unit fee					
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34
Total # of credits	Line 4A divided by unit fee		63,042	66,474	79,746	76,179	85,542	89,270
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236
Summary								
1.8-4 line 4B.	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,602						
1.8-4 5.	Credit Units Waived		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,345**	**$ 71,237**	**$ 75,115**	**$ 90,113**	**$ 93,198**	**$ 117,774**	**$ 122,908**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
FY 03-04: Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
FY 04-05 and 05-06: Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: West Valley-Mission
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2006	JUNE PAYMENT	TOTAL PAID THRU JUNE 2006
GENERAL APPORTIONMENT	$11,543,444	$11,727,577	$-1,105,339	$10,622,238
EQUALIZATION	620,679	571,024	49,655	620,679
ENROLL FEE ADMIN (2%)	37,141	34,169	2,972	37,141
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	506,847	466,300	40,547	506,847
S.F.A.A.	532,102	488,460	43,642	532,102
E.O.P.S.	1,235,480	1,132,385	103,095	1,235,480
C.A.R.E.	146,855	133,236	13,619	146,855
D.S.P.S.	1,254,501	1,154,141	100,360	1,254,501
STATE HOSPITALS	304,840	280,452	24,388	304,840
CALWORKS	210,854	193,985	16,869	210,854
MATRICULATION (CREDIT)	807,942	743,306	64,636	807,942
MATRIC. (NONCREDIT)	2,854	2,625	229	2,854
FAC.& STAFF DIVERSITY	21,180	17,907	3,273	21,180
PART-TIME FAC. INS.	1,381	0	1,381	1,381
PART-TIME FAC. OFF. HRS	339,180	0	339,180	339,180
PART-TIME FAC. ALLO.	785,215	722,397	62,818	785,215
TELECOMMUNICATIONS	104,664	67,524	37,140	104,664
PLANT & INSTRUCTIONAL	422,921	389,088	33,833	422,921
ECON. DEVELOPMENT	2,085,759	1,752,038	0	1,752,038
TANF	48,780	44,876	3,904	48,780
VTEA LEADERSHIP	0	0	0	0
VTEA TECH. PREP.	131,687	31,604	79,013	110,617
VTEA TITLE I C	323,508	230,735	41,012	271,747
NURSING CARE	413,339	0	413,339	413,339
PRIOR YEAR CORRECTION	1,208,994	1,208,994	0	1,208,994
TOTAL	$23,090,147	$21,392,823	$369,566	$21,762,389

FISCAL SERVICES:06/19/06 08:18
J:\PBF\2005-06\Dir_P2\PaySchedule\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sch. 5A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Ref	Source	Item	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
	EFCW-1 B. 1. a.			$ 799.92	$ 854.82	$ 733.80	$ 582.60	$ 586.60	$ 509.90
	EFCW-1 B. 1. b.		$ 869.60	$ 5,338.11	$ 9,478.53	$ 5,677.57	$ 5,520.55	$ 7,259.75	$ 8,518.48
	EFCW-1 B. 2. a.		$ 11,055.64	$ 7,590.24	$ 10,270.44	$ 14,629.52	$ 5,431.24	$ 5,514.24	$ 8,986.32
	EFCW-1 B. 2. b.		$ 143,823.68	$ 126,038.10	$ 153,325.47	$ 183,675.31	$ 203,739.22	$ 228,975.00	$ 241,297.29
	EFCW-1 B. 2. c.		$ 29,796.00	$ 31,474.08	$ 36,677.68	$ 35,267.20	$ 23,087.20	$ 34,352.52	$ 37,106.32
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 185,544.92	$ 171,240.45	$ 210,606.94	$ 239,983.40	$ 238,360.81	$ 276,688.11	$ 296,418.31
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 75,345.00	$ 71,237.00	$ 75,115.00	$ 90,113.00	$ 93,198.00	$ 117,774.00	$ 122,908.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 110,199.92	$ 100,003.45	$ 135,491.94	$ 149,870.40	$ 145,162.81	$ 158,914.11	$ 173,510.31
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 75,345.00**	**$ 71,237.00**	**$ 75,115.00**	**$ 90,113.00**	**$ 93,198.00**	**$ 117,774.00**	**$ 122,908.00**

California Home

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mission College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 19, 2007 11:10:44

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	232	114,049
BOGW - Part B based on income standards	2,370	719,394
BOGW - Part C based on financial need	904	294,515

Total Amount = $ 1,127,958

Back to Top of Page

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

West Valley College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of June 07, 2007 04:21:13

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	70	13,767
BOGW - Part B based on income standards	1,792	612,989
BOGW - Part C based on financial need	940	328,861

Total Amount = $ 955,617

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 25, 2008

CERTIFIED MAIL # 7006 3450 0000 3941 8703

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
West Valley-Mission Community College District CC 43180

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for West Valley-Mission Community College District's reimbursement claim listed below:

308/95 Enrollment Fee Collection and Waivers 2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

Dorothy Braswell

for Keith B. Petersen, President

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43180

(02) Claimant Name: West Valley-Mission Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 14000 Fruitvale Avenue

City: Saratoga | State: CA | Zip Code: 95070-5698

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 1,565,900	(13) $ 1,423,618
Less : 10% Late Penalty, not to exceed $10,000		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,423,618
Due from State	(08) $ 1,565,900	(17) $ 1,423,618
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	885
(23) EFCW-1, (04)(A)(1)(b)(f)	64,644
(24) EFCW-1, (04)(A)(2)(a)(f)	813,810
(25) EFCW-1, (04)(B)(1)(a)(f)	510
(26) EFCW-1, (04)(B)(1)(b)(f)	5,963
(27) EFCW-1, (04)(B)(2)(a)(f)	13,234
(28) EFCW-1, (04)(B)(2)(b)(f)	196,252
(29) EFCW-1, (04)(B)(2)(c)(f)	37,346
(30) EFCW-1, (06)	39
(31) EFCW-1, (07)	440,145
(32) EFCW-1, (09)	41,839
(33) EFCW-1, (10)	107,331
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) | **Date**

George Kozitza | 1/17/08

George Kozitza
Type or Print Name

Interim Vice Chancellor, Business Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

1) Claimant:

'est Valley-Mission Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year

2006-2007

)3) Leave Blank

irect Costs	Object Accounts					
4) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 884.62	$ -	$ -	$ -	$ -	$ 884.62
b. Staff training (One time per employee)	$ 64,643.51	$ -	$ -	$ -	$ -	$ 64,643.51
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 813,809.70	$ -	$ -	$ -	$ -	$ 813,809.70
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. P...ing district policies & procedures for § IV.B.	$ 509.90	$ -	$ -	$ -	$ -	$ 509.90
b. Staff training (One time per employee)	$ 5,962.96	$ -	$ -	$ -	$ -	$ 5,962.96
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 13,234.26	$ -	$ -	$ -	$ -	$ 13,234.26
b. Waiving student fees	$ 196,251.87	$ -	$ -	$ -	$ -	$ 196,251.87
c. Reporting BOG fee waiver data to CCC	$ 37,345.90	$ -	$ -	$ -	$ -	$ 37,345.90
) Total Direct Costs	$ 1,132,642.72	$ -	$ -	$ -	$ -	$ 1,132,642.72

irect Costs		
) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	38.86%
) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 440,144.96
) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 1,572,787.68
st Reduction		
Less: Enrollment Fee Revenue offset		$ 41,839.00
Less: Enrollment Fee Waiver offsets		$ 107,331.00
Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 1,423,617.68

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees Ogilve, Barbara A&R Supervisor	$40.21	22.0	$ 884.62				
(05) Total [x] Subtotal [ ]		Page 1 of 1	$ 884.62	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Belham, Elinor	Student Services Account Tech	$32.50	110.0	$ 3,575.00				
Dasalla, Analiza Bibat	Senior Student Services Tech	$28.01	632.0	$ 17,702.32				
De Los Reyes, Melissa	Student Records Advisor	$29.92	110.0	$ 3,291.20				
Estrada, Cynthia	Student Services Account Tech	$27.47	40.0	$ 1,098.80				
Lautermilch, Jane	Student Services Account Tech	$26.83	8.0	$ 214.64				
Le, Diemanh	Student Services Account Tech	$30.98	110.0	$ 3,407.80				
Lino, Paulette	A&R Supervisor	$41.87	210.0	$ 8,792.70				
Lopez, Al	Student Services Account Tech	$27.47	30.0	$ 824.10				
Oglive, Barbara	A&R Supervisor	$40.21	65.0	$ 2,613.65				
Ramirez, Elizabeth	Student Services Account Tech	$26.83	40.0	$ 1,073.20				
Riggs, Phyllis	Student Services Account Tech	$26.83	460.0	$ 12,341.80				
Rodriguez, Thelma	Systems Analyst	$39.93	80.0	$ 3,194.40				
Sawyer, Henry	Senior Systems Analyst	$40.89	2.0	$ 81.78				
Tran, Kelvin	Student Services Account Tech	$26.83	110.0	$ 2,951.30				
Tran, Thuy	Student Services Account Tech	$27.47	8.0	$ 219.76				
Trinh, Tu-Lan	Student Records Advisor	$29.92	8.0	$ 239.36				
Vasquez, Nitha	Student Services Account Tech	$27.47	110.0	$ 3,021.70				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 64,643.51	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$29.15	10,593.0	$ 308,785.95				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$29.15	8,316.0	$ 242,411.40				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$29.15	9,009.0	$ 262,612.35				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 813,809.70	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
st Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination Cantarero, Maritza Financial Aid Director	$50.99	10.0	$ 509.90				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 509.90	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
Estrada, Cynthia	Student Services Account Tech	$27.47	20.0	$ 549.40				
Franklin, Marta	Financial Aid Advisor	$29.92	8.0	$ 239.36				
Lopez, Al	Student Services Account Tech	$27.47	20.0	$ 549.40				
McDonnell, Mike	Senior Systems Analyst	$40.89	4.0	$ 163.56				
Nguyen, Linh	Systems Analyst	$39.93	16.0	$ 638.88				
Pelayo, Elizabeth	Financial Aid Outreach Specialist	$29.92	24.0	$ 718.08				
Trin, Lucy	Financial Aid Technician	$29.92	1.5	$ 44.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,962.96	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
MacReynolds, Melissa	Systems Analyst	$39.93	40.0	$ 1,597.20				
McDonnell, Mike	Senior Systems Analyst	$40.89	24.0	$ 981.36				
Rodriguez, Thelma	Systems Analyst	$39.93	180.0	$ 7,187.40				
Sawyer, Henry	Senior Systems Analyst	$40.89	10.0	$ 408.90				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 13,234.26	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,440.9	$ 43,039.68				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,892.6	$ 56,531.96				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,376.4	$ 41,113.07				
ng approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,860.3	$ 55,567.16				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 196,251.87	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
t Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cantarero, Maritza	Financial Aid Director	$50.99	50.0	$ 2,549.50				
Nguyen, Linh	Systems Analyst	$39.93	256.0	$ 10,222.08				
Oglive, Barbara	A&R Supervisor	$40.21	56.0	$ 2,251.76				
Riggs, Phyllis	Student Services Account Tech	$26.83	832.0	$ 22,322.56				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 37,345.90	$ -	$ -	$ -	$ -

West Valley-Mission Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	110.00	Belham, Elinor	Student Services Account Tech	$32.50	$3,575.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Belham, Elinor Total**			$3,575.00		
06-07	10.00	Cantarero, Maritza	Financial Aid Director	$50.99	$509.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
06-07	50.00	Cantarero, Maritza	Financial Aid Director	$50.99	$2,549.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	180.00	**Cantarero, Maritza Total**			$9,178.20		
06-07	632.00	Dasalla, Analiza Bibat	Senior Student Services Tech	$28.01	$17,702.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	632.00	**Dasalla, Analiza Bibat Total**			$17,702.32		
06-07	110.00	De Los Reyes, Melissa	Student Records Advisor	$29.92	$3,291.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**De Los Reyes, Melissa Total**			$3,291.20		
06-07	10,593.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$308,785.95	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	8,316.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$242,411.40	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	9,009.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$262,612.35	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,918.00	**Enrollment Office Staff Total**			$813,809.70		
06-07	40.00	Estrada, Cynthia	Student Services Account Tech	$27.47	$1,098.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	20.00	Estrada, Cynthia	Student Services Account Tech	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	60.00	**Estrada, Cynthia Total**			$1,648.20		
06-07	1,440.90	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$43,039.68	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	1,892.60	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$56,531.96	Receiving waiver applications	Waiving student fees
06-07	1,376.40	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$41,113.07	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,860.30	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$55,567.16	Entering approved application information into district records; providing student award letter	Waiving student fees
	6,570.20	**Financial Aid Office Staff Total**			$196,251.87		
06-07	8.00	Franklin, Marta	Financial Aid Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Franklin, Marta Total**			$239.36		
06-07	8.00	Lautermilch, Jane	Student Services Account Tech	$26.83	$214.64	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Lautermilch, Jane Total**			$214.64		
06-07	110.00	Le, Diemanh	Student Services Account Tech	$30.98	$3,407.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Le, Diemanh Total**			$3,407.80		
06-07	210.00	Lino, Paulette	A&R Supervisor	$41.87	$8,792.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	210.00	**Lino, Paulette Total**			$8,792.70		
06-07	30.00	Lopez, Al	Student Services Account Tech	$27.47	$824.10	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	20.00	Lopez, Al	Student Services Account Tech	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	50.00	**Lopez, Al Total**			$1,373.50		
06-07	40.00	MacReynolds, Melissa	Systems Analyst	$39.93	$1,597.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	40.00	**MacReynolds, Melissa Total**			$1,597.20		
06-07	4.00	McDonnell, Mike	Senior Systems Analyst	$40.89	$163.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	24.00	McDonnell, Mike	Senior Systems Analyst	$40.89	$981.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	28.00	**McDonnell, Mike Total**			$1,144.92		
06-07	16.00	Nguyen, Linh	Systems Analyst	$39.93	$638.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	256.00	Nguyen, Linh	Systems Analyst	$39.93	$10,222.08	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	272.00	**Nguyen, Linh Total**			$10,860.96		
06-07	22.00	Oglive, Barbara	A&R Supervisor	$40.21	$884.62	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	65.00	Oglive, Barbara	A&R Supervisor	$40.21	$2,613.65	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	56.00	Oglive, Barbara	A&R Supervisor	$40.21	$2,251.76	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	143.00	**Oglive, Barbara Total**			$5,750.03		

West Valley-Mission Community College District
308/95 ENROLLMEN COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	24.00	Pelayo, Elizabeth	Financial Aid Outreach Specialist	$29.92	$718.08	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	24.00	**Pelayo, Elizabeth Total**			$718.08		
06-07	40.00	Ramirez, Elizabeth	Student Services Account Tech	$26.83	$1,073.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	40.00	**Ramirez, Elizabeth Total**			$1,073.20		
06-07	460.00	Riggs, Phyllis	Student Services Account Tech	$26.83	$12,341.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	832.00	Riggs, Phyllis	Student Services Account Tech	$26.83	$22,322.56	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,292.00	**Riggs, Phyllis Total**			$34,664.36		
06-07	80.00	Rodriguez, Thelma	Systems Analyst	$39.93	$3,194.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	180.00	Rodriguez, Thelma	Systems Analyst	$39.93	$7,187.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	260.00	**Rodriguez, Thelma Total**			$10,381.80		
06-07	2.00	Sawyer, Henry	Senior Systems Analyst	$40.89	$81.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	10.00	Sawyer, Henry	Senior Systems Analyst	$40.89	$408.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	12.00	**Sawyer, Henry Total**			$490.68		
06-07	110.00	Tran, Kelvin	Student Services Account Tech	$26.83	$2,951.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Tran, Kelvin Total**			$2,951.30		
06-07	8.00	Tran, Thuy	Student Services Account Tech	$27.47	$219.76	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Tran, Thuy Total**			$219.76		
06-07	1.50	Trin, Lucy	Financial Aid Technician	$29.92	$44.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.50	**Trin, Lucy Total**			$44.88		
06-07	8.00	Trinh, Tu-Lan	Student Records Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Trinh, Tu-Lan Total**			$239.36		
06-07	110.00	Vasquez, Nitha	Student Services Account Tech	$27.47	$3,021.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Vasquez, Nitha Total**			$3,021.70		
	38,314.70	**Grand Total**			$1,132,642.72		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$43,233,301		$43,233,301	$359,907	$42,873,394
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	3,738,624		3,738,624	59,321	3,679,303
Course and Curriculum Development	6020	447,221		447,221	75,000	372,221
Academic/Faculty Senate	6030	231,120		231,120		231,120
Other Instructional Administration & Instructional Governance	6090	785,365		785,365	1,177	784,188
Instructional Support Services	6100					
Learning Center	6110	603,362		603,362	7,673	595,689
Library	6120	2,004,810		2,004,810	73,439	1,931,371
Media	6130	130,003		130,003	2,368	127,635
Museums and Galleries	6140	15,667		15,667		15,667
Academic Information Systems and Technology	6150	608,193		608,193	20,852	587,341
Other Instructional Support Services	6190	512,861		512,861	-125	512,986
Admissions and Records	6200	1,690,179		1,690,179	18,132	1,672,047
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	3,864,698		3,864,698	7,539	3,857,159
Matriculation and Student Assessment	6320	673,700		673,700	10,080	663,620
Transfer Programs	6330					
Career Guidance	6340	356,058		356,058	1,316	354,742
Other Student Counseling and Guidance	6390					
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,588,774	5,014	2,583,760	56,927	2,526,833
Subtotal		$61,483,936	$5,014	$61,478,922	$693,606	$60,785,316

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,824,434	$824,025	$1,000,409	$12,067	$988,342
Health Services	6440	1,301		1,301		1,301
Student Personnel Admin.	6450	666,019		666,019	1,410	664,609
Financial Aid Administration	6460	1,017,653		1,017,653	3,848	1,013,805
Job Placement Services	6470	127,213		127,213		127,213
Veterans Services	6480	184,198		184,198		184,198
Miscellaneous Student Services	6490	1,200,016		1,200,016	149,844	1,050,172
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,711,259		1,711,259	1,711,259	0
Custodial Services	6530	2,169,859		2,169,859	2,169,859	0
Grounds Maintenance and Repairs	6550					
Utilities	6570	2,418,346		2,418,346	2,418,346	0
Other	6590	682,613		682,613	682,613	0
Planning, Policy Making, and Coordination	6600	3,029,891		3,029,891	3,029,891	0
General Inst. Support Services	6700					
Community Relations	6710	214,096		214,096	214,096	0
Fiscal Operations	6720	3,008,451		3,008,451	3,008,451	0
Human Resources Management	6730	1,364,637		1,364,637	1,364,637	0
Noninstructional Staff Benefits & Incentives	6740	2,627,182		2,627,182	2,627,182	0
Staff Development	6750	309,975		309,975	309,975	0
Staff Diversity	6760	4,359		4,359	4,359	0
Logistical Services	6770	3,006,501		3,006,501	3,006,501	0
Management Information Systems	6780	3,200,306		3,200,306	3,200,306	0
Subtotal		$90,252,245	$829,039	$89,423,206	$24,608,250	$64,814,956

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	30,101		30,101	30,101	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	408,905		408,905	3,650	405,255
Community Use of Facilities	6830	267,515		267,515	158,973	108,542
Economic Development	6840	1,822,102		1,822,102	24,941	1,797,161
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	668		668		668
Farm Operations	6930					
Food Services	6940					
Parking	6950	448,706		448,706	199,298	249,408
Student and Co-curricular Activities	6960	473,630		473,630	1,073	472,557
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	93,436		93,436	15,086	78,350
Other Auxiliary Operations	7090	5,841		5,841		5,841
Physical Property Acquisitions	7100					
(05) Total		$93,803,149	$829,039	$92,974,110	$25,041,372	$67,932,738
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.86%		
(07) Notes						

CALIFORI COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	2,341					2,341
Architecture and Environmental Design	0200	156,164		140			156,304
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,439,836	15,505	97,629	8,126		1,561,096
Business and Management	0500	2,483,262	27,109	32,505	1,303		2,544,179
Communications	0600	92,059		8,251			100,310
Information Technology	0700	2,124,320	113,153	117,616	44,632		2,399,721
Education	0800	3,376,302	113,313	384,953	79,125		3,953,693
Engineering and Industrial Tech.	0900	1,498,007	30,605	72,889	2,000		1,603,501
Fine and Applied Arts	1000	3,213,109	70,841	101,063	25,674		3,410,687
Foreign Language	1100	1,563,896	25,482	13,414			1,602,792
Health	1200	1,709,569	69,303	15,633			1,794,505
Family and Consumer Sciences	1300	1,896,891		128,142	20,629		2,045,662
Law	1400	219,834	62,326	3,862			286,022
Humanities (Letters)	1500	7,163,163		28,771			7,191,934
Library Science	1600						
Mathematics	1700	3,787,730	20,178	32,221			3,840,129
Military Studies	1800						
Physical Sciences	1900	1,839,348	58	37,653			1,877,059
Psychology	2000	745,032		4,107			749,139
Public and Protective Services	2100	1,653,290	124,270	421,898	57,728		2,257,186
Social Sciences	2200	2,648,265	110,461	39,271			2,797,997
Commercial Services	3000						
Interdisciplinary Studies	4900	578,242	85,391	267,766	120,690		1,052,089
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,006,955					2,006,955
Subtotal - Instructional Activities	**599**	40,197,615	867,995	1,807,784	359,907		43,233,301

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2005-06**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		2,188,549	338,284	56,927	5,014	2,588,774
Extended Opportunity Prgms. & Services (EOPS)	6430		939,300	49,042	12,067	824,025	1,824,434
Health Services	6440		1,301				1,301
Student Personnel Administration	6450		611,476	53,133	1,410		666,019
Financial Aid Administration	6460		831,614	182,191	3,848		1,017,653
Job Placement Services	6470		123,490	3,723			127,213
Veterans Services	6480		180,713	3,485			184,198
Miscellaneous Student Services	6490		774,800	275,372	149,844		1,200,016
Subtotal - Other Student Services	**6400**		5,651,243	905,230	224,096	829,039	7,609,608
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		779,951	843,339	87,969		1,711,259
Custodial Services	6530		2,079,362	90,497			2,169,859
Grounds Maintenance and Repairs	6550						
Utilities	6570			2,418,346			2,418,346
Other Operation and Maintenance of Plant	6590		527,104	148,536	6,973		682,613
Subtotal - Operation and Maintenance of Plant	**6500**		3,386,417	3,500,718	94,942		6,982,077
Planning, Policymaking, and Coordination	**6600**		1,789,319	1,216,228	24,344		3,029,891

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		268	400			668
Farm Operations	6930						
Food Services	6940						
Parking	6950		194,930	54,478	199,298		448,706
Student and Co-curricular Activities	6960		329,781	142,776	1,073		473,630
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		524,979	197,654	200,371		923,004
Auxiliary Operations (7000)							
Contract Education	7010	5,300	4,358	68,692	15,086		93,436
Other Auxiliary Operations	7090		5,841				5,841
Subtotal - Auxiliary Operations	**7000**	5,300	10,199	68,692	15,086		99,277
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210					16,651	16,651
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**					16,651	16,651
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,249,566	1,249,566
Student Aid	7320					62,327	62,327
Other Outgo	7330					15,463	15,463
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,327,356	1,327,356
TOTAL EXPENDITURES and OTHER OUTGO	**391**	40,697,791	37,998,436	12,586,797	1,691,086	2,173,046	95,147,156

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Analysis of Interfund Transfers

Fund #	In/Out	Fund Title	Amount Transferred In	Amount Transferred Out
10	IN	General Funds	113,546	
12	OUT	Restricted Subfund		113,546
10	IN	General Funds	14,867	
59	OUT	Other Enterprise Fund		14,867
10	IN	General Funds	14,918	
59	OUT	Other Enterprise Fund		14,918
12	IN	Restricted Subfund	612,992	
10	OUT	General Funds		612,992
12	IN	Restricted Subfund	7,799	
74	OUT	Student Financial Aid Trust Fund		7,799
12	IN	Restricted Subfund	9,820	
74	OUT	Student Financial Aid Trust Fund		9,820
12	IN	Restricted Subfund	20,102	
74	OUT	Student Financial Aid Trust Fund		20,102
21	IN	Bond Interest and Redemption Fund	16,449,757	
42	OUT	Revenue Bond Construction Fund		16,449,757
29	IN	Other Debt Service Fund	300,000	
10	OUT	General Funds		300,000
73	IN	Student Body Center Fee Trust Fund	9,100	
10	OUT	General Funds		9,100
74	IN	Student Financial Aid Trust Fund	38,996	
10	OUT	General Funds		38,996

Analysis of Interfund Transfers

Fund #	In/Out	Fund Title	Amount Transferred In	Amount Transferred Out
Summary Totals				
Totals			17,766,829	17,766,829
10		General Funds	143,331	
12		Restricted Subfund		113,546
59		Other Enterprise Fund		29,785
12		Restricted Subfund	650,713	
10		General Funds		1,136,020
74		Student Financial Aid Trust Fund		37,721
21		Bond Interest and Redemption Fund	16,449,757	
42		Revenue Bond Construction Fund		16,449,757
29		Other Debt Service Fund	300,000	
73		Student Body Center Fee Trust Fund	9,100	
74		Student Financial Aid Trust Fund	169,870	
75		Scholarship and Loan Trust Fund	44,058	

Community College District
Indirect Cost Rates

CCD	Method	98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
Allan Hancock Joint CCD	FAM-29C	37.59	37.07	35.76	36.14	32.00	32.46	31.81	32.71	30.33
Cerritos CCD	FAM-29C	39.30	40.33	32.78	31.58	29.26	28.16	34.11	30.68	29.17
Citrus CCD	FAM-29C	51.75	44.86	44.70	45.74	41.72	45.53	40.58	40.60	41.95
Contra Costa CCD	*FED rate*	*34.00*	*34.00*	*34.00*	*34.00*	*32.80*	*32.80*	*32.80*	*32.80*	*32.80*
El Camino CCD	FAM-29C	39.18	41.40	37.55	36.24	30.38	29.10	35.22	35.02	32.00
Foothill-De Anza CCD	FAM-29C	28.67	30.09	31.67	35.50	32.28	31.11	29.66	28.90	29.69
Gavilan CCD	FAM-29C	35.68	34.23	36.55	35.86	32.88	36.29	33.96	36.92	36.45
Glendale CCD	*FED rate*					*45.00*	*45.00*	*45.00*	*45.00*	*45.00*
Glendale CCD	FAM-29C	39.13	38.41	38.15	34.20					
Kern CCD	FAM-29C	66.87	55.25	51.24	49.63	48.94	39.43	42.89	39.91	37.49
Los Rios CCD	*FED rate*								*30.00*	*30.00*
Los Rios CCD	FAM-29C	33.73	33.68	34.00	32.79	31.09	30.88	31.96	*32.61*	
Long Beach CCD	FAM-29C		36.80	37.27	38.71	35.01	33.40	32.33	33.86	32.70
Monterey Peninsula CCD	FAM-29C					34.91	38.94	43.85	32.29	34.62
North Orange County CCD	*FED rate*	*38.00*	*38.00*	*38.00*	*38.00*	*39.00*	*39.00*	*39.00*	*39.00*	*29.50*
Palomar CCD	FAM-29C	32.61	32.87	35.16	35.41	33.72	29.56	27.57	25.48	26.35
Pasadena Area CCD	*FED rate*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*32.80*	*32.80*	*32.80*
Redwoods CCD	FAM-29C	42.74	39.44	41.42	41.43	38.92	38.64	37.90	37.45	39.60
Mt. San Jacinto CCD	FAM-29C	47.02	50.15	42.92	42.47	40.14	38.81	36.94	34.02	38.69
San Bernardino CCD	FAM-29C	51.36	45.57	51.88	46.95	49.18	44.42	45.62	47.74	45.3
San Mateo CCD	*FED rate*		*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*	*30.00*
Santa Monica CCD	FAM-29C	43.56	45.96	41.72	42.07	39.82	34.07	36.91	34.25	35.53
Sierra Joint CCD	FAM-29C	45.92	42.04	41.34	36.18	36.79	38.41	40.90	35.70	38.49
State Center CCD	*FED rate*							*36.50*	*36.50*	*36.50*
State Center CCD	FAM-29C	38.96	38.26	34.59	36.70	34.62	31.33	32.25		
Victor Valley CCD	FAM-29C	57.90	58.96	58.45	61.28	55.20	53.91	45.61	46.57	41.33
West Valley-Mission CCD	FAM-29C	40.47	44.02	42.99	44.15	33.37	34.89	35.80	37.57	38.86
West Kern CCD	FAM-29C	33.92	37.65	37.64	39.73	37.46	31.79	38.32	34.32	34.87
Yosemite CCD	FAM-29C	33.05	32.67	30.93	30.98	26.87	26.35	34.88	36.38	32.23

ICR taken from previously filed claims

Schedule 1A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	59,400
Avg. time p/account	10.7
Total Time (in minutes)	635580
Per Hour	60
Hours Worked (****Activity 11**)	**10593.0**
***EFC 2**	
Avg. time p/student	8.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 12**)	**0.0**
***EFC 1**	59,400
Avg. time p/question	8.4
Total Time (in minutes)	498960
Per Hour	60
Hours Worked (****Activity 13**)	**8316.0**
***EFC 1**	59,400
Avg. time p/file	9.1
Total Time (in minutes)	540540
Per Hour	60
Hours Worked (****Activity 14**)	**9009.0**
***EFC 4**	
Avg. time p/account	14.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 15**)	**0.0**
***EFC 5**	
Avg. time p/student	10.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,452
Avg. time p/question	13.4
Total Time (in minutes)	86457
Per Hour	60
Hours Worked (****Activity 21**)	**1440.9**
***EFW 6**	6,452
Avg. time p/application	17.6
Total Time (in minutes)	113555
Per Hour	60
Hours Worked (****Activity 22**)	**1892.6**
***EFW 6**	6,452
Avg. time p/evaluation	12.8
Total Time (in minutes)	82586
Per Hour	60
Hours Worked (****Activity 23**)	**1376.4**
***EFW 8**	0
Avg. time p/application	23.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 24**)	**0.0**
***EFW 7**	6,452
Avg. time p/application	17.3
Total Time (in minutes)	111620
Per Hour	60
Hours Worked (****Activity 25**)	**1860.3**
***EFW 8**	0
Avg. time p/application	15.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 2005-2006 timestudy. (back-up in 05-06 only)
Findings:

		*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Belham, Eliner	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Brien, Diane	Student Services Tech.	5.0	5.0	10.0	5.0		
Dasalla, Analiza	Sr. Student Services Tech.	15.0	5.0	5.0	8.0	20.0	10.0
De Los Reyes, Melissa	Student Records Advisor	15.0	15.0	10.0	7.0	7.0	7.0
Estrada, Cynthia	Student Services Acct. Tech.	6.0	4.0	5.0	5.0	8.0	7.0
Lautermilch, Jane	Student Services Tech.	6.0	6.0	6.0	5.0		3.0
Le, Diemanh	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Lino, Paulette	A & R Supervisor	15.0	15.0	15.0	20.0	20.0	15.0
Lopez, Al	Student Services Acct. Tech.	5.0	7.0	5.0	6.0	6.0	6.0
Ramirez, Elizabeth	Student Services Tech.	3.0	3.0	3.0	1.0	5.0	
Riggs, Phyllis M.	Student Services Tech., Cashier	20.0	5.0	20.0	10.0	20.0	20.0
Tran, Kelvin	Student Services Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Tran, Thuy	Student Services Acct. Tech.	5.0	9.0	3.0	4.0	7.0	3.0
Trinh, Tu-Lan	Student Records Advisor	6.0	7.0	4.0	5.0		
Vasquez, Nitha	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Average		**10.7**	**8.1**	**8.4**	**9.1**	**14.4**	**10.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Sch ule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Enrollment Office Staff.
Source: PHR Calculation Schedules.
Findings:

Staff	Title	06-07	Code
Belham, Eliner	Student Services Acct. Tech.	32.50	
Brien, Diane	Student Services Tech.	26.83	A
Dasalla, Analiza	Senior Student Services Tech.	28.01	A
De Los Reyes, Melissa	Student Records Advisor	29.92	A
Estrada, Cynthia	Student Services Acct. Tech.	27.47	A
Lautermilch, Jane	Student Services Tech.	26.83	A
Le, Diemanh	Student Services Acct. Tech.	30.98	
Lino, Paulette	A & R Supervisor	41.87	
Lopez, Al	Student Services Acct. Tech.	27.47	A
Ramirez, Elizabeth	Student Services Tech.	26.83	A
Riggs, Phyllis M.	Student Services Tech., Cashier	26.83	A
Tran, Kelvin	Student Services Tech.	26.83	A
Tran, Thuy	Student Services Acct. Tech.	27.47	A
Trinh, Tu-Lan	Student Records Advisor	29.92	A
Vasquez, Nitha	Student Services Acct. Tech.	27.47	A
Average		**29.15**	

A: Used 05-06 PHR's since 06-07 PHR's were not provided.
Conclusion: Findings go forward to EFCW -2

Schedule 3
West Valley Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 2005-2006 timestudy. (back-up in 05-06 only)
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Baldwin, Daniel	Financial Aid Advisor	4	6	3	9	5	7
DeLos Reyes,Amber	Financial Aid Tech.	30	60	18	50	15	15
Fitzgerald, Katy	Financial Aid Advisor	15	10	20	15	20	20
Franklin, Marta	Financial Aid Advisor	5	10	7	7	30	10
Galang, Roehl	Financial Aid Advisor	5	10	5	10	10	15
Kirkland, Rhonda	Interim Financial Aid Advisor	2	10	5		15	7
Lopez, Maria	Student Services Tech.	10	5	5	10	10	10
Nguyen, Ngolien	Financial Aid Tech.	30	20	20	30	20	15
Pelayo, Elizabeth	Financial Aid Outreach Spec.	2	5	10	40	10	30
Rancap, Marie	Student Services Tech.	30	60	40	60	40	30
Trinh, Lucy	Financial Aid Tech.	8	5	5	5		
Vuong, Ha M.	Financial Aid Advisor	20	10	15	20	15	10
Average		**13.4**	**17.6**	**12.8**	**23.3**	**17.3**	**15.4**

Conclusion: Findings go forward to Schedule 1B.

***EFW Worklaod Multiplier (Default) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Sch e 3
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average PHR's

Purpose: To list PHR's for each year and calculate an average for Financial Aid Office Staff.
Source: PHR Calculation Schedules.
Findings:

Staff	Title	06-07	Code
Baldwin, Daniel	Financial Aid Advisor	29.92	A
De Los Reyes,Amber	Financial Aid Tech.	29.92	A
Fitzgerald, Katy	Financial Aid Advisor	29.92	A
Franklin, Marta	Financial Aid Advisor	29.92	A
Galang, Roehl	Financial Aid Advisor	29.92	A
Kirkland, Rhonda	Interim Financial Aid Advisor	29.92	A
Lopez, Maria	Student Services Tech.	26.83	A
Nguyen, Ngolien	Financial Aid Tech.	29.92	A
Pelayo, Elizabeth	Financial Aid Outreach Spec.	29.92	A
Rancap, Marie	Student Services Tech.	26.83	A
Trinh, Lucy	Financial Aid Tech.	29.92	A
Vuong, Ha M.	Financial Aid Advisor	35.52	
Average		**29.87**	

A: Used 05-06 PHR's since 06-07 PHR's were not provided.

Conclusion: Findings go forward to EFCW-2

Schedule 4
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: Schedule 4A and chancellor's website.
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	65,956	63,855	62,195	62,522	66,334	56,612	54,966	53,871	59,400
EFC 2	1.8-1	2.	Paid Enrollment fees	-								
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	-								
EFC 4	1.8-2	1.	Delinquencies collections	-								
EFC 5	1.8-2	2.	Refunds	-								
EFW 6	1.8-3	1.	Waivers Requested	X	*5732	*4829	5,519	6,448	7,205	8,110	8,113	6,452
EFW 7	1.8-3	2.	Waivers Approved	X	5,732	4,829	4,171	4,704	5,367	5,647	6,308	6,452
EFW 8	1.8-3 (1-2)		Waivers Denied	X			1,348	1,744	1,838	2,463	1,805	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***Used the number of Approved Waivers, (these numbers came from the Chancellor's website, as reported by the district)**

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Number of Enrolled Students
98-99 through 06-07

Purpose: To calculate the number of Enrolled students
Source: Chancellors report.
Findings:

Year	98-99		99-00		00-01		01-02		02-03		03-04		04-05		05-06		06-07	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	MC	WV
Summer	5,021	6,149	4,900	13,980	4,753	13,652	4,212	13,806	5,643	13,749	4,656	12,337	4,731	12,085	4,502	11,461	5,010	5,880
Fall	10,940	14,729	6,089	12,499	5,682	12,000	5,479	12,462	6,431	13,021	3,922	11,120	4,457	10,627	5,204	10,952	10,912	12,057
Spring	12,969	16,148	11,808	14,579	11,507	14,601	11,817	14,746	12,665	14,825	11,732	12,845	10,514	12,552	9,790	11,962	12,273	13,268
Total	28,930	37,026	22,797	41,058	21,942	40,253	21,508	41,014	24,739	41,595	20,310	36,302	19,702	35,264	19,496	34,375	28,195	31,205
Dist. Total	**65,956**		**63,855**		**62,195**		**62,522**		**66,334**		**56,612**		**54,966**		**53,871**		**59,400**	

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission
For 2006 Summer Term

Data Current As Of December 28, 2007 01:50:37

Total Headcount	5,010

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission For 2006 Fall Term

Data Current As Of December 28, 2007 01:50:28

Total Headcount	10,912

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission
For 2007 Spring Semester

Data Current As Of December 28, 2007 01:50:13

Total Headcount	12,273

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley For 2006 Summer Term

Data Current As Of December 28, 2007 01:50:52

Total Headcount	5,880

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2006 Fall Term

Data Current As Of December 28, 2007 01:51:00

Total Headcount	12,057

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2007 Spring Semester

Data Current As Of December 28, 2007 01:51:16

Total Headcount	13,268

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Elinor Belham — Employee Name

Student Services Acct Tech — Exact Position Title

Mission College (ABR) 408-855-5026 — College/Department/Location — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 290 hrs | 220 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elinor Belham Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMC District

Maritza Cantarero — Financial Aid Director
Employee Name — Exact Position Title

West Valley College — 741-2611 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities: [SAFERS] FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	18	18	15	12	12	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	10	10	85	85	65	65	65	60	60
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	240	240	120	120	60	60	60	60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	32	40	40	40	90	30	50	50
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maritza Cantarero Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College

Amalia Bibat Dacanay — Employee Name

Senior Student Services Tech. — Exact Position Title

Admission & Records — College/Department/Location

885-8911 — Telephone #

12mo/11mo/10mo/hrly — ~~Work~~ year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	624	624	840	840	840	632	632	632	632
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA DE LOS REYES — STUDENT RECORDS ADVISOR
Employee Name — Exact Position Title

ADMISSIONS & RECORDS (MC) — (408) 855-5020 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	110	110	110	300	300	110	110	110	110
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wvm ccd

Cynthia Estrada — Employee Name

Student Services Account Technician — Exact Position Title

West Valley College — College/Department/Location

(408) 741-2654 — Telephone #

12mo/11mo/10mo/hrly Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	N/A	N/A	40	40	40	40	40	40	40
* Enrollment Waiver Process:	N/A	N/A	[illegible] N/A	20	20	20	20	20	20
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Marta Franklin — Financial Aid Advisor
Employee Name — Exact Position Title

WVC Financial Aid — 2495 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: — — — — — — — — —

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: 0 0 24 8 8 8 8 8 8

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV Mesa Community

Jane Laudermilch — Student Service Tech
Employee Name — Exact Position Title

WVA & R. — 2477 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS: Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Laudermilch Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission Community College

Diemanh Le — Employee Name

Student Services Acctd Tech — Exact Position Title

Mission College/A+R — College/Department/Location

408-855-5027 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
A. Enrollment Collection Process:	~~220~~ HRS	110 HRS	220 HRS	220 HRS	110 HRS	110 HRS	110 HRS	110 HRS	110 HRS
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley - Mission Community College

Paulette Lino — Employee Name

A & R Supervisor — Exact Position Title

Mission College - A & R — College/Department/Location

(408) 855-5021 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 210 210 420 420 210 210 210 210 210

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission

Al Lopez — Student Service Acct Tech II
Employee Name — Exact Position Title

WVC / cashier / A&R — 741-2651 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:	30	30	30	30	30	30	30	30	30
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:	30	30	30	30	30	30	30	30	30
* . Enrollment Waiver Process:	20	20	20	20	20	20	20	20	20

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

—	—	—	—	—	—	—	—	—

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

—	—	—	—	—	—	—	—	—

TOTALS:

—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Al Lopez — Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY - MISSION

MELISSA MACREYNOLDS — Employee Name

SYSTEMS ANALYST — Exact Position Title

INFORMATION SYSTEMS — College/Department/Location

408-741-4069 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:						40	20	20	
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

		40	80	—	40	40	120	40

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:		40	80		80	60	140	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melissa MacReynolds — Date 6/11/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Mike McDonnell — Employee Name

Senior Systems Analyst — Exact Position Title

Information Systems — College/Department/Location

408 741 2675 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	80	8	8	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	4	4	4	20	8	8	8	8	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael McDonnell Date 6-8-07

If you have any questions, please contact Mike McDonnell, at 408 741-2675

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

LINH NGUYEN — Employee Name

Systems Analyst — Exact Position Title

Information Systems — College/Department/Location

741-2678 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	80	80	16
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	250	250	256
TOTALS:	—	—	—	—	—	—	330	330	272

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh P. Nguyen — Date 06/08/07

If you have any questions, please contact LINH NGUYEN, at 741-2678

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How much time each year Training, writing procedures etc

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Barbara Ogilvie — Employee Name

Supervisor A/R II — Exact Position Title

WVC/A+R/A+R — College/Department/Location

408-741-4630 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	Ø	18	18	18	18	22	22	22	22
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	Ø	65	85	85	65	65	65	65	65
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	48	48	48	48	48	56	56	56
TOTALS:	Ø	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College

Elizabeth T. Pelayo — Financial Aid Outreach Specialist
Employee Name — Exact Position Title

WVC / Financial Aid / — 741-2660 — (12mo/11mo/10mo/hrly)
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:								24	24
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV-Mission

Elizabeth Ramirez — Employee Name

Student Services Tech — Exact Position Title

WV A&R Saratoga — College/Department/Location

741-2536 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ~~40~~ 150 40 150 40 150 40 150 40 150 40 ~~40~~ 150 40 150 40 150 40 150

Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ERamirez — Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College District

Phyllis M. Riggs — Employee Name

Student Servs Tech-Cashier — Exact Position Title

Admissions/Mission College — College/Department/Location

8865009 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60 4 60

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

8 32 8 32 8 32 8 32 8 32 8 32 8 32 8 32 8 32

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK.

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission CCD

Thelma Rodriguez — Employee Name

Systems Analyst — Exact Position Title

IS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process:				40	80			40	80
B. Enrollment Waiver Process:									

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

			10	160	10	10	10	180	

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

TOTALS:			50	240	10	10	50	260	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Thelma Rodriguez Date 6/8/07

If you have any questions, please contact _____, at _____

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ON-LINE REGISTRATION AND CREDIT CARD PROCESSING VIA THE WEB

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

HENRY SAWYER — Senior System Analyst
Employee Name — Exact Position Title

clnfo. Systems — 2677 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16		8	2	2		2
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.			16	16	16	12	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:			32	16	24	12	12	10	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Henry Sawyer — Date 6.8.07

If you have any questions, please contact _____, at _____

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Billing tables for new system

Revised May 2007

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley + Mission College Dist

Kelvin Tran — Employee Name

Student Services Technic... — Exact Position Title

Mission College - A+R — College/Department/Location

408-855-5172 — Telephone #

~~12mo~~/11mo/10mo/~~hrly~~ — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	~~99-0~~	00-1	01-2	02-3	~~03-4~~	~~04-5~~	~~05-6~~	~~06-7~~

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 110 ___ ___ ___ 360 110 110 110

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Com District

THUY TRAN
Employee Name

Student Services Acct Tech
Exact Position Title

WV / Adm / West Valley
College/Department/Location

Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/6/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Lucy Trinh — Financial Aid Technician
Employee Name — Exact Position Title

WVC / FA / 2443
College/Department/Location — Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: — — — — — — — — —

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: — — — — — — — — —

B. Enrollment Waiver Process: 0 0 1-2 1-2 1-2 1-2 1-2 1-2 1-2 hrs.

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

— — — — — — — — —

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

— — — — — — — — —

TOTALS: — — — — — — — — —

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Comm district

TU-LAN TRINH — Student Records Advisor
Employee Name — Exact Position Title

Records — (408)741-2537 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Tu Lan Trinh Date 6/07/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WKMCCD

Nitha I. Vasquez. — Employee Name

Student Services Acct. Technician — Exact Position Title

Mission College - A&R (408) 855-8028 — College/Department/Location / Telephone #

(12mo/11mo/10mo/hrly) — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 110 HRS 220 HRS 220 HRS 110 HRS 110 HRS 110 HRS 110 HRS 110 HRS

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha I. Vasquez — Date 6-11-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College / Mission College AER
District / Department/Location

Elinor Belham
Employee Name

Student Services Acct Tech
Exact Position Title

408-855-5026
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 (99-0) (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10 min					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Belham Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY MISSION COMM COLL DIST
District

ADMISSIONS & RECORDS
Department/Location

DIANE BRIEN
Employee Name

STUDENT SERVICES TECH.
Exact Position Title

408-741-2417
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	—					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	—					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Diane Brien Date 06/06/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College
District

Admissions + Records
Department/Location

Arabia Bibat-Dasalla
Employee Name

Senior Student Services Tech.
Exact Position Title

855-5011
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	8					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	10					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY-MISSION
District

ADMISSIONS & RECORDS (MISSION COLL.)
Department/Location

MELISSA DE LOS REYES
Employee Name

STUDENT RECORDS ADVISOR
Exact Position Title

(408) 855-5020
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15.0					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15.0					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10.0					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	7.0					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7.0					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7.0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- MISSION (WVMCCD)
District

Cashiers / WVC
Department/Location

Cynthia Estrada
Employee Name

Student Services Account Technician
Exact Position Title

408) 741-2654
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-9 99-0 (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	7					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community — District

ADMISSIONS + Records — Department/Location

JANE LAUTERMILCH — Employee Name

Student Services Tech — Exact Position Title

408 741-2477 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-9) (99-0) (00-1) (01-2) (02-3) (03-4) (04-5) (05-6) (06-7)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	6					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	6					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A.					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3 MIN ~~N/A~~					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Lautermilch Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission Community College A&R - Mission College
District / Department/Location

Diemanh Ho
Employee Name

Student Services Account Tech
Exact Position Title

408-855-5027
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

A&R / Mission College
Department/Location

Paulette Lino
Employee Name

A&R Supervisor
Exact Position Title

(408) 855-5021
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	15					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	15					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	20					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission — District

Cashier / W.U.C — Department/Location

Al Lopez — Employee Name

Student Service Account Tech — Exact Position Title

741-2651 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: (98-9) 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	5					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	6					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	6					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	6					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Al Lopez — Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Status of Tasks

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Admission & Records / WVC
Department/Location

Barbara Ogilvie
Employee Name

Supervisor A/R II
Exact Position Title

408-741-4630 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record "1" which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.						
Code 12 Calculating the enrollment fee, collect the "2" payment or receivable, update student account/record, and print out receipt/course list/other report.						
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.						
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.						
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.) "4"						
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15 min. See back of page					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Barbara Ugiliore

10% of Student's who receive BOGG waivers have problems receiving their BOGG, Because before it was implemented the student drops some or all classes. When this happens it negates the Bogg from completing In order for this process to be completed I must do research to find out what semesters should be rebilled and then switch screens & remove the "drops" from those semesters. Once the drops are removed then re-bill the student for those semesters. The next step would be to re-enter the drops into the student records. Once this is done if the student has not yet paid their fees they can do so at that time, if the student has paid... an email must be sent to finance informing them to refund the student. Each student who must be rebilled in this fashion takes on average 15 minutes and can only be corrected by myself & the Director of Admissions & Record

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WV- Mission
District

Records WVC
Department/Location

Elizabeth Ramirez
Employee Name

Student Services Technician
Exact Position Title

408 741-2536
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	35					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Ramirez Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-MISSION
District

Admissions - MISSION college
Department/Location

PHYLLIS M. Riggs
Employee Name

Student Serv Tech - Cashier
Exact Position Title

(408) 855-5009
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	20 min					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	5					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	20					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	10					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20 min					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	20 min					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley + Mission College District
District

Admissions + Records (Mission Coll
Department/Location

Kelvin Tran
Employee Name

Student Services Technician
Exact Position Title

408 - 855 - 5127
Telephone #

~~12mo~~/11mo/10mo/~~hrly~~ (circle)
Work year length(circle)

Fiscal Year: 98-9 ~~99-0~~ 00-1 01-2 02-3 ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (*telephone contact, written notices, collection agencies, small claims court, etc.*)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/2007

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm District — District
Cashier / West Valley — Department/Location
THUY TRAN — Employee Name
STUDENT SERVICES ACCT Tech — Exact Position Title
(408) 741-2662 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)
Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	5					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	9					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	7					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	3					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-6-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley Mission College Comm. District — District
Records — Department/Location

DI-LAN TRINH — Employee Name
Student Records Advisor — Exact Position Title

(408) 741-2537 — Telephone #
12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 98-9 99-0 00-1 01-2 02-3 03-4 04-5 05-6 06-7
Circle the years ~~for which you are responding~~.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	6					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	7					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	4					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	5					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	N/A					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	N/A					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06/07/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WUMCCA
District

Mission College A & R
Department/Location

Nitha T. Vasquez
Employee Name

Student Servs Acct. Tech.
Exact Position Title

(408) 855-5028
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-9~~ ~~99-0~~ ~~00-1~~ ~~01-2~~ ~~02-3~~ ~~03-4~~ ~~04-5~~ ~~05-6~~ ~~06-7~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	15					
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	10					
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	10					
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	15					
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	20					
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	15					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha T. Vasquez Date 6-11-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY / MISSION
District

FINANCIAL AID
Department/Location

DANIEL BALDWIN
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

741-2494
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	4			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	6			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	9			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	5			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	1			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Daniel Baldwin Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley/Mission College — District
F.A.O - MC — Department/Location
Amber Delos Reyes — Employee Name
Financial Aid Tech — Exact Position Title
(408) 855-5066 — Telephone #
12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes** per Student	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer. 30	15-45			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office. 60	60-more			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards. 18	15-20			
Code 24 Incomplete Applications: notifying the student of the *additional required information. Holding the student application in* a suspense file until all information is received. 50	40-60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents. 15	10-20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. 15	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 4-7-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD West Valley-Mission
District

Financial Aid/Mission
Department/Location

Katy Fitzgerald
Employee Name

Financial Aid Advisor
Exact Position Title

408-855-5070
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	15			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	15			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	20			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Katy Fitzgerald Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid
Department/Location

Marta Franklin
Employee Name

Financial Aid Advisor
Exact Position Title

x 2495
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	7			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	7			
* **Code 25** Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	30	x 48 weeks		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

District

FINANCIAL AID – MC
Department/Location

ROEHL GALANG
Employee Name

FINANCIAL AID ADVISOR
Exact Position Title

408-855-5071
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	15			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-7-07

If you have any questions, please contact ROEHL GALANG, at 408-855-5071

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD - WV
District

Financial Aid
Department/Location

Rhonda Kirkland
Employee Name

Interim Financial Aid Advisor
Exact Position Title

2601
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03
03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2.0			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10.0			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5.0			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	1 wk			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15.0			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	5 wk			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Rhonda Kirkland Date 6/6/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WEST VALLEY - WVMCCD
District

FINANCIAL AID
Department/Location

MARIA LOPEZ
Employee Name

STUDENT SERVICE TECHNICIAN
Exact Position Title

408-741-2039
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06) (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	10			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	10			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maria Lopez Date 6/6/07

If you have any questions, please contact _____, at _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION
District

FINANCIAL AID - MISSION
Department/Location

NGOCLIEN NGUYEN
Employee Name

FINANCIAL AID TECHNICIAN
Exact Position Title

408-855-5068 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one) 6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer. 30	20 - 45			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	20			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	20			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received. 30	20-45			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. 20 Providing student with proof of eligibility and filing documents.	15-25			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status. 15	10-20			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-07-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

West Valley-Mission College
District

Financial Aid / WVC
Department/Location

Elizabeth T. Pelayo
Employee Name

Financial Aid Outreach Specialist
Exact Position Title

741-2660
Telephone #

12mo/11mo/10mo/hrly ~~Work~~ year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	2			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	10			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	40			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	10			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

MISSION COLLEGE
District

FINANCIAL AID / MC
Department/Location

MARIE RANCAP
Employee Name

STUDENT SERVICE TECH.
Exact Position Title

(408) 855-5054
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ ~~05-06~~ ~~06-07~~

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes** (PER STUDENT)	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20-40 (30)			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	more than 60			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	40			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	60			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	40			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	30			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.6.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVMCCD
District

Financial Aid / WVC
Department/Location

Lucy Trinh
Employee Name

Financial Aid Technician
Exact Position Title

(408)741-2443
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06 06-07

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	8 min			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	5 min			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	5 min			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	5 min			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	N/A			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	N/A			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact (408) 741-2443, at WVC

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

WVmccd
District

Financial Aid Office / MC
Department/Location

HA M. VUONG
Employee Name

FA Advisor
Exact Position Title

855-5069
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) (00-01) (01-02) (02-03) (03-04) (04-05) (05-06) (06-07)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)		
		6	7	8
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	20			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	10			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	15			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	20			
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	15			
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	10			

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____, TO _____.

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Six Ten and Associates

MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATES

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: West Valley-Mission Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ADMINISTRATIVE ASSISTANT		$ 44.89
	AVERAGE DEAN	$ 65.66	$ 85.22
CANTERO, MARITZ	AVERAGE DIRECTOR		$ 62.21
	AVERAGE EXECUTIVE ASSISTANT		$ 51.74
	AVERAGE PRESIDENT		$ 108.90
	AVERAGE VICE PRESIDENT	$ 84.48	$ 85.52
ARTERBERRY, STAN	CHANCELLOR	$ 115.25	$ 133.15
ATONDO, ARLENE	DIRECTOR, ADMISSIONS	$ 41.95	$ 49.34
BAKER, CALVIN	COLLEGE FACILITIES MGR	$ 51.99	$ 60.06
BELHAM, ELINOR	STUDENT SERVICES ACCT TECH	$ 27.81	32.5
BOOTH, CHRISTINA	SR ADMIN ASSISTANT	$ 38.86	$ 44.89
BRODRICK, MALCOLM	DEAN OF ADMINISTRATIVE SERVICES TERM 5/31/06	$ 59.61	LEFT DISTRICT
CARACCIOLO, FRANCINE	EXEC. COORD.	$ 42.42	$ 51.26
CHAN, ROSALYN	COORDINATOR HEALTH SERVICES	$ 58.44	$ 73.73

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
CLEMENTI, LUCY	HUMAN RESOURCES SPECIALIST	$ 37.20	$ 42.98
CURRY, RHODA	EXEC. ASST TO BOARD OF TRUSTEES	$ 47.95	$ 55.40
DACANAY, BILL	SENIOR FINANCIAL ANALYST	$ 44.55	$ 51.47
DENNIN, JENNIFER	HR SPECIALIST	$ 36.17	$ 41.79
DUARTE, ANGELINA	VP STUDENT SERVICES (term 8/30/06	$ 77.41	LEFT DISTRICT
FISHBAUGH, DAVE	VICE PRESIDENT OF INSTRUCTION	$ 71.71	$ 85.52
FRANCIS, LINDA	DIRECTOR OF FISCAL SERVICES	$ 64.98	$ 75.08
GRAY, CHRISTINE	FINANCE TECH	$ 26.97	$ 25.77
HALL, RUSTY	COLLEGE FACILITIES MGR	$ 55.57	$ 63.98
JOHNSON, TRACY	ASSISTANT TO THE CHANCELLOR	$ 41.61	$ 48.07
JOLLIFF, MAXINE	FINANCE TECH	$ 26.97	$ 32.22
LE, DIEMANH	STUDENT SERVICES ACCT TECH	$ 28.09	30.98
LINO, PAULETTE	A&R SUPERVISOR	$ 33.86	41.87
LORMAN, LAURA	CHIEF OF POLICE	$ 60.53	$ 69.94
MAHRT, JACK	VICE CHANCELLOR, BUSINESS SERVICES	$ 91.67	$ 107.90
MATHIESSON, ANN	ADMIN IN CHARGE-GENERAL SERVICES	$ 48.59	$ 39.32
MENDOZA, GRACIANO	BUDGER MANAGER	$ 52.55	$ 60.71
MINICUCCI, PAT	ACCOUNTING MANAGER	$ 55.94	$ 64.63

MANDATE REIMBURSEMENT SERVICES

Name	Title	Fiscal Years: 05-06	06-07
MURPHY, KELLY	ADMIN. SPECIALIST, PERSONNEL	$ 37.20	$ 39.32
NEGASH, WORKU	DEAN, ADMINISTRATIVE SERVICES	$ 75.16	85.22
PERELLI, BECKY	COORDINATOR HEALTH SERVICES	$ 50.93	$ 64.25
ROBLES, HARRIET	MISSION PRESIDENT	$ 91.54	$ 108.90
SAMUELS, JOE	INTERIM COLLEGE PRESIDENT TERM 1/4/06	$ 73.73	LEFT DISTRICT
STEVENSON, JANET	FINANCIAL AID TECHNICIAN	$ 21.82	
STEWART, DONNA	FINANCIAL AID DIRECTOR (TERM 7/31/07	$ 51.27	60.35
VUONG (VAMP), HA	FINANCIAL AID ADVISOR	$ 32.21	35.52
WHITE, ROSE	HR SPECIALIST	$ 34.43	$ 40.79

PHR edule 1
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year 05-06

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Belham, Elinor	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Brien, Diane	Student Services Tech.	Class	52	3397	628	**26.83**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3546	655	**28.01**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3788	700	**29.92**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lautermilch, Jane	Student Services Tech.	Class	52	3397	628	**26.83**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lino, Paulette	A&R Supervisor	Supvr	16	4705	869	**37.16**
Lopez, Al	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3397	628	**26.83**
Riggs, Phyllis	Student Services Tech.	Class	52	3397	628	**26.83**
Tran Kelvin	Student Services Tech.	Class	52	3397	628	**26.83**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Trinh, Lucy	Student Records Advisor	Class	57	3788	700	**29.92**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3478	643	**27.47**

PHR edule 2
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year *05-06*

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Baldwin, Daniel	Financial Aid Advisor	Class	57	3788	700	**29.92**
De Los Reyes, Amber	Financial Aid Tech.	Class	57	3788	700	**29.92**
Fitzgerald, Katy	Financial Aid Advisor	Class	57	3788	700	**29.92**
Franklin, Marta	Financial Aid Advisor	Class	57	3788	700	**29.92**
Galang, Roehl	Financial Aid Advisor	Class	57	3788	700	**29.92**
Kirkland, Rhonda	Interim Financial Aid Advisor	Class	57	3788	700	**29.92**
Lopez, Maria	Student Services Tech.	Class	52	3397	628	**26.83**
Nguyen, Ngolien	Financial Aid Tech.	Class	57	3788	700	**29.92**
Pelayo, Elizabeth	Financial Outreach Specialist	Class	57	3788	700	**29.92**
Rancap, Maria	Student Services Tech.	Class	52	3397	628	**26.83**
Trinh, Lucy	Financial Aid Tech.	Class	57	3788	700	**29.92**
Vuong, Ha M.	Financial Aid Advisor	Class	57	3788	700	**29.92**

PHR edule 3
West Valley-Mission Community College District
308/95 Enrollment Collections and Waivers
Fiscal Year 2005-06

Purpose: To calculate the PHR's for staff involved in Enrollment Fee Collections and Waivers.
Source: Classified Salary Schedule and Supervisors Salary Schedule from West Valley-Mission district office and PHR Schedules 1 & 2.
Findings:

Staff	Title	Salary Sch.	Range	Salary	Benefits	PHR
Belham, Elinor	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Brien, Diane	Student Services Tech.	Class	52	3397	628	**26.83**
Cantarero, Maritza	Financial Aid Director	Supvr	32	6456	1193	**50.99**
Dasalla, Analiza	Sr. Student Service Tech.	Class	54	3546	655	**28.01**
De Los Reyes, Melissa	Student Records Advisor	Class	57	3788	700	**29.92**
Enrollment Office Staff	Collection of Enrollment Fees	PHR Sch. 1				**28.27**
Estrada, Cynthia	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Finacial Aid Office Staff	Waving Enrollment Fees	PHR Sch. 2				**29.41**
Franklin, Marta	Financial Aid Advisor	Class	57	3788	700	**29.92**
Lautermilch, Jane	Student Services Tech.	Class	52	3397	628	**26.83**
Le, Diemanh	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Lino, Paulette	A&R Supervisor	Supvr	16	4705	869	**37.16**
Lopez, Al	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
MacReynolds, Melissa	Systems Analyst	Class	70	5055	934	**39.93**
McDonnell, Mike	Sr. Systems Analyst	Class	71	5177	957	**40.89**
Nguyen, Linh	Systems Analyst	Class	70	5055	934	**39.93**
Ogilvie, Barbara	A&R Supervisor II	Supvr	20	5091	941	**40.21**
Petayo, Elizabeth	Financial Outreach Specialist	Class	57	3788	700	**29.92**
Ramirez, Elizabeth	Student Services Tech.	Class	52	3397	628	**26.83**
Riggs, Phyllis	Student Services Tech.	Class	52	3397	628	**26.83**
Rodriguez, Thelma	Systems Analyst	Class	70	5055	934	**39.93**
Sawyer, Henry	Sr. Systems Analyst	Class	71	5177	957	**40.89**
Tran Kelvin	Student Services Tech.	Class	52	3397	628	**26.83**
Tran, Thuy	Student Services Acct. Tech.	Class	53	3478	643	**27.47**
Trinh, Lucy	Student Records Advisor	Class	57	3788	700	**29.92**
Trinh, Tu-Lan	Student Records Advisor	Class	57	3788	700	**29.92**
Vasquez, Nitha	Student Services Acct. Tech.	Class	53	3478	643	**27.47**

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue, Saratoga, CA 95070

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Administrative Assistant	57	3,330	-	4,368	$20.49
Administrative Specialist – Instruction	62	3,709	-	4,873	$22.82
Administrative Specialist – Personnel	62	3,709	-	4,873	$22.82
Alternate Media / Instructional Support Assistant	59	3,478	-	4,560	$21.40
Career / Transfer Advisor	59	3,478	-	4,560	$21.40
Career Placement / Workforce Development Advisor	59	3,478	-	4,560	$21.40
Child Development Center Specialist I	43	2,481	-	3,233	$15.27
Child Development Center Specialist II	48	2,752	-	3,593	$16.94
Child Development Center Specialist III	53	3,062	-	3,996	$18.84
College Recruitment Specialist	57	3,330	-	4,368	$20.49
College Webmaster	80	5,533	-	7,346	$34.05
Community Access Coordinator / TV Producer	61	3,624	-	4,766	$22.30
Computer Graphic Specialist	58	3,397	-	4,463	$20.90
Computer Operations Specialist	63	3,788	-	4,990	$23.31
rdinator of Parking and Traffic	54	3,126	-	4,089	$19.24
Desktop Publishing Specialist	50	2,866	-	3,746	$17.64
Desktop Support Technician	67	4,137	-	5,454	$25.46
Duplicating Services Specialist	48	2,752	-	3,593	$16.94
Educational Testing Specialist	54	3,126	-	4,089	$19.24
EOPS / CARE Specialist	59	3,478	-	4,560	$21.40
EOPS Specialist	57	3,330	-	4,368	$20.49
Financial Aid Advisor	57	3,330	-	4,368	$20.49
Financial Aid Outreach Specialist (BFAP)	57	3,330	-	4,368	$20.49
Financial Aid Special Services Technician (BFAP)	52	2,994	-	3,909	$18.42
Financial Analyst	68	4,231	-	5,574	$26.04
Financial Assistant (Assignment: Accounts Payable)	53	3,062	-	3,996	$18.84
Financial Technician	57	3,330	-	4,368	$20.49
Financial Technician – Payroll	57	3,330	-	4,368	$20.49
Grant Assistant – Foster & Kinship Care	57	3,330	-	4,368	$20.49
Graphic Designer	61	3,624	-	4,766	$22.30
HelpDesk / Computer Operations Specialist	70	4,421	-	5,838	$27.21
Instructional Assistant – Adaptive Physical Education	53	3,062	-	3,996	$18.84
Instructional Assistant – Business	53	3,062	-	3,996	$18.84
Instructional Assistant – Child Development	53	3,062	-	3,996	$18.84
Instructional Assistant – Court Reporting	53	3,062	-	3,996	$18.84
uctional Assistant – DSPS	53	3,062	-	3,996	$18.84
Instructional Assistant – Foreign Language	53	3,062	-	3,996	$18.84
Instructional Assistant – Music	53	3,062	-	3,996	$18.84

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Instructional Laboratory Technician – Art	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Business	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Computer Science	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Foreign Language & ESL	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – LATC	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Mathematics	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Nursing	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Printing	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Science	54	3,126	-	4,089	$19.24
Instructional Laboratory Technician – Theatre Arts Costumer	54	3,126	-	4,089	$19.24
Instructional Systems Computer Resources Specialist	66	4,049	-	5,333	$24.92
Instructional Technology Producer / Director	66	4,049	-	5,333	$24.92
Internal Auditor	76	5,055	-	6,692	$31.11
International Student Advisor	57	3,330	-	4,368	$20.49
Library / Media Technician	54	3,126	-	4,089	$19.24
Microcomputer Technical Specialist	63	3,788	-	4,990	$23.31
Network / Communication Specialist	72	4,624	-	6,100	$28.46
C e Assistant	50	2,866	-	3,746	$17.64
Office Coordinator	54	3,126	-	4,089	$19.24
Offset Printer	51	2,933	-	3,834	$18.05
Performing Arts Technical Director	64	3,874	-	5,099	$23.84
Principal Accountant	76	5,055	-	6,692	$31.11
Program Assistant	54	3,126	-	4,089	$19.24
Program Coordinator	57	3,330	-	4,368	$20.49
Program Specialist	57	3,330	-	4,368	$20.49
Program Specialist – DSPS	59	3,478	-	4,560	$21.40
Program Specialist – Hospitality Management	57	3,330	-	4,368	$20.49
Program Specialist – Work Exp. / Work-Based Learning Program	57	3,330	-	4,368	$20.49
Programmer	65	3,961	-	5,211	$24.38
Programmer Analyst	70	4,421	-	5,838	$27.21
Receptionist	44	2,530	-	3,301	$15.57
Registered Nurse	81	5,664	-	7,513	$34.86
Research Analyst	75	4,947	-	6,548	$30.44
Research Technician	61	3,624	-	4,766	$22.30
Senior Administrative Assistant	59	3,478	-	4,560	$21.40
Senior Buyer	62	3,709	-	4,873	$22.82
Senior Desktop Support Technician	72	4,624	-	6,100	$28.46
Senior Office Coordinator	57	3,330	-	4,368	$20.49
S or Programmer / Analyst	71	4,525	-	5,973	$27.85
Senior Student Services Technician	54	3,126	-	4,089	$19.24
Senior Telecommunications Systems Administrator	72	4,624	-	6,100	$28.46
Server Systems Administrator (WINDOWS / NT)	81	5,664	-	7,513	$34.86

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

2005 – 2006 Classified Salary Schedule
OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

Job Classification	Range	Salary			Hourly Rate
Student Records Advisor	57	3,330	-	4,368	$20.49
Student Services Account Technician	53	3,062	-	3,996	$18.84
Student Services Technician	52	2,994	-	3,909	$18.42
Telecommunications / Audiovisual Maintenance Specialist	70	4,421	-	5,838	$27.21
Telephone Operator	41	2,386	-	3,102	$14.68
Telephone Systems Administrator	65	3,961	-	5,211	$24.38
Title V Student Services Coordinator	72	4,624	-	6,100	$28.46
Tram Driver / Mobility Assistant	44	2,530	-	3,301	$15.57
Transfer / Career Advisor	57	3,330	-	4,368	$20.49
TV / AV Operations Coordinator	66	4,421	-	5,838	$27.21
Web Administrator	80	5,533	-	7,346	$34.05
Workforce Program Advisor	57	3,330	-	4,368	$20.49

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT

2005 – 2006 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	RATE	A	B	C	D	E	F*	G*
21	$9.92	1,612	1,666	1,749	1,806	1,873	1,968	2,065
22	$10.10	1,642	1,702	1,770	1,836	1,913	2,008	2,109
23	$10.25	1,666	1,734	1,806	1,873	1,950	2,047	2,149
24	$10.47	1,702	1,770	1,836	1,913	1,991	2,091	2,195
25	$10.67	1,734	1,806	1,873	1,950	2,028	2,129	2,236
26	$10.89	1,770	1,836	1,913	1,991	2,071	2,174	2,282
27	$11.11	1,806	1,873	1,950	2,028	2,105	2,210	2,320
28	$11.30	1,836	1,913	1,991	2,071	2,149	2,257	2,370
29	$11.53	1,873	1,950	2,028	2,105	2,194	2,304	2,419
30	$11.77	1,913	1,991	2,071	2,149	2,245	2,358	2,476
31	$12.00	1,950	2,028	2,105	2,194	2,287	2,401	2,522
32	$12.25	1,991	2,071	2,149	2,245	2,331	2,447	2,569
33	$12.48	2,028	2,105	2,194	2,287	2,386	2,504	2,629
34	$12.74	2,071	2,149	2,245	2,331	2,433	2,554	2,683
35	$12.95	2,105	2,194	2,287	2,386	2,481	2,605	2,735
36	$13.22	2,149	2,247	2,331	2,433	2,530	2,656	2,789
37	$13.50	2,194	2,287	2,386	2,481	2,583	2,712	2,848
38	$13.82	2,245	2,331	2,433	2,530	2,635	2,766	2,906
39	$14.07	2,287	2,386	2,481	2,583	2,693	2,827	2,968
40	$14.34	2,331	2,433	2,530	2,635	2,752	2,890	3,035
41	$14.68	2,386	2,481	2,583	2,693	2,813	2,954	3,102
42	$14.97	2,433	2,530	2,635	2,752	2,866	3,011	3,161
43	$15.27	2,481	2,583	2,693	2,813	2,933	3,079	3,233
44	$15.57	2,530	2,635	2,752	2,866	2,994	3,144	3,301
45	$15.90	2,583	2,692	2,813	2,933	3,062	3,216	3,375
46	$16.22	2,635	2,752	2,865	2,994	3,126	3,282	3,447
47	$16.57	2,693	2,813	2,933	3,062	3,190	3,350	3,516
48	$16.94	2,752	2,865	2,994	3,126	3,259	3,423	3,593
49	$17.31	2,813	2,933	3,062	3,190	3,330	3,496	3,671
50	$17.64	2,866	2,994	3,126	3,259	3,397	3,567	3,746
51	$18.05	2,933	3,062	3,190	3,330	3,478	3,651	3,834
52	$18.42	2,994	3,126	3,259	3,397	3,546	3,723	3,909
53	$18.84	3,062	3,190	3,330	3,478	3,624	3,804	3,996
54	$19.24	3,126	3,259	3,397	3,546	3,709	3,895	4,089
55	$19.63	3,190	3,330	3,478	3,624	3,788	3,978	4,178
56	$20.06	3,259	3,397	3,546	3,709	3,874	4,067	4,271
57	$20.49	3,330	3,478	3,624	3,788	3,961	4,160	4,368
58	$20.90	3,397	3,546	3,709	3,874	4,049	4,250	4,463
59	$21.40	3,478	3,624	3,788	3,961	4,137	4,343	4,560
60	$21.82	3,546	3,709	3,874	4,049	4,231	4,443	4,664

*In order to be eligible for Steps F and G, the employee must have completed five years of services, after July 1, 1998, at the previous step.

Adopted: December 7, 2006
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY – MISSION COMMUNITY COLLEGE DISTRICT

2005 – 2006 OFFICE, TECHNICAL & BUSINESS SERVICES UNIT

RANGE	RATE	A	B	C	D	E	F*	G*
61	$22.30	3,624	3,788	3,961	4,137	4,323	4,540	4,766
62	$22.82	3,709	3,874	4,049	4,231	4,421	4,642	4,873
63	$23.31	3,788	3,961	4,137	4,323	4,525	4,751	4,990
64	$23.84	3,874	4,049	4,231	4,421	4,624	4,856	5,099
65	$24.38	3,961	4,137	4,323	4,525	4,727	4,963	5,211
66	$24.92	4,049	4,231	4,421	4,624	4,837	5,078	5,333
67	$25.46	4,137	4,323	4,525	4,727	4,947	5,194	5,454
68	$26.04	4,231	4,421	4,624	4,834	5,055	5,309	5,574
69	$26.60	4,323	4,525	4,727	4,947	5,179	5,438	5,710
70	$27.21	4,421	4,624	4,834	5,055	5,294	5,559	5,838
71	$27.85	4,525	4,727	4,947	5,177	5,418	5,689	5,973
72	$28.46	4,624	4,834	5,055	5,294	5,533	5,808	6,100
73	$29.09	4,727	4,947	5,177	5,418	5,664	5,948	6,243
74	$29.77	4,837	5,055	5,294	5,532	5,801	6,091	6,395
75	$30.44	4,947	5,179	5,418	5,664	5,940	6,237	6,548
76	$31.11	5,055	5,294	5,533	5,801	6,070	6,374	6,692
77	$31.87	5,179	5,418	5,664	5,940	6,211	6,521	6,847
78	$32.58	5,294	5,533	5,801	6,070	6,355	6,673	7,006
79	$33.34	5,418	5,664	5,940	6,211	6,512	6,837	7,179
80	$34.05	5,533	5,801	6,070	6,355	6,661	6,996	7,346
81	$34.86	5,664	5,940	6,211	6,512	6,814	7,155	7,513
82	$35.70	5,801	6,070	6,355	6,661	6,988	7,337	7,703
83	$36.55	5,940	6,211	6,512	6,814	7,144	7,500	7,877
84	$37.35	6,070	6,355	6,661	6,988	7,307	7,671	8,055
85	$38.22	6,211	6,512	6,814	7,144	7,480	7,855	8,248
86	$39.11	6,355	6,661	6,988	7,307	7,664	8,048	8,449
87	$40.07	6,512	6,814	7,144	7,480	7,845	8,236	8,648
88	$40.99	6,661	6,988	7,307	7,664	8,031	8,433	8,855
89	$41.93	6,814	7,144	7,480	7,845	8,212	8,623	9,054
90	$43.00	6,988	7,307	7,664	8,031	8,410	8,831	9,272

*In order to be eligible for Steps F and G, the employee must have completed five years of services, after July 1, 1998, at the previous step.

Adopted: April 19, 2007
Effective: July 1, 2005
1% + 4% on schedule (5.04%)

Human Resources Department
WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT
14000 Fruitvale Avenue
Saratoga, CA 95070

2005-2006 SUPERVISORS SALARY SCHEDULE
(40-HOUR WEEK)

Job Classification – Group A	Range	Salary	Hourly
Admissions and Records Director	24	4,765 - 6,384	$ 27.50
Admissions and Records Supervisor I	16	4,066 - 5,449	$ 23.46
Admissions and Records Supervisor II	20	4,402 - 5,901	$ 25.38
Custodial Supervisor	10	3,611 - 4,834	$ 20.84
Director, Student Activities and Campus Center	24	4,765 - 6,384	$ 27.50
District Custodial Manager	31	5,476 - 7,335	$ 31.58
District Grounds Manager	31	5,476 - 7,335	$ 31.58
District Warehouse Services Supervisor	13	3,835 - 5,132	$ 22.11
Finance Supervisor – Payroll	19	4,316 - 5,784	$ 24.91
Financial Aid Director	32	5,583 - 7,481	$ 32.23
Financial Aid Supervisor II	20	4,402 - 5,901	$ 25.38
International Student Services Coordinator	12	3,759 - 5,032	$ 21.69
Network / Communications Supervisor	40	6,542 - 8,769	$ 37.72
Printing Services Manager	21	4,487 - 6,017	$ 25.90
Public Safety Supervisor	34	5,810 - 7,782	$ 33.53
Senior Applications and Database Administrator	42	6,803 - 9,122	$ 39.27
Senior Network Architect and IS Security Analyst	44	7,081 - 9,489	$ 40.85
Senior Systems Analyst	42	6,803 - 9,122	$ 39.27
Student Records Supervisor	13	3,835 - 5,132	$ 22.11
Student Recruitment Supervisor	16	4,066 - 5,449	$ 23.46
Student Services Office Supervisor	18	4,230 - 5,668	$ 24.41
Systems Analyst	31	5,476 - 7,335	$ 31.58
UNIX Server Administrator	38	6,286 - 8,425	$ 36.28

2005-2006 SUPERVISORS UNIT

Range	Hourly	A	B	C	D	E	F*	G*
10	$20.84	3,611	3,791	3,980	4,180	4,386	4,604	4,834
11	$21.26	3,686	3,868	4,058	4,260	4,474	4,697	4,932
12	$21.69	3,759	3,940	4,141	4,350	4,564	4,793	5,032
13	$22.11	3,835	4,022	4,221	4,433	4,656	4,889	5,132
14	$22.56	3,909	4,104	4,307	4,523	4,749	4,987	5,237
15	$23.00	3,988	4,187	4,391	4,612	4,844	5,088	5,341
16	$23.46	4,066	4,265	4,480	4,705	4,944	5,191	5,449
17	$23.95	4,152	4,356	4,574	4,798	5,041	5,292	5,557
18	$24.41	4,230	4,443	4,661	4,894	5,142	5,399	5,668
19	$24.91	4,316	4,532	4,755	4,988	5,247	5,508	5,784
20	$25.38	4,402	4,623	4,851	5,091	5,352	5,619	5,901
21	$25.90	4,487	4,712	4,949	5,194	5,457	5,730	6,017
22	$26.45	4,582	4,806	5,046	5,296	5,566	5,843	6,135
23	$26.95	4,673	4,903	5,149	5,399	5,680	5,964	6,261
24	$27.50	4,765	4,999	5,252	5,507	5,792	6,082	6,384
25	$28.05	4,862	5,095	5,359	5,620	5,906	6,201	6,511
26	$28.61	4,959	5,198	5,465	5,728	6,025	6,327	6,644
27	$29.19	5,058	5,301	5,573	5,845	6,145	6,451	6,774
28	$29.75	5,159	5,406	5,686	5,960	6,268	6,583	6,913
29	$30.77	5,335	5,598	5,881	6,168	6,486	6,811	7,153
30	$30.96	5,366	5,627	5,914	6,209	6,521	6,848	7,192
31	$31.58	5,476	5,745	6,036	6,327	6,652	6,984	7,335
32	$32.23	5,583	5,855	6,153	6,456	6,786	7,125	7,481
33	$32.85	5,693	5,974	6,274	6,587	6,921	7,268	7,631
34	$33.53	5,810	6,091	6,401	6,716	7,060	7,412	7,782
35	$34.17	5,925	6,215	6,530	6,850	7,200	7,562	7,940
36	$34.87	6,046	6,337	6,660	6,987	7,346	7,716	8,102
37	$35.57	6,167	6,463	6,796	7,126	7,496	7,872	8,266
38	$36.28	6,286	6,594	6,932	7,271	7,644	8,024	8,425
39	$37.00	6,415	6,724	7,065	7,416	7,793	8,183	8,591
40	$37.72	6,542	6,859	7,210	7,566	7,953	8,351	8,769
41	$38.49	6,671	6,995	7,352	7,716	8,112	8,517	8,942
42	$39.27	6,803	7,133	7,501	7,871	8,273	8,688	9,122
43	$40.05	6,941	7,278	7,650	8,027	8,438	8,859	9,302
44	$40.85	7,081	7,422	7,803	8,188	8,605	9,038	9,489
45	$41.66	7,222	7,572	7,960	8,352	8,779	9,219	9,677
46	$42.48	7,368	7,728	8,120	8,521	8,955	9,401	9,872
47	$43.35	7,514	7,881	8,282	8,690	9,133	9,590	10,071
48	$44.22	7,665	8,038	8,447	8,863	9,316	9,783	10,272
49	$45.09	7,818	8,199	8,617	9,042	9,504	9,978	10,478
50	$46.00	7,975	8,363	8,791	9,223	9,693	10,176	10,687
51	$37.00	8,135	8,530	8,968	9,405	9,886	10,381	10,901
52	$47.87	8,298	8,700	9,146	9,593	10,086	10,590	11,121
53	$48.81	8,463	8,874	9,330	9,786	10,288	10,803	11,342
54	$49.81	8,631	9,051	9,516	9,982	10,492	11,019	11,569
55	$50.78	8,803	9,233	9,705	10,180	10,704	11,238	11,801

NOTE: This salary schedule reflects agreed realignments designed to insure that the supervisors earn at least 10% more than the highest paid, regularly-assigned subordinate.

*In order to be eligible for steps F and G, the employee must have completed five years of service, after July 1, 1998, at the previous step.

Schedule 5
West Valley-Mission C[illegible]munity College District
308/95 Enrollment Fe[illegible]llection and Waivers
Fiscal Years: 1999-00 through 2006-2007
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers							
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 837,172	$ 693,467	$ 731,216	$ 877,216	$ 1,193,734	$ 1,996,553	2,083,575	1,853,186
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672	$ 37,064
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,602	For 00-01 through 06-07- unit fee						
p/E.C. 76300 (I) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34	$ 24.00
Total # of credits	Line 4A divided by unit fee		63,042	66,474	79,746	76,179	85,542	89,270	77,216
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236	$ 70,267
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672	$ 37,064
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,602							
1.8-4 5.	Credit Units Waived		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236	$ 70,267
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,345**	**$ 71,237**	**$ 75,115**	**$ 90,113**	**$ 93,198**	**$ 117,774**	**$ 122,908**	**$ 107,331**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 06-07 Fall and Winter $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: West Valley-Mission
COUNTY: Santa Clara

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$19,198,815	$18,333,138	$-345,300	$17,987,838
ENROLL FEE ADMIN (2%)	41,839	38,492	3,347	41,839
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	361,669	0	361,669	361,669
S.F.A.A.	527,876	485,646	42,230	527,876
E.O.P.S.	1,303,021	1,198,780	104,241	1,303,021
C.A.R.E.	151,663	139,530	12,133	151,663
D.S.P.S.	1,340,737	1,233,478	107,259	1,340,737
STATE HOSPITALS	303,778	279,475	24,303	303,778
CALWORKS	292,365	282,775	9,590	292,365
MATRICULATION (CREDIT)	1,108,932	1,020,218	88,714	1,108,932
MATRIC. (NONCREDIT)	23,608	21,720	1,888	23,608
FAC.& STAFF DIVERSITY	19,161	17,628	1,533	19,161
PART-TIME FAC. ALLO.	785,215	722,397	62,818	785,215
PART-TIME FAC. OFF. HRS	315,400	0	315,400	315,400
PART-TIME FAC. INS.	2,472	0	2,472	2,472
TELECOMMUNICATIONS	93,916	67,523	26,393	93,916
PLANT & INSTRUCTIONAL	191,129	175,838	15,291	191,129
SCHDL. MAINT. & REPAIR	191,146	175,855	15,291	191,146
TANF	56,662	52,129	4,533	56,662
ECON. DEVELOPMENT	2,587,156	1,617,130	556,081	2,173,211
NURSING EDUCATION	86,661	72,795	13,866	86,661
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	96,207	96,207	0	96,207
PRIOR YEAR CORRECTION	552,198	401,698	150,500	552,198
ONE TIME FUNDS				
TRANSITION PAYMENT	0	0	0	0
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	339,309	339,309	0	339,309
BASIC SKILLS -REAPPROP	374,954	374,954	0	374,954
CAR. TECH. TRAILER BIL	604,268	604,268	0	604,268
GEN. PUR. TRAILER BILL	1,182,164	1,182,164	0	1,182,164
INST. MATERIAL TRAILER	713,345	713,345	0	713,345
SCHLD.MAINT. TRAILER B	713,345	713,345	0	713,345
FACULTY STAFF DEV	75,936	75,936	0	75,936
TOTAL	$33,644,947	$30,445,773	$1,574,252	$32,020,025

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
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Schedule 5A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Ref	Source	Item	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 582.60	$ 586.60	$ 509.90	$ 509.90
	EFCW-1 B. 1. b.		$ 5,520.55	$ 7,259.75	$ 8,518.48	$ 5,962.96
	EFCW-1 B. 2. a.		$ 5,431.24	$ 5,514.24	$ 8,986.32	$ 13,234.26
	EFCW-1 B. 2. b.		$ 203,739.22	$ 228,975.00	$ 241,297.29	$ 196,251.87
	EFCW-1 B. 2. c.		$ 23,087.20	$ 34,352.52	$ 37,106.32	$ 37,345.90
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 238,360.81	$ 276,688.11	$ 296,418.31	$ 253,304.89
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 93,198.00	$ 117,774.00	$ 122,908.00	$ 107,331.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 145,162.81	$ 158,914.11	$ 173,510.31	$ 145,973.89
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 93,198.00**	**$ 117,774.00**	**$ 122,908.00**	**$ 107,331.00**

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Friday, December 21, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Mission College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of December 21, 2007 10:07:59

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	26	8,459
BOGW - Part A-2 based on SSI recipient status	36	6,637
BOGW - Part A-3 based on general assistance recipient status	1	78
BOGW - Part B based on income standards	2,214	677,309
BOGW - Part C based on financial need	924	276,560
Fee Waiver – Dependent (children) of Deceased Law Enforcement/Fire Suppression	1	78
Fee Waiver – Dependent of (children) deceased or disabled Veteran	12	4,272

total 3,214

Total Amount = $ 973,393

W. Valley 879,793

$1,853,186

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Head count Mission 3214
W Valley 3238
total WVM 6452

total WVM

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California Home

Friday, December 21, 2007

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

West Valley College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of December 21, 2007 10:08:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	25	6,037
BOGW - Part A-2 based on SSI recipient status	42	5,694
BOGW - Part B based on income standards	2,215	599,255
BOGW - Part C based on financial need	939	263,479
Fee Waiver – Dependent of (children) deceased or disabled Veteran	17	5,328

total 3,238

Total Amount = $ 879,793

Back to Top of Page

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SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

January 30, 2009

Claim File Copy

CERTIFIED MAIL #7006 3450 0000 3941 9007

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
West Valley-Mission Community College District CC 43180

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for West Valley-Mission Community College District's reimbursement claims listed below:

961/75	Collective Bargaining	2007-2008
1/84	Health Fee Elimination	2006-2007
1/84	Health Fee Elimination	2007-2008
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC43180

(02) Claimant Name: West Valley-Mission Community College District

County of Location: Santa Clara

Street Address or P.O. Box: 14000 Fruitvale Avenue

City: Saratoga | State: CA | Zip Code: 95070-5698

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 1,450,348
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 1,440,348
Due from State	(08)	(17) $ 1,440,348
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	885
(23) EFCW-1, (04)(A)(1)(b)(f)	64,644
(24) EFCW-1, (04)(A)(2)(a)(f)	813,810
(25) EFCW-1, (04)(B)(1)(a)(f)	510
(26) EFCW-1, (04)(B)(1)(b)(f)	5,963
(27) EFCW-1, (04)(B)(2)(a)(f)	13,234
(28) EFCW-1, (04)(B)(2)(b)(f)	196,252
(29) EFCW-1, (04)(B)(2)(c)(f)	37,346
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	466,875
(32) EFCW-1, (09)	41,839
(33) EFCW-1, (10)	107,331
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1-29-08

~~George Koziza~~ John E. Hendrickson — Type or Print Name

Chancellor — ~~Interim Vice Chancellor, Business Services~~ — Title

(38) Name of Contact Person for Claim: ...ten and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

) Cla

st Valley-Mission Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
Preparing district policies & procedures for § IV.A.	$ 884.62	$ -	$ -	$ -	$ -	$ 884.62
Staff training (One time per employee)	$ 64,643.51	$ -	$ -	$ -	$ -	$ 64,643.51
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
Calculating and collecting enrollment fees	$ 813,809.70	$ -	$ -	$ -	$ -	$ 813,809.70
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
Pre g district policies & procedures for §.	$ 509.90	$ -	$ -	$ -	$ -	$ 509.90
Staff training (One time per employee)	$ 5,962.96	$ -	$ -	$ -	$ -	$ 5,962.96
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
Adopting procedures, recording, and maintaining records	$ 13,234.26	$ -	$ -	$ -	$ -	$ 13,234.26
Waiving student fees	$ 196,251.87	$ -	$ -	$ -	$ -	$ 196,251.87
Reporting BOG fee waiver data to CCC	$ 37,345.90	$ -	$ -	$ -	$ -	$ 37,345.90
otal Direct Costs	$ 1,132,642.72	$ -	$ -	$ -	$ -	$ 1,132,642.72
ct Costs						
ndirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]					41.22%
otal Indirect Costs	[Line (06) x line (05)(a)]					$ 466,875.33
otal Direct and Indirect Costs	[Line (05)(f) + line (07)]					$ 1,599,518.05
eduction						
ss: Enrollment Fee Revenue offset						$ 41,839.00
s: Enrollment Fee Waiver offsets						$ 107,331.00
al (d Amount	[Line (08) - {Line (09) + Line (10)}]					$ 1,450,348.05

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Oglive, Barbara A&R Supervisor	$40.21	22.0	$ 884.62				
(05) Total [x] Subtotal [ ]			$ 884.62	$ -	$ -	$ -	$ -

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☒ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for enrollment fees collection								
Belham, Elinor	Student Services Account Tech	$32.50	110.0	$ 3,575.00				
Dasalla, Analiza Bibat	Senior Student Services Tech	$28.01	632.0	$ 17,702.32				
De Los Reyes, Melissa	Student Records Advisor	$29.92	110.0	$ 3,291.20				
Estrada, Cynthia	Student Services Account Tech	$27.47	40.0	$ 1,098.80				
Lautermilch, Jane	Student Services Account Tech	$26.83	8.0	$ 214.64				
Le, Diemanh	Student Services Account Tech	$30.98	110.0	$ 3,407.80				
Lino, Paulette	A&R Supervisor	$41.87	210.0	$ 8,792.70				
Lopez, Al	Student Services Account Tech	$27.47	30.0	$ 824.10				
Oglive, Barbara	A&R Supervisor	$40.21	65.0	$ 2,613.65				
Ramirez, Elizabeth	Student Services Account Tech	$26.83	40.0	$ 1,073.20				
Riggs, Phyllis	Student Services Account Tech	$26.83	460.0	$ 12,341.80				
Rodriguez, Thelma	Systems Analyst	$39.93	80.0	$ 3,194.40				
Sawyer, Henry	Senior Systems Analyst	$40.89	2.0	$ 81.78				
Tran, Kelvin	Student Services Account Tech	$26.83	110.0	$ 2,951.30				
Tran, Thuy	Student Services Account Tech	$27.47	8.0	$ 219.76				
Trinh, Tu-Lan	Student Records Advisor	$29.92	8.0	$ 239.36				
Vasquez, Nitha	Student Services Account Tech	$27.47	110.0	$ 3,021.70				
5) Total ☒ Subtotal ☐			Page 1 of 1	$ 64,643.51	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Office Staff Collecting Enrollment Fees	$29.15	10,593.0	$ 308,785.95				
Answering student's questions regarding enrollment fee collection Enrollment Office Staff Collecting Enrollment Fees	$29.15	8,316.0	$ 242,411.40				
Updating written and computer records for enrollment fee information Enrollment Office Staff Collecting Enrollment Fees	$29.15	9,009.0	$ 262,612.35				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 813,809.70	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Cantarero, Maritza Financial Aid Director	$50.99	10.0	$ 509.90				
(05) Total ☒ Subtotal ☐			$ 509.90	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☒ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Train district staff or attend training to implement procedures for waiver eligibility determination								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
Estrada, Cynthia	Student Services Account Tech	$27.47	20.0	$ 549.40				
Franklin, Marta	Financial Aid Advisor	$29.92	8.0	$ 239.36				
Lopez, Al	Student Services Account Tech	$27.47	20.0	$ 549.40				
McDonnell, Mike	Senior Systems Analyst	$40.89	4.0	$ 163.56				
Nguyen, Linh	Systems Analyst	$39.93	16.0	$ 638.88				
Pelayo, Elizabeth	Financial Aid Outreach Specialist	$29.92	24.0	$ 718.08				
Trin, Lucy	Financial Aid Technician	$29.92	1.5	$ 44.88				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 5,962.96	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Cantarero, Maritza	Financial Aid Director	$50.99	60.0	$ 3,059.40				
MacReynolds, Melissa	Systems Analyst	$39.93	40.0	$ 1,597.20				
McDonnell, Mike	Senior Systems Analyst	$40.89	24.0	$ 981.36				
Rodriguez, Thelma	Systems Analyst	$39.93	180.0	$ 7,187.40				
Sawyer, Henry	Senior Systems Analyst	$40.89	10.0	$ 408.90				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 13,234.26	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ *Calculating and Collecting Enrollment Fees*

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,440.9	$ 43,039.68				
Receiving waiver applications							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,892.6	$ 56,531.96				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,376.4	$ 41,113.07				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Waiving Enrollment Fees	$29.87	1,860.3	$ 55,567.16				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 196,251.87	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
West Valley-Mission Community College District

(02) Fiscal Year
2006-2007

Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers								
Cantarero, Maritza	Financial Aid Director	$50.99	50.0	$ 2,549.50				
Nguyen, Linh	Systems Analyst	$39.93	256.0	$ 10,222.08				
Oglive, Barbara	A&R Supervisor	$40.21	56.0	$ 2,251.76				
Riggs, Phyllis	Student Services Account Tech	$26.83	832.0	$ 22,322.56				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 37,345.90	$ -	$ -	$ -	$ -

New 04/06

West Valley-Mission Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
06-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	110.00	Belham, Elinor	Student Services Account Tech	$32.50	$3,575.00	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Belham, Elinor Total**			$3,575.00		
06-07	10.00	Cantarero, Maritza	Financial Aid Director	$50.99	$509.90	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
06-07	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	60.00	Cantarero, Maritza	Financial Aid Director	$50.99	$3,059.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining reco
06-07	50.00	Cantarero, Maritza	Financial Aid Director	$50.99	$2,549.50	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	180.00	**Cantarero, Maritza Total**			$9,178.20		
06-07	632.00	Dasalla, Analiza Bibat	Senior Student Services Tech	$28.01	$17,702.32	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	632.00	**Dasalla, Analiza Bibat Total**			$17,702.32		
06-07	110.00	De Los Reyes, Melissa	Student Records Advisor	$29.92	$3,291.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**De Los Reyes, Melissa Total**			$3,291.20		
06-07	10,593.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$308,785.95	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	8,316.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$242,411.40	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	9,009.00	Enrollment Office Staff	Collecting Enrollment Fees	$29.15	$262,612.35	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
	27,918.00	**Enrollment Office Staff Total**			$813,809.70		
06-07	40.00	Estrada, Cynthia	Student Services Account Tech	$27.47	$1,098.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	20.00	Estrada, Cynthia	Student Services Account Tech	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	60.00	**Estrada, Cynthia Total**			$1,648.20		
06-07	1,440.90	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$43,039.68	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	1,892.60	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$56,531.96	Receiving waiver applications	Waiving student fees
06-07	1,376.40	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$41,113.07	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	1,860.30	Financial Aid Office Staff	Waiving Enrollment Fees	$29.87	$55,567.16	Entering approved application information into district records; providing student award letter	Waiving student fees
	6,570.20	**Financial Aid Office Staff Total**			$196,251.87		
06-07	8.00	Franklin, Marta	Financial Aid Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	8.00	**Franklin, Marta Total**			$239.36		
06-07	8.00	Lautermilch, Jane	Student Services Account Tech	$26.83	$214.64	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Lautermilch, Jane Total**			$214.64		
06-07	110.00	Le, Diemanh	Student Services Account Tech	$30.98	$3,407.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Le, Diemanh Total**			$3,407.80		
06-07	210.00	Lino, Paulette	A&R Supervisor	$41.87	$8,792.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	210.00	**Lino, Paulette Total**			$8,792.70		
06-07	30.00	Lopez, Al	Student Services Account Tech	$27.47	$824.10	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	20.00	Lopez, Al	Student Services Account Tech	$27.47	$549.40	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	50.00	**Lopez, Al Total**			$1,373.50		
06-07	40.00	MacReynolds, Melissa	Systems Analyst	$39.93	$1,597.20	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	40.00	**MacReynolds, Melissa Total**			$1,597.20		
06-07	4.00	McDonnell, Mike	Senior Systems Analyst	$40.89	$163.56	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	24.00	McDonnell, Mike	Senior Systems Analyst	$40.89	$981.36	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
	28.00	**McDonnell, Mike Total**			$1,144.92		
06-07	16.00	Nguyen, Linh	Systems Analyst	$39.93	$638.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
06-07	256.00	Nguyen, Linh	Systems Analyst	$39.93	$10,222.08	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	272.00	**Nguyen, Linh Total**			$10,860.96		
06-07	22.00	Oglive, Barbara	A&R Supervisor	$40.21	$884.62	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
06-07	65.00	Oglive, Barbara	A&R Supervisor	$40.21	$2,613.65	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	56.00	Oglive, Barbara	A&R Supervisor	$40.21	$2,251.76	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	143.00	**Oglive, Barbara Total**			$5,750.03		

West Valley Mission Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
06-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	24.00	Pelayo, Elizabeth	Financial Aid Outreach Specialist	$29.92	$718.08	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	24.00	**Pelayo, Elizabeth Total**			$718.08		
06-07	40.00	Ramirez, Elizabeth	Student Services Account Tech	$26.83	$1,073.20	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	40.00	**Ramirez, Elizabeth Total**			$1,073.20		
06-07	460.00	Riggs, Phyllis	Student Services Account Tech	$26.83	$12,341.80	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	832.00	Riggs, Phyllis	Student Services Account Tech	$26.83	$22,322.56	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	1,292.00	**Riggs, Phyllis Total**			$34,664.36		
06-07	80.00	Rodriguez, Thelma	Systems Analyst	$39.93	$3,194.40	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	180.00	Rodriguez, Thelma	Systems Analyst	$39.93	$7,187.40	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining rec
	260.00	**Rodriguez, Thelma Total**			$10,381.80		
06-07	2.00	Sawyer, Henry	Senior Systems Analyst	$40.89	$81.78	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
06-07	10.00	Sawyer, Henry	Senior Systems Analyst	$40.89	$408.90	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintainir
	12.00	**Sawyer, Henry Total**			$490.68		
06-07	110.00	Tran, Kelvin	Student Services Account Tech	$26.83	$2,951.30	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Tran, Kelvin Total**			$2,951.30		
06-07	8.00	Tran, Thuy	Student Services Account Tech	$27.47	$219.76	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Tran, Thuy Total**			$219.76		
06-07	1.50	Trin, Lucy	Financial Aid Technician	$29.92	$44.88	Train district staff or attend training to implement procedures for waiver eligibility determination	Staff training - enrollment fee waiver
	1.50	**Trin, Lucy Total**			$44.88		
06-07	8.00	Trinh, Tu-Lan	Student Records Advisor	$29.92	$239.36	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	8.00	**Trinh, Tu-Lan Total**			$239.36		
06-07	110.00	Vasquez, Nitha	Student Services Account Tech	$27.47	$3,021.70	Train district staff or attend training to implement procedures for enrollment fees collection	Staff training - enrollment fee collection
	110.00	**Vasquez, Nitha Total**			$3,021.70		
	38,314.70	**Grand Total**			$1,132,642.72		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$49,095,000		$49,095,000	$1,307,062	$47,787,938
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,317,932		4,317,932	7,564	4,310,368
Course and Curriculum Development	6020	430,713		430,713	15,000	415,713
Academic/Faculty Senate	6030	288,986		288,986		288,986
Other Instructional Administration & Instructional Governance	6090	1,127,128		1,127,128	6,836	1,120,292
Instructional Support Services	6100					
Learning Center	6110	441,005		441,005		441,005
Library	6120	2,198,211		2,198,211	70,278	2,127,933
Media	6130	126,706		126,706		126,706
Museums and Galleries	6140	6,877		6,877		6,877
Academic Information Systems and Technology	6150	596,687		596,687		596,687
Other Instructional Support Services	6190	872,142		872,142	45,291	826,851
Admissions and Records	6200	2,110,169		2,110,169	16,355	2,093,814
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	4,141,251		4,141,251	5,451	4,135,800
Matriculation and Student Assessment	6320	893,922		893,922	5,185	888,737
Transfer Programs	6330					
Career Guidance	6340	475,695		475,695	1,248	474,447
Other Student Counseling and Guidance	6390	409,373		409,373	14,982	394,391
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,770,741	3,520	1,767,221	128,501	1,638,720
Subtotal		$69,302,538	$3,520	$69,299,018	$1,623,753	$67,675,265

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,958,104	[illegible]	$1,080,733	$12,016	$1,068,717
Health Services	6440	363,882	[illegible]	363,882		363,882
Student Personnel Admin.	6450	565,536	[illegible]	565,536	12,360	553,176
Financial Aid Administration	6460	1,100,187	[illegible]	1,100,187	2,933	1,097,254
Job Placement Services	6470	94,423	[illegible]	94,423		94,423
Veterans Services	6480	191,940	[illegible]	191,940		191,940
Miscellaneous Student Services	6490	1,571,492	[illegible]	1,571,492	38,773	1,532,719
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	1,827,735		1,827,735	1,827,735	0
Custodial Services	6530	2,465,026		2,465,026	2,465,026	0
Grounds Maintenance and Repairs	6550					
Utilities	6570	2,270,568		2,270,568	2,270,568	0
Other	6590	845,578		845,578	845,578	0
Planning, Policy Making, and Coordination	6600	5,884,440		5,884,440	5,884,440	0
General Inst. Support Services	6700					
Community Relations	6710	239,669		239,669	239,669	0
Fiscal Operations	6720	2,994,360		2,994,360	2,994,360	0
Human Resources Management	6730	1,188,357		1,188,357	1,188,357	0
Noninstructional Staff Benefits & Incentives	6740	961,007		961,007	961,007	0
Staff Development	6750	542,786		542,786	542,786	0
Staff Diversity	6760	7,959		7,959	7,959	0
Logistical Services	6770	3,523,883		3,523,883	3,523,883	0
Management Information Systems	6780	3,770,264		3,770,264	3,770,264	0
Subtotal		$101,669,734	$880,891	$100,788,843	$28,211,467	$72,577,376

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant West Valley-Mission Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	31,694		31,694	31,694	0
Community Services and Economic Development	6800					
Community Recreation	6810					
Community Service Classes	6820	193,004		193,004		193,004
Community Use of Facilities	6830	239,728		239,728	88,048	151,680
Economic Development	6840	2,672,355		2,672,355	170,727	2,501,628
Other Community Services & Economic Development	6890					
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	74,383		74,383		74,383
Farm Operations	6930					
Food Services	6940					
Parking	6950	379,499		379,499	26,612	352,887
Student and Co-curricular Activities	6960	550,012		550,012	2,508	547,504
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	58,468		58,468		58,468
Other Auxiliary Operations	7090	77,757		77,757	19,238	58,519
Depreciation or Use Allowance - Building					2,154,123	
Depreciation or Use Allowance - Equipment					835,810	
(05) Total		$105,946,634	$880,891	$105,065,743	$31,540,227	$76,515,449
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				41.22%		
(07) Notes						

	ASSETS				DEPRECIATION			
	AT 6/30/06	ADDITIONS	DELETIONS	AT 6/30/07	AT 6/30/06	ADDITIONS	DELETIONS	AT 6/30/07
LAND	2,050,827			2,050,827				
BUILDINGS	85,613,640	0	0	85,613,640	30,503,438	1,821,483	0	32,324,921
BUILDING IMPROVEMENTS	12,742,145	175,521	0	12,917,665	5,299,893	332,640	0	5,632,533
EQUIPMENT	8,889,013	1,262,103	2,845,532	7,305,584	7,385,567	762,139	2,845,532	5,302,174
VEHICLES	1,093,863	42,277	0	1,136,140	875,701	73,671	0	949,372
TOTAL DEPRECIABLE ASSETS	108,338,661	1,479,901	2,845,532	106,973,030	**44,064,599**	**2,989,933**	**2,845,532**	**44,209,001**
CONSTRUCTION IN PROGRESS	3,843,131	10,618,900	41,549	14,420,482				
TOTAL CAPITAL ASSETS	114,232,619	12,098,801	2,887,081	123,444,339				

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100						
Architecture and Environmental Design	0200	248,510					248,510
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,565,160	501	47,094	6,807		1,619,562
Business and Management	0500	2,814,841	1,221	19,374			2,835,436
Communications	0600	82,750		4,220			86,970
Information Technology	0700	2,141,838	136,733	94,624	55,707		2,428,902
Education	0800	3,897,805	80,175	696,888	589,365		5,264,233
Engineering and Industrial Tech.	0900	1,593,183	30,555	75,103	18,249		1,717,090
Fine and Applied Arts	1000	3,802,553	66,700	54,395	3,656		3,927,304
Foreign Language	1100	1,771,861	7,488	14,937			1,794,286
Health	1200	1,982,105	26,475	38,259	88,160		2,134,999
Family and Consumer Sciences	1300	2,137,020	26,005	70,437	43,223		2,276,685
Law	1400	256,477		203			256,680
Humanities (Letters)	1500	7,688,091		10,419			7,698,510
Library Science	1600						
Mathematics	1700	4,119,990	2,959	33,371			4,156,320
Military Studies	1800						
[illegible]ical Sciences	1900	1,878,662	41,637	23,304			1,943,603
Psychology	2000	887,488		2,596			890,084
Public and Protective Services	2100	1,955,218	10,620	189,655	4,871		2,160,364
Social Sciences	2200	2,970,077	62,095	4,870			3,037,042
Commercial Services	3000						
Interdisciplinary Studies	4900	1,153,852	105,923	560,206	497,024		2,317,005
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	2,301,415					2,301,415
Subtotal - Instructional Activities	**599**	45,248,896	599,087	1,939,955	1,307,062		49,095,000

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

West Valley Community College District 490 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,985,866	324,502	7,564		4,317,932
Course and Curriculum Development	6020		393,527	22,186	15,000		430,713
Academic/Faculty Senate	6030		284,699	4,287			288,986
Other Instruct. Admin. & Instruct. Governance	6090		1,060,288	60,004	6,836		1,127,128
Subtotal - Instructional Administration	**6000**		5,724,380	410,979	29,400		6,164,759
Instructional Support Services (6100)							
Learning Center	6110	226,948	164,256	49,801			441,005
Library	6120		1,974,109	153,824	70,278		2,198,211
Media	6130		114,409	12,297			126,706
Museums and Galleries	6140		2,266	4,611			6,877
Academic Information Systems and Tech.	6150		496,809	99,878			596,687
Other Instructional Support Services	6190		811,324	15,527	45,291		872,142
Subtotal - Instructional Support Services	**6100**	226,948	3,563,173	335,938	115,569		4,241,628
Admissions and Records	**6200**		1,866,691	227,123	16,355		2,110,169
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		3,980,783	155,017	5,451		4,141,251
Matriculation and Student Assessment	6320		845,683	43,054	5,185		893,922
Transfer Programs	6330						
Career Guidance	6340		419,232	55,215	1,248		475,695
Other Student Counseling and Guidance	6390		141,003	253,388	14,982		409,373
Subtotal - Student Counseling and Guidance	**6300**		5,386,701	506,674	26,866		5,920,241

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District | **490** | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,538,597	100,123	128,501	3,520	1,770,741
Extended Opportunity Prgms. & Services (EOPS)	6430		1,014,770	53,947	420,016	69,371	1,958,104
Health Services	6440		311,292	52,590			363,882
Student Personnel Administration	6450		514,222	38,954	12,360		565,536
Financial Aid Administration	6460		973,104	124,150	2,933		1,100,187
Job Placement Services	6470		87,764	6,659			94,423
Veterans Services	6480		188,446	3,494			191,940
Miscellaneous Student Services	6490		1,310,023	222,696	38,773		1,571,492
Subtotal - Other Student Services	**6400**		5,938,218	602,613	194,583	880,891	7,616,305
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		983,040	794,500	50,195		1,827,735
Custodial Services	6530		2,354,250	110,776			2,465,026
Grounds Maintenance and Repairs	6550						
Utilities	6570			2,270,568			2,270,568
Other Operation and Maintenance of Plant	6590		653,837	189,707	2,034		845,578
Subtotal - Operation and Maintenance of Plant	**6500**		3,991,127	3,365,551	52,229		7,408,907
Planning, Policymaking, and Coordination	**6600**		3,842,332	2,013,615	28,493		5,884,440

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District **490** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		208,680	23,506	7,483		239,669
Fiscal Operations	6720		1,751,063	1,232,132	11,165		2,994,360
Human Resources Management	6730		883,408	304,949			1,188,357
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		961,007				961,007
Staff Development	6750		167,906	374,880			542,786
Staff Diversity	6760			7,959			7,959
Logistical Services	6770		3,102,243	309,641	111,999		3,523,883
Management Information Systems	6780		2,795,932	824,116	150,216		3,770,264
Other General Institutional Support Services	6790		31,694				31,694
Subtotal - General Institutional Support Services	**6700**		9,901,933	3,077,183	280,863		13,259,979
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810						
Community Service Classes	6820	1,450	142,290	49,264			193,004
Community Use Facilities	6830		65,453	86,227	88,048		239,728
Economic Development	6840		1,795,122	706,506	170,727		2,672,355
Other Community Svcs. & Economic Development	6890						
Subtotal - Community Services	**6800**	1,450	2,002,865	841,997	258,775		3,105,087

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District | 490 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		1,311	73,072			74,383
Farm Operations	6930						
Food Services	6940						
Parking	6950		232,532	120,355	26612		379,499
Student and Co-curricular Activities	6960		382,570	164,934	2508		550,012
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		616,413	358,361	29,120		1,003,894
Auxiliary Operations (7000)							
Contract Education	7010			58,468			58,468
Other Auxiliary Operations	7090		3,510	55,009	19238		77,757
Subtotal - Auxiliary Operations	**7000**		3,510	113,477	19,238		136,225
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,318,710	1,318,710
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,318,710	1,318,710
TOTAL EXPENDITURES and OTHER OUTGO	**391**	45,477,294	43,436,430	13,793,466	2,358,553	2,199,601	107,265,344

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

West Valley Community College District **490** District Code No.

Schedule 1A
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	59,400
Avg. time p/account	10.7
Total Time (in minutes)	635580
Per Hour	60
Hours Worked (****Activity 11**)	**10593.0**
***EFC 2**	
Avg. time p/student	8.1
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 12**)	**0.0**
***EFC 1**	59,400
Avg. time p/question	8.4
Total Time (in minutes)	498960
Per Hour	60
Hours Worked (****Activity 13**)	**8316.0**
***EFC 1**	59,400
Avg. time p/file	9.1
Total Time (in minutes)	540540
Per Hour	60
Hours Worked (****Activity 14**)	**9009.0**
***EFC 4**	
Avg. time p/account	14.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked (****Activity 15**)	**0.0**
***EFC 5**	
Avg. time p/student	10.9
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **16**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	6,452
Avg. time p/question	13.4
Total Time (in minutes)	86457
Per Hour	60
Hours Worked **(**Activity 21)**	**1440.9**
***EFW 6**	6,452
Avg. time p/application	17.6
Total Time (in minutes)	113555
Per Hour	60
Hours Worked **(**Activity 22)**	**1892.6**
***EFW 6**	6,452
Avg. time p/evaluation	12.8
Total Time (in minutes)	82586
Per Hour	60
Hours Worked **(**Activity 23)**	**1376.4**
***EFW 8**	0
Avg. time p/application	23.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(**Activity 24)**	**0.0**
***EFW 7**	6,452
Avg. time p/application	17.3
Total Time (in minutes)	111620
Per Hour	60
Hours Worked **(**Activity 25)**	**1860.3**
***EFW 8**	0
Avg. time p/application	15.4
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(**Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Worklaod Multiplier (Default)**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 1998-99 through 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. (back-up in 05-06 only)
Findings:

Staff	Title	*EFC Workload Multiplier					
		1	2	1	1	4	5
		**Activity Codes					
		11	12	13	14	15	16
Belham, Eliner	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Brien, Diane	Student Services Tech.	5.0	5.0	10.0	5.0		
Dasalla, Analiza	Sr. Student Services Tech.	15.0	5.0	5.0	8.0	20.0	10.0
De Los Reyes, Melissa	Student Records Advisor	15.0	15.0	10.0	7.0	7.0	7.0
Estrada, Cynthia	Student Services Acct. Tech.	6.0	4.0	5.0	5.0	8.0	7.0
Lautermilch, Jane	Student Services Tech.	6.0	6.0	6.0	5.0		3.0
Le, Diemanh	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Lino, Paulette	A & R Supervisor	15.0	15.0	15.0	20.0	20.0	15.0
Lopez, Al	Student Services Acct. Tech.	5.0	7.0	5.0	6.0	6.0	6.0
Ramirez, Elizabeth	Student Services Tech.	3.0	3.0	3.0	1.0	5.0	
Riggs, Phyllis M.	Student Services Tech., Cashier	20.0	5.0	20.0	10.0	20.0	20.0
Tran, Kelvin	Student Services Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Tran, Thuy	Student Services Acct. Tech.	5.0	9.0	3.0	4.0	7.0	3.0
Trinh, Tu-Lan	Student Records Advisor	6.0	7.0	4.0	5.0		
Vasquez, Nitha	Student Services Acct. Tech.	15.0	10.0	10.0	15.0	20.0	15.0
Average		**10.7**	**8.1**	**8.4**	**9.1**	**14.4**	**10.9**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Default)**

EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load.

****Activity Codes**

11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes),

Schedule 3
West Valley Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2006-2007
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. (back-up in 05-06 only)
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Baldwin, Daniel	Financial Aid Advisor	4	6	3	9	5	7
DeLos Reyes,Amber	Financial Aid Tech.	30	60	18	50	15	15
Fitzgerald, Katy	Financial Aid Advisor	15	10	20	15	20	20
Franklin, Marta	Financial Aid Advisor	5	10	7	7	30	10
Galang, Roehl	Financial Aid Advisor	5	10	5	10	10	15
Kirkland, Rhonda	Interim Financial Aid Advisor	2	10	5		15	7
Lopez, Maria	Student Services Tech.	10	5	5	10	10	10
Nguyen, Ngolien	Financial Aid Tech.	30	20	20	30	20	15
Pelayo, Elizabeth	Financial Aid Outreach Spec.	2	5	10	40	10	30
Rancap, Marie	Student Services Tech.	30	60	40	60	40	30
Trinh, Lucy	Financial Aid Tech.	8	5	5	5		
Vuong, Ha M.	Financial Aid Advisor	20	10	15	20	15	10
Average		13.4	17.6	12.8	23.3	17.3	15.4

Conclusion: Findings go forward to Schedule 1B.

***EFW Workiaod Multiplier (Default) except activity codes 24 and 26 used EFW 8.**
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission For 2006 Summer Term

Data Current As Of December 28, 2007 01:50:37

Total Headcount	5,010

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Mission For 2006 Fall Term

Data Current As Of December 28, 2007 01:50:28

Total Headcount	10,912

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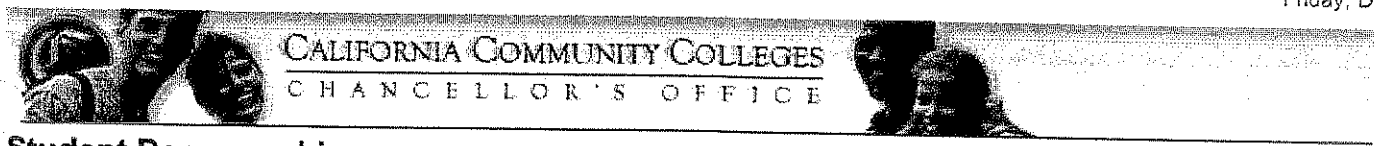

Student Demographics

Student Total Headcount For Mission For 2007 Spring Semester

Data Current As Of December 28, 2007 01:50:13

Total Headcount	12,273

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2006 Summer Term

Data Current As Of December 28, 2007 01:50:52

Total Headcount	5,880

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2006 Fall Term

Data Current As Of December 28, 2007 01:51:00

Total Headcount	12,057

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For West Valley
For 2007 Spring Semester

Data Current As Of December 28, 2007 01:51:16

Total Headcount	13,268

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Elinor Belham — Employee Name

Student Services Acct Tech — Exact Position Title

Mission College (ARR) 408-855-5026 — College/Department/Location — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 220 hrs | 220 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs | 110 hrs

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elin Belh — Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMC District

Maritza Cantarero — Employee Name

Financial Aid Director — Exact Position Title

West Valley College — College/Department/Location

741-2611 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities: [SAFERS] FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	18	18	15	12	12	10	10
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	10	10	85	85	65	65	65	60	60
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	260	260	120	120	60	60	60	60	60
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	32	32	40	40	40	90	80	50	50
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Maritza Cantarero Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College

Amalia Bibat Dorella — Employee Name

Senior Student Services Tech. — Exact Position Title

Admission & Records — College/Department/Location

855-8011 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	624	624	840	840	840	632	632	632	632
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA DE LOS REYES — Employee Name

STUDENT RECORDS ADVISOR — Exact Position Title

ADMISSIONS & RECORDS (MC) — College/Department/Location

(408) 855-5020 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	110	110	110	300	300	110	110	110	110
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6.7.07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Wvmccd

Cynthia Estrada — Student Services Account Technician

Employee Name — Exact Position Title

West Valley College — (408) 741-2624 — 12mo/11mo/10mo/hrly

College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	N/A	N/A	40	40	40	40	40	40	40
B. Enrollment Waiver Process:	N/A	N/A	N/A	20	20	20	20	20	20
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cynthia Estrada — Date 6/7/07

If you have any questions, please contact _____ , at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Marta Franklin — Financial Aid Advisor
Employee Name — Exact Position Title

WVC Financial Aid — 2495 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:	0	0	24	8	8	8	8	8	
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marta L. Franklin Date 6-7-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV Mesa Community

Jane Laudermilch — Employee Name

Student Service Tech — Exact Position Title

WVA&R — College/Department/Location

2477 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jane Laudermilch Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission Community College

Diemanh Le — Employee Name

Student Services Accdat Tech — Exact Position Title

Mission College/A&R — College/Department/Location

408-855-5027 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	~~220~~	110 HRS	220 HRS	220 HRS	110 HRS	110 HRS	110 HRS	110 HRS	110 HRS
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 06-11-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley - Mission Community College

Paulette Lino — Employee Name

A & R Supervisor — Exact Position Title

Mission College - A & R — College/Department/Location

(408) 855-5021 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 210 210 420 420 210 210 210 210 210

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6-11-07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission

Al Lopez
Employee Name

Student Service Acct Tech II
Exact Position Title

WVC/Cashier/A&R
College/Department/Location

741-2651
Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities: FISCAL YEARS- Report time in hours

98-9 | 99-0 | 00-1 | 01-2 | 02-3 | 03-4 | 04-5 | 05-6 | 06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ~~30 30 30 30 30 30 30 30 30~~

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 30 30 30 30 30 30 30 30 30

B. Enrollment Waiver Process: 20 20 20 20 20 20 20 20 20

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Al Lopez Date 6-7-07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WEST VALLEY-MISSION

MELISSA MACREYNOLDS — Employee Name

SYSTEMS ANALYST — Exact Position Title

INFORMATION SYSTEMS — College/Department/Location

408-741-4069 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	(05-6)	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	40	20	20	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	40	80	—	40	40	120	40
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	40	80	—	80	60	140	40

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Melissa MacReynolds Date 6/11/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley Mission Community College

Mike McDonnell — Employee Name

Senior Systems Analyst — Exact Position Title

Information Systems — College/Department/Location

408 741 2675 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	80	8	8	4	4	4
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	4	4	4	20	8	8	8	8	24
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michael McDonnell — Date 6-8-07

If you have any questions, please contact Mike McDonnell, at 408 741-2675

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

LINH NGUYEN — Employee Name

Systems Analyst — Exact Position Title

Information Systems 741-2678 — College/Department/Location / Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	80	80	16
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	250	250	256
TOTALS:	—	—	—	—	—	—	330	330	272

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Linh P. Nguyen — Date 06/08/07

If you have any questions, please contact LINH NGUYEN, at 741-2678

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How much time each year Training, writing procedures etc

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Barbara Ogilvie — Employee Name

Supervisor A/R II — Exact Position Title

WVC/A+R/A+R — College/Department/Location

408-741-4630 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	Ø	18	18	18	18	22	22	22	22
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	Ø	65	85	85	65	65	65	65	65
B. Enrollment Waiver Process:	Ø	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	Ø	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	Ø	48	48	48	48	48	56	56	56
TOTALS:	Ø	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Barbara Ogilvie Date 6/7/07

If you have any questions, please contact _____, at _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College

Elizabeth T. Pelayo — Financial Aid. Outreach Specialist
Employee Name — Exact Position Title

WVC / Financial Aid / — 741-2660 — (12mo)/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	___	___
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	___	___	___	___	___	___	___	___	___
B. Enrollment Waiver Process:	___	___	___	___	___	___	___	24 wks	24 hrs
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	___	___	___	___	___	___	___	___	___
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	___	___	___	___	___	___	___	___	___
TOTALS:	___	___	___	___	___	___	___	___	___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Elizabeth T. Pelayo Date 6/7/07

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WV-Mission

Elizabeth Ramirez — Employee Name

Student Services Tech — Exact Position Title

WV A&R Saratoga — College/Department/Location

741-2536 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 40 150 | 40 150 | 40 150 | 40 150 | 40 150 | 40 150 | 40 150 | 40 150 | 40 150

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature ERamirez — Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission College District

Phyllis M. Riggs — Employee Name

Student Servs Tech-Cashier — Exact Position Title

Admissions/Mission College — College/Department/Location

8855009 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: 460 460 460 460 460 460 460 460 460

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

832 832 832 832 832 832 832 832 832

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Phyllis M. Riggs Date 6/7/07

If you have any questions, please contact _____, at _____

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley-Mission CCD

Thelma Rodriguez — Employee Name

Systems Analyst — Exact Position Title

IS — College/Department/Location

Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:				40	80			40	80
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.				10	160	10	10	10	180
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:				50	240	10	10	50	260

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Thelma Rodriguez Date 6/8/07

If you have any questions, please contact _____, at _____

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ON-LINE REGISTRATION AND CREDIT CARD PROCESSING VIA THE WEB

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Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: West Valley Mission CCD

HENRY SAWYER — Senior System Analyst
Employee Name — Exact Position Title

Info. Systems — 2677 — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	16	—	8	2	2	—	2
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	16	16	16	10	10	10	10
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	32	16	24	12	12	10	12

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Henry Sawyer — Date 6.8.07

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Billing tables for new system

Revised May 2007

EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley + Mission College Dist

Kelvin Tran — Employee Name

Student Services Technici — Exact Position Title

Mission College - A+R — College/Department/Location

408-853-5172 — Telephone #

~~12mo~~/11mo/10mo/~~hrly~~ — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 110 ___ ___ ___ 360 110 110 110

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/11/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Com District

THUY TRAN — Student Services Acct Tech
Employee Name — Exact Position Title

WV / Adm / West Valley — _____ — 12mo/11mo/10mo/hrly
College/Department/Location — Telephone # — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:									
B. Enrollment Waiver Process:									
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:			16	8	8	8	8	8	8
B. Enrollment Waiver Process:									
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.									
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.									
TOTALS:									

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/6/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WVMCCD

Lucy Trinh — Employee Name

Financial Aid Technician — Exact Position Title

WVC / FA / — College/Department/Location

2443 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

FISCAL YEARS- Report time in hours

	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	0	0	1-2	1-2	1-2	1-2	1-2	1-2	1-2 hrs.
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 6/7/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: West Valley Mission College Comm district

TU-LAN TRINH — Employee Name

Student Records Advisor — Exact Position Title

Records — College/Department/Location

(408)741-2537 — Telephone #

12mo/11mo/10mo/hrly — Work year length

Typical Reimbursable Activities:

	FISCAL YEARS- Report time in hours								
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6	06-7
Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:									
A. Enrollment Collection Process:	—	—	—	—	—	—	—	—	—
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.									
A. Enrollment Collection Process:	—	—	16	8	8	8	8	8	8
B. Enrollment Waiver Process:	—	—	—	—	—	—	—	—	—
Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.	—	—	—	—	—	—	—	—	—
Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.	—	—	—	—	—	—	—	—	—
TOTALS:	—	—	—	—	—	—	—	—	—

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 6/07/07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6B

Employee Annual SUMMARY Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: WKMCCD

Nitha I. Vasquez.
Employee Name

Student Services Acct. Technician
Exact Position Title

Mission College - A&R (408) 855-5028
College/Department/Location Telephone #

12mo/11mo/10mo/hrly
Work year length

Typical Reimbursable Activities:

~~FISCAL YEARS~~ Report time in hours

98-9 | 99-0 | 00-1 | 01-2 | 02-3 | 03-4 | 04-5 | 05-6 | 06-7

Code 1 Policies and Procedures: Time spent by staff to prepare and update policies and procedures:

A. Enrollment Collection Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 2 Staff Training: Time spent by staff to conduct or attend training to implement the mandate.

A. Enrollment Collection Process: ___ 110 220 220 110 110 110 110 110
HRS HRS HRS HRS HRS HRS HRS HRS

B. Enrollment Waiver Process: ___ ___ ___ ___ ___ ___ ___ ___ ___

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

___ ___ ___ ___ ___ ___ ___ ___ ___

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

___ ___ ___ ___ ___ ___ ___ ___ ___

TOTALS: ___ ___ ___ ___ ___ ___ ___ ___ ___

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Nitha I. Vasquez Date 6-11-07

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Schedule 4
West Valley-Mission Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3. (back-up in 05-06 only)
Findings:

*Workload Multiplier	Source			Totals								
				98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1.	Enrolled Students	65,956	63,855	62,195	62,522	66,334	56,612	54,966	53,871	59,400
EFC 2	1.8-1	2.	Paid Enrollment fees	-								
EFC 3	1.8-1	3.	Exempted from enrollment fees (BOGG, etc.)	-								
EFC 4	1.8-2	1.	Delinquencies collections	-								
EFC 5	1.8-2	2.	Refunds	-								
EFW 6	1.8-3	1.	Waivers Requested	X	*5732	*4829	5,519	6,448	7,205	8,110	8,113	6,452
EFW 7	1.8-3	2.	Waivers Approved	X	5,732	4,829	4,171	4,704	5,367	5,647	6,308	6,452
EFW 8	1.8-3	(1-2)	Waivers Denied	X			1,348	1,744	1,838	2,463	1,805	0

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***Used the number of Approved Waivers, (these numbers came from the Chancelior's website, as reported by the district)**

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

West Valley-Mission Community College District
308/95 Enrollment Collection and Fee Waivers
Number of Enrolled Students
98-99 through 06-07

Purpose: To calculate the number of Enrolled students
Source: Chancellors report.
Findings:

Year	98-99		99-00		00-01		01-02		02-03		03-04		04-05		05-06		06-07	
Campus	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	M C	W V	MC	WV
Summer	5,021	6,149	4,900	13,980	4,753	13,652	4,212	13,806	5,643	13,749	4,656	12,337	4,731	12,085	4,502	11,461	5,010	5,880
Fall	10,940	14,729	6,089	12,499	5,682	12,000	5,479	12,462	6,431	13,021	3,922	11,120	4,457	10,627	5,204	10,952	10,912	12,057
Spring	12,969	16,148	11,808	14,579	11,507	14,601	11,817	14,746	12,665	14,825	11,732	12,845	10,514	12,552	9,790	11,962	12,273	13,268
Total	28,930	37,026	22,797	41,058	21,942	40,253	21,508	41,014	24,739	41,595	20,310	36,302	19,702	35,264	19,496	34,375	28,195	31,205
Dist. Total	**65,956**		**63,855**		**62,195**		**62,522**		**66,334**		**56,612**		**54,966**		**53,871**		**59,400**	

[illegible] Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: [illegible]00 through 2006-2007
C[illegible]t Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	Not provided by client -- used CCCCO's website numbers							
p/E.C. 76300 (c)	2% of Revenue Rec'd.		$ -	$ -	$ -	$ -	$ -	$ -	$ -
1.8-4 line 4A	Enrollment Fees Waived	$ 837,172	$ 693,467	$ 731,216	$ 877,216	$ 1,193,734	$ 1,996,553	2,083,575	1,853,186
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672	$ 37,064
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 58,602	For 00-01 through 06-07- unit fee						
p/E.C. 76300 (l) (2)	Credit unit fee in F/Y**		$ 11.00	$ 11.00	$ 11.00	$ 15.67	$ 23.34	$ 23.34	$ 24.00
Total # of credits	Line 4A divided by unit fee		63,042	66,474	79,746	76,179	85,542	89,270	77,216
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236	$ 70,267
Summary									
1.8-4 line 4B.	2% of Fees Waived	$ 16,743	$ 13,869	$ 14,624	$ 17,544	$ 23,875	$ 39,931	$ 41,672	$ 37,064
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 58,602							
1.8-4 5.	Credit Units Waived		$ 57,368	$ 60,491	$ 72,569	$ 69,323	$ 77,843	$ 81,236	$ 7[illegible]
Total Enrollment Fee Waiver Offset	**Forward to EFCW-1**	**$ 75,345**	**$ 71,237**	**$ 75,115**	**$ 90,113**	**$ 93,198**	**$ 117,774**	**$ 122,908**	**$ 107,331**

**Per unit fee
Years 2000-01 through 2002-03 fees are $11.00.
Summer $11.00, fall and spring $18.00. ($11.00+$18.00+$18.00=Average of $15.67)
Summer $18.00, fall and spring $26.00. ($18.00+$26.00+$26.00=Average of $23.34)
FY 06-07 Fall and Winter $26.00, Spring $20.00. ($26.00+$26.00+$20.00=Average of $24.00)

dule 5A
West Valley-Missi... ommunity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Claimed Offset Savings

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

Re	Source	Item	2003-04	2004-05	2005-06	2006-07
	EFCW-1 B. 1. a.		$ 582.60	$ 586.60	$ 509.90	$ 509.90
	EFCW-1 B. 1. b.		$ 5,520.55	$ 7,259.75	$ 8,518.48	$ 5,962.96
	EFCW-1 B. 2. a.		$ 5,431.24	$ 5,514.24	$ 8,986.32	$ 13,234.26
	EFCW-1 B. 2. b.		$ 203,739.22	$ 228,975.00	$ 241,297.29	$ 196,251.87
	EFCW-1 B. 2. c.		$ 23,087.20	$ 34,352.52	$ 37,106.32	$ 37,345.90
1	Total EFCW - Fee Waiver Costs	EFCW-1	$ 238,360.81	$ 276,688.11	$ 296,418.31	$ 253,304.89
2	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 93,198.00	$ 117,774.00	$ 122,908.00	$ 107,331.00
3	Fee Waiver Costs to claim after offsets	L1 - L2	$ 145,162.81	$ 158,914.11	$ 173,510.31	$ 145,973.89
4	**Total Enrollment Fee Waiver Offset to Claim**	**Forward to EFCW -1**	**$ 93,198.00**	**$ 117,774.00**	**$ 122,908.00**	**$ 107,331.00**

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

West Valley College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of December 21, 2007 10:08:35

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A-1 based on TANF recipient status	25	6,037
BOGW - Part A-2 based on SSI recipient status	42	5,694
BOGW - Part B based on income standards	2,215	599,255
BOGW - Part C based on financial need	939	263,479
Fee Waiver – Dependent of (children) deceased or disabled Veteran	17	5,328

total 3,238

Total Amount = $ 879,793

Back to Top of Page

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YEAR: 2006 SUM ONLY: Y INCL LOC: Y

AWARD: WBOGA - Board of Governor's Waiver - A

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION '' TOTALS:								
LOCATION 'DIST' TOTALS:	728.00							
	1							
		728.00		728.00				
		1		1				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	728.00							
MAXIMUM BUDGET...:	1							
REMAINING BALANCE: -728.00		728.00		728.00				
		1		1				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	44,934.00							
	67							
		36,926.00		36,926.00				8,008.00
		56		56				11
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	44,934.00							
MAXIMUM BUDGET...: 99,999,999	67							
REMAINING BALANCE: 99,963,073.00		36,926.00						8,008.00
		56						11
AWARD 'WBOGA' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	45,662.00							
MAXIMUM BUDGET...: 99,999,999	68							
REMAINING BALANCE: 99,962,345.00		37,654.00						8,008.00
		57						11

BOGW A

BOGW Req

0 C

A 57 +

B 2,350 +

C 1,150 +

total 3,557 *

Awarded

BOGW A 57

B 2,350

C 1,150

total 3,557

AWARD: WBOGB - Board of Governor's Waiver - B YEAR: 2006 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION '' TOTALS:								
LOCATION 'DIST' TOTALS:	7,260.00							
	11							
		7,260.00		7,260.00				
		11		11				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	7,260.00							
MAXIMUM BUDGET...:	11							
REMAINING BALANCE: -7,260.00		7,260.00		7,260.00				
		11		11				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	1,549,051.50							
	2351							
		1,545,065.50		1,545,065.50				3,986.00
		2339		2339				12
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	1,549,051.50							
MAXIMUM BUDGET...: 99,999,999	2351							
REMAINING BALANCE: 98,454,933.50		1,545,065.50		1,545,065.50				3,986.00
		2339		2339				12
AWARD 'WBOGB' TOTALS:	1,556,311.50							
BUDGETED AMOUNT..: 99,999,999	2362							
MAXIMUM BUDGET...: 99,999,999		1,552,325.50		1,552,325.50				3,986.00
REMAINING BALANCE: 98,447,673.50		2350		2350				12

WBOGB

AWARD: WBOGC - Board of Governor's Waiver - C YEAR: 2006 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION '' TOTALS:								
	4,968.00							
	7							
		4,968.00		4,968.00				
		7		7				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	4,968.00							
MAXIMUM BUDGET...:	7							
REMAINING BALANCE: -5,568.00		4,968.00		4,968.00				
		7		7				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:								
	765,585.28							
	1144							
		765,585.28		765,585.28				0.00
		1143		1143				1
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	765,585.28							
MAXIMUM BUDGET...: 99,999,999	1144							
REMAINING BALANCE: 99,234,413.72		765,585.28		765,585.28				0.00
		1143		1143				1
AWARD 'WBOGC' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	770,553.28							
MAXIMUM BUDGET...: 99,999,999	1151							
REMAINING BALANCE: 99,228,845.72		770,553.28		770,553.28				0.00
		1150		1150				1

BOGW Q

AWARD: WBOGC - Board of Governor's Waiver - C YEAR: 2006 SUM ONLY: Y INCL LOC: Y

AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ

End of Report

une 21 2007 FUND MANAGEMENT REPORT Page 1

WARD 'MBOGA' - Board of Governor's Waiver - A YEAR: 2006 SUM ONLY: Y INCL LOC: Y

66-07

06-07

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	75,554.00						0.00	
	122						2	
		75,554.00		75,554.00				
		122		122				
OFFICE '122' TOTALS:	75,554.00						0.00	
BUDGETED AMOUNT..: 99,999,999	122						2	
MAXIMUM BUDGET...: 99,999,999		75,554.00		75,554.00				
REMAINING BALANCE: 99,924,445.00		122		122				
WARD 'MBOGA' TOTALS:	75,554.00						0.00	
BUDGETED AMOUNT..: 99,999,999	122						2	
MAXIMUM BUDGET...: 99,999,999		75,554.00		75,554.00				
REMAINING BALANCE: 99,924,445.00		122		122				

BOGWA - 122
B - 3,229
A - 1,327
4,678 total BOGW requests

BOGWA1VSX
0.
122.
3,229.
1,327.
4,678.

AWARD: MBOGB - Board of Governor's Waiver - B

YEAR: 2006 SUM ONLY: Y INCL LOC: Y

06-07

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION 'DIST' TOTALS:	16,188.00							
	25							
		16,188.00		16,188.00				
		25		25				
OFFICE '120' TOTALS:								
BUDGETED AMOUNT..:	16,188.00							
MAXIMUM BUDGET...:	25							
REMAINING BALANCE: -16,188.00		16,188.00		16,188.00				
		25		25				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	2,155,084.00						3,192.00	
	3206						30	
		2,151,892.00		2,151,892.00				
		3203		3203				
OFFICE '122' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	2,155,084.00						3,192.00	
MAXIMUM BUDGET...: 99,999,999	3206						30	
REMAINING BALANCE: 97,848,107.00		2,151,892.00		2,151,892.00				
		3203		3203				
OFFICE: 123 - West Valley College								
LOCATION 'WV' TOTALS:	300.00							
	1							
		300.00		300.00				
		1		1				
OFFICE '123' TOTALS:								
BUDGETED AMOUNT..:	300.00							
MAXIMUM BUDGET...:	1							
REMAINING BALANCE: -300.00		300.00		300.00				

AWARD: MBOGB - Board of Governor's Waiver - B

YEAR: 2006 SUM ONLY: Y INCL LOC: Y

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
		1		1				
AWARD 'MBOGB' TOTALS:								
BUDGETED AMOUNT..: 99,999,999	2,171,572.00						3,192.00	
MAXIMUM BUDGET...: 99,999,999	3232						30	
REMAINING BALANCE: 97,831,619.00		2,168,380.00		2,168,380.00				
		3229		3229				

06-07

AWARD: MBOGC - Board of Governor's Waiver - C YEAR: 2006 SUM ONLY: Y INCL LOC: Y

06-07

	AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ
OFFICE: 120 - District WV/MC Community College								
LOCATION '' TOTALS:	600.00							
	1							
		600.00		600.00				
		1		1				
LOCATION 'DIST' TOTALS:	5,332.00							
	8							
		5,332.00		5,332.00				
		8		8				
OFFICE '120' TOTALS:	5,932.00							
BUDGETED AMOUNT..:	9							
MAXIMUM BUDGET...:		5,932.00		5,932.00				
REMAINING BALANCE: -5,932.00		9		9				
OFFICE: 122 - Mission College								
LOCATION 'MC' TOTALS:	857,861.60						600.00	
	1319						4	
		857,261.60		857,261.60				
		1318		1318				
OFFICE '122' TOTALS:	857,861.60						600.00	
BUDGETED AMOUNT..: 99,999,999	1319						4	
MAXIMUM BUDGET...: 99,999,999		857,261.60		857,261.60				
REMAINING BALANCE: 99,142,737.40		1318		1318				
AWARD 'MBOGC' TOTALS:	863,793.60						600.00	
BUDGETED AMOUNT..: 99,999,999	1328						4	
MAXIMUM BUDGET...: 99,999,999		863,193.60		863,193.60				
REMAINING BALANCE: 99,136,805.40		1327		1327				

AWARD: MBOGC - Board of Gove[illegible]or's Waiver - C

YEAR: 2006 SUM ONLY: Y INCL LOC: Y

AWARD AMT	AWARDED AMT	TOTAL XMIT	TOTAL ACC	TOTAL EST	TOTAL PEN	TOTAL DEN	TOTAL REJ

06-07

End of Report

SixTen and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
[illegible]2 Balboa Avenue, Suite 807
San Diego, CA 92117

Telephone: (858) 514-8605
Fax: (858) 514-8645
E-Mail: Kbpsixten@aol.com

Claim File Copy

July 28, 2006

CERTIFIED MAIL # 7003 3110 0000 2900 4785

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Yosemite Community College District CC50150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Yosemite Community College District's reimbursement claims listed below:

308/95	Enrollment Fee Collection and Waivers	1998-1999
308/95	Enrollment Fee Collection and Waivers	1999-2000
308/95	Enrollment Fee Collection and Waivers	2000-2001
308/95	Enrollment Fee Collection and Waivers	2001-2002
308/95	Enrollment Fee Collection and Waivers	2002-2003
308/95	Enrollment Fee Collection and Waivers	2003-2004
308/95	Enrollment Fee Collection and Waivers	2004-2005

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez, Vice-President
Claims Processing Manager

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program 267

LABEL HERE

(01) Claimant Identification Number: CC50150
(02) Claimant Name: Yosemite Community College District
County of Location: Stanislaus
Street Address or P.O. Box: P.O. Box 4065
City: Modesto | State: CA | Zip Code: 95352

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2005-2006	(12) 2004-2005
Total Claimed Amount	(07) $ 213,200	(13) $ 193,838
Less: 10% Late Penalty		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 193,838
Due from State	(08) $ 213,200	(17) $ 193,838
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	173,412
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	122,798
(29) EFCW-1, (04)(B)(2)(c)(f)	
(30) EFCW-1, (06)	35
(31) EFCW-1, (07)	103,318
(32) EFCW-1, (09)	82,891
(33) EFCW-1, (10)	122,798
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK)

Date 7/25/06

Teresa Scott
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Program 287	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:

Yosemite Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2004-2005

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 173,411.52	$ -	$ -	$ -	$ -	$ 173,411.52
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 122,797.83	$ -	$ -	$ -	$ -	$ 122,797.83
c. Reporting BOG fee waiver data to CCC	$ -	$ -	$ -	$ -	$ -	$ -
(05) Total Direct Costs	$ 296,209.35	$ -	$ -	$ -	$ -	$ 296,209.35

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	34.88%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 103,317.82
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 399,527.17
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 82,891.00
(10) Less: Enrollment Fee Waiver offsets		$ 122,797.83
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 193,838.34

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Y ite Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Various enrollment office staff Collecting fees	$24.80	2,083.5	$ 51,670.80				
Calculating total enrollment fee to be collected Various enrollment office staff Collecting fees	$24.80	1,196.0	$ 29,660.80				
Answering student's questions regarding enrollment fee collection Various enrollment office staff Collecting fees	$24.80	2,170.3	$ 53,823.44				
Up written and computer records for enrollment fee information Various enrollment office staff Collecting fees	$24.80	773.9	$ 19,192.72				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Various enrollment office staff Collecting fees	$24.80	646.7	$ 16,038.16				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Various enrollment office staff Collecting fees	$24.80	122.0	$ 3,025.60				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 173,411.52	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Ye e Community College District

(02) Fiscal Year
2004-2005

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Various Financial office staff Waiving enrollment fees	$20.52	3,110.7	$ 63,831.56				
Receiving waiver applications							
Various Financial office staff Waiving enrollment fees	$20.52	707.0	$ 14,507.64				
Evaluating waiver applications and verifying application documents							
Various Financial office staff Waiving enrollment fees	$20.52	1,131.1	$ 23,210.17				
Enter pproved application information into district records; providing student award letter							
Various Financial office staff Waiving enrollment fees	$20.52	1,035.5	$ 21,248.46				
05) Total ☒ Subtotal ☐		Page 1 of 1	$ 122,797.83	$ -	$ -	$ -	$ -

ew 04/06

Yosemite Community College District

308/95 ENROLLMENT COLLECTIONS/WAIVERS

2005

Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
04-05	2,083.50	Various enrollment office staf	Collecting fees	$24.80	$51,670.80	Referencing student accounts and records	Calculating and collecting enrollment fees
04-05	1,196.00	Various enrollment office staf	Collecting fees	$24.80	$29,660.80	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
04-05	2,170.30	Various enrollment office staf	Collecting fees	$24.80	$53,823.44	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
04-05	773.90	Various enrollment office staf	Collecting fees	$24.80	$19,192.72	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
04-05	646.70	Various enrollment office staf	Collecting fees	$24.80	$16,038.16	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
04-05	122.00	Various enrollment office staf	Collecting fees	$24.80	$3,025.60	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	6,992.40	**Various enrollment office staff Total**			$173,411.52		
04-05	3,110.70	Various Financial office staff	Waiving enrollment fee:	$20.52	$63,831.56	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
04-05	707.00	Various Financial office staff	Waiving enrollment fee:	$20.52	$14,507.64	Receiving waiver applications	Waiving student fees
04-05	1,131.10	Various Financial office staff	Waiving enrollment fee:	$20.52	$23,210.17	Evaluating waiver applications and verifying application documents	Waiving student fees
04-05	1,035.50	Various Financial office staff	Waiving enrollment fee:	$20.52	$21,248.46	Entering approved application information into district records; providing student award letter	Waiving student fees
	5,984.30	**Various Financial office staff Total**			$122,797.83		
	12,976.70	**Grand Total**			$296,209.35		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$51,297,740		$51,297,740	$383,415	$50,914,325
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,821,929		4,821,929	188,386	4,633,543
Course and Curriculum Development	6020	8,231		8,231	1,934	6,297
Academic/Faculty Senate	6030	104,332		104,332		104,332
Other Instructional Administration & Instructional Governance	6090	10,761		10,761		10,761
Instructional Support Services	6100					
Learning Center	6110	384,214		384,214		384,214
Library	6120	1,506,502		1,506,502	5,550	1,500,952
Media	6130	1,385,082		1,385,082	12,045	1,373,037
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	695,580		695,580	6,951	688,629
Other Instructional Support Services	6190	61,255		61,255		61,255
Admissions and Records	6200	1,008,470		1,008,470	5,616	1,002,854
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,087,222		2,087,222	27,816	2,059,406
Matriculation and Student Assessment	6320	148,903		148,903		148,903
Transfer Programs	6330	122,754		122,754	2,609	120,145
Career Guidance	6340	3,090		3,090	1,465	1,625
Other Student Counseling and Guidance	6390	226,814		226,814		226,814
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,560,226		1,560,226	29,224	1,531,002
Subtotal		$65,433,105	$0	$65,433,105	$665,011	$64,768,094

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Yosemite CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,575,360	$596,391	$978,969	$10,309	$968,660
Health Services	6440	479,321		479,321	12,802	466,519
Student Personnel Admin.	6450	831,473		831,473	10,046	821,427
Financial Aid Administration	6460	1,065,207		1,065,207	28,228	1,036,979
Job Placement Services	6470	17,271		17,271		17,271
Veterans Services	6480	65,589		65,589		65,589
Miscellaneous Student Services	6490	355,597		355,597	4,040	351,557
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,578,914		2,578,914	2,578,914	0
Custodial Services	6530	2,264,706		2,264,706	2,264,706	0
Grounds Maintenance and Repairs	6550	448,759		448,759	448,759	0
Utilities	6570	1,453,109		1,453,109	1,453,109	0
Other	6590					
Planning, Policy Making, and Coordination	6600	2,796,874		2,796,874	2,796,874	0
General Inst. Support Services	6700					
Community Relations	6710	426,597		426,597	426,597	0
Fiscal Operations	6720	2,096,441		2,096,441	2,096,441	0
Human Resources Management	6730	3,156,257		3,156,257	3,156,257	0
Noninstructional Staff Benefits & Incentives	6740	1,065,760		1,065,760	1,065,760	0
Staff Development	6750	64,801		64,801	64,801	0
Staff Diversity	6760	552,551		552,551	552,551	0
Logistical Services	6770	3,139,904		3,139,904	3,139,904	0
Management Information Systems	6780	3,890,746		3,890,746	3,890,746	0
Subtotal		$93,758,342	$596,391	$93,161,951	$24,665,855	$68,496,096

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite CCD				(02) Period of Claim 2004-2005		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790					
Community Services and Economic Development	6800					
Community Recreation	6810	68,013		68,013		68,013
Community Service Classes	6820	826,553		826,553	3,136	823,417
Community Use of Facilities	6830	6,392		6,392		6,392
Economic Development	6840	738		738		738
Other Community Services & Economic Development	6890	341,825		341,825	1,290	340,535
Ancillary Services	6900					
Bookstores	6910					
Child Development Center	6920	556,667		556,667	298	556,369
Farm Operations	6930	120		120		120
Food Services	6940	1,221		1,221		1,221
Parking	6950	118,501		118,501		118,501
Student and Co-curricular Activities	6960	18,264		18,264		18,264
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	175,311		175,311		175,311
Other Auxiliary Operations	7090	127,803		127,803		127,803
Physical Property Acquisitions	7100					
(05) Total		$95,999,750	$596,391	$95,403,359	$24,670,579	$70,732,780
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				34.88%		
(07) Notes						

CALIFORN COMMUNITY COLLEGES
Annual Financial and Budget Report

Expend ures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	1,700,128	136,530	502,518	9,202		2,348,378
Architecture and Environmental Design	0200	230,176	1,194	379			231,749
Biological Sciences	0400	1,717,432	156,505	91,595	2,358		1,967,890
Business and Management	0500	1,728,376	136,196	41,260	29,417		1,935,249
Communications	0600	408,937	15,281	14,233	3,390		441,841
Computer and Information Science	0700	1,330,437	27,642	47,318	10,188		1,415,585
Education	0800	155,897	2,940,386	363,223	31,773		3,491,279
Engineering and Related Industrial Tech.	0900	1,970,712	206,927	389,000	37,196		2,603,835
Fine and Applied Arts	1000	3,114,187	145,462	322,279	24,034		3,605,962
Foreign Language	1100	662,169	5,492	-8,167			659,494
Health	1200	2,137,649	77,705	499,727	24,941		2,740,022
Consumer Education and Home Economics	1300	2,386,460	783,428	4,483,543	61,745		7,715,176
Law	1400						
Humanities (Letters)	1500	4,150,036	145,735	97,647	9,109		4,402,527
Library Science	1600						
Mathematics	1700	2,436,109	87,144	10,075			2,533,328
Military Studies	1800						
Physical Sciences	1900	1,421,742	64,360	236,999	12,757		1,735,858
Psychology	2000	950,977	16,062	50			967,089
Public Affairs and Services	2100	1,428,784	219,117	793,927	66,877		2,508,705
Social Sciences	2200	2,000,015	20,185	32,574			2,052,774
Commercial Services	3000						
Interdisciplinary Studies	4900	4,712,394	2,008,457	421,937	60,428		7,203,216
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	737,783					737,783
Subtotal - Instructional Activities	**599**	35,380,400	7,193,808	8,340,117	383,415		51,297,740

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR[illegible]A COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2003-04

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,021,814	611,729	188,386		4,821,929
Course and Curriculum Development	6020		5,364	933	1,934		8,231
Academic/Faculty Senate	6030		95,364	8,968			104,332
Other Instruct. Admin. & Instruct. Governance	6090		7,717	3,044			10,761
Subtotal - Instructional Administration	6000		4,130,259	624,674	190,320		4,945,253
Instructional Support Services (6100)							
Learning Center	6110		300,367	83,847			384,214
Library	6120		1,190,250	310,702	5,550		1,506,502
Media	6130		1,291,833	81,204	12,045		1,385,082
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		651,430	37,199	6,951		695,580
Other Instructional Support Services	6190		57,658	3,597			61,255
Subtotal - Instructional Support Services	6100		3,491,538	516,549	24,546		4,032,633
Admissions and Records	6200		952,232	50,622	5,616		1,008,470
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,011,130	48,276	27,816		2,087,22[illegible]
Matriculation and Student Assessment	6320		142,223	6,680			148,903
Transfer Programs	6330		114,826	5,319	2,609		122,754
Career Guidance	6340			1,625	1,465		3,090
Other Student Counseling and Guidance	6390		223,902	2,912			226,814
Subtotal - Student Counseling and Guidance	6300		2,492,081	64,812	31,890		2,588,783

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORN' COMMUNITY COLLEGES
Annual Financial and Budget Report

Expend' res by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional*	Noninstructional**				
		(1)	(2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,154,495	376,507	29,224		1,560,226
Extended Opportunity Prgms. & Services (EOPS)	6430		921,866	46,794	10,309	596,391	1,575,360
Health Services	6440		388,812	77,707	12,802		479,321
Student Personnel Administration	6450		777,687	43,740	10,046		831,473
Financial Aid Administration	6460		1,048,049	(11,070)	28,228		1,065,207
Job Placement Services	6470		10,615	6,656			17,271
Veterans Services	6480		63,323	2,266			65,589
Miscellaneous Student Services	6490		331,002	20,555	4,040		355,597
Subtotal - Other Student Services	6400		4,695,849	563,155	94,649	596,391	5,950,044
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,068,934	417,414	92,566		2,578,914
Custodial Services	6530		2,128,533	126,529	9,644		2,264,706
Grounds Maintenance and Repairs	6550		425,302	23,457			448,759
Utilities	6570			1,453,109			1,453,109
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	6500		4,622,769	2,020,509	102,210		6,745,488
Planning, Policymaking, and Coordination	6600		2,315,317	352,816	128,741		2,796,874

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFOR COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		267,735	157,490	1,372		426,597
Fiscal Operations	6720		2,215,550	(151,258)	32,149		2,096,441
Human Resources Management	6730		2,762,670	388,807	4,780		3,156,257
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,065,760				1,065,760
Staff Development	6750		11,890	52,911			64,801
Staff Diversity	6760		366,362	163,372	22,817		552,551
Logistical Services	6770		2,587,344	476,448	76,112		3,139,904
Management Information Systems	6780		1,680,335	1,561,373	649,038		3,890,746
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		10,957,646	2,649,143	786,268		14,393,057
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		66,650	1,363			68,013
Community Service Classes	6820		393,356	430,061	3,136		826,553
Community Use Facilities	6830		1,071	5,321			6,392
Economic Development	6840			738			738
Other Community Svcs. & Economic Development	6890		262,542	77,993	1,290		341,82
Subtotal - Community Services	**6800**		723,619	515,476	4,426		1,243,521

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2003-04

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910						
Child Development Centers	6920		338,631	217,738	298		556,667
Farm Operations	6930		120				120
Food Services	6940		1,221				1,221
Parking	6950		221,265	(102,764)			118,501
Student and Co-curricular Activities	6960		16,037	2,227			18,264
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		577,274	117,201	298		694,773
Auxiliary Operations (7000)							
Contract Education	7010	183,484	186,432	(194,605)			175,311
Other Auxiliary Operations	7090		127,803				127,803
Subtotal - Auxiliary Operations	**7000**	183,484	314,235	(194,605)			303,114
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210			24,000			24,000
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			24,000			24,000
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					1,401,000	1,401,000
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					1,401,000	1,401,000
TOTAL EXPENDITURES and OTHER OUTGO	**391**	35,563,884	42,466,627	15,644,469	1,752,379	1,997,391	97,424,750

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District 590 District Code No.

Schedule 1A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	52,087
Avg. time p/account	2.4
Total Time (in minutes)	125009
Per Hour	60
Hours Worked **(** Activity 11)**	**2083.5**
***EFC 2**	21,106
Avg. time p/student	3.4
Total Time (in minutes)	71760
Per Hour	60
Hours Worked **(** Activity 12)**	**1196.0**
***EFC 1**	52,087
Avg. time p/question	2.5
Total Time (in minutes)	130218
Per Hour	60
Hours Worked **(** Activity 13)**	**2170.3**
***EFC 2**	21,106
Avg. time p/file	2.2
Total Time (in minutes)	46433
Per Hour	60
Hours Worked **(** Activity 14)**	**773.9**
***EFC 4**	10,779
Avg. time p/account	3.6
Total Time (in minutes)	38804
Per Hour	60
Hours Worked **(** Activity 15)**	**646.7**
***EFC 5**	2,928
Avg. time p/student	2.5
Total Time (in minutes)	7320
Per Hour	60
Hours Worked **(** Activity 16)**	**122.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2004-2005*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	42,418
Avg. time p/question	4.4
Total Time (in minutes)	186639
Per Hour	60
Hours Worked (** **Activity 21**)	**3110.7**
***EFW 6**	42,418
Avg. time p/application	1.0
Total Time (in minutes)	42418
Per Hour	60
Hours Worked (** **Activity 22**)	**707.0**
***EFW 6**	42,418
Avg. time p/evaluation	1.6
Total Time (in minutes)	67869
Per Hour	60
Hours Worked (** **Activity 23**)	**1131.1**
***EFW 8**	
Avg. time p/application	3.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 24**)	**0.0**
***EFW 7**	10,355
Avg. time p/application	6.0
Total Time (in minutes)	62130
Per Hour	60
Hours Worked (** **Activity 25**)	**1035.5**
***EFW 8**	
Avg. time p/application	2.3
Total Time (in minutes)	0
Per Hour	60
Hours Worked (** **Activity 26**)	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2004-2005
EFC Workload Multiplier

Purpose: To calculate the correct multiplier to use on Schedule 2.
Source: EFCW 1.7-2.
Findings:

	Multiplier:					Multiplier to be
Code:	1	2	3	4	5	used:
11	20					**1**
12	1	19				**2**
13	14	6				**1**
14	1	4		15		**2**
15				20		**4**
16			1		19	**5**

Conclusion: Findings go onto Schedule 1A and Schedule2.

Schedule 2
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Initial year claim 98-99 through 05-06.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abbott, Kathy	Account Technician	0.5	1	2	0.5	2	2
Auxier, Sara	Account Technician I	3	4	2	2	3	2
Ayers, Jan	Fiscal Services Tech		2	2		1	1
Carsner, Pam	Account Technician I	0.5	1	2	0.5	2	1
Day, Karen	Account Technician I	3	4	2.5	2	5	5
Doty, Judy	Fiscal Analyst I	3	4	3	4	8	2
Evans (Tomlinson), Terri	Fiscal Analyst I	3	4	3	4	5	2
Gardner, Darla R.	Fiscal Services Specialist	3	4	2	2	3	2
Gritz, Robert	Account Technician II	1	2	2	1	2	
Isaman, Terri	Administrative Secretary	0.5	2	3	2	2	5
Klana, Ghorighos	Fiscal Analyst III	2	3	2.5	1	4	1
Lenstrom, Amy	Fiscal Services Specialist	3	4	2	2	3	2
Marriott, Veronica	Fiscal Analyst II	3	4	2	2	2	2
Rule, Teresa N.	Fiscal Services Supervisor	3	4	3	2	3	4
Salazar, Jeremy	Fiscal Services Coordinator I	3	4	3	4	5	2
Turner, Kelly	Fiscal Services Specialist	3	4	2	2	3	2
Vera, Soledad	Account Technician I	3	4	2.5	2	5	5
Villafana, Kathryn	Fiscal Analyst I	3	4	2.5	2	5	2
Whitfield, Gary	Business Manager	3	4	3	2	3	4
Woodhead, Susie	Fiscal Analyst I	3	4	3	4	5	2
Average		**2.4**	**3.4**	**2.5**	**2.2**	**3.6**	**2.5**

Conclusion: *Findings go forward to Schedule 1A.*

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class l

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2004-2005
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier						
		1	2	1	2	4	5	
		**Activity Codes						
Staff	Title	11	12	13	14	15	16	04-05 PHR
Abbott, Kathy	Account Technician	0.5	1	2	0.5	2	2	$21.16
Auxier, Sara	Account Technician I	3	4	2	2	3	2	$21.16
Ayers, Jan	Fiscal Services Tech		2	2		1	1	$21.16
Carsner, Pam	Account Technician I	0.5	1	2	0.5	2	1	$21.16
Day, Karen	Account Technician I	3	4	2.5	2	5	5	$21.16
Doty, Judy	Fiscal Analyst I	3	4	3	4	8	2	$26.50
Evans (Tomlinson), Terri	Fiscal Analyst I	3	4	3	4	5	2	$26.50
Gardner, Darla R.	Fiscal Services Specialist	3	4	2	2	3	2	$19.16
Gritz, Robert	Account Technician II	1	2	2	1	2		$21.16
Isaman, Terri	Administrative Secretary	0.5	2	3	2	2	5	$25.19
Klana. Ghorighos	Fiscal Analyst III	2	3	2.5	1	4	1	$26.50
Lenstrom, Amy	Fiscal Services Specialist	3	4	2	2	3	2	$19.16
Marriott, Veronica	Fiscal Analyst II	3	4	2	2	2	2	$26.50
Rule, Teresa N.	Fiscal Services Supervisor	3	4	3	2	3	4	$26.50
Salazar, Jeremy	Fiscal Services Coordinator I	3	4	3	4	5	2	$26.50
Turner, Kelly	Fiscal Services Specialist	3	4	2	2	3	2	$19.16
Vera, Soledad	Account Technician I	3	4	2.5	2	5	5	$21.16
Villafana, Kathryn	Fiscal Analyst I	3	4	2.5	2	5	2	$26.50
Whitfield, Gary	Business Manager	3	4	3	2	3	4	$53.25
Woodhead, Susie	Fiscal Analyst I	3	4	3	4	5	2	$26.50
Average		**2.4**	**3.4**	**2.5**	**2.2**	**3.6**	**2.5**	**$ 24.80**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Initial year claim 98-99 through 05-06. Used one time study for all years of initial claims.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Bailey, Candy	Financial Aid Tech II	5	1	1	3	8	2
Canutt, Sheryl	Support Staff	5	1	1	3	8	2
Hesse, Wendy	Account Technician I	3	1	3	3	2	3
Pfleging, Elizabeth	Support Staff	5	1	1	3	8	2
Salado, Carol	Support Staff	5	1	1	3	8	2
Shively, Marnie	Financial Aid II	3	1	3	3	2	3
Vidaurri, Michelle	Financial Aid I	5	1	1	3	6	
Average		**4.4**	**1.0**	**1.6**	**3.0**	**6.0**	**2.3**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2004-05
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						04-05 PHR
		6			8	7	8	
		**Activity Codes						
		21	22	23	24	25	26	
Bailey, Candy	Financial Aid Tech II	5	1	1	3	8	2	$20.67
Canutt, Sheryl	Support Staff	5	1	1	3	8	2	$20.15
Hesse, Wendy	Account Technician I	3	1	3	3	2	3	$21.16
Pfleging, Elizabeth	Support Staff	5	1	1	3	8	2	$20.15
Salado, Carol	Support Staff	5	1	1	3	8	2	$20.15
Shively, Marnie	Financial Aid II	3	1	3	3	2	3	$20.67
Vidaurri, Michelle	Financial Aid I	5	1	1	3	6		$20.67
Average		**4.4**	**1.0**	**1.6**	**3.0**	**6.0**	**2.3**	**$ 20.52**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2004-2005
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals						
			98-99	99-00	00-01	01-02	02-03	03-04	04-05
EFC 1	1.8-1	1. Enrolled Students	45,702	47,184	49,388	53,268	56,002	52,664	52,087
EFC 2	1.8-1	2. Paid Enrollment fees	18,321	19,623	19,855	21,390	26,038	23,848	21,106
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	X	15,862	16,622	17,969	16,633	17,603	20,202
EFC 4	1.8-2	1. Delinquencies collections	12001	11,699	12,911	13,909	13,331	11,213	10,779
EFC 5	1.8-2	2. Refunds	1,591	1,668	1,904	2,639	2,954	3,113	2928
EFW 6	1.8-3	1. Waivers Requested	X	23,308	25,205	26,100	27,816	48,385	42,418
EFW 7	1.8-3	2. Waivers Approved	X	7,404	7,294	7,665	8,358	8,851	10,355
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Did not provide					

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class loa
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

California Home

Mo

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2005 Spring Semester

Data Current As Of July 03, 2006 02:46:16

Total Headcount	17,223

© 2001 State of California, California Community Colleges, Chancellor's Office

total students enrolled

17,223
3,564
17,972
3,562
8,534
1,227
52,027

California Home

Mo

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2005 Spring Semester

Data Current As Of July 03, 2006 02:38:10

Total Headcount	3,564

© 2001 State of California. California Community Colleges, Chancellor's Office

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2004 Fall Term

Data Current As Of July 03, 2006 02:46:31

Total Headcount	17,972

© 2001 State of California. California Community Colleges, Chancellor's Office

California Home

Mo

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2004 Fall Term

Data Current As Of July 03, 2006 02:38:36

Total Headcount	3,567

© 2001 State of California. California Community Colleges, Chancellor's Office

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2004 Summer Term

Data Current As Of July 03, 2006 02:46:41

Total Headcount	8,534

© 2001 State of California. California Community Colleges, Chancellor's Office

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2004 Summer Term

Data Current As Of July 03, 2006 02:38:47

Total Headcount	1,227

© 2001 State of California. California Community Colleges, Chancellor's Office

1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Kathy Abbott
Employee Name

Account Technician I (retired)
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature retired Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Sara Auxier
Employee Name

Account Tech I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
Employee Signature Teresa M Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Jan Ayers
Employee Name

Fiscal Services Tech
Exact Position Title

575-6828
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	Ø	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	Ø				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only.

PLEASE USE BLUE INK

Supervisor
Employee Signature Teresa Mills

Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Pam Carsner
Employee Name

Account Technician I (resigned)
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		X			
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature resigned Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services
Department/Location

Karen Day
Employee Name

Account Technician I
Exact Position Title

209-575-7734 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Day Date 5-8-06

If you have any questions, please contact Gary Whitfield at 209-575-6830

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services-East/West
Department/Location

Judy Doty
Employee Name

Fiscal Analyst T
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or formation." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
~~Employee~~ Signature Teresa Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC- Business Services East
Department/Location

Terri Evans (Tomlinson)
Employee Name

Fiscal Analyst I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

~~Employee~~ Supervisor Signature Teresa Nicole Date 5/8/06

If you have any questions, please contact GARY WHITTIER, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Y.C.C.D.
District

Business Services
Department/Location

Darla R. GARDNER
Employee Name

Fiscal Services Specialist
Exact Position Title

575-6825 | 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: (98-99) (99-00) (00-01) 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
de 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or refering student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Darla Gardner Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Robert Gritz
Employee Name

Account Technician II
Exact Position Title

209-588-5113
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	1	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Robert Gritz Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Terri Isaman
Employee Name

Administrative Secretary
Exact Position Title

588-5112
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 (03-04) 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Terri L Isaman Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College Dist. — District

MJC Business Services_East Campus — Department/Location

Ghonghas Khana — Employee Name

Fiscal Analyst III — Exact Position Title

575-6822 — Telephone #

(12mo/11mo/10mo/hrly) — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2½	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/08/06

If you have any questions, please contact Gary Whitfield, at 575-6836

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services East
Department/Location

Amy Lenstrom
Employee Name

Fiscal Services Specialist
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02)
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
~~Employee~~ Signature Teresa M Kule

Date 5-4-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College District
District

Business Services - East Campus
Department/Location

Veronica Marriott
Employee Name

Fiscal Analyst II
Exact Position Title

(209) 575-6823
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Marriott Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Teresa N Rule
Employee Name

Fiscal Services Supervisor
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa N Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC- Business Services - East
Department/Location

Jeremy Salazar
Employee Name

Fiscal Services Coord I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
Employee Signature Teresa Nuño Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Kelly Turner
Employee Name

Fiscal Services Specialist
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
~~Employee~~ Signature Teresa Nkubo

Date 5-4-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

East Campus Business Services
Department/Location

Soledad Vera
Employee Name

Account Technician I
Exact Position Title

575-6832 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Soledad Vera Date 5-8-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services / MJC East
Department/Location

Kathryn Villafana
Employee Name

Fiscal Analyst I
Exact Position Title

209 575-6824
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Villafana Date 5-4-06

If you have any questions, please contact Cathy Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Bus Serv.
Department/Location

Gary Whitfield
Employee Name

Business Manager
Exact Position Title

6830
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ ~~02-03~~ ~~03-04~~ ~~04-05~~ 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓	✓		
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/11/06

If you have any questions, please contact Gary Whitfield, at 6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Business Services/East
Department/Location

Susie Woodhead
Employee Name

Fiscal Analyst I
Exact Position Title

209.575.6827
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Woodhead Date 5/4/06

If you have any questions, please contact Gary Whitfield, at 209-575-6830

PLEASE SUBMIT THIS INFORMATION BY

Fin Aid

EFCW 1.7-3

–mployee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

report below the ***average*** amount of time spent (in minutes) by you to ent each of the reimbursable activities for the mandated program.

YCCD-Columbia

Fin Aid / Columbia
Department/Location

Candy Bailey
ee Name

Fin Aid Tech II
Exact Position Title

88-5105
ne #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

ort time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

able Activities: MENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Answering Questions regarding fee waivers or referring appropriate person for an answer.	5'	X			
Receiving Applications from students by mail, fax, nline access, or in person, or in the form of eligibility processed by the financial aid office.	1'	X			
valuating Applications each application and verification for compliance with eligibility standards.	1'	X			
complete Applications: notifying the student of the quired information. Holding the student application in a until all information is received.	3'			X	
proved Applications: Copying all documentation and rmation. Entering information into district records. ident with proof of eligibility and filing documents.	8'		X		
nied Applications: Reviewing additional documentation en denial is appealed. Providing written notification to al eligibility status.	2'			X	

CERTIFICATION: The State of California requires that school district personnel maintain a record of mandates in order for the district to receive reimbursement. Your signature on this form certifies that rted actual data or have provided a good faith estimate which you certify (or declare) under penalty er the laws of the State of California to be true and correct based on your personal knowledge or Thi rmation is used for cost accounting purposes only. PLEASE USE BLUE INK

nature Candy Bailey Date 5/16/06

y questions, please contact _____, at _____

MIT THIS INFORMATION BY _____; TO _____

Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD - Columbia
District

Fin Aid / Columbia
Department/Location

Sheryl Cornett
Employee Name

Support Staff
Exact Position Title

5105
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: **ENROLLMENT WAIVER FUNCTIONS**	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5'	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1'	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1'	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3'			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8'		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2'			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that I have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cornett Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VCCD
District

Fiscal Services/Financial Aid
Department/Location

Wendy Hesse
Employee Name

Account Tech. I
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Wendy Hesse Date 5/4/06

If I have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VCCD- Columbia
District

Fin Aid / Columbia
Department/Location

Elizabeth Pfleging
Employee Name

Support Staff
Exact Position Title

5105
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5'	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1'	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1'	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3'			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8'		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	21'			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Pflegin Date 5/16/05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ : TO _____

Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Report below the ***average*** amount of time spent (in minutes) by you to ent each of the reimbursable activities for the mandated program.

VCCD - Columbia — Fin. Aid / Columbia
Department/Location

Carol Salado — Support Staff - Short Term
Exact Position Title

5105 — Short-term 12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 (00-01) 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

Report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Answering Questions regarding fee waivers or referring to appropriate person for an answer.	5'	X			
Receiving Applications from students by mail, fax, online access, or in person, or in the form of eligibility processed by the financial aid office.	1'	X			
Evaluating Applications each application and verification for compliance with eligibility standards.	1'	X			
Incomplete Applications: notifying the student of the required information. Holding the student application in a file until all information is received.	3'			X	
Approved Applications: Copying all documentation and information. Entering information into district records. Student with proof of eligibility and filing documents.	8'		X		
Denied Applications: Reviewing additional documentation when denial is appealed. Providing written notification to final eligibility status.	2'			X	

CERTIFICATION: The State of California requires that school district personnel maintain a record of mandates in order for the district to receive reimbursement. Your signature on this form certifies that reported actual data or have provided a good faith estimate which you certify (or declare) under penalty under the laws of the State of California to be true and correct based on your personal knowledge or belief. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Signature Carol Larkin Date 5/16/06

If any questions, please contact _____, at _____

SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD - Columbia
District

Financial Aid / Columbia
Department/Location

Marnie Shively (Love-White)
Employee Name

Financial Aid Tech II
Exact Position Title at that Time

588-5313
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 (02-03) 03-04 04-05 05-06 DSK & Detailed

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marnie Shively Date May 9, 06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Columbia College Financial Aid
Department/Location

Michelle Vidaurri
Employee Name

Support Staff I (7/04 thru 12/04)
Financial Aid Technician I (As of 1/05)
Exact Position Title

5885105
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michelle Date 05-09-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised 6/1/06

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer	6151	5858	6562	7878	10124	9174	9761	9978
Fall	19435	19568	20.505	21,464	23976	21998	21539	21667
Winter/ Intersession								
Spring	20116	21758	22321	23926	21902	21492	20787	21000
Total	45702	47184	49388	53268	56002	52664	52087	52645
2. Number of students who paid enrollment fees:								
Summer	2924	3120	3108	3528	4625	5078	2991	3631
Fall	7950	8685	8540	9137	11190	10137	9723	10132
Winter/ Intersession								
Spring	7447	7818	8207	8725	10223	8633	8392	8694
Total	18321 18320	19623 19624	19855	21390	26038	23848	21106	22457
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer	2328	2217	2484	2982	3370	3440	4189	4282
Fall	6335	6379	6684	6997	6811	7084	8112	8160
Winter/ Intersession								
Spring	6717	7266	7454	7990	6452	7079	7901	7982
Total	15380	15862	16622	17968 17968	16633	17603	20202	20424

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Gary Whitfield
Employee Name: (print)

Chief Operations Manager
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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6/15/06

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer	899	521	970	1368	2129	656	2581	2065
Fall	5150	4504	5281	5330	5975	4777	3704	3315
Winter/Intersession								
Spring	5952	6674	6660	7211	5227	5780	4494	4324
	12001	11699	12911	13909	13331	11213	10779	9704
ent fee a result of ility								
	352	416	454	722	820	1016	929	949
	887	909	911	1104	1304	1346	1242	1249
	352	343	539	813	830	751	757	765
	1591	1668	1904	2639	2954	3113	2928	2963

1.8-2 #1

0 c

98/99: 899 + 5,150 + 5,952 + 12,001 *

- 521 +

99/00: 4,504 + 6,674 + 11,699 *

970 +

00/01: 5,281 + 6,660 + 12,911 *

1,368 +

01/02: 5,330 + 7,211 + 13,909 *

2,129 +

1- 5,975 +

ON: The State of California requires that school district personnel maintain a record of rder for the district to receive reimbursement. Your signature on this form certifies that ta or have provided a good faith estimate which you "certify (or declare) under penalty the State of California to be true and correct based on your personal knowledge or ion is used for cost accounting purposes only. PLEASE USE BLUE INK

Date

field

Chief Operations officer
Position or Title

please contact , at .

ORMATION BY ; TO .

Associates

0•85 =
86•7 *

0• c

16,967• +
14,846• +
10,605• +
42,418• *

19,354• +
16,935• +
12,096• +
48,385• *

11,126• +
9,736• +
6,954• +
27,816• *

10,440• +
9,135• +
6,525• +
26,100• *

10,082• +
8,822• +
6,301• +
25,205• *

9,323• +
8,158• +
5,827• +
23,308• *

8,891• +
7,780• +
5,557• +
22,228• *

EFCW 1.8-3

ENROLLMENT FEE COLLECTION AND WAIVERS
NT FEE WAIVER WORKLOAD STATISTICS REPORT

D

accounting statistics will be used to calculate your reimbursement.
equired information in the spaces provided.

	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
lment fee BOGG etc.)								
	8891	9323	10,062	10,440	11126	19354	16967	
	7780	8158	4822	9135	9736	16935	14846	
n								
	5557	5827	6301	6525	6954	12,096	10605	
	22,228	23,308	25,205	26100	27816	48,385	42,418	
llment fee BOGG, etc.)								
	2982	2961	2918	3000	3343	3540	4142	
	2609	2591	2553	2683	2925	3098	3624	
n								
	1863	1852	1823	1916	2090	2213	2589	
	7454	7401	7294	7665	8358	8851	10,355	

TION: The State of California requires that school district personnel maintain a record of in order for the district to receive reimbursement. Your signature on this form certifies that data or have provided a good faith estimate which you certify (or declare) under penalty of the State of California to be true and correct based on your personal knowledge or ation is used for cost accounting purposes only. PLEASE USE BLUE INK

Date 7/11/06

Simental

Program Rep II
Position or Title

ns, please contact _____, at _____

INFORMATION BY _____; TO _____

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Attachment

6/15/06

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See attached

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 6/15/06

Dorothy Pimentel
Employee Name: (print)

Program Rep. II
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Yosemite Comm College District
Fiscal Years: 1998-1999 through 2004-2005
Mid-Range Salary Schedule

Purpose: To calculate the mid-salary PHR for Yosemite CCD.
Source: Yosemite CCD mid-range salary schedule, monthly amounts with benefits.
Findings:

POSITION	98-99	PHR	99-00	PHR	00-01	PHR	01-02	PHR	02-03	PHR	03-04	PHR	04-05	PHR
Account Technician I	2728	$18.19	2962	$19.75	3085	$20.57	3112	$20.75	3174	$21.16	3174	$21.16	3174	$21.16
Administrative Secretary	3209	$21.39	3434	$22.89	3577	$23.85	3705	$24.70	3779	$25.19	3779	$25.19	3779	$25.19
Business Manager	6800	$45.33	7276	$48.51	7797	$51.98	7755	$51.70	7988	$53.25	7988	$53.25	7988	$53.25
Business Services Supervisor	4236	$28.24	4533	$30.22	4721	$31.47	4891	$32.61	4989	$33.26	4989	$33.26	4989	$33.26
Financial Aid I	2386	$15.91	2553	$17.02	2660	$17.73	2755	$18.37	2811	$18.74	2811	$18.74	2811	$18.74
Financial Aid Support Staff	2566	$17.11	2745	$18.30	2860	$19.07	2963	$19.75	3023	$20.15	3023	$20.15	3023	$20.15
Financial Aid Technician	2634	$17.56	2818	$18.79	2935	$19.57	3041	$20.27	3101	$20.67	3101	$20.67	3101	$20.67
Fiscal Services Coordinator	3376	$22.51	3612	$24.08	3762	$25.08	3897	$25.98	3975	$26.50	3975	$26.50	3975	$26.50
Fiscal Services Specialist	2439	$16.26	2610	$17.40	2719	$18.13	2817	$18.78	2874	$19.16	2874	$19.16	2874	$19.16
Fiscal Services Technician	2696	$17.97	2885	$19.23	3004	$20.03	3112	$20.75	3174	$21.16	3174	$21.16	3174	$21.16

Conclusion: Findings go forward to EFCW-2.

Yosemite Community College District
Mid-range salary schedule
Monthly amounts with benefits included

Position	98-99	99-00	00-01	01-02	02-03	03-04	04-05
Account Technician I	2728	2962	3085	3112	3174	3174	3174
Administrative Secretary	3209	3434	3577	3705	3779	3779	3779
Business Manager	6800	7276	7797	7755	7988	7988	7988
Business Services Supervisor	4236	4533	4721	4891	4989	4989	4989
Financial Aid I	2386	2553	2660	2755	2811	2811	2811
Financial Aid Support Staff	2566	2745	2860	2963	3023	3023	3023
Financial Aid Technician	2634	2818	2935	3041	3101	3101	3101
Fiscal Services Coordinator	3376	3612	3762	3897	3975	3975	3975
Fiscal Services Specialist	2439	2610	2719	2817	2874	2874	2874
Fiscal Services Technician	2696	2885	3004	3112	3174	3174	3174

÷ 150 = PHR

Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2004-05
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05
1.8-4 line 3	Net Revenue Received	$ 2,108,649	$ 2,242,697	$ 2,393,622	$ 2,582,073	$ 3,468,086	$ 4,345,432
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909
1.8-4 line 4A	Enrollment Fees Waived	$ 1,187,073	$ 1,237,210	$ 1,345,946	$ 1,507,992	$ 2,532,425	$ 4,793,489
p/E.C. 76300 (l) (2)	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,095	For 00-01 through 04-05 - unit fee				
1.8-4 line 5	Summer		2,458	3,420	6,656	20,465	23,232
	Fall		34,014	39,005	44,117	77,214	80,031
	Winter/Interssion						
	Spring		32,259	38,140	41,762	48,869	74,184
	Total # of credits		68,731	80,565	92,535	146,548	177,447
p/E.C. 76300 (l) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477
Summary							
2% of line 3	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909
1.8-4 line 4B.	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 83,095					
1.8-4 5	Credit Units Waived		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477
Total Offset Savings	**Forward to EFCW-1**	**$ 149,009**	**$ 132,143**	**$ 148,105**	**$ 166,008**	**$ 253,370**	**$ 344,256**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2004-2005 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Yosemite
COUNTY: Stanislaus

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2005	JUNE PAYMENT	TOTAL PAID THRU JUNE 2005
GENERAL APPORTIONMENT	$27,600,624	$22,461,820	$2,204,542	$24,666,362
ENROLL FEE ADMIN (2%)	82,891	71,286	11,605	82,891
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	0	0	0	0
PARTNERSHIP FOR EXCEL.	2,811,624	2,417,996	393,628	2,811,624
S.F.A.A.	640,818	548,523	92,295	640,818
E.O.P.S.	1,455,256	1,251,520	203,736	1,455,256
C.A.R.E.	155,897	134,072	21,825	155,897
D.S.P.S.	1,660,851	1,423,648	237,203	1,660,851
STATE HOSPITALS	0	0	0	0
CALWORKS	678,226	566,236	111,990	678,226
MATRICULATION (CREDIT)	601,705	517,466	84,239	601,705
MATRIC. (NONCREDIT)	136,775	117,627	19,148	136,775
FAC.& STAFF DIVERSITY	19,454	13,829	5,625	19,454
PART-TIME FACULTY INS.	0	0	0	0
PART-TIME FACULTY OFFIC	0	0	0	0
PART-TIME FACULTY ALLOC	753,662	648,149	105,513	753,662
BLOCK GRANT (ONE-TIME)	373,652	321,341	52,311	373,652
ECON. DEVELOPMENT	496,473	376,379	40,658	417,037
TELECOMMUNICATIONS	122,612	63,119	59,493	122,612
TANF	151,913	130,645	21,268	151,913
VTEA LEADERSHIP	84,840	22,058	49,208	71,266
VTEA TECH. PREP.	68,800	26,832	30,960	57,792
VTEA TITLE I C	959,549	374,223	431,798	806,021
PLANT & INSTRUCTIONAL	419,110	360,435	58,675	419,110
PRIOR YEAR CORRECTION	2,630,531	2,614,798	15,733	2,630,531
TOTAL	$41,905,263	$34,462,002	$4,251,453	$38,713,455

FISCAL SERVICES: 06/23/05 16:14
J:\PBF\2004-05\P2_Pay_Schedule\Exhibits\EX_A_DIST.DOC

Sc ule 5A
Yosemite Con. ity College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2004-2005
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)						
2	Staff Training	(04)(B)(1)(b)						
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)						
4	Waiving student fees	(04)(B)(2)(b)	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)						
6	EFCW - Fee Waiver Costs	Total	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 149,009.00	$ 132,143.00	$ 148,105.00	$ 166,008.00	$ 253,370.00	$ 344,256.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (85,142.94)	$ (61,532.20)	$ (73,513.94)	$ (83,694.22)	$ (121,659.90)	$ (221,458.17)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 63,866.06**	**$ 70,610.80**	**$ 74,591.06**	**$ 82,313.78**	**$ 131,710.10**	**$ 122,797.83**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Modesto College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 03, 2006 02:31:41

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	917	409,752
BOGW - Part B based on income standards	5,657	2,579,174
BOGW - Part C based on financial need	2,449	1,230,666

Total Unduplicated Count = 9,018
Total Amount = $ 4,219,592

Back to Top of Page

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WAIVERS GRANTED

9018
1,337
10355

FEES WAIVED $4,219,592
71,852
$4,291,444

California Home

Mo

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Columbia College
Financial Aid Count and Amount By type
For 2004-2005

Data Current As Of July 03, 2006 02:27:51

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	130	28,060
BOGW - Part B based on income standards	941	408,499
BOGW - Part C based on financial need	267	137,338

Total Unduplicated Count = 1,337
Total Amount = $ 573,897

Back to Top of Page

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Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

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5252 Balboa Avenue, Suite 900
San Diego, CA 92117
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Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

January 16, 2007

CERTIFIED MAIL # 7003 3110 0000 2900 4921

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Yosemite Community College District CC50150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Yosemite Community College District's reimbursement claims listed below:

308/95	Enrollment Fees Collection and Waivers	2005-2006
764/99	Integrated Waste Management	2005-2006

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

D.J. Branwell

for Keith B. Petersen, President

Claim File Copy

State Controller's Office — Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC50150

(02) Claimant Name: Yosemite Community College District

County of Location: Stanislaus

Street Address or P.O. Box: P.O. Box 4065

City: Modesto | State: CA | Zip Code: 95352

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2006-2007	(12) 2005-2006
Total Claimed Amount	(07) $ 280,400	(13) $ 254,975
Less : 10% Late Penalty		(14) $ -
Less : Prior Claim Payment Received		(15) $ -
Net Claimed Amount		(16) $ 254,975
Due from State	(08) $ 280,400	(17) $ 254,975
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	224,411
(25) EFCW-1, (04)(B)(1)(a)(f)	
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	1,798
(28) EFCW-1, (04)(B)(2)(b)(f)	74,238
(29) EFCW-1, (04)(B)(2)(c)(f)	141
(30) EFCW-1, (06)	36
(31) EFCW-1, (07)	109,354
(32) EFCW-1, (09)	78,790
(33) EFCW-1, (10)	76,176
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) — Date: 1/9/07

Teresa Scott — Type or Print Name

Vice Chancellor, Fiscal Services — Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605

E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 2[illegible]7	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant:	(02) Type of Claim		Fiscal Year
osemite Community College District	Reimbursement	X	2005-2006
	Estimated		

(03) Leave Blank

irect Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 224,411.14	$ -	$ -	$ -	$ -	$ 224,411.14
[illegible]nrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. [illegible]reparing district policies & procedures for § IV.B.	$ -	$ -	$ -	$ -	$ -	$ -
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
[illegible]. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ 1,797.58	$ -	$ -	$ -	$ -	$ 1,797.58
b. Waiving student fees	$ 74,237.78	$ -	$ -	$ -	$ -	$ 74,237.78
c. Reporting BOG fee waiver data to CCC	$ 140.88	$ -	$ -	$ -	$ -	$ 140.88
(05) Total Direct Costs	$ 300,587.38	$ -	$ -	$ -	$ -	$ 300,587.38
ndirect Costs						
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]					36.38%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]					$ 109,353.69
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]					$ 409,941.07
ost Reduction						
(09) Less: Enrollment Fee Revenue offset						$ 78,790.00
(10) Less: Enrollment Fee Waiver offsets						$ 76,176.24
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]					$ 254,974.83

ew 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Y[illegible]te Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records Enrollment Staff Various	$30.28	2,193.5	$ 66,419.18				
Calculating total enrollment fee to be collected Enrollment Staff Various	$30.28	1,235.1	$ 37,398.83				
Answering student's questions regarding enrollment fee collection Enrollment Staff Various	$30.28	2,193.5	$ 66,419.18				
Up[illegible]ng written and computer records for enrollment fee information Enrollment Staff Various	$30.28	823.4	$ 24,932.55				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies Enrollment Staff Various	$30.28	830.1	$ 25,135.43				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment Enrollment Staff Various	$30.28	135.6	$ 4,105.97				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 224,411.14	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yo e Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☒ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses		(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Adopting procedures for documenting financial assistance, recording, and record maintenance								
Pendergrass, John	Programmer Analyst	$37.31	2.0	$ 74.62				
Rashid, Marlin	Programmer Analyst	$36.57	24.0	$ 877.68				
Steffy, Dave	Part Time Programmer	$35.22	24.0	$ 845.28				
(05) Total ☒ Subtotal ☐			Page 1 of 1	$ 1,797.58	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yo[illegible] Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Waiver Staff Various	$21.38	1,365.5	$ 29,194.39				
Receiving waiver applications Waiver Staff Various	$21.38	290.5	$ 6,210.89				
Evaluating waiver applications and verifying application documents Waiver Staff Various	$21.38	377.7	$ 8,075.23				
Entering approved application information into district records; providing student award letter Waiver Staff Various	$21.38	1,199.2	$ 25,638.90				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Waiver Staff Various	$21.38	239.4	$ 5,118.37				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 74,237.78	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yo[illegible] Community College District

(02) Fiscal Year
2005-2006

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers Steffy, Dave Part Time Programmer	$35.22	4.0	$ 140.88				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 140.88	$ -	$ -	$ -	$ -

New 04/06

Yosemite Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2006
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
05-06	2,193.50	Enrollment Staff	Various	$30.28	$66,419.18	Referencing student accounts and records	Calculating and collecting enrollment fees
05-06	1,235.10	Enrollment Staff	Various	$30.28	$37,398.83	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
05-06	2,193.50	Enrollment Staff	Various	$30.28	$66,419.18	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
05-06	823.40	Enrollment Staff	Various	$30.28	$24,932.55	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
05-06	830.10	Enrollment Staff	Various	$30.28	$25,135.43	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
05-06	135.60	Enrollment Staff	Various	$30.28	$4,105.97	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	7,411.20	**Enrollment Staff Total**			$224,411.14		
5/3/2006	2.00	Pendergrass, John	Programmer Analyst	$37.31	$74.62	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	2.00	**Pendergrass, John Total**			$74.62		
5/22/2006	8.00	Rashid, Marlin	Programmer Analyst	$36.57	$292.56	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining record
5/23/2006	8.00	Rashid, Marlin	Programmer Analyst	$36.57	$292.56	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining recor
5/24/2006	8.00	Rashid, Marlin	Programmer Analyst	$36.57	$292.56	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
	24.00	**Rashid, Marlin Total**			$877.68		
5/22/2006	8.00	Steffy, Dave	Part Time Programmer	$35.22	$281.76	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
5/23/2006	8.00	Steffy, Dave	Part Time Programmer	$35.22	$281.76	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
5/24/2006	8.00	Steffy, Dave	Part Time Programmer	$35.22	$281.76	Adopting procedures for documenting financial assistance, recording, and record maintenance	Adopting procedures, recording, and maintaining records
6/22/2006	4.00	Steffy, Dave	Part Time Programmer	$35.22	$140.88	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	28.00	**Steffy, Dave Total**			$986.16		
05-06	1,365.50	Waiver Staff	Various	$21.38	$29,194.39	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
05-06	290.50	Waiver Staff	Various	$21.38	$6,210.89	Receiving waiver applications	Waiving student fees
05-06	377.70	Waiver Staff	Various	$21.38	$8,075.23	Evaluating waiver applications and verifying application documents	Waiving student fees
05-06	1,199.20	Waiver Staff	Various	$21.38	$25,638.90	Entering approved application information into district records; providing student award letter	Waiving student fees
05-06	239.40	Waiver Staff	Various	$21.38	$5,118.37	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	3,472.30	**Waiver Staff Total**			$74,237.78		
	10,937.50	**Grand Total**			$300,587.38		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$53,993,236		$53,993,236	$482,557	$53,510,679
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,982,958		4,982,958	233,901	4,749,057
Course and Curriculum Development	6020	2,220		2,220		2,220
Academic/Faculty Senate	6030	163,969		163,969	32	163,937
Other Instructional Administration & Instructional Governance	6090	9,501		9,501		9,501
Instructional Support Services	6100					
Learning Center	6110	550,107		550,107	2,181	547,926
Library	6120	1,866,534		1,866,534	16,182	1,850,352
Media	6130	1,153,575		1,153,575	106,249	1,047,326
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	861,214		861,214	6,034	855,180
Other Instructional Support Services	6190	23,353		23,353		23,353
Admissions and Records	6200	1,242,204		1,242,204	17,806	1,224,398
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,673,536		2,673,536		2,673,536
Matriculation and Student Assessment	6320	160,586		160,586	3,219	157,367
Transfer Programs	6330	157,927		157,927		157,927
Career Guidance	6340					
Other Student Counseling and Guidance	6390	265,867		265,867		265,867
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,032,483		2,032,483	35,052	1,997,431
Subtotal		$70,139,270	$0	$70,139,270	$903,213	$69,236,057

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Yosemite Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,660,179	$603,642	$1,056,537	$4,516	$1,052,021
Health Services	6440	613,226		613,226		613,226
Student Personnel Admin.	6450	619,831		619,831	6,502	613,329
Financial Aid Administration	6460	1,422,776		1,422,776	4,993	1,417,783
Job Placement Services	6470	22,681		22,681	-7	22,688
Veterans Services	6480	64,873		64,873		64,873
Miscellaneous Student Services	6490	424,047		424,047		424,047
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,859,944		2,859,944	2,859,944	0
Custodial Services	6530	2,316,680		2,316,680	2,316,680	0
Grounds Maintenance and Repairs	6550	512,602		512,602	512,602	0
Utilities	6570	2,011,222		2,011,222	2,011,222	0
Other	6590					
Planning, Policy Making, and Coordination	6600	3,543,032		3,543,032	3,543,032	0
General Inst. Support Services	6700					
Community Relations	6710	640,059		640,059	640,059	0
Fiscal Operations	6720	2,126,912		2,126,912	2,126,912	0
Human Resources Management	6730	1,177,538		1,177,538	1,177,538	0
Noninstructional Staff Benefits & Incentives	6740	1,326,479		1,326,479	1,326,479	0
Staff Development	6750	88,771		88,771	88,771	0
Staff Diversity	6760	854,377		854,377	854,377	0
Logistical Services	6770	3,182,662		3,182,662	3,182,662	0
Management Information Systems	6780	2,844,518		2,844,518	2,844,518	0
Subtotal		$98,451,679	$603,642	$97,848,037	$24,404,013	$73,444,024

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2005-2006		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	93,435		93,435	93,435	0
Community Services and Economic Development	6800					
Community Recreation	6810	73,427		73,427		73,427
Community Service Classes	6820	1,086,171		1,086,171	10,573	1,075,598
Community Use of Facilities	6830	2,978		2,978		2,978
Economic Development	6840	105		105		105
Other Community Services & Economic Development	6890	316,721		316,721		316,721
Ancillary Services	6900					
Bookstores	6910	736		736		736
Child Development Center	6920	709,982		709,982	6,192	703,790
Farm Operations	6930	2,351		2,351		2,351
Food Services	6940	2,883		2,883		2,883
Parking	6950	107,438		107,438		107,438
Student and Co-curricular Activities	6960	43,464		43,464		43,464
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	137,497		137,497		137,497
Other Auxiliary Operations	7090	146,796		146,796		146,796
Depreciation or Use Allowance - Building					1,524,137	
Depreciation or Use Allowance - Equipment					1,572,042	
(05) Total		$101,175,663	$603,642	$100,572,021	$27,610,392	$76,057,808
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				36.30%		
(07) Notes						

Subj: **FW: FW: Document Request - Depreciation**
Dat: 9/16/2008 3:48:21 P.M. Pacific Daylight Time
Fr: pimenteld@yosemite.cc.ca.us
To: Smpsixten@aol.com

Sergio,

Please see below, is this what you were wanting?

Dorothy Pimentel
Risk Services
YCCD – Fiscal Services
2201 Blue Gum Ave
Modesto CA 95358
(209) 575-6963 Office
(209) 575-6562 Fax
pimenteld@yosemite.edu

From: Jeremy Salazar
Sent: Tuesday, September 16, 2008 3:08 PM
To: Dorothy Pimentel; Deborah Campbell
Subject: RE: FW: Document Request - Depreciation

I believe this is the information he is looking for. The reason for the large amount in 2004-05 is because that is when we transferred from legacy system into Datatel.

Sum of ACTUAL EXPENDITURES			
OBJECT CODE	TRANSACTION	Year	Total
5590 Other-Depreciation	Opening Balance	2004-05	27,229,238.74
	Buildings and Structures	2004-05	1,678,505.68
		2005-06	1,524,137.01
		2006-07	1,533,840.25
		2007-08	1,535,559.92
	Equipment	2004-05	1,572,951.83
		2005-06	1,572,042.27
		2006-07	1,668,748.24
		2007-08	1,586,289.73
	Land/Land Improvements	2004-05	38,062.00
		2005-06	57,093.00
		2006-07	66,813.76
		2007-08	173,742.12
	Library Books/Materials	2004-05	68,197.40
		2005-06	98,944.66
		2006-07	76,218.96
		2007-08	72,425.36
5990 : Other-Depreciation Total			40,552,810.93

eremy P. Salazar
enior Accountant
osemite Community College District

alazarj@yosemite.cc.ca.us

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Agriculture and Natural Resources	0100	966,083	663,683	466,575	104,682		2,201,023
Architecture and Environmental Design	0200	119,311	30,309	347			149,967
Biological Sciences	0400	1,342,890	584,585	33,046	1,758		1,962,279
Business and Management	0500	1,231,204	369,955	36,468	1,410		1,639,037
Communications	0600	283,502	95,313	16,603	8,287		403,705
Computer and Information Science	0700	1,022,984	299,410	15,970			1,338,364
Education	0800	2,289,600	784,693	350,472	7,102		3,431,867
Engineering and Related Industrial Tech.	0900	1,265,610	919,664	344,974	39,560		2,569,808
Fine and Applied Arts	1000	2,530,604	918,988	204,874	12,016		3,666,482
Foreign Language	1100	650,975	169,878	67,152			888,005
Health	1200	1,790,953	558,914	305,770	55,076		2,710,713
Consumer Education and Home Economics	1300	947,123	2,313,909	4,677,634	88,415		8,027,081
Law	1400						
Humanities (Letters)	1500	3,492,739	1,049,772	126,038	3,068		4,671,617
Library Science	1600						
Mathematics	1700	2,039,074	699,806	26,136	2,971		2,767,987
Military Studies	1800						
Physical Sciences	1900	1,109,765	408,808	168,307	40,890		1,727,770
Psychology	2000	790,974	183,969				974,943
Public Affairs and Services	2100	1,194,432	674,251	767,923	11,469		2,648,075
Social Sciences	2200	1,674,620	432,424	23,368	1,197		2,131,609
Commercial Services	3000						
Interdisciplinary Studies	4900	2,479,734	2,045,707	441,228	76,020		5,042,689
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,639,975					1,639,975
Subtotal - Instructional Activities	**599**	28,862,152	13,204,038	8,072,885	453,921		50,592,996

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		3,795,636	698,419	118,840		4,612,895
Course and Curriculum Development	6020		3,368	3,689			7,057
Academic/Faculty Senate	6030		98,087	11,217	1,753		111,057
Other Instruct. Admin. & Instruct. Governance	6090		10,606	2,877			13,483
Subtotal - Instructional Administration	**6000**		3,907,697	716,202	120,593		4,744,492
Instructional Support Services (6100)							
Learning Center	6110	243,060	196,813	74,521	8,009		522,403
Library	6120		1,341,458	260,869	15,801		1,618,128
Media	6130		1,042,205	34,172	135,542		1,211,919
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		791,165	255,404	16,605		1,063,174
Other Instructional Support Services	6190		56,659	4,201			60,860
Subtotal - Instructional Support Services	**6100**	243,060	3,428,300	629,167	175,957		4,476,484
Admissions and Records	**6200**		1,023,212	38,577			1,061,789
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		1,991,425	23,963	3,177		2,018,565
Matriculation and Student Assessment	6320		144,368	26,738			171,106
Transfer Programs	6330		185,286	11,965			197,251
Career Guidance	6340			145			145
Other Student Counseling and Guidance	6390		230,075	4,784			234,859
Subtotal - Student Counseling and Guidance	**6300**		2,551,154	67,595	3,177		2,621,926

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District 590 District Code No.

CALIFORN COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,061,872	432,122	23,144		1,517,138
Extended Opportunity Prgms. & Services (EOPS)	6430		881,026	44,948	1,195	609,522	1,536,691
Health Services	6440		452,691	72,600	636		525,927
Student Personnel Administration	6450		909,705	115,891	118,303		1,143,899
Financial Aid Administration	6460		1,309,168	144,189	42,985		1,496,342
Job Placement Services	6470		15,740	3,219	1,409		20,368
Veterans Services	6480		62,161	1,450	2,055		65,666
Miscellaneous Student Services	6490		314,418	37,509			351,927
Subtotal - Other Student Services	**6400**		5,006,781	851,928	189,727	609,522	6,657,958
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		1,982,213	571,739	336,974		2,890,926
Custodial Services	6530		2,191,436	251,805	14,152		2,457,393
Grounds Maintenance and Repairs	6550		440,900	59,713			500,613
Utilities	6570			1,688,490			1,688,490
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		4,614,549	2,571,747	351,126		7,537,422
Planning, Policymaking, and Coordination	**6600**		2,357,184	732,061	260,205		3,349,450

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
General Institutional Support Services (6700)							
Community Relations	6710		266,692	206,718			473,410
Fiscal Operations	6720		2,368,800	(223,247)	11,376		2,156,929
Human Resources Management	6730		903,433	(39,410)	1,955		865,978
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		2,489,623				2,489,623
Staff Development	6750		5,179	61,337	250		66,766
Staff Diversity	6760		382,189	201,836	6,228		590,253
Logistical Services	6770		2,565,247	530,019	94,144		3,189,410
Management Information Systems	6780		1,846,874	1,422,745	799,178		4,068,797
Other General Institutional Support Services	6790						
Subtotal - General Institutional Support Services	**6700**		10,828,037	2,159,998	913,131		13,901,166
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		68,323	206			68,529
Community Service Classes	6820	120,267	284,464	415,526	40,444		860,701
Community Use Facilities	6830		371	2,604	1,377		4,352
Economic Development	6840		(4,652)	2,710			(1,942)
Other Community Svcs. & Economic Development	6890		211,600	73,439			285,039
Subtotal - Community Services	**6800**	120,267	560,106	494,485	41,821		1,216,679

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORI COMMUNITY COLLEGES
Annual Financial and Budget Report

Expen ures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2004-05

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		2,984				2,984
Child Development Centers	6920		393,548	358,804	5,907		758,259
Farm Operations	6930		587				587
Food Services	6940		5,590				5,590
Parking	6950		206,241	(115,808)			90,433
Student and Co-curricular Activities	6960		20,395	1,200			21,595
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		629,345	244,196	5,907		879,448
Auxiliary Operations (7000)							
Contract Education	7010	2,177	338,043	(273,086)			67,134
Other Auxiliary Operations	7090		147,288				147,288
Subtotal - Auxiliary Operations	**7000**	2,177	485,331	(273,086)			214,422
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210			144,000			144,000
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**			144,000			144,000
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**						
TOTAL EXPENDITURES and OTHER OUTGO	**391**	29,227,656	48,595,734	16,449,755	2,515,565	609,522	97,398,232

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 through 2005-2006
EFC Workload Multiplier

Purpose: To calculate the correct multiplier to use on Schedule 2.
Source: EFCW 1.7-2.
Findings:

	Multiplier:					Multiplier to be used:
Code:	1	2	3	4	5	
11	20					**1**
12	1	19				**2**
13	14	6				**1**
14	1	4		15		**2**
15				20		**4**
16			1		19	**5**

Conclusion: Findings go onto Schedule 1A and Schedule2.

Schedule 1A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	52,645
Avg. time p/account	2.5
Total Time (in minutes)	131613
Per Hour	60
Hours Worked **(** Activity 11)**	**2193.5**
***EFC 2**	22,457
Avg. time p/student	3.3
Total Time (in minutes)	74108
Per Hour	60
Hours Worked **(** Activity 12)**	**1235.1**
***EFC 1**	52,645
Avg. time p/question	2.5
Total Time (in minutes)	131613
Per Hour	60
Hours Worked **(** Activity 13)**	**2193.5**
***EFC 2**	22,457
Avg. time p/file	2.2
Total Time (in minutes)	49405
Per Hour	60
Hours Worked **(** Activity 14)**	**823.4**
***EFC 4**	9,764
Avg. time p/account	3.5
Total Time (in minutes)	34174
Per Hour	60
Hours Worked **(** Activity 15)**	**569.6**
***EFC 5**	2,963
Avg. time p/student	2.5
Total Time (in minutes)	7408
Per Hour	60
Hours Worked **(** Activity 16)**	**123.5**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2005-2006*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	10,900
Avg. time p/question	4.7
Total Time (in minutes)	51230
Per Hour	60
Hours Worked **(** Activity 21)**	**853.8**
***EFW 6**	10,900
Avg. time p/application	1.0
Total Time (in minutes)	10900
Per Hour	60
Hours Worked **(** Activity 22)**	**181.7**
***EFW 6**	10,900
Avg. time p/evaluation	1.3
Total Time (in minutes)	14170
Per Hour	60
Hours Worked **(** Activity 23)**	**236.2**
***EFW 8**	
Avg. time p/application	3.0
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 24)**	**0.0**
***EFW 7**	10,900
Avg. time p/application	6.6
Total Time (in minutes)	71940
Per Hour	60
Hours Worked **(** Activity 25)**	**1199.0**
***EFW 8**	
Avg. time p/application	2.2
Total Time (in minutes)	0
Per Hour	60
Hours Worked **(** Activity 26)**	**0.0**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abbott, Kathy	Account Technician	0.5	1.0	2.0	0.5	2.0	2.0
Auxier, Sara	Account Technician I	3.0	4.0	2.0	2.0	3.0	2.0
Ayers, Jan	Fiscal Services Tech		2.0	2.0		1.0	1.0
Carsner, Pam	Account Technician I	0.5	1.0	2.0	0.5	2.0	1.0
Day, Karen	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Doty, Judy	Fiscal Analyst I	3.0	4.0	3.0	4.0	8.0	2.0
Evans (Tomlinson), Terri	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Gardner, Darla R.	Fiscal Services Specialist		2.0	2.0		1.0	1.0
Gritz, Robert	Account Technician II	2.0	2.0	2.0	1.0	2.0	
Isaman, Terri	Administrative Secretary	0.5	2.0	3.0	2.0	2.0	5.0
Klana, Ghorighos	Fiscal Analyst III	2.0	3.0	2.5	1.0	4.0	1.0
Lenstrom, Amy	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Marriott, Veronica	Fiscal Analyst II	3.0	4.0	2.0	2.0	2.0	2.0
Rule, Teresa N.	Fiscal Services Supervisor	3.0	4.0	3.0	2.0	3.0	4.0
Salazar, Jeremy	Fiscal Services Coordinator I	3.0	4.0	3.0	4.0	5.0	2.0
Turner, Kelly	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Vera, Soledad	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Villafana, Kathryn	Fiscal Analyst I	3.0	4.0	2.5	2.0	5.0	2.0
Whitfield, Gary	Business Manager	3.0	4.0	3.0	2.0	3.0	4.0
Woodhead, Susie	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Average		**2.5**	**3.3**	**2.5**	**2.2**	**3.5**	**2.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class l

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2005-2006
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2.
Findings:

		*EFC Workload Multiplier							
		1	2	1	2	4	5		
		**Activity Codes							
Staff	Title	11	12	13	14	15	16	04-05 PHR	05-06 PHR
Abbott, Kathy	Account Technician	0.5	1	2	0.5	2	2	$21.16	$21.16
Auxier, Sara	Account Technician I	3	4	2	2	3	2	$21.16	$24.11
Ayers, Jan	Fiscal Services Tech		2	2		1	1	$21.16	$21.16
Carsner, Pam	Account Technician I	0.5	1	2	0.5	2	1	$21.16	$21.16
Day, Karen	Account Technician I	3	4	2.5	2	5	5	$21.16	$24.72
Doty, Judy	Fiscal Analyst I	3	4	3	4	8	2	$26.50	$26.50
Evans (Tomlinson), Terri	Fiscal Analyst I	3	4	3	4	5	2	$26.50	$26.50
Gardner, Darla R.	Fiscal Services Specialist	3	4	2	2	3	2	$19.16	$26.64
Gritz, Robert	Account Technician II	1	2	2	1	2		$21.16	$34.74
Hesse, Wendy	Account Technician I								$21.84
Isaman, Terri	Administrative Secretary	0.5	2	3	2	2	5	$25.19	$31.81
Khana. Ghorighos	Fiscal Analyst III	2	3	2.5	1	4	1	$26.50	$34.09
Lenstrom, Amy	Fiscal Services Specialist	3	4	2	2	3	2	$19.16	$19.16
Marriott, Veronica	Fiscal Analyst II	3	4	2	2	2	2	$26.50	$30.15
Rule, Teresa N.	Fiscal Services Supervisor	3	4	3	2	3	4	$26.50	$43.60
Salazar, Jeremy	Fiscal Services Coordinator I	3	4	3	4	5	2	$26.50	$52.06
Turner, Kelly	Fiscal Services Specialist	3	4	2	2	3	2	$19.16	$19.16
Vera, Soledad	Account Technician I	3	4	2.5	2	5	5	$21.16	$24.11
Villafana, Kathryn	Fiscal Analyst I	3	4	2.5	2	5	2	$26.50	$27.93
Whitfield, Gary	Business Manager	3	4	3	2	3	4	$53.25	$76.56
Woodhead, Susie	Fiscal Analyst I	3	4	3	4	5	2	$26.50	$28.63
Average		**2.4**	**3.4**	**2.5**	**2.2**	**3.6**	**2.5**	**$ 24.80**	**$ 30.28**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Bailey, Candy	Financial Aid Tech II	5.0	1.0	1.0	3.0	8.0	2.0
Canutt, Sheryl	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Hesse, Wendy	Account Technician I	3.0	1.0	3.0	3.0	2.0	3.0
Pfleging, Elizabeth	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Salado, Carol	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Shively, Marnie	Financial Aid II	5.0	1.0	1.0	3.0	6.0	
Vidaurri, Michelle	Financial Aid I	5.0	1.0	1.0	3.0	6.0	
Average		**4.7**	**1.0**	**1.3**	**3.0**	**6.6**	**2.2**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	*EFW Workload Multiplier						04-05 PHR	05-06 PHR
		6			8	7	8		
		**Activity Codes							
		21	22	23	24	25	26		
Bailey, Candy	Financial Aid Tech II	5	1	1	3	8	2	$20.67	$20.67
Canutt, Sheryl	Support Staff	5	1	1	3	8	2	$20.15	$20.15
Hesse, Wendy	Account Technician I	3	1	3	3	2	3	$21.16	$21.84
Pfleging, Elizabeth	Support Staff	5	1	1	3	8	2	$20.15	$20.15
Salado, Carol	Support Staff	5	1	1	3	8	2	$20.15	$20.15
Shively, Marnie	Financial Aid II	3	1	3	3	2	3	$20.67	$27.34
Vidaurri, Michelle	Financial Aid I	5	1	1	3	6		$20.67	$19.34
Average		**4.4**	**1.0**	**1.6**	**3.0**	**6.0**	**2.3**	**$ 20.52**	**$ 21.38**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

California Home

Wednesday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2005 Summer Term

Data Current As Of November 01, 2006 11:32:03

Total Headcount	1,418

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California Home

Wednesday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2005 Fall Term

Data Current As Of November 01, 2006 11:32:22

Total Headcount	3,287

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2006 Spring Semester

Data Current As Of November 01, 2006 11:33:16

Total Headcount	3,467

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2005 Summer Term

Data Current As Of November 01, 2006 11:33:36

Total Headcount	8,560

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2005 Fall Term

Data Current As Of November 01, 2006 11:33:51

Total Headcount	18,380

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2006 Spring Semester

Data Current As Of November 01, 2006 11:34:18

Total Headcount	17,486

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: YCCD

John Pendergrass 37,131
Employee Name

Fiscal Year: 2006

Programmer Analyst II
Exact Position Title

IT/District
Department/Location

209 [redacted]5575-6560
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/31/6	1A 1B 2A 2B 3 (4)	Write a Report D.ST.R.0012 – No Stu who Paid enrl Fees (Answer to 26-2)	2 hr
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature John Pendergrass Date 6-9-6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Yosemite Community College District Fiscal Year: 05 - 06

Marlin Rashid
Employee Name

Programmer Analyst II
Exact Position Title

IT / Bldg 1000
Department/Location

209-575-6555
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5 12/06	1A 1B 2A 2B (3) 4	Programming	8
5 12 3106	1A 1B 2A 2B (3) 4	Programming	8
5 12/4 06	1A 1B 2A 2B 3 (4)	Programming	8
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date July 11, 2006

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Yosemite

Fiscal Year: 05-06

Dave Steffy 35,00

Employee Name

Part Time Programmer

Exact Position Title

E, T

Department/Location

575-6556

Telephone #

12mo/11mo/10mo/hrly (circle)

Work year length

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
5/22/06	1A 1B 2A 2B (3) 4	Programming	8
5/23/06	1A 1B 2A 2B (3) 4	4	8
5/24/06	1A 1B 2A 2B (3) 4	4 & Filling in Forms	8
6/2/06	1A 1B 2A 2B 3 (4)	MIS Prep	4
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature David J Steffy Date 7-11-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Sara Auxier
Employee Name

Account Tech I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
Employee Signature Teresa N Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services
Department/Location

Karen Day
Employee Name

Account Technician I
Exact Position Title

209-575-7784 (12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of a for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Day Date 5-8-06

If you have any questions, please contact Gary Whitfield at 209-575-6830

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Y.C.C.D.
District

Business Services
Department/Location

Darla R. Gardner
Employee Name

Account Technician II
Exact Position Title

575-6825 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Darla R Gardner Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Robert Gritz
Employee Name

Fiscal Services Supervisor
Exact Position Title

209-588-5113
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					N/A

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Robert Gritz Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College Dist. — District

MJC Business Services_East Campus — Department/Location

Ghorghas Khana — Employee Name

Fiscal Analyst III — Exact Position Title

575-6822 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2½	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported *actual* data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 05/08/06

If you have any questions, please contact Gary Whitfield, at 575-6836

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College District
District

Business Services - East Campus
Department/Location

Veronica Marriott
Employee Name

Fiscal Analyst II
Exact Position Title

(209) 575-6823
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Marriott Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Teresa N Rule
Employee Name

Accountant
Exact Position Title

575-6828
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa N Rule Date 5/18/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

East Campus Business Services
Department/Location

Soledad Vera
Employee Name

Account Technician I
Exact Position Title

575-6832 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Soledad Vera Date 5-8-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services / MJC East
Department/Location

Kathryn Villafana
Employee Name

Fiscal Analyst I
Exact Position Title

09-575-6824
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Villafana Date 5-4-06

If you have any questions, please contact Cathy Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Bus Serv.
Department/Location

Gary Whitfield
Employee Name

Chief Operations officer
Exact Position Title

6830
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/11/06

If you have any questions, please contact Gary Whitfield, at 6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Business Services/East
Department/Location

Susie Woodhead
Employee Name

Fiscal Analyst I
Exact Position Title

209.575.6827
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of ata for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Woodhead Date 5/4/06

If you have any questions, please contact Gary Whitfield, at 209-575-6830

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD - Columbia
District

Financial Aid / Columbia
Department/Location

Marnie Shively
Employee Name

Financial Aid Tech III
Exact Position Title

588-5313
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	∅				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marnie Shively Date May 9, 06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Columbia College Financial
Department/Location

Michelle Vidaurri
Employee Name

Financial Aid Technician I
Exact Position Title

209-588-5105
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	1 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	∅				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michelle Date 05-09-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised 6/1/06

EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data			FISCAL YEARS							
			98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
		nrolled each fiscal								
			6151	5858	6562	7878	10124	9174	9761	9978
			19435	19568	20.505	21,464	23976	21998	21539	21667
0•	c									
9,978•	+		20116	21758	22321	23926	21902	21492	20787	21000
21,667•	+		45702	47184	49388	53208	56002	52664	52087	52645
21,000•	+									
52,645•	*	vho paid								
3,631•	+		2924	3120	3108	3528	4625	5078	2991	3631
10,132•	+		7950	8685	8540	9137	11190	10137	9723	10132
8,694•	+									
22,457•	*									
4,282•	+		7447	7818	8207	8725	10223	8633	8392	8694
8,160•	+		18321 18320	19623 19624	19858	21390	26038	23848	21106	22457
7,982•	+	xempted from OGG, etc):								
20,424•	*									
			2328	2217	2484	2982	3370	3440	4189	4282
			6335	6379	6684	6997	6811	7084	8112	8160
			6717	7266	7454	7990	6452	7079	7901	7982
			15380	15868	16620	17969 17968	16633	17603	20202	20424

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Gary Whitfield
Employee Name: (print)

Chief Operations Manager
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of students enrolled each fiscal year. (Not FTE's)								
Summer								11524
Fall								23468
Winter/ Intersession								NA
Spring								22120
Total								57112
2. Number of students who paid enrollment fees:								
Summer								7913
Fall								18292
Winter/ Intersession								NA
Spring								16676
Total								42881
3 Number of students exempted from paying enrollment fees (BOGG, etc):								
Summer								4251
Fall								8291
Winter/ Intersession								NA
Spring								8169
Total								20711

9979
21667
20953
52598

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 12/08/06

Dorothy Pimentel
Employee Name: (print)

Program Rep II
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
Summer								3,611
Fall								5,176
Winter/Intersession								NA
Spring								5,444
Total								14,231
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility								
Summer								1,096
Fall								1,353
Winter/Intersession								NA
Spring								806
Total								3,255

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 12/08/06

Gary Whitfield
Employee Name: (print)

Position or Title Chief Operations Officer

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Revised JANUARY 2006

6/15/06

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Number of enrollment fee accounts receivable requiring collection:								
	899	521	970	1368	2129	656	2581	2065
	5150	4504	5281	5330	5975	4777	3704	3315
	~	~	~	~	~	~	~	~
	5952	6674	6660	7211	5227	5780	4494	4324
	12001	11699	12911	13909	13331	11213	10779	9764
liment fee as a result of igibility								
	352	416	454	722	820	1016	929	949
	887	909	911	1104	1304	1346	1242	1249
	~	~	~	~	~	~	~	~
	352	343	539	813	830	751	757	765
	1591	1668	1904	2639	2954	3113	2928	2963

0• C
2,065• +
3,375• +
4,324• +
9,764• *

949• +
1,249• +
765• +
2,963• *

1.8-2
#1
#2

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Gary L. Whitfield
Employee Name: (print)

Chief Operations Officer
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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6/15/06

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								
Fall								
Winter/Intersession								
Spring								
TOTAL x $0.91 per credit								

See Attached

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: [signature] Date 6/15/06

Dorothy Pimentel Program Rep. IT

Employee Name: (print) Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
								05-6
1. Number of enrollment fee waivers requested (BOGG etc.)								
Summer								3486
Fall								6973
Winter/Intersession								NA
Spring								6973
Total								17432
2. Number of enrollment fee waivers approved (BOGG, etc.)								
Summer								2180
Fall								4361
Winter/Intersession								NA
Spring								4361
Total								10,902

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 12/12/06

Dorothy Pimentel
Employee Name (print)

Position or Title Program Rep II

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS							
								05-6
1. Enrollment Fees Collected	$	$	$	$	$	$	$	$5,220,563.00
2. Enrollment Fees Refunded	$	$	$	$	$	$	$	$682,979.98
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$	$	$	$	$	$	$4,537,583.02
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$	$	$	$	$	$	$4,587,648.00
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$	$	$	$	$	$	$91,752.96
4C. 7% Enrollment Fees Waived (Line 4A x 7%)	$	$						
5 Number of credit units for which enrollment fees were waived.								
Summer								22352.5
Fall								78630.5
Winter/Intersession								NA
Spring								75465
TOTAL x $0.91 per credit								160567.68

org 28,336

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date 12/8/06

Dorothy Pimentel — Program Rep

Employee Name: (print) — Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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308/95 Enrollment Fee Collection/Waiver
Enrollment Fee Revenues Report

Statistical Data	98-9	99-0	00-1	01-2	02-3	03-4	04-5	05-6
1) Enrollment Fees Collected	$2,536,475.27	$2,509,811.28	$2,553,069.31	$2,722,785.54	$2,952,565.02	$3,901,522.07	$5,047,933.03	$5,336,170.00
2) Enrollment Fees Refunded	$293,802.31	$401,162.03	$310,372.25	$329,163.62	$370,492.13		$702,501.01	$626,562.04
3) Enrollment Fee Revenue-Net (line 1 subtract line 2)	$2,242,672.96	$2,108,649.25	$2,242,697.06	$2,393,621.92	$2,582,072.89	$3,901,522.07	$4,345,432.02	$4,709,607.96
4A) Total Enrollment Fees Waived							$4,304,709.00	$2,684,825.00
4B) 2% Enrollment Fees Waived (Line 4A x 2%)		$0.00	$0.00	$0.00	$0.00	$0.00	$86,094.18	$53,696.50
4C) 7% Enrollment Fees Waived (Line 4A x 7%)								
5) Number of credit units for which enrollment fees were waived								
Summer			2,458	3,720	6,656	20,465	23,232	
Fall			34,014	39,005	44,117	77,214	80,031	
Winter/Intersession								
Spring			32,259	38,140	41,762	48,869	74,184	

Schedule 4
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals							
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06
EFC 1	1.8-1	1. Enrolled Students	45,702	47,184	49,388	53,268	56,002	52,664	52,087	52,645
EFC 2	1.8-1	2. Paid Enrollment fees	18,321	19,623	19,855	21,390	26,038	23,848	21,106	22,457
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	X	15,862	16,622	17,969	16,633	17,603	20,202	20,424
EFC 4	1.8-2	1. Delinquencies collections	12,001	11,699	12,911	13,909	13,331	11,213	10,779	9,764
EFC 5	1.8-2	2. Refunds	1,591	1,668	1,904	2,639	2,954	3,113	2928	2,963
EFW 6	1.8-3	1. Waivers Requested	X	23,308	25,205	26,100	27,816	48,385	42,418	10,900
EFW 7	1.8-3	2. Waivers Approved	X	7,404	7,294	7,665	8,358	8,851	10,355	10,900
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Did not provide						

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 3

Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2005-06
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06
1.8-4 line 3	Net Revenue Received	$ 2,108,649	$ 2,242,697	$ 2,393,622	$ 2,582,073	$ 3,468,086	$ 4,345,432	$ 4,709,608
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192
1.8-4 line 4A	Enrollment Fees Waived	$ 1,187,073	$ 1,237,210	$ 1,345,946	$ 1,507,992	$ 2,532,425	$ 4,793,489	$ 4,999,859
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,095	For 00-01 through 04-05 - unit fee					
1.8-4 line 5	Summer		2,458	3,420	6,656	20,465	23,232	22,353
	Fall		34,014	39,005	44,117	77,214	80,031	78,630
	Winter/Interssion							
	Spring		32,259	38,140	41,762	48,869	74,184	75,465
	Total # of credits		68,731	80,565	92,535	146,548	177,447	176,4[illegible]
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568
Summary								
2% of line 3	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192
1.8-4 line 4B.	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 83,095						
1.8-4 5	Credit Units Waived		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568
Total Offset Savings	**Forward to EFCW-1**	**$ 149,009**	**$ 132,143**	**$ 148,105**	**$ 166,008**	**$ 253,370**	**$ 344,256**	**$ 354,757**

Sch[illegible]le 5A
Yosemite Com[illegible]y College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)							$ 1,797.58
2	Staff Training	(04)(B)(1)(b)							$ 53,988.78
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)							$ 140.88
4	Waiving student fees	(04)(B)(2)(b)	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ 55,927.24
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)							$ 354,757.00
6	EFCW - Fee Waiver Costs	Total	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ (298,829.76)
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 149,009.00	$ 132,143.00	$ 148,105.00	$ 166,008.00	$ 253,370.00	$ 344,256.00	
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (85,142.94)	$ (61,532.20)	$ (73,513.94)	$ (83,694.22)	$ (121,659.90)	$ (221,458.17)	
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 63,866.06**	**$ 70,610.80**	**$ 74,591.06**	**$ 82,313.78**	**$ 131,710.10**	**$ 122,797.83**	**$ 55,927.24**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

Schedule 6
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year 2005-2006
Student Count Summary

Purpose: To summarize student count.
Source: California Community colleges Chancellor's Office website.
Findings:

College	Term	Count
Columbia	Summer	1,418
	Fall	3,287
	Spring	3,467
Modesto	Summer	8,560
	Fall	18,380
	Spring	17,486
		52,598

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

0• C

0• C

1,425• +
9,475• +
10,900• *

0• C

564,115• +
4,435,744• +
4,999,859• *

Columbia College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 11:36:28

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	177	34,928
BOGW - Part B based on income standards	923	378,117
BOGW - Part C based on financial need	326	151,070

Total Unduplicated Count = 1,425
Total Amount = $ 564,115

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Headcount

Columbia 1,425
10DEST0 9,475
10,900

Amount

$ 564,115
$ 4,435,744
$ 4,999,859

California Home

Wednesday, I

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Modesto College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 01, 2006 11:36:53

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	777	369,280
BOGW - Part B based on income standards	6,086	2,797,400
BOGW - Part C based on financial need	2,613	1,269,064

Total Unduplicated Count = 9,475
Total Amount = $ 4,435,744

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California Home

Saturday, N

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Columbia College
Financial Aid Count and Amount By type
For 2005-2006

Data Current As Of November 18, 2006 09:39:58

Download The Result in Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	177	34,928
BOGW - Part B based on income standards	923	378,117
BOGW - Part C based on financial need	326	151,070

Total Amount = $ 564,115

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PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 05-06 and the missing rates for FY: 04-05.

COMMUNITY COLLEGE DISTRICT NAME: Yosemite Community College District

Name	Title	Fiscal Years: 04-05	05-06
	AVERAGE ACCOUNT TECHNICIAN I		$ 21.84
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 35.55	$ 37.58
	AVERAGE ADMINISTRATIVE SECRETARY	$ 27.77	$ 28.67
	AVERAGE DEAN	$ 69.94	$ 73.53
	AVERAGE DIRECTOR	$ 53.20	$ 64.92
	AVERAGE EXECUTIVE SECRETARY	$ 33.26	$ 33.43
	AVERAGE FINANCIAL AID TECHNICIAN II		$ 21.84
	AVERAGE FISCAL ANALYST I		$ 25.35
	AVERAGE MECHANIC		$ 31.70
	AVERAGE PRESIDENT	$ 96.42	$ 103.00
	AVERAGE VICE PRESIDENT		$ 75.05
~~ABBOTT, KATHY~~	ACCOUNT TECHNICIAN I(Resigned)		
AGOSTINI, THERESE	DEAN OF MATRICULATION, ADMISSIONS & RECORDS	$ 68.21	$ 72.12

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
AKIONA, SHELLY	ADMINSTRATIVE ASSITANT TO CHANCELLOR	$ 36.43	$ 43.60
~~ALVAREZ, JUAN~~	DEAN OF STUDENT SERVICES(Retired)		
AMARANTE, PEGGY	SECRETARY III	$ 24.23	$ 25.63
ANGLIN,MARK	DEAN OF AGRICULTURE, ENVIRON. SCIENCES		$ 72.12
AUXIER, SARA	ACCOUNT TECHNICIAN I		$ 24.11
~~AYERS, JAN~~	FISCAL ANAYLIST I		
~~BAILEY, CANDY~~	FINANCIAL AID TECHNICIAN II		$ 21.84
BAKER, MARIA	DIRECTOR, FACILITIES PLANNING & OPS	$ 66.26	$ 70.05
BALDWIN, GERALD	TRANSPORTATION TECHNICIAN II	$ 23.41	$ 26.00
BETHEL, AMY	FOUNDATION ASSITANT/EVENT COORDINATOR	$ 27.77	$ 30.32
BEUVING, JANET	PAYROLL TECH III (Retired)		
BOODROOKAS, GEORGE	DEAN OF COMMUNITY & ECONOMIC DEV	$ 72.48	$ 76.56
BRYANT, OTIS	LEAD MECHANIC	$ 36.61	$ 38.70
BYRD, WENDY	DIRECTOR OF STUDENT DEV & CAMPUS LIFE	$ 49.25	$ 52.06
CAMPBELL, DEBORAH	CONTROLLER	$ 68.25	$ 76.56
~~CAMPBELL, MEGAN~~	GENERAL CLERK, Fac.Plann.&Ops. (RESIGNED)	$ 12.33	$ 12.72
~~CANUTT, SHERYL~~	SUPPORT STAFF (RESIGNED)		
~~CARSNER, PAM~~	ACCOUNT TECHNICIAN I (RESIGNED)		

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
CHAVEZ,CONI	ADMIN ASSISTANT TO THE PRESIDENT		$ 37.58
CHAVEZ, Arnold	BOOKSTORE OPERATIONS LEAD		$ 27.93
CHAWINGA, JANE	INTERNAL AUDITOR	$ 52.30	$ 55.29
CODINI, JIM	LEAD TECHNICIAN	$ 28.49	$ 30.15
COOPER, SPENCE	DIRECTOR, PURCHASING DEPARTMENT	$ 52.30	$ 55.29
COVER ALLAN	INTERIM DEAN OF AGRICULTURE, ENVIRON. SCIENCES		
CRAWFORD, LOUISE	GREAT VALLEY MUSEUM MANAGER	$ 32.57	$ 36.53
CRAMTON, SHAWNA	DIRECTOR OF RESEARCH AND PLANNING		$ 41.78
DAVIS, TOM	INTERIM DIRECTOR FIRE SCIENCE FACILITY		
DAY, KAREN	ACCOUNT TECHNICIAN I		$ 24.72
DIGGS-GRAY,LINDA	HUMAN RESOURCES SUPERVISOR		$ 37.31
DORSETT, BEN	MAINTENANCE I		$ 24.70
~~DOTY, JUDY~~	FISCAL ANALYST I		
~~EBRAHIMOFF,GIZEL~~	HUMAN RESOURCES SUPERVISOR		
~~EVANS, (TOMLINSON), TERRI~~	FISCAL ANALYST I		
~~FURIO, RALPH~~	MAINTENANCE	$ 32.22	
GAISER, WILLIAM (BILL)	MECHANIC III		
GALVAN, RAMON	GROUNDS MAINTENANCE II		$ 22.95

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
GARDNER, DARLA R.	FISCAL SERVICES SPECIALIST		$ 26.64
GERVIN, DENNIS	VP STUDENT LEARNING	$ 76.22	$ 82.67
GHAN, MARVIN	MECHANIC III	$ 30.71	$ 34.08
GIRON, TINA	CAREER DEV/TRANSFER CENTER TECH III	$ 29.97	$ 32.69
GREEN, RHONDA	AUXILIARY SERVICES MANAGER	$ 52.30	$ 55.29
GRITZ, ROBERT	ACCOUNT TECHNICIAN II		$ 34.74
~~GROETESMA,JUDITH~~	ADMIN ASSISTANT TO THE VC FOR FISCAL SVCS		
HAMPTON, RODNEY	CAMPUS OPS. MNGR. I (new hire in 04/05) . . .	$ 37.41	$ 37.41
HARRIS, TOM	TRANSPORTATION SUPERVISOR	$ 35.55	$ 37.58
HART, CAROLYN	ADMIN ASSISTANT TO THE PRESIDENT MJC	$ 35.55	$ 37.58
~~HARWOOD, SUE ELLEN~~	DIRECTOR OF COMM OUTREACH & DEV SVCS		
~~HEGOAS, KATIE~~	STUDENT EMPLOYEE	$ -	
HERNANDEZ, TERESA	PAYROLL ANALYST II	$ 26.27	$ 28.63
HESSE, WENDY	ACCOUNT TECHNICIAN I		$ 21.84
HOILE, LINDA	DIRECTOR OF MARKETING & PUBLIC RELATIONS	$ 49.25	$ 52.06
IMBESI, BILL	FINANCIAL AID ACCOUNTANT	$ 37.36	$ 39.53
ISAMAN, TERRI	EXECUTIVE SECRETARY		$ 31.81
~~JEFFERY, KATHRYN~~	VICE PRESIDENT OF STUDENT SERVICES		

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
JOHNSON, ALPINE	INTERM DIRECTOR OF CAMPUS SECURITY		$ 52.06
JOHNSON, JAMES L	VP OF INSTRUCTION	$ 69.62	$ 82.67
JONES, JERRY	MAINTENANCE III, PAINTER	$ 28.50	$ 33.25
KAISER, WILLIAM	DEAN PHYSICAL RECREATION/HEALTH ED	$ 69.62	$ 73.53
KHANNA-CHAMAKI, GHORIGHOS	FISCAL ANALYST III		$ 34.09
LARKIN, CASS	FINANCIAL AID MANAGER		$ 31.68
LAU, DOUG	DIRECTOR, MARKETING & PUBLIC INFORMATION	$ 49.25	$ 52.06
~~LENSTROM, AMY~~	FISCAL SERVICES SPECIALIST		
LOPEZ, JOYCIE	SUPPORT STAFF, Fac.Ops. - Columbia CC	$ 19.65	$ 21.81
LOYD,PAMELA	COUNSELOR		$ 58.97
~~MADDEN,DEREK~~	INTERIM DEAN OF SCIENCE, MATH & ENGRG	$ 64.66	
MARRIOTT, VERONICA	FISCAL ANALYST II		$ 30.15
~~MAYHEW,LEW~~	COUNSELOR		RETIRED
~~MCDANIEL,WILLIE~~	DIRECTOR OF CAMPUS SECURITY	$ 49.25	
~~McLEOD, WILMA~~	VICE PRESIDENT, STUDENT SERVICES		
MENDENHALL, GARY	DEAN OF INSTRUCTIONAL SERVICES	$ 72.42	$ 76.56
MENDEZ, PEDRO	DIRECTOR OF TECHNICAL EDUCATION	$ 58.82	$ 62.19
MESENHIMER, SANDY	PAYROLL SUPERVISOR, FISCAL SERVICES	$ 41.24	$ 43.60

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
METCALF, VENESSE	DIRECTOR OF HUMAN RESOURCES	$ 52.98	$ 55.29
MICAL, CONNIE	CHIEF OPERATING OFFICER	$ 70.75	$ 76.56
MILLER, PHYLIS	ACCOUNT TECH I	$ 23.66	$ 25.99
MOREIRA, TERI	CUSTODIAN	$ 22.14	$ 23.52
MUNOZ,LUCY	ADMIN ASSISTANT		$ 37.58
NADELL,BOB	VICE PRESIDENT, STUDENT SERVICES		$ 78.48
NESMITH, TIMOTHY	CAMPUS OPS. MNGR. II	$ 40.87	$ 45.35
~~NOEL, CHARLES~~	GROUNDS MAINTENANCE SPECIALIST	$ 19.84	
~~OGARA, CHRIS~~	MECHANIC III	$ 30.71	$ 31.70
~~OSNAYA, ELISA~~	ADMIN ASSISTANT TO CHANCELLOR		RETIRED
~~PADDACK, JOSEPH~~	GROUNDS MAINTENANCE SPECIALIST	$ 19.92	
PADDACK, KEN	MAINTENANCE III	$ 33.02	$ 34.94
~~PANTALEONI, PAT~~	ADMIN ASSISTANT TO THE PRESIDENT		
PENGERGRASS, JOHN	PROGRAM ANALYST II		$ 37.31
~~PERALTA, RICH~~	VICE CHANCELLOR, HUMAN RESOURCES		RETIRED
~~PFLEGING, ELIZABETH~~	SUPPORT STAFF		
PIMENTEL, DOROTHY	PROGRAM REPRESENTATIVE		$ 28.67
RAILEY, GEORGE	DEAN OF INSTRUCTIONAL SERVICES		$ 76.56

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
RASHID, MARLIN	PROGRAMMER ANALYST II		$ 36.57
RIGGS, JIM	PRESIDENT	$ 96.42	$ 105.17
ROBERT, BRENDA	DEAN OF LITERATURE & LANGUAGE	$ 69.76	$ 73.53
ROSE, GINA	ASSITANT CHANCELLOR	$ 64.99	$ 85.27
ROSE, RICHARD	PRESIDENT		$ 100.83
RULE, TERESA N.	FISCAL SERVICES SUPERVISOR		$ 43.60
RUSH, MYRA	DIRECTOR OF FIANANCIAL AID	$ 52.30	$ 55.29
~~SALADO, CAROL~~	SUPPORT STAFF		
SALAZAR, JEREMY	FISCAL SERVICES COORDINATOR I		$ 52.06
SALCEDO, ALICIA	SUPPORT STAFF TECH/SST II - Fac.Plann.&Ops.	$ 21.13	$ 22.36
SAMPSON,CARRIE	ADMIN ASSISTANT TO THE EXEC. VC	$ 35.55	$ 37.58
SCHARFFER, BECKI	EXECUTIVE SECRETARY	$ 30.09	$ 33.43
~~SCHMIDT, JUDY~~	ADMIN ASSISTANT		
SCOTT, TERESA	VICE CHANCELLOR, FISCAL SERVICES	$ 93.44	$ 98.78
~~SCROGGINS, BILL~~	INTERIM PRESIDENT	$ 88.80	
SCULLY, DOROTHY	INSTRUCTOR, LITERATURE & LANGUAGE ARTS		$ 59.63
SERRANO, CHRISTINE	ACCOUNT TECHNICIAN I		$ 24.72
SHIVELY, MARNIE	FINANCIAL AID II		$ 27.34

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
SIMMS, DENNIS	GROUNDS MAINTENANCE II	$ 22.23	$ 23.52
~~SMITH, CHERYL~~	HUMAN RESOURCES SUPERVISOR		
SMITH, LORI	SUPPORT STAFF II	$ 21.13	$ 22.36
SOLA,JOHN	INTERIM DIRECTOR FIRE SCIENCE FACILITY		$ 51.17
STEFFY, DAVE	PART TIME PROGRAMMER		$ 35.22
SWANK, JEFF	ELECTRONIC TECHNICIAN	$ 31.42	$ 33.25
TOROK,MIKE	INTERIM DEAN OF SCIENCE, MATH & ENGRG		$ 68.70
~~TURNER, KELLY~~	FISCAL SERVICES SPECIALIST		
VANDER WAL, ROBERT	CUSTODIAN	$ 21.69	$ 22.95
VANTRESS, PAUL	DIRECTOR OF WORKFORCE DEVELOPMENT	$ 52.30	$ 55.29
VASCONCELOS, SABINO	GROUNDS MAINTENANCE II		$ 18.82
VASQUEZ, ALFREDO	GROUNDS MAINTENANCE III	$ 24.53	$ 25.95
VAUGHT, LLOYD	SYSTEMS PROGRAM MANAGER		$ 49.21
VERA, SOLEDAD	ACCOUNT TECHNICIAN I		$ 24.11
VIDAURRI, MICHELLE	FINANCIAL AID I		$ 19.34
VILLAFANA, KATHRYN	FISCAL ANALYST I		$ 27.93
WARING, DEREK	DEAN OF STUDENT SERVICES	$ 72.42	$ 76.56
WHITE, JEAN	ADMINISTRATIVE SECRETARY	$ 25.84	$ 28.67

MANDATE REIMBURSEMENT SERVICES

Name	Title	04-05	05-06
WHITFIELD, GARY	CHIEF OPERATING OFFICER	$ 66.76	$ 76.56
WILLIAMS, JIM	CHANCELLOR	$ 113.11	$ 122.08
~~WILSON, DAVE~~	VICE PRESIDENT, INSTRUCTION(Retired)		RETIRED
WIRTH, DIANE	INTERIM VC, HUMAN RESOURCES	$ 72.42	$ 86.72
~~WOODARD, BILL~~	DIRECTOR OF MEDIA & TECH SUPPORT SYSTEMS(Retired)		RETIRED
WOODHEAD, SUSIE	FISCAL ANALYST I		$ 28.63
YOCUM, DOUGLAS	GROUNDS MAINTENANCE II		$ 21.84

Sixten and Associates
Mandate Reimbursement Services

KEITH B. PETERSEN, MPA, JD, President
E-Mail: Kbpsixten@aol.com

San Diego
5252 Balboa Avenue, Suite 900
San Diego, CA 92117
Telephone: (858) 514-8605
Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 8, 2008

CERTIFIED MAIL #7006 3450 0000 3941 8727

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claim
Yosemite Community College District CC50150

Dear Ms. Brummels:

Enclosed please find the original claim and an extra copy of the FAM-27 for Yosemite Community College District's reimbursement claim listed below:

308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding this claim, please contact me at (858) 514-8605.

Sincerely,

D. Brummell

for Keith B. Petersen, President

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC50150

(02) Claimant Name: Yosemite Community College District

County of Location: Stanislaus

Street Address or P.O. Box: P.O. Box 4065

City: Modesto | State: CA | Zip Code: 95352

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated [X]	(09) Reimbursement [X]
	(04) Combined [ ]	(10) Combined [ ]
	(05) Amended [ ]	(11) Amended [ ]
Fiscal Year of cost	(06) 2007-2008	(12) 2006-2007
Total Claimed Amount	(07) $ 280,200	(13) $ 254,742
Less: 10% Late Penalty, not to exceed $10,000		(14) $ -
Less: Prior Claim Payment Received		(15) $ -
Claimed Amount		(16) $ 254,742
Due from State	(08) $ 280,200	(17) $ 254,742
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	140
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	246,972
(25) EFCW-1, (04)(B)(1)(a)(f)	36
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	87,743
(29) EFCW-1, (04)(B)(2)(c)(f)	443
(30) EFCW-1, (06)	32
(31) EFCW-1, (07)	108,078
(32) EFCW-1, (09)	100,448
(33) EFCW-1, (10)	88,222
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) Teresa Scott — **Date** 1/31/08

Teresa Scott
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

Ten and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267	MANDATED COSTS ENROLLMENT FEE COLLECTION AND WAIVERS CLAIM SUMMARY	FORM EFCW-1

(01) Claimant: Yosemite Community College District

(02) Type of Claim: Reimbursement [X] Estimated [ ]

Fiscal Year: 2006-2007

(03) Leave Blank

Direct Costs	Object Accounts					
(04) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
A. 1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 139.68	$ -	$ -	$ -	$ -	$ 139.68
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
A. 2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 246,972.11	$ -	$ -	$ -	$ -	$ 246,972.11
B. 1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 36.02	$ -	$ -	$ -	$ -	$ 36.02
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
B. 2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 87,743.09	$ -	$ -	$ -	$ -	$ 87,743.09
c. Reporting BOG fee waiver data to CCC	$ 443.36	$ -	$ -	$ -	$ -	$ 443.36
(05) Total Direct Costs	$ 335,334.26	$ -	$ -	$ -	$ -	$ 335,334.26

Indirect Costs		
(06) Indirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	32.23%
(07) Total Indirect Costs	[Line (06) x line (05)(a)]	$ 108,078.23
(08) Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 443,412.49
Cost Reduction		
(09) Less: Enrollment Fee Revenue offset		$ 100,448.00
(10) Less: Enrollment Fee Waiver offsets		$ 88,222.47
(11) Total Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 254,742.02

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

osemite Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Young, Holly Program Analyst	$46.56	3.0	$ 139.68				
(05) Total [x] Subtotal [ ] Page 1 of 1			$ 139.68	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☒ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Referencing student accounts and records							
Enrollment Office Staff Various	$31.74	2,386.8	$ 75,757.03				
Calculating total enrollment fee to be collected							
Enrollment Office Staff Various	$31.74	1,239.0	$ 39,325.86				
Answering student's questions regarding enrollment fee collection							
Enrollment Office Staff Various	$31.74	2,386.8	$ 75,757.03				
ting written and computer records for enrollment fee information							
Enrollment Office Staff Various	$31.74	826.0	$ 26,217.24				
Collecting delinquent enrollment fees, or turning over accounts to collection agencies							
Enrollment Office Staff Various	$31.74	806.6	$ 25,601.48				
Providing refund of enrollment fees paid to students establishing fee waiver after enrollment							
Enrollment Office Staff Various	$31.74	135.9	$ 4,313.47				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 246,972.11	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS

ENROLLMENT FEE COLLECTION AND WAIVERS

ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

semite Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Rashid, Marlin Program Analyst	$27.71	1.3	$ 36.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 36.02	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person Financial Aid Office Staff Various	$23.21	1,358.1	$ 31,521.50				
Receiving waiver applications Financial Aid Office Staff Various	$23.21	289.0	$ 6,707.69				
Evaluating waiver applications and verifying application documents Financial Aid Office Staff Various	$23.21	375.7	$ 8,720.00				
...fying students of additional documentation requirements and how to obtain information Financial Aid Office Staff Various	$23.21	320.7	$ 7,443.45				
Entering approved application information into district records; providing student award letter Financial Aid Office Staff Various	$23.21	1,201.8	$ 27,893.78				
In case of denied applications, reviewing and evaluating information if denial is appealed by student Financial Aid Office Staff Various	$23.21	235.1	$ 5,456.67				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 87,743.09	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS

ENROLLMENT FEE COLLECTION AND WAIVERS

ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant

semite Community College District

(02) Fiscal Year

2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Rashid, Marlin Program Analyst	$27.71	16.0	$ 443.36				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 443.36	$ -	$ -	$ -	$ -

Yosemite Community College District
308/95 ENROLLMENT COLLECTIONS/WAIVERS
2006-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	2,386.80	Enrollment Office Staff	Various	$31.74	$75,757.03	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	1,239.00	Enrollment Office Staff	Various	$31.74	$39,325.86	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,386.80	Enrollment Office Staff	Various	$31.74	$75,757.03	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	826.00	Enrollment Office Staff	Various	$31.74	$26,217.24	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	806.60	Enrollment Office Staff	Various	$31.74	$25,601.48	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	135.90	Enrollment Office Staff	Various	$31.74	$4,313.47	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	7,781.10	**Enrollment Office Staff Total**			$246,972.11		
06-07	1,358.10	Financial Aid Office Staf	Various	$23.21	$31,521.50	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	289.00	Financial Aid Office Staf	Various	$23.21	$6,707.69	Receiving waiver applications	Waiving student fees
06-07	375.70	Financial Aid Office Staf	Various	$23.21	$8,720.00	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	320.70	Financial Aid Office Staf	Various	$23.21	$7,443.45	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,201.80	Financial Aid Office Staf	Various	$23.21	$27,893.78	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	235.10	Financial Aid Office Staf	Various	$23.21	$5,456.67	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	3,780.40	**Financial Aid Office Staff Total**			$87,743.09		
11/14/2006	0.80	Rashid, Marlin	Program Analyst	$27.71	$22.17	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
11/20/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
11/28/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
12/1/2006	0.50	Rashid, Marlin	Program Analyst	$27.71	$13.86	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.B.
12/5/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
12/7/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	17.30	**Rashid, Marlin Total**			$479.39		
11/9/2006	3.00	Young, Holly	Program Analyst	$46.56	$139.68	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A.
	3.00	**Young, Holly Total**			$139.68		
	11,581.80	**Grand Total**			$335,334.27		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$53,993,236		$53,993,236	$482,557	$53,510,679
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	4,982,958		4,982,958	233,901	4,749,057
Course and Curriculum Development	6020	2,220		2,220		2,220
Academic/Faculty Senate	6030	163,969		163,969	32	163,937
Other Instructional Administration & Instructional Governance	6090	9,501		9,501		9,501
Instructional Support Services	6100					
Learning Center	6110	550,107		550,107	2,181	547,926
Library	6120	1,866,534		1,866,534	16,182	1,850,352
Media	6130	1,153,575		1,153,575	106,249	1,047,326
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	861,214		861,214	6,034	855,180
Other Instructional Support Services	6190	23,353		23,353		23,353
Admissions and Records	6200	1,242,204		1,242,204	17,806	1,224,398
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,673,536		2,673,536		2,673,536
Matriculation and Student Assessment	6320	160,586		160,586	3,219	157,367
Transfer Programs	6330	157,927		157,927		157,927
Career Guidance	6340					
Other Student Counseling and Guidance	6390	265,867		265,867		265,867
Other Student Services	6400					
Disabled Students Programs & Services	6420	2,032,483		2,032,483	35,052	1,997,431
Subtotal		$70,139,270	$0	$70,139,270	$903,213	$69,236,057

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,660,179	$603,642	$1,056,537	$4,516	$1,052,021
Health Services	6440	613,226		613,226		613,226
Student Personnel Admin.	6450	619,831		619,831	6,502	613,329
Financial Aid Administration	6460	1,422,776		1,422,776	4,993	1,417,783
Job Placement Services	6470	22,681		22,681	-7	22,688
Veterans Services	6480	64,873		64,873		64,873
Miscellaneous Student Services	6490	424,047		424,047		424,047
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	2,859,944		2,859,944	2,859,944	0
Custodial Services	6530	2,316,680		2,316,680	2,316,680	0
Grounds Maintenance and Repairs	6550	512,602		512,602	512,602	0
Utilities	6570	2,011,222		2,011,222	2,011,222	0
Other	6590					
Planning, Policy Making, and Coordination	6600	3,543,032		3,543,032	3,543,032	0
General Inst. Support Services	6700					
Community Relations	6710	640,059		640,059	640,059	0
Fiscal Operations	6720	2,126,912		2,126,912	2,126,912	0
Human Resources Management	6730	1,177,538		1,177,538	1,177,538	0
Noninstructional Staff Benefits & Incentives	6740	1,326,479		1,326,479	1,326,479	0
Staff Development	6750	88,771		88,771	88,771	0
Staff Diversity	6760	854,377		854,377	854,377	0
Logistical Services	6770	3,182,662		3,182,662	3,182,662	0
Management Information Systems	6780	2,844,518		2,844,518	2,844,518	0
Subtotal		$98,451,679	$603,642	$97,848,037	$24,404,013	$73,444,024

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	93,435		93,435	93,435	0
Community Services and Economic Development	6800					
Community Recreation	6810	73,427		73,427		73,427
Community Service Classes	6820	1,086,171		1,086,171	10,573	1,075,598
Community Use of Facilities	6830	2,978		2,978		2,978
Economic Development	6840	105		105		105
Other Community Services & Economic Development	6890	316,721		316,721		316,721
Ancillary Services	6900					
Bookstores	6910	736		736		736
Child Development Center	6920	709,982		709,982	6,192	703,790
Farm Operations	6930	2,351		2,351		2,351
Food Services	6940	2,883		2,883		2,883
Parking	6950	107,438		107,438		107,438
Student and Co-curricular Activities	6960	43,464		43,464		43,464
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	137,497		137,497		137,497
Other Auxiliary Operations	7090	146,796		146,796		146,796
Physical Property Acquisitions	7100					
(05) Total		$101,175,663	$603,642	$100,572,021	$24,514,213	$76,057,808
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				32.23%		
(07) Notes						

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	1,524,563	448,105	405,679	88,266		2,466,613
Architecture and Environmental Design	0200	222,675		360			223,035
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,943,567	225,240	24,552			2,193,359
Business and Management	0500	1,663,728	135,809	47,057	14,306		1,860,900
Communications	0600	444,499	9,463	11,731	4,294		469,987
Information Technology	0700	1,418,699	5,218	66,208			1,490,125
Education	0800	3,195,871	333,044	412,432	35,998		3,977,345
Engineering and Industrial Tech.	0900	1,840,905	599,934	414,963	40,111		2,895,913
Fine and Applied Arts	1000	3,493,006	271,906	264,388	14,072		4,043,372
Foreign Language	1100	922,459	6,247	1,414			930,120
Health	1200	2,799,783	114,380	650,370	161,897		3,726,430
Family and Consumer Sciences	1300	1,397,625	2,031,038	4,479,131	47,930		7,955,724
Law	1400						
Humanities (Letters)	1500	4,950,639	135,449	68,745			5,154,833
Library Science	1600						
Mathematics	1700	2,869,595	134,249	7,306			3,011,150
Military Studies	1800						
Physical Sciences	1900	1,513,238	107,960	113,404	11,829		1,746,431
Psychology	2000	1,034,035	4,888	1,116			1,040,039
Public and Protective Services	2100	1,423,005	444,831	755,678	9,740		2,633,254
Social Sciences	2200	2,364,564	20,817	24,064	4,107		2,413,552
Commercial Services	3000						
Interdisciplinary Studies	4900	2,268,385	1,363,952	618,803	50,007		4,301,147
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,459,907					1,459,907
Subtotal - Instructional Activities	**599**	38,750,748	6,392,530	8,367,401	482,557		53,993,236

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

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CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,328,748	420,309	233,901		4,982,958
Course and Curriculum Development	6020			2,220			2,220
Academic/Faculty Senate	6030		152,634	11,303	32		163,969
Other Instruct. Admin. & Instruct. Governance	6090		9,483	18			9,501
Subtotal - Instructional Administration	**6000**		4,490,865	433,850	233,933		5,158,648
Instructional Support Services (6100)							
Learning Center	6110	310,105	193,132	44,689	2,181		550,107
Library	6120		1,568,505	281,847	16,182		1,866,534
Media	6130		956,538	90,788	106,249		1,153,575
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		770,799	84,381	6,034		861,214
Other Instructional Support Services	6190		23,353				23,353
Subtotal - Instructional Support Services	**6100**	310,105	3,512,327	501,705	130,646		4,454,783
Admissions and Records	**6200**		1,149,094	75,304	17,806		1,242,204
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,643,634	29,902			2,673,536
Matriculation and Student Assessment	6320		143,581	13,786	3,219		160,586
Transfer Programs	6330		149,965	7,962			157,927
Career Guidance	6340						
Other Student Counseling and Guidance	6390		258,668	7,199			265,867
Subtotal - Student Counseling and Guidance	**6300**		3,195,848	58,849	3,219		3,257,916

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,183,271	814,160	35,052		2,032,483
Extended Opportunity Prgms. & Services (EOPS)	6430		959,973	92,048	4,516	603,642	1,660,179
Health Services	6440		505,314	107,912			613,226
Student Personnel Administration	6450		593,340	19,989	6,502		619,831
Financial Aid Administration	6460		1,260,733	157,050	4,993		1,422,776
Job Placement Services	6470		18,149	4,539	(7)		22,681
Veterans Services	6480		63,741	1,132			64,873
Miscellaneous Student Services	6490		403,749	20,298			424,047
Subtotal - Other Student Services	6400		4,988,270	1,217,128	51,056	603,642	6,860,096
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,074,737	589,180	196,027		2,859,944
Custodial Services	6530		2,206,294	110,386			2,316,680
Grounds Maintenance and Repairs	6550		464,763	47,839			512,602
Utilities	6570			2,011,222			2,011,222
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	6500		4,745,794	2,758,627	196,027		7,700,448
Planning, Policymaking, and Coordination	6600		2,836,150	504,188	202,694		3,543,032

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity

S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA

For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		424,728	207,429	7,902		640,059
Fiscal Operations	6720		2,176,610	(67,684)	17,986		2,126,912
Human Resources Management	6730		1,079,135	98,403			1,177,538
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,326,479				1,326,479
Staff Development	6750		1,593	38,830	48,348		88,771
Staff Diversity	6760		407,080	444,701	2,596		854,377
Logistical Services	6770		2,585,816	509,275	87,571		3,182,662
Management Information Systems	6780		1,946,050	743,816	154,652		2,844,518
Other General Institutional Support Services	6790		92,461	974			93,435
Subtotal - General Institutional Support Services	**6700**		10,039,952	1,975,744	319,055		12,334,751
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		71,372	2,055			73,427
Community Service Classes	6820	195,444	371,116	509,038	10,573		1,086,171
Community Use Facilities	6830		1,457	1,521			2,978
Economic Development	6840		105				105
Other Community Svcs. & Economic Development	6890		241,217	75,504			316,721
Subtotal - Community Services	**6800**	195,444	685,267	588,118	10,573		1,479,402

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

SUPPLEMENTAL DATA
For Actual Year: 2005-06

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000)	Capital Outlay (6000)	Other Outgo (7000)	Total (1000 - 7000)
		Instructional* (1)	Noninstructional** (2)	(3)	(4)	(5)	(6)
Ancillary Services (6900)							
Bookstores	6910		736				736
Child Development Centers	6920		432,039	271,751	6,192		709,982
Farm Operations	6930		2,351				2,351
Food Services	6940		2,883				2,883
Parking	6950		268,241	(160,803)			107,438
Student and Co-curricular Activities	6960		40,234	3,230			43,464
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	6900		746,484	114,178	6,192		866,854
Auxillary Operations (7000)							
Contract Education	7010	9,932	308,094	(180,529)			137,497
Other Auxiliary Operations	7090		146,796				146,796
Subtotal - Auxiliary Operations	7000	9,932	454,890	(180,529)			284,293
Physical Property and Related Acquisitions (7100)	7100						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	7200						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310						
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	7300						
TOTAL EXPENDITURES and OTHER OUTGO	391	39,266,229	43,237,471	16,414,563	1,653,758	603,642	101,175,663

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Schedule 1A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	57,283
Avg. time p/account	2.5
Total Time (in minutes)	143208
Per Hour	60
Hours Worked **(** Activity 11)**	**2386.8**
***EFC 2**	22,528
Avg. time p/student	3.3
Total Time (in minutes)	74342
Per Hour	60
Hours Worked **(** Activity 12)**	**1239.0**
***EFC 1**	57,283
Avg. time p/question	2.5
Total Time (in minutes)	143208
Per Hour	60
Hours Worked **(** Activity 13)**	**2386.8**
***EFC 2**	22,528
Avg. time p/file	2.2
Total Time (in minutes)	49562
Per Hour	60
Hours Worked **(** Activity 14)**	**826.0**
***EFC 4**	13,827
Avg. time p/account	3.5
Total Time (in minutes)	48395
Per Hour	60
Hours Worked **(** Activity 15)**	**806.6**
***EFC 5**	3,262
Avg. time p/student	2.5
Total Time (in minutes)	8155
Per Hour	60
Hours Worked **(** Activity 16)**	**135.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	17,338
Avg. time p/question	4.7
Total Time (in minutes)	81489
Per Hour	60
Hours Worked **(** Activity 21)**	**1358.1**
***EFW 6**	17,338
Avg. time p/application	1.0
Total Time (in minutes)	17338
Per Hour	60
Hours Worked **(** Activity 22)**	**289.0**
***EFW 6**	17,338
Avg. time p/evaluation	1.3
Total Time (in minutes)	22539
Per Hour	60
Hours Worked **(** Activity 23)**	**375.7**
***EFW 8**	6,413
Avg. time p/application	3.0
Total Time (in minutes)	19239
Per Hour	60
Hours Worked **(** Activity 24)**	**320.7**
***EFW 7**	10,925
Avg. time p/application	6.6
Total Time (in minutes)	72105
Per Hour	60
Hours Worked **(** Activity 25)**	**1201.8**
***EFW 8**	6,413
Avg. time p/application	2.2
Total Time (in minutes)	14109
Per Hour	60
Hours Worked **(** Activity 26)**	**235.1**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. Used 05-06 timestudy. All backup is in 2005-06 files.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abbott, Kathy	Account Technician	0.5	1.0	2.0	0.5	2.0	2.0
Auxier, Sara	Account Technician I	3.0	4.0	2.0	2.0	3.0	2.0
Ayers, Jan	Fiscal Services Tech		2.0	2.0		1.0	1.0
Carsner, Pam	Account Technician I	0.5	1.0	2.0	0.5	2.0	1.0
Day, Karen	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Doty, Judy	Fiscal Analyst I	3.0	4.0	3.0	4.0	8.0	2.0
Evans (Tomlinson), Terri	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Gardner, Darla R.	Fiscal Services Specialist		2.0	2.0		1.0	1.0
Gritz, Robert	Account Technician II	2.0	2.0	2.0	1.0	2.0	
Isaman, Terri	Administrative Secretary	0.5	2.0	3.0	2.0	2.0	5.0
Klana. Ghorighos	Fiscal Analyst III	2.0	3.0	2.5	1.0	4.0	1.0
Lenstrom, Amy	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Marriott, Veronica	Fiscal Analyst II	3.0	4.0	2.0	2.0	2.0	2.0
Rule, Teresa N.	Fiscal Services Supervisor	3.0	4.0	3.0	2.0	3.0	4.0
Salazar, Jeremy	Fiscal Services Coordinator I	3.0	4.0	3.0	4.0	5.0	2.0
Turner, Kelly	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Vera, Soledad	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Villafana, Kathryn	Fiscal Analyst I	3.0	4.0	2.5	2.0	5.0	2.0
Whitfield, Gary	Business Manager	3.0	4.0	3.0	2.0	3.0	4.0
Woodhead, Susie	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Average		**2.5**	**3.3**	**2.5**	**2.2**	**3.5**	**2.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class l

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 2A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-2007
Average Enrollment Office PHR

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: SixTen PHR list.
Findings:

Staff	Title	06-07 PHR	
Abbott, Kathy	Account Technician	$23.29	A
Auxier, Sara	Account Technician I	$23.29	A
Ayers, Jan	Fiscal Services Tech	$27.71	A
Carsner, Pam	Account Technician I	$23.29	A
Day, Karen	Account Technician I	$25.71	
Doty, Judy	Fiscal Analyst I	$27.71	A
Evans (Tomlinson), Terri	Fiscal Analyst I	$27.71	A
Gardner, Darla R.	Fiscal Services Specialist	$27.71	B
Gritz, Robert	Account Technician II	$37.99	
Hesse, Wendy	Account Technician I	$23.87	
Isaman, Terri	Administrative Secretary	$33.08	
Khana. Ghorighos	Fiscal Analyst III	$35.45	
Lenstrom, Amy	Fiscal Services Specialist	$27.71	B
Marriott, Veronica	Fiscal Analyst II	$32.13	
Rule, Teresa N.	Fiscal Services Supervisor	$39.90	A
Salazar, Jeremy	Fiscal Services Coordinator I	$39.90	A
Turner, Kelly	Fiscal Services Specialist	$27.71	B
Vera, Soledad	Account Technician I	$23.29	A
Villafana, Kathryn	Fiscal Analyst I	$29.77	
Whitfield, Gary	Business Manager	$79.63	
Woodhead, Susie	Fiscal Analyst I	$29.77	
Average		**$ 31.74**	

A: Used average for their title.
B: Used Fife, Darla's PHR. Only one person with that title.

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Used 05-06 timestudy. Backup is in 2005-06 file.
Findings:

		*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
Staff	Title	21	22	23	24	25	26
Bailey, Candy	Financial Aid Tech II	5.0	1.0	1.0	3.0	8.0	2.0
Canutt, Sheryl	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Hesse, Wendy	Account Technician I	3.0	1.0	3.0	3.0	2.0	3.0
Pfleging, Elizabeth	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Salado, Carol	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Shively, Marnie	Financial Aid II	5.0	1.0	1.0	3.0	6.0	
Vidaurri, Michelle	Financial Aid I	5.0	1.0	1.0	3.0	6.0	
Average		**4.7**	**1.0**	**1.3**	**3.0**	**6.6**	**2.2**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: 2006-07
Average Financial Aid PHR

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: SixTen PHR list.
Findings:

Staff	Title	06-07 PHR	
Bailey, Candy	Financial Aid Tech II	$23.87	A
Canutt, Sheryl	Support Staff	$23.26	A
Hesse, Wendy	Account Technician I	$23.87	
Pfleging, Elizabeth	Support Staff	$23.26	A
Salado, Carol	Support Staff	$23.26	A
Shively, Marnie	Financial Aid II	$23.87	A
Vidaurri, Michelle	Financial Aid I	$21.11	
Average		**$ 23.21**	

A: Used average for their title.

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 4
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2006-2007
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source	Totals								
		98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1 1. Enrolled Students	45,702	47,184	49,388	53,268	56,002	52,664	52,087	52,645	57,283
EFC 2	1.8-1 2. Paid Enrollment fees	18,321	19,623	19,855	21,390	26,038	23,848	21,106	22,457	22,528
EFC 3	1.8-1 3. Exempted from enrollment fees (BOGG, etc.)	X	15,862	16,622	17,969	16,633	17,603	20,202	20,424	20,928
EFC 4	1.8-2 1. Delinquencies collections	12,001	11,699	12,911	13,909	13,331	11,213	10,779	14,231	13,827
EFC 5	1.8-2 2. Refunds	1,591	1,668	1,904	2,639	2,954	3,113	2928	3,255	3,262
EFW 6	1.8-3 1. Waivers Requested	X	23,308	25,205	26,100	27,816	48,385	42,418	17,432	17,338
EFW 7	1.8-3 2. Waivers Approved	X	7,404	7,294	7,665	8,358	8,851	10,355	10,902	10,925
EFW 8	1.8-3 (1-2) Waivers Denied	X	Did not provide						6,530	6,413

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2006 Summer Term

Data Current As Of January 22, 2008 08:05:56

Total Headcount	1,371

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COLUMBIA MODESTO

SUMMER 1,371 9,041

FALL 3,368 18,748
3,387 17,492

total 8126 45,281

total Headcount 53407

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2006 Summer Term

Data Current As Of January 22, 2008 08:06:11

Total Headcount	9,041

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2006 Fall Term

Data Current As Of January 22, 2008 08:05:48

Total Headcount	3,368

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2006 Fall Term

Data Current As Of January 22, 2008 08:06:20

Total Headcount	18,748

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California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2007 Spring Semester

Data Current As Of January 22, 2008 08:05:33

Total Headcount	3,387

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2007 Spring Semester

Data Current As Of January 22, 2008 08:06:29

Total Headcount	17,492

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: Ycc1D Fiscal Year: 2006

Marlin Rashid
Employee Name

Programmer Analyst II
Exact Position Title

IT Central Services
Department/Location

575-6555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/14/06	1A (1B) 2A 2B 3 (4)	Meeting	45 min
11/20/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
11/21/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
12/1/06	1A (1B) 2A 2B 3 (4)	Meeting	1/2 hour
12/5/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
12/7/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 12/17/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: YCCD Fiscal Year: 05/06

Holly Young
Employee Name

Programmer Analyst II
Exact Position Title

IT / District Bld 1000
Department/Location

209-575-6560
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11 19 6	1A 1B 2A 2B 3 4	Meetings / [redacted] Write Code	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Holly Young Date 12/7/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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1.6's, 1.7's &/or 1.8's used in multiple years

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Kathy Abbott
Employee Name

Account Technician I (retired)
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature retired Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Sara Auxier
Employee Name

Account Tech I
Exact Position Title

575-6828
Telephone #

(12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ... lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
Employee Signature Tina M Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Jan Ayers
Employee Name

Fiscal Services Tech
Exact Position Title

575-6828
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	Ø	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	Ø				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa Mills

Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Pam Carsner
Employee Name

Account Technician I (resigned)
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	1		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	.5		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature resigned Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services
Department/Location

Karen Day
Employee Name

Account Technician I
Exact Position Title

209-575-7754
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 (01-02) (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Karen Day Date 5-8-06

If you have any questions, please contact Gary Whitfield at 209-575-6830

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services-East/West
Department/Location

Judy Doty
Employee Name

Fiscal Analyst T
Exact Position Title

575-6878
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record ...ich lists student courses, status of payments, and ...aiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	8				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa M Rule Date 5/8/06

If you have any questions, please contact GARY Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC- Business Services East
Department/Location

Terri Evans (Tomlinson)
Employee Name

Fiscal Analyst I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

~~Employee~~ Supervisor Signature Teresa Nkole Date 5/8/06

If you have any questions, please contact GARY WHITTEKER, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Y.C.C.D.
District

Business Services
Department/Location

Darla R. Gardner
Employee Name

Account Technician II
Exact Position Title

575-6825 12mo/11mo/10mo/hrly
Telephone # Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	Average Time in Minutes	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record [illegible] lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	0	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	0				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	1				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Darla Gardner Date 5/8/06

If you have any questions, please contact Cary Whitfield, at 575-6838

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD — District

Business Office, Columbia College — Department/Location

Robert Gritz — Employee Name

Fiscal Services Supervisor — Exact Position Title

209-588-5113 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	2	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	0					

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Robert Gritz Date 5/15/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Office, Columbia College
Department/Location

Terri Isaman
Employee Name

Administrative Secretary
Exact Position Title

588-5112
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	.5	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	2		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3		X			
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2		X			
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Terri L Isaman Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College Dist. — District

MJC Business Services_East Campus — Department/Location

Ghorghas Ikhana — Employee Name

Fiscal Analyst III — Exact Position Title

575-6822 — Telephone #

(12mo)/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record w[illegible] lists student courses, status of payments, and w[illegible] eligibility, and printing out a list of enrolled courses.	2	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	3	✓				
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2½	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	1	✓				
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	4				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	1			✓		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 05/08/06

If you have any questions, please contact Gary Whitfield, at 575-6836

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services East
Department/Location

Amy Lenstrom
Employee Name

Fiscal Services Specialist
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 (00-01) (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Supervisor
Employee Signature Teresa M Kule

Date 5-4-06

If you have any questions, please contact GARY Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College District
District

Business Services - East Campus
Department/Location

Veronica Marriott
Employee Name

Fiscal Analyst II
Exact Position Title

(209) 575-6823
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	2				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Veronica Marriott Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Teresa N Rule
Employee Name

Accountant
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02
02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Teresa N Rule Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC- Business Services - East
Department/Location

Jeremy Salazar
Employee Name

Fiscal Services Coord I
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: (98-99) (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record w lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Jeremy Salazar Date 5/8/06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

Yosemite Community College
District

MJC Business Services - East
Department/Location

Kelly Turner
Employee Name

Fiscal Services Specialist
Exact Position Title

575-6828
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 (99-00) 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1 (Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

~~Employee~~ Supervisor Signature Teresa Nkulo Date 5-4-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

East Campus Business Services
Department/Location

Soledad Vera
Employee Name

Account Technician I
Exact Position Title

575-6832 (12mo/11mo/10mo/hrly)
Telephone # Work year length(circle)

Fiscal Year: ~~98-99~~ ~~99-00~~ ~~00-01~~ ~~01-02~~ (02-03) (03-04) (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	2.5	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	5					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Soledad Vera Date 5-8-06

If you have any questions, please contact Gary Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Business Services / MJC East
Department/Location

Kathryn Villafana
Employee Name

Fiscal Analyst I
Exact Position Title

209 575-6824
Telephone #

(12mo/11mo/10mo/hrly)
~~Work~~ year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	X				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		X			
Code 13 *Answering Questions and/or referring student to* the appropriate person for an answer.	2.5	X				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				X	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				X	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					X

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Kathryn Villafana Date 5-4-06

If you have any questions, please contact Cory Whitfield, at 575-6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Bus Serv.
Department/Location

Gary Whitfield
Employee Name

Chief Operations Officer
Exact Position Title

6830
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	2				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	3				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	4					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature _____ Date 5/11/06

If you have any questions, please contact Gary Whitfield, at 6830

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

EFCW 1.7-2

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE COLLECTION/CASHIER FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

MJC Business Services | East
Department/Location

Susie Woodhead
Employee Name

Fiscal Analyst I
Exact Position Title

209-575-6827
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 98-99 99-00 00-01 01-02 02-03 03-04 (04-05) (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 1.7-1

Reimbursable Activities: ENROLLMENT FEE COLLECTION AND CASHIER FUNCTIONS	**Average Time in Minutes**	Workload Multiplier From 1.7-1(Check one)				
		1	2	3	4	5
Code 11 Referencing the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.	3	✓				
Code 12 Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.	4		✓			
Code 13 Answering Questions and/or referring student to the appropriate person for an answer.	3	✓				
Code 14 Updating Student File for the enrollment fee information, and providing a copy to the student.	4				✓	
Code 15 Amounts Receivable/Delinquencies: Collecting enrollment fees due/deliquent (telephone contact, written notices, collection agencies, small claims court, etc.)	5				✓	
Code 16 Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.	2					✓

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that u have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Susie Woodhead Date 5/4/06

If you have any questions, please contact Gary Whitfield, at 209-575-6830

PLEASE SUBMIT THIS INFORMATION BY

Fin Aid

EFCW 1.7-3

mployee AVERAGE Time Record for Mandated Costs
3od/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

eport below the ***average*** amount of time spent (in minutes) by you to it each of the reimbursable activities for the mandated program.

CCCD-Columbia

Fin Aid/Columbia
Department/Location

Sandy Bailey
Name

Fin Aid Tech II
Exact Position Title

88-5105 12mo/11mo/10mo/hrly
e # Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

ble Activities: ENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
swe Questions regarding fee waivers or referring ppropriate person for an answer.	5'	X			
eiving Applications from students by mail, fax, ne access, or in person, or in the form of eligibility ocessed by the financial aid office.	1'	X			
uating Applications each application and verification compliance with eligibility standards.	1'	X			
mplete Applications: notifying the student of the red information. Holding the student application in a ntil all information is received.	3'			X	
ved Applications: Copying all documentation and ation. Entering information into district records. nt with proof of eligibility and filing documents.	8'		X		
d Applications: Reviewing additional documentation denial is appealed. Providing written notification to ligibility status.	2'			X	

RTIFICATION: The State of California requires that school district personnel maintain a record of indates in order for the district to receive reimbursement. Your signature on this form certifies that d actual data or have provided a good faith estimate which you certify (or declare) under penalty he laws of the State of California to be true and correct based on your personal knowledge or s information is used for cost accounting purposes only. PLEASE USE BLUE INK

ure Carla

Date 5/16/06

uestions, please contact _____, at _____

THIS INFORMATION BY _____; TO _____

Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

X CCD - Columbia — District

Fin Aid / Columbia — Department/Location

Sheryl Cornett — Employee Name

Support Staff — Exact Position Title

5105 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5'	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1'	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1'	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3'			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8'		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2'			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Cornett Date 5/16/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ TO _____

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VCCD
District

Fiscal Services/Financial Aid
Department/Location

Wendy Hesse
Employee Name

Account Tech. I
Exact Position Title

588-5114
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	3 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	3 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	2 min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	3 min			✓	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Wendy Hesse Date 5/4/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

VCCD- Columbia — District

Fin Aid / Columbia — Department/Location

Elizabeth Pfleging — Employee Name

Support Staff — Exact Position Title

5105 — Telephone #

12mo/11mo/10mo/hrly — Work year length(circle)

Fiscal Year: 99-00 00-01 (01-02) 02-03 03-04 04-05 05-06

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5'	X			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1'	X			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1'	X			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3'			X	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	8'		X		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	2'			X	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature E Pfleging — Date 5/16/05

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____

Fin Aid

EFCW 1.7-3

Employee AVERAGE Time Record for Mandated Costs
3000/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Report below the ***average*** amount of time spent (in minutes) by you to perform each of the reimbursable activities for the mandated program.

CCD - Columbia — Fin Aid / Columbia
Name — Department/Location

Carol Salado — Support Staff - Short Term
Name — Exact Position Title

105 — Short-term
ee # — 12mo/11mo/10mo/hrly Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 05-06
Circle the years for which you are responding.

Instructions: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	Average Time in Minutes	1.7-1 Workload Multiplier (Check one) 6	7	8	
Answering Questions regarding fee waivers or referring appropriate person for an answer.	5'	X			
Receiving Applications from students by mail, fax, online access, or in person, or in the form of eligibility processed by the financial aid office.	1'	X			
Evaluating Applications each application and verification for compliance with eligibility standards.	1'	X			
Incomplete Applications: notifying the student of the required information. Holding the student application in a file until all information is received.	3'			X	
Approved Applications: Copying all documentation and verification. Entering information into district records. Submitting with proof of eligibility and filing documents.	8'		X		
Denied Applications: Reviewing additional documentation when denial is appealed. Providing written notification to student of eligibility status.	2'			X	

CERTIFICATION: The State of California requires that school district personnel maintain a record of all mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have recorded actual data or have provided a good faith estimate which you certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or belief. This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Signature Clarkin Date 5/16/06

If questions, please contact _____, at _____

PLEASE RETURN THIS INFORMATION BY _____; TO _____

Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD - Columbia
District

Financial Aid / Columbia
Department/Location

Marnie Shively
Employee Name

Financial Aid Tech III
Exact Position Title

588-5313
Telephone #

(12mo)/11mo/10mo/hrly
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min.	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min.	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min.	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3 min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6 min.		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	ø				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Marnie Shively Date May 9, 06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee AVERAGE Time Record for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER (BOGG, ETC.) FUNCTIONS

Please report below the ***average*** amount of time spent (in minutes) by you to implement each of the reimbursable activities for the mandated program.

YCCD
District

Columbia College Financial
Department/Location

Michelle Vidaurri
Employee Name

Financial Aid Technician I
Exact Position Title

209-588-5105
Telephone #

(12mo/11mo/10mo/hrly)
Work year length(circle)

Fiscal Year: 99-00 00-01 01-02 02-03 03-04 04-05 (05-06)

Circle the years for which you are responding.

How to report time: Step 1: For each activity, list the average time in minutes
Step 2: Select the appropriate workload multiplier from Form 17-1

Reimbursable Activities: ENROLLMENT WAIVER FUNCTIONS	**Average Time in Minutes**	1.7-1 Workload Multiplier (Check one)			
		6	7	8	
Code 21 Answering Questions regarding fee waivers or referring them to the appropriate person for an answer.	5 min	✓			
Code 22 Receiving Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.	1 min	✓			
Code 23 Evaluating Applications each application and verification documents for compliance with eligibility standards.	1 min	✓			
Code 24 Incomplete Applications: notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.	3min			✓	
Code 25 Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.	6min		✓		
Code 26 Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.	∅				

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Michelle Vidaurri Date 05-09-06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		11,525	
Fall		23,503	
Winter/ Intersession		N/A	
Spring		22,255	
Total *(These numbers obtained from report on Yosemite Gold)*		57,283	
2. Number of students who paid enrollment fees:			
Summer		3,187	
Fall		9,445	
Winter/ Intersession		N/A	
Spring		9,896	
Total		22,528	
exempted from paying enrollment fees (BOGG, etc):			
		4,252	
		8,616	
		NA	
		8,060	
		20,928	

1.8-1

0• c

11,525• +
23,503• +
22,255• +
57,283• *

3,187• +
9,445• +
9,896• +
22,528• *

4,252• +
8,616• +
8,060• +
20,928• *

ATION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost ly. PLEASE USE BLUE INK

Date Dec. 4, 2007

Chief Operations Officer, MJC
Position or Title

, please contact _____, at _____

NFORMATION BY _____; TO _____

nd Associates

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		4,086	
Fall		5,442	
Winter/Intersession			
Spring		4,299	
Total		13,827	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		1,096	
Fall		1.355	
Winter/Intersession			
Spring		811	
Total		3,262	

1.8-2

4,086 + 5,442 + 4,299 + 13,827 *

1,096 + 1,355 + 811 + 3,262 *

0 *

ITION: The State of California requires that school district personnel maintain a record of data for or the district to receive reimbursement. Your signature on this form certifies that you have reported ded a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the rue and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

Date Dec. 4, 2007

Chief Operations Officer, MJC
Position or Title

s, please contact _____, at _____.

INFORMATION BY _____; TO _____.

and Associates

Revised JULY 2007

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: YOSEMITE COMMUNITY COLLEGE DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer		3468	
Fall		6940	
Winter/Intersession		N/A	
Spring		6930	
Total		17,338	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer		2185	
Fall		4370	
Winter/Intersession		N/A	
		4370	
		10,925	

1.8-3

3,468• +
6,940• +
6,930• +
17,338• *

2,185• +
4,370• +
4,370• +
10,925• *

ATION: The State of California requires that school district personnel maintain a record of s in order for the district to receive reimbursement. Your signature on this form certifies that al data or have provided a good faith estimate which you "certify (or declare) under penalty of of the State of California to be true and correct based on your personal knowledge or rmation is used for cost accounting purposes only. PLEASE USE BLUE INK

_____ Date _____

ntel _____ Program Rep. II
) Position or Title

ns, please contact _____, at _____.

S INFORMATION BY _____; TO _____.

n and Associates

Revised JULY 2007

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$5,190,023.00	$
2. Enrollment Fees Refunded	$	$478,034.50	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$4,711,988.50	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$3,561,028.00	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$71,220.40	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer		22,352.50	
B. Fall		81,190.50	
C. Winter/Intersession		N/A	
D. Spring		74,508.00	
TOTAL x $0.91 per credit		162,026.41	

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature: _____ Date _____

Dorothy Pimentel
Employee Name: (print)

Program Rep II
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____ ; TO _____.

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MANDATE REIMBURSEMENT SERVICES

PRODUCTIVE HOURLY RATE UPDATE

Note: Please provide the rates for the FY: 06-07 and the missing rates for FY: 05-06.

COMMUNITY COLLEGE DISTRICT NAME: Yosemite Community College District

Name	Title	Fiscal Years: 05-06	06-07
	AVERAGE ACCOUNT TECHNICIAN I	$ 21.84	$ 23.29
	AVERAGE ADMINISTRATIVE ASSISTANT	$ 37.58	$ 37.58
	AVERAGE ADMINISTRATIVE SECRETARY	$ 28.67	$ 28.67
	AVERAGE PROGRAM ANALYST		$ 33.91
	AVERAGE DEAN	$ 73.53	$ 73.53
	AVERAGE DIRECTOR	$ 64.92	$ 64.92
	AVERAGE EXECUTIVE SECRETARY	$ 33.43	$ 33.43
	AVERAGE FINANCIAL AID TECHNICIAN II	$ 21.84	$ 23.87
RASHID MARLIN	AVERAGE FISCAL ANALYST I	$ 25.35	$ 27.71
	AVERAGE GROUNDS MAINTENANCE		$ 24.41
	AVERAGE MAINTENANCE		$ 26.42
	AVERAGE MECHANIC	$ 31.70	$ 33.75
	AVERAGE PRESIDENT	$ 103.00	$ 106.28

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
	AVERAGE SUPERVISOR		$ 39.90
	AVERAGE SUPPORT STAFF		$ 23.26
	AVERAGE VICE PRESIDENT	$ 75.05	$ 76.58
~~ABBOTT, KATHY~~	ACCOUNT TECHNICIAN I(Resigned)		
AGOSTINI, THERESE	DEAN OF MATRICULATION, ADMISSIONS & RECORDS	$ 72.12	$ 75.00
AKIONA, SHELLY	ADMINSTRATIVE ASSITANT TO CHANCELLOR	$ 43.60	$ 45.34
~~ALVAREZ, JUAN~~	DEAN OF STUDENT SERVICES(Retired)		
AMARANTE, PEGGY	EXECUTIVE SECRETARY	$ 25.63	$ 31.53
ANGLIN,MARK	DEAN OF AGRICULTURE, ENVIRON. SCIENCES	$ 72.12	$ 75.00
AUXIER, SARA	ACCOUNT TECHNICIAN I	$ 24.11	
~~AYERS, JAN~~	FISCAL ANAYLIST I		
~~BAILEY, CANDY~~	FINANCIAL AID TECHNICIAN II	$ 21.84	
BAKER, MARIA	DIRECTOR, FACILITIES PLANNING & OPS	$ 70.05	
BALDWIN, GERALD	TRANSPORTATION TECHNICIAN II	$ 26.00	$ 28.36
BETHEL, AMY	FOUNDATION ASSITANT/EVENT COORDINATOR	$ 30.32	$ 33.08
BEUVING, JANET	PAYROLL TECH III (Retired)		
BOODROOKAS, GEORGE	DEAN OF COMMUNITY & ECONOMIC DEV	$ 76.56	$ 79.63
BRYANT, OTIS	LEAD MECHANIC	$ 38.70	$ 40.25

Name	Title	05-06	06-07
~~CAMPBELL, MEGAN~~	GENERAL CLERK, Fac.Plann.&Ops. (RESIGNED)	$ 12.72	
~~CANUTT, SHERYL~~	SUPPORT STAFF (RESIGNED)		
~~CARSNER, PAM~~	ACCOUNT TECHNICIAN I (RESIGNED)		
CHAVEZ, Arnold	BOOKSTORE OPERATIONS LEAD	$ 27.93	$ 29.77
CHAVEZ,CONI	ADMIN ASSISTANT TO THE PRESIDENT	$ 37.58	$ 39.08
CHAWINGA, JANE	INTERNAL AUDITOR	$ 55.29	$ 57.50
CODINI, JIM	LEAD TECHNICIAN	$ 30.15	$ 31.35
COOPER, SPENCE	DIRECTOR, PURCHASING DEPARTMENT	$ 55.29	$ 57.50
COVER ALLAN	INTERIM DEAN OF AGRICULTURE, ENVIRON. SCIENCES		
CRAMTON, SHAWNA	DIRECTOR OF RESEARCH AND PLANNING	$ 41.78	$ 54.75
CRAWFORD, LOUISE	GREAT VALLEY MUSEUM MANAGER	$ 36.53	$ 37.99
CROW, BECKY	DIRECTOR OF CAMPUS SECURITY	$ 52.06	$ 54.14
DAVIS, TOM	INTERIM DIRECTOR FIRE SCIENCE FACILITY		
DAY, KAREN	ACCOUNT TECHNICIAN I	$ 24.72	$ 25.71
DIGGS-GRAY,LINDA	HUMAN RESOURCES SUPERVISOR	$ 37.31	$ 40.72
DORSETT, BEN	MAINTENANCE I	$ 24.70	$ 26.34
~~DOTY, JUDY~~	FISCAL ANALYST I		
~~EBRAHIMOFF,GIZEL~~	HUMAN RESOURCES SUPERVISOR		

Name	Title	05-06	06-07
~~EVANS, (TOMLINSON), TERRI~~	FISCAL ANALYST I		
FIFE, DARLA R.	FISCAL SERVICES SPECIALIST	$ 26.64	$ 27.71
~~FURIO, RALPH~~	MAINTENANCE		
GAISER, WILLIAM (BILL)	MECHANIC III		
GALVAN, RAMON	GROUNDS MAINTENANCE II	$ 22.95	$ 24.47
GERVIN, DENNIS	VP STUDENT LEARNING	$ 82.67	$ 85.92
GHAN, MARVIN	MECHANIC III	$ 34.08	$ 36.33
GREEN, RHONDA	AUXILIARY SERVICES MANAGER	$ 55.29	$ 57.50
GRITZ, ROBERT	ACCOUNT TECHNICIAN II	$ 34.74	$ 37.99
~~GROETESMA,JUDITH~~	ADMIN ASSISTANT TO THE VC FOR FISCAL SVCS		RETIRED
HARRIS, TOM	TRANSPORTATION SUPERVISOR	$ 37.58	$ 39.08
HART, CAROLYN	ADMIN ASSISTANT TO THE PRESIDENT MJC	$ 37.58	$ 39.08
~~HARWOOD, SUE ELLEN~~	DIRECTOR OF COMM OUTREACH & DEV SVCS		
~~HEGOAS, KATIE~~	STUDENT EMPLOYEE		
HERNANDEZ, TERESA	PAYROLL ANALYST II	$ 28.63	$ 29.77
HESSE, WENDY	ACCOUNT TECHNICIAN I	$ 21.84	$ 23.87
HODGES, STAN	INTERIM CHANCELLOR		$ 109.83
HOILE, LINDA	DIRECTOR OF MARKETING & PUBLIC RELATIONS	$ 52.06	$ 54.14

Name	Title	05-06	06-07
HUNT, JUNE	CAREER DEV/TRANSFER CENTER TECH III	$ 32.69	$ 32.98
IMBESI, BILL	FINANCIAL AID ACCOUNTANT	$ 39.53	$ 41.12
ISAMAN, TERRI	EXECUTIVE SECRETARY	$ 31.81	$ 33.08
~~JEFFERY, KATHRYN~~	VICE PRESIDENT OF STUDENT SERVICES		
JONES, JERRY	MAINTENANCE III, PAINTER	$ 33.25	$ 34.59
KAISER, WILLIAM	DEAN PHYSICAL RECREATION/HEALTH ED	$ 73.53	$ 76.42
KEENER, DAVID	CAMPUS OPS. MNGR. II	$ 37.41	$ 44.93
KHANNA-CHAMAKI, GHORIGHOS	FISCAL ANALYST III	$ 34.09	$ 35.45
LARKIN, CASS	FINANCIAL AID MANAGER	$ 31.68	$ 41.52
LAU, DOUG	DIRECTOR, MARKETING & PUBLIC INFORMATION	$ 52.06	$ 54.14
~~LENSTROM, AMY~~	FISCAL SERVICES SPECIALIST		
LOPEZ, JOYCIE	SUPPORT STAFF II, Fac.Ops. - Columbia CC	$ 21.81	$ 23.26
LOYD,PAMELA	COUNSELOR	$ 58.97	$ 58.97
~~MADDEN,DEREK~~	INTERIM DEAN OF SCIENCE, MATH & ENGRG		
MARRIOTT, VERONICA	FISCAL ANALYST II	$ 30.15	$ 32.13
~~MAYHEW,LEW~~	COUNSELOR	RETIRED	
~~MCDANIEL,WILLIE~~	DIRECTOR OF CAMPUS SECURITY		RESIGNED
~~McLEOD, WILMA~~	VICE PRESIDENT, STUDENT SERVICES		RETIRED

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
PIMENTEL, DOROTHY	PROGRAM REPRESENTATIVE II	$ 28.67	$ 30.56
RAILEY, GEORGE	DEAN OF INSTRUCTIONAL SERVICES	$ 76.56	$ 79.63
RASHID, MARLIN	PROGRAMMER ANALYST II	$ 36.57	
RIGGS, JIM	PRESIDENT	$ 105.17	
ROBERT, BRENDA	DEAN OF LITERATURE & LANGUAGE	$ 73.53	
ROSE, GINA	ASSITANT CHANCELLOR	$ 85.27	
ROSE, RICHARD	PRESIDENT	$ 100.83	
RULE, TERESA N.	FISCAL SERVICES SUPERVISOR	$ 43.60	
RUSH, MYRA	DIRECTOR OF FIANANCIAL AID	$ 55.29	
~~SALADO, CAROL~~	SUPPORT STAFF		
SALAZAR, JEREMY	FISCAL SERVICES COORDINATOR I	$ 52.06	
SALCEDO, ALICIA	SUPPORT STAFF TECH/SST II - Fac.Plann.&Ops.	$ 22.36	
SAMPSON,CARRIE	ADMIN ASSISTANT TO THE EXEC. VC	$ 37.58	
SCHARFFER, BECKI	EXECUTIVE SECRETARY	$ 33.43	
~~SCHMIDT, JUDY~~	ADMIN ASSISTANT		
SCOTT, TERESA	VICE CHANCELLOR, FISCAL SERVICES	$ 98.78	
~~SCROGGINS, BILL~~	INTERIM PRESIDENT		
SCULLY, DOROTHY	INSTRUCTOR, LITERATURE & LANGUAGE ARTS	$ 59.63	

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
SERRANO, CHRISTINE	ACCOUNT TECHNICIAN I	$ 24.72	
SHIVELY, MARNIE	FINANCIAL AID II	$ 27.34	
SIMMS, DENNIS	GROUNDS MAINTENANCE II	$ 23.52	$ 24.47
~~SMITH, CHERYL~~	HUMAN RESOURCES SUPERVISOR		
SMITH, LORI	SUPPORT STAFF II	$ 22.36	$ 23.26
SOLA,JOHN	FIRE SCIENCE INSTRUCTOR	$ 51.17	$ 42.65
STEFFY, DAVE	PART TIME PROGRAMMER	$ 35.22	
SWANK, JEFF	ELECTRONIC TECHNICIAN	$ 33.25	$ 34.58
TOROK,MIKE	DEAN OF INSTRUCTIONAL SERVICES/ARTS & SCIENCES	$ 68.70	$ 79.63
~~TURNER, KELLY~~	FISCAL SERVICES SPECIALIST		
VANDER WAL, ROBERT	CUSTODIAN	$ 22.95	$ 23.87
VANTRESS, PAUL	DIRECTOR OF WORKFORCE DEVELOPMENT	$ 55.29	$ 57.50
VASCONCELOS, SABINO	GROUNDS MAINTENANCE II	$ 18.82	$ 21.63
VASQUEZ, ALFREDO	GROUNDS MAINTENANCE III	$ 25.95	$ 26.99
VAUGHT, LLOYD	COMPUTER SCIENCE INSTRUCTOR	$ 49.21	$ 59.62
VERA, SOLEDAD	ACCOUNT TECHNICIAN I	$ 24.11	$ 25.71
VIDAURRI, MICHELLE	FINANCIAL AID I	$ 19.34	$ 21.11
VILLAFANA, KATHRYN	FISCAL ANALYST I	$ 27.93	$ 29.77

MANDATE REIMBURSEMENT SERVICES

Name	Title	05-06	06-07
WALTERS-DUNLAP, KAREN	VP OF INSTRUCTION	$ 82.67	$ 85.92
WARING, DEREK	DEAN OF STUDENT SERVICES	$ 76.56	$ 79.63
WHITE, JEAN	ADMINISTRATIVE SECRETARY	$ 28.67	$ 30.56
WHITFIELD, GARY	CHIEF OPERATING OFFICER	$ 76.56	$ 79.63
WILLIAMS, JIM	CHANCELLOR	$ 122.08	RETIRED
~~WILSON, DAVE~~	VICE PRESIDENT, INSTRUCTION(Retired)	RETIRED	
WIRTH, DIANE	INTERIM VC, HUMAN RESOURCES	$ 86.72	$ 95.34
~~WOODARD, BILL~~	DIRECTOR OF MEDIA & TECH SUPPORT SYSTEMS(Retired)	RETIRED	
WOODHEAD, SUSIE	FISCAL ANALYST I	$ 28.63	$ 29.77
YOCUM, DOUGLAS	GROUNDS MAINTENANCE II	$ 21.84	$ 24.47
YOUNG, HOLLY	PROGRAM ANALYST II	$ 37.31	$ 46.56

Schedule 5
Yosemite Comm[illegible] College District
308/95 Enrollment Fe[illegible]llection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,108,649	$ 2,242,697	$ 2,393,622	$ 2,582,073	$ 3,468,086	$ 4,345,432	$ 4,709,608	$ 4,711,989
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192	$ 94,240
1.8 [illegible]ne 4A	Enrollment Fees Waived	$ 1,187,073	$ 1,237,210	$ 1,345,946	$ 1,507,992	$ 2,532,425	$ 4,793,489	$ 4,999,859	$ 3,561,028
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997	$ 71,221
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,095							
			For 00-01 through 06-07 - unit fee						
1.8-4 line 5	Summer		2,458	3,420	6,656	20,465	23,232	22,353	22,353
	Fall		34,014	39,005	44,117	77,214	80,031	78,630	81,191
	Winter/Interssion								
	Spring		32,259	38,140	41,762	48,869	74,184	75,465	74,508
	Total # of credits		68,731	80,565	92,535	146,548	177,447	176,448	178,052
)/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568	$ 162,027
Sum[illegible]ary									
[illegible]% of line 3	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192	$ 94,240
.8-4 line 4B.	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997	$ 71,221
Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 83,095							
.8-4 5	Credit Units Waived		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568	$ 162,027
[illegible]otal Offset Savings	**Forward to EFCW-1**	**$ 149,009**	**$ 132,143**	**$ 148,105**	**$ 166,008**	**$ 253,370**	**$ 344,256**	**$ 354,757**	**$ 327,488**

CALIFORNIA COMMUNITY COLLEGES
MONTHLY PAYMENT SCHEDULE
2006-07 SECOND PRINCIPAL APPORTIONMENT EXHIBIT A

DISTRICT: Yosemite
COUNTY: Stanislaus

PROGRAM	AMOUNT CERTIFIED	TOTAL PAID THRU MAY 2007	JUNE PAYMENT	TOTAL PAID THRU JUNE 2007
GENERAL APPORTIONMENT	$44,562,960	$32,887,352	$8,864,773	$41,752,125
ENROLL FEE ADMIN (2%)	100,448	92,412	8,036	100,448
APPRENTICE ALLOWANCE	0	0	0	0
BASIC SKILLS	260,240	0	260,240	260,240
S.F.A.A.	680,103	625,694	54,409	680,103
E.O.P.S.	1,699,703	1,563,726	135,977	1,699,703
C.A.R.E.	175,967	161,889	14,078	175,967
D.S.P.S.	2,154,185	2,194,936	-40,751	2,154,185
STATE HOSPITALS	0	0	0	0
CALWORKS	734,044	638,521	95,523	734,044
MATRICULATION (CREDIT)	998,485	918,607	79,878	998,485
MATRIC. (NONCREDIT)	109,322	100,577	8,745	109,322
FAC.& STAFF DIVERSITY	19,028	17,505	1,523	19,028
PART-TIME FAC. ALLO.	753,662	693,369	60,293	753,662
PART-TIME FAC. OFF. HRS	0	0	0	0
PART-TIME FAC. INS.	0	0	0	0
TELECOMMUNICATIONS	104,511	67,523	36,988	104,511
PLANT & INSTRUCTIONAL	188,289	173,226	15,063	188,289
SCHDL. MAINT. & REPAIR	188,306	173,241	15,065	188,306
TANF	145,068	133,462	11,606	145,068
ECON. DEVELOPMENT	321,746	270,492	-225	270,267
NURSING EDUCATION	106,937	47,999	58,938	106,937
PARTNER	0	0	0	0
CHILDCARE TAXBAILOUT	0	0	0	0
PRIOR YEAR CORRECTION	8,428,384	8,428,384	0	8,428,384
ONE TIME FUNDS				
TRANSITION PAYMENT	162,591	141,856	20,735	162,591
TRANS.& ARTIC. -REAPPR	10,000	10,000	0	10,000
GEN. PURPOSE -REAPPROP	334,266	334,266	0	334,266
BASIC SKILLS -REAPPROP	235,831	235,831	0	235,831
CAR. TECH. TRAILER BIL	595,289	595,289	0	595,289
GEN. PUR. TRAILER BILL	1,164,598	1,164,598	0	1,164,598
INST. MATERIAL TRAILER	702,745	702,745	0	702,745
SCHLD.MAINT. TRAILER B	702,745	702,745	0	702,745
FACULTY STAFF DEV	74,807	74,807	0	74,807
TOTAL	$65,714,260	$53,151,052	$9,700,894	$62,851,946

FISCAL SERVICES:06/22/07 44056.037 12:14 PM:EM
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Sch 5A
Yosemite Comm...y College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2006-2007
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)								$ 36.02
2	Staff Training	(04)(B)(1)(b)								
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)							$ 1,797.58	
4	Waiving student fees	(04)(B)(2)(b)	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ 74,237.78	$ 87,743.09
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)							$ 140.88	$ 443.36
6	EFCW - Fee Waiver Costs	Total	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ 76,176.24	$ 88,222.47
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 149,009.00	$ 132,143.00	$ 148,105.00	$ 166,008.00	$ 253,370.00	$ 344,256.00	$ 354,757.00	$ 327,488.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (85,142.94)	$ (61,532.20)	$ (73,513.94)	$ (83,694.22)	$ (121,659.90)	$ (221,458.17)	$ (278,580.76)	$ (239,265.53)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 63,866.06**	**$ 70,610.80**	**$ 74,591.06**	**$ 82,313.78**	**$ 131,710.10**	**$ 122,797.83**	**$ 76,176.24**	**$ 88,222.47**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Columbia College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 08:07:31

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	89	20,688
BOGW - Part B based on income standards	882	309,072
BOGW - Part C based on financial need	353	149,513

1324

Total Amount = $ 479,273

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0• C
8• +
882• +
353• +
1,324• *

567• +
6,330• +
2,726• +
9,623• *

9,623• +
1,324• +
10,947• *

4,094,583• +
0• G◊
0• C
0• C

479,273• +
4,094,583• +
4,573,856• *

Columbia
Head Count
MODESTO
total Head count
total

1324
9,623
10,947

479,273
4,094,583
4,573,856

California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Modesto College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 08:07:52

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	567	229,078
BOGW - Part B based on income standards	6,330	2,644,885
BOGW - Part C based on financial need	2,726	1,220,620

9623

Total Amount = $ 4,094,583

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SixTen and Associates
Mandate Reimbursement Services

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Fax: (858) 514-8645

Sacramento
3841 North Freeway Blvd., Suite 170
Sacramento, CA 95834
Telephone: (916) 565-6104
Fax: (916) 564-6103

Claim File Copy

February 6, 2009

CERTIFIED MAIL #7006 3450 0000 3941 8901

Ms. Virginia Brummels, Section Manager
Local Reimbursement Section
Division of Accounting and Reporting
Office of the State Controller
P.O. Box 942850
Sacramento, CA 94250

RE: Annual Reimbursement Claims
Yosemite Community College District CC50150

Dear Ms. Brummels:

Enclosed please find the original claims and extra copies of the FAM-27 for Yosemite Community College District's reimbursement claims listed below:

1/84	Health Fee Elimination	2006-2007
308/95	Enrollment Fee Collection and Waivers	2006-2007

If you have any questions regarding these claims, please contact me at (858) 514-8605.

Sincerely,

Sergio M. Perez

State Controller's Office

Community College Mandated Cost Manual

CLAIM FOR PAYMENT
Pursuant to Government Code Section 17561
ENROLLMENT FEE COLLECTION AND WAIVERS

For State Controller Use Only
(19) Program Number 00267
(20) Date Filed ___/___/___
(21) LRS Input ___/___/___

Program **267**

LABEL HERE

(01) Claimant Identification Number: CC50150

(02) Claimant Name: Yosemite Community College District

County of Location: Stanislaus

Street Address or P.O. Box: P.O. Box 4065

City: Modesto | State: CA | Zip Code: 95352

Type of Claim	Estimated Claim	Reimbursement Claim
	(03) Estimated ☐	(09) Reimbursement ☐
	(04) Combined ☐	(10) Combined ☐
	(05) Amended ☐	(11) Amended ☒
Fiscal Year of cost	(06)	(12) 2006-2007
Total Claimed Amount	(07)	(13) $ 284,386
Less : 10% Late Penalty, not to exceed $10,000		(14) $ 10,000
Less : Prior Claim Payment Received		(15) $ -
t Claimed Amount		(16) $ 274,386
Due from State	(08)	(17) $ 274,386
Due to State		(18)

Reimbursement Claim Data

(22) EFCW-1, (04)(A)(1)(a)(f)	140
(23) EFCW-1, (04)(A)(1)(b)(f)	
(24) EFCW-1, (04)(A)(2)(a)(f)	246,972
(25) EFCW-1, (04)(B)(1)(a)(f)	36
(26) EFCW-1, (04)(B)(1)(b)(f)	
(27) EFCW-1, (04)(B)(2)(a)(f)	
(28) EFCW-1, (04)(B)(2)(b)(f)	87,743
(29) EFCW-1, (04)(B)(2)(c)(f)	443
(30) EFCW-1, (06)	41
(31) EFCW-1, (07)	137,722
(32) EFCW-1, (09)	100,448
(33) EFCW-1, (10)	88,222
(34)	
(35)	
(36)	

(37) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the community college district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.

I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer (USE BLUE INK) Teresa Scott

Date 1-30-09

Teresa Scott
Type or Print Name

Vice Chancellor, Fiscal Services
Title

(38) Name of Contact Person for Claim

SixTen and Associates

Telephone Number: (858) 514-8605
E-mail Address: kbpsixten@aol.com

Form FAM-27 (New 04/06)

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
CLAIM SUMMARY

FORM EFCW-1

) Claimant:

semite Community College District

(02) Type of Claim

Reimbursement [X]

Estimated [ ]

Fiscal Year 2006-2007

3) Leave Blank

ect Costs	Object Accounts					
Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contracted Services	(d) Fixed Assets	(e) Travel and Training	(f) Total
1. Enrollment Fee Collection: One-Time Activities (Reimbursement begins 07/01/1998)						
a. Preparing district policies & procedures for § IV.A.	$ 139.68	$ -	$ -	$ -	$ -	$ 139.68
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Collection: Ongoing Activities (Reimbursement begins 07/01/1998)						
a. Calculating and collecting enrollment fees	$ 246,972.11	$ -	$ -	$ -	$ -	$ 246,972.11
1. Enrollment Fee Waiver: One-Time Activities (Reimbursement begins 07/01/1999)						
a. Preparing district policies & procedures for § IV.B.	$ 36.02	$ -	$ -	$ -	$ -	$ 36.02
b. Staff training (One time per employee)	$ -	$ -	$ -	$ -	$ -	$ -
2. Enrollment Fee Waiver: Ongoing Activities (Reimbursement begins 07/01/1999)						
a. Adopting procedures, recording, and maintaining records	$ -	$ -	$ -	$ -	$ -	$ -
b. Waiving student fees	$ 87,743.09	$ -	$ -	$ -	$ -	$ 87,743.09
c. Reporting BOG fee waiver data to CCC	$ 443.36	$ -	$ -	$ -	$ -	$ 443.36
Total Direct Costs	$ 335,334.26	$ -	$ -	$ -	$ -	$ 335,334.26

ict Costs		
ndirect Cost Rate	[From OMB A-21, FAM-29C, or 7%]	41.07%
Total Indirect Costs	[Line (06) x line (05)(a)]	$ 137,721.78
Total Direct and Indirect Costs	[Line (05)(f) + line (07)]	$ 473,056.04
Reduction		
ess: Enrollment Fee Revenue offset		$ 100,448.00
ess: Enrollment Fee Waiver offsets		$ 88,222.47
otal Claimed Amount	[Line (08) - {Line (09) + Line (10)}]	$ 284,385.57

4/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- [x] Prepare District Policies & Procedures for § IV. A.
- [ ] Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- [ ] Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- [ ] Prepare District Policies & Procedures for § IV. B.
- [ ] Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- [ ] Adopting Procedures, Recording, and Maintaining Records
- [ ] Waiving Student Fees
- [ ] Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for collection of enrollment fees							
Young, Holly Program Analyst	$46.56	3.0	$ 139.68				
(05) Total [x] Subtotal [ ] Page 1 of 1			$ 139.68	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☒ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Prepare/revise district policies and procedures for waiver eligibility determination							
Rashid, Marlin Program Analyst	$27.71	1.3	$ 36.02				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 36.02	$ -	$ -	$ -	$ -

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity
- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities
- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities
- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☒ Waiving Student Fees
- ☐ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Answering student's questions regarding enrollment fee waivers/referring to appropriate person							
Financial Aid Office Staff Various	$23.21	1,358.1	$ 31,521.50				
Receiving waiver applications							
Financial Aid Office Staff Various	$23.21	289.0	$ 6,707.69				
Evaluating waiver applications and verifying application documents							
Financial Aid Office Staff Various	$23.21	375.7	$ 8,720.00				
[illegible] students of additional documentation requirements and how to obtain information							
Financial Aid Office Staff Various	$23.21	320.7	$ 7,443.45				
Entering approved application information into district records; providing student award letter							
Financial Aid Office Staff Various	$23.21	1,201.8	$ 27,893.78				
In case of denied applications, reviewing and evaluating information if denial is appealed by student							
Financial Aid Office Staff Various	$23.21	235.1	$ 5,456.67				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 87,743.09	$ -	$ -	$ -	$ -

New 04/06

Program 267

MANDATED COSTS
ENROLLMENT FEE COLLECTION AND WAIVERS
ACTIVITY COST DETAIL

FORM EFCW-2

(01) Claimant
Yosemite Community College District

(02) Fiscal Year
2006-2007

(03) Reimbursable Activities: Check only **one** box per form to identify the activity being claimed.

A. 1. Enrollment Fee Collection: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. A.
- ☐ Staff Training (One Time per Employee)

A. 2. Enrollment Fee Collection: Ongoing Activity

- ☐ Calculating and Collecting Enrollment Fees

B. 1. Enrollment Fee Waiver: One-Time Activities

- ☐ Prepare District Policies & Procedures for § IV. B.
- ☐ Staff Training (One Time per Employee)

B. 2. Enrollment Fee Waiver: Ongoing Activities

- ☐ Adopting Procedures, Recording, and Maintaining Records
- ☐ Waiving Student Fees
- ☒ Reporting BOG Fee Waiver Data to CCC

(04) Description of Expenses

(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	Object Accounts (d) Salaries and Benefits	(e) Materials and Supplies	(f) Contracted Services	(g) Fixed Assets	(h) Travel and Training
Reporting to College Chancellor number of and amounts provided for BOG fee waivers							
Rashid, Marlin Program Analyst	$27.71	16.0	$ 443.36				
(05) Total ☒ Subtotal ☐		Page 1 of 1	$ 443.36	$ -	$ -	$ -	$ -

Yosemite Community College District
308/95 ENROLLMENT FEE COLLECTIONS/WAIVERS
5-2007
Sort by Name

Date	Hours	Employee Name	Title	PHR	Salary	Activity	Component
06-07	2,386.80	Enrollment Office Staff	Various	$31.74	$75,757.03	Referencing student accounts and records	Calculating and collecting enrollment fees
06-07	1,239.00	Enrollment Office Staff	Various	$31.74	$39,325.86	Calculating total enrollment fee to be collected	Calculating and collecting enrollment fees
06-07	2,386.80	Enrollment Office Staff	Various	$31.74	$75,757.03	Answering student's questions regarding enrollment fee collection	Calculating and collecting enrollment fees
06-07	826.00	Enrollment Office Staff	Various	$31.74	$26,217.24	Updating written and computer records for enrollment fee information	Calculating and collecting enrollment fees
06-07	806.60	Enrollment Office Staff	Various	$31.74	$25,601.48	Collecting delinquent enrollment fees, or turning over accounts to collection agencies	Calculating and collecting enrollment fees
06-07	135.90	Enrollment Office Staff	Various	$31.74	$4,313.47	Providing refund of enrollment fees paid to students establishing fee waiver after enrollment	Calculating and collecting enrollment fees
	7,781.10	**Enrollment Office Staff Total**			$246,972.11		
06-07	1,358.10	Financial Aid Office Staff	Various	$23.21	$31,521.50	Answering student's questions regarding enrollment fee waivers/referring to appropriate person	Waiving student fees
06-07	289.00	Financial Aid Office Staff	Various	$23.21	$6,707.69	Receiving waiver applications	Waiving student fees
06-07	375.70	Financial Aid Office Staff	Various	$23.21	$8,720.00	Evaluating waiver applications and verifying application documents	Waiving student fees
06-07	320.70	Financial Aid Office Staff	Various	$23.21	$7,443.45	Notifying students of additional documentation requirements and how to obtain information	Waiving student fees
06-07	1,201.80	Financial Aid Office Staff	Various	$23.21	$27,893.78	Entering approved application information into district records; providing student award letter	Waiving student fees
06-07	235.10	Financial Aid Office Staff	Various	$23.21	$5,456.67	In case of denied applications, reviewing and evaluating information if denial is appealed by student	Waiving student fees
	3,780.40	**Financial Aid Office Staff Total**			$87,743.09		
11/14/2006	0.80	Rashid, Marlin	Program Analyst	$27.71	$22.17	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
11/20/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
11/28/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
12/1/2006	0.50	Rashid, Marlin	Program Analyst	$27.71	$13.86	Prepare/revise district policies and procedures for waiver eligibility determination	Preparing district policies & procedures for § IV.E
12/5/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
12/7/2006	4.00	Rashid, Marlin	Program Analyst	$27.71	$110.84	Reporting to College Chancellor number of and amounts provided for BOG fee waivers	Reporting BOG fee waiver data to CCC
	17.30	**Rashid, Marlin Total**			$479.39		
11/9/2006	3.00	Young, Holly	Program Analyst	$46.56	$139.68	Prepare/revise district policies and procedures for collection of enrollment fees	Preparing district policies & procedures for § IV.A
	3.00	**Young, Holly Total**			$139.68		
	11,581.80	**Grand Total**			$335,334.27		

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Subtotal Instruction	599	$55,721,522		$55,721,522	$1,182,401	$54,539,121
Instructional Administration and Instructional Governance	6000					
Academic Administration	6010	5,864,134		5,864,134	245,556	5,618,578
Course and Curriculum Development	6020	25,717		25,717		25,717
Academic/Faculty Senate	6030	169,975		169,975	720	169,255
Other Instructional Administration & Instructional Governance	6090					
Instructional Support Services	6100					
Learning Center	6110	612,999		612,999	1,401	611,598
Library	6120	2,075,853		2,075,853	401	2,076,254
Media	6130	1,268,683		1,268,683	63,498	1,205,185
Museums and Galleries	6140					
Academic Information Systems and Technology	6150	894,828		894,828	25,599	869,229
Other Instructional Support Services	6190	43,991		43,991		43,991
Admissions and Records	6200	1,355,394		1,355,394	7,221	1,348,173
Counseling and Guidance	6300					
Student Counseling and Guidance	6310	2,835,565		2,835,565	3,726	2,831,839
Matriculation and Student Assessment	6320	176,268		176,268	4,755	171,513
Transfer Programs	6330	146,510		146,510		146,510
Career Guidance	6340					-
Other Student Counseling and Guidance	6390	304,995		304,995	1,535	303,460
Other Student Services	6400					
Disabled Students Programs & Services	6420	1,953,242		1,953,242	34,734	1,918,508
Subtotal		$73,449,676	$0	$73,449,676	$1,570,745	$71,878,931

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES				FORM FAM-29C		
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
Extended Opportunity Programs & Services	6430	$1,821,437	$638,824	$1,182,613	$7,153	$1,175,460
Health Services	6440	767,062		767,062	4,330	762,732
Student Personnel Admin.	6450	675,933		675,933	20,206	655,727
Financial Aid Administration	6460	1,595,829		1,595,829	11,173	1,584,656
Job Placement Services	6470	54,377		54,377		54,377
Veterans Services	6480	69,380		69,380		69,380
Miscellaneous Student Services	6490	410,435		410,435	2,860	407,575
Operation & Maintenance of Plant	6500					
Building Maintenance and Repairs	6510	3,031,309		3,031,309	3,031,309	0
Custodial Services	6530	2,538,881		2,538,881	2,538,881	0
Grounds Maintenance and Repairs	6550	642,689		642,689	642,689	0
Utilities	6570	2,276,230		2,276,230	2,276,230	0
Other	6590					
Planning, Policy Making, and Coordination	6600	4,647,356		4,647,356	4,647,356	0
General Inst. Support Services	6700					
Community Relations	6710	678,509		678,509	678,509	0
Fiscal Operations	6720	2,661,599		2,661,599	2,661,599	0
Human Resources Management	6730	1,159,987		1,159,987	1,159,987	0
Noninstructional Staff Benefits & Incentives	6740	1,327,125		1,327,125	1,327,125	0
Staff Development	6750	36,226		36,226	36,226	0
Staff Diversity	6760	852,621		852,621	852,621	0
Logistical Services	6770	3,388,058		3,388,058	3,388,058	0
Management Information Systems	6780	4,650,668		4,650,668	4,650,668	0
Subtotal		$106,735,387	$638,824	$106,096,563	$29,507,725	$76,588,838

Table 4 Indirect Cost Rate for Community Colleges

MANDATED COST INDIRECT COST RATE FOR COMMUNITY COLLEGES						FORM FAM-29C
(01) Claimant Yosemite Community College District				(02) Period of Claim 2006-2007		
(03) Expenditures by Activity				(04) Allowable Costs		
Activity	EDP	Total	Adjustments	Total	Indirect	Direct
General Inst. Sup. Serv. (cont.)	6700					
Other General Institutional Support Services	6790	25,457		25,457	25,457	0
Community Services and Economic Development	6800					
Community Recreation	6810	75,552		75,552		75,552
Community Service Classes	6820	1,212,056		1,212,056	4,785	1,207,271
Community Use of Facilities	6830	6,946		6,946		6,946
Economic Development	6840					
Other Community Services & Economic Development	6890	378,961		378,961	17,046	361,915
Ancillary Services	6900					
Bookstores	6910	313		313		313
Child Development Center	6920	770,802		770,802		770,802
Farm Operations	6930					
Food Services	6940	11,137		11,137		11,137
Parking	6950	114,500		114,500		114,500
Student and Co-curricular Activities	6960	51,659		51,659		51,659
Student Housing	6970					
Other	6990					
Auxiliary Operations	7000					
Contract Education	7010	460,812		460,812	5,022	455,790
Other Auxiliary Operations	7090	122,248		122,248		122,248
Depreciation or Use Allowance - Building					1,533,840	
Depreciation or Use Allowance - Equipment					1,668,748	
(05) Total		$109,965,830	$638,824	$109,327,006	$32,762,623	$79,766,971
(06) Indirect Cost Rate: (Total Indirect Cost/Total Direct Cost)				41.07%		
(07) Notes						

Subj: **FW: FW: Document Request - Depreciation**
Date: 9/16/2008 3:48:21 P.M. Pacific Daylight Time
Fro: pimenteld@yosemite.cc.ca.us
To: Smpsixten@aol.com

Sergio,

Please see below, is this what you were wanting?

Dorothy Pimentel
Risk Services
YCCD – Fiscal Services
2201 Blue Gum Ave
Modesto CA 95358
(209) 575-6963 Office
(209) 575-6562 Fax
pimenteld@yosemite.edu

From: Jeremy Salazar
Sent: Tuesday, September 16, 2008 3:08 PM
To: Dorothy Pimentel; Deborah Campbell
Subject: RE: FW: Document Request - Depreciation

believe this is the information he is looking for. The reason for the large amount in 2004-05 is because that is when we ransferred from legacy system into Datatel.

Sum of ACTUAL EXPENDITURES			
OBJECT CODE	TRANSACTION	Year	Total
5990 Other-Depreciation	Opening Balance	2004-05	27,229,238.74
	Buildings and Structures	2004-05	1,678,505.68
		2005-06	1,524,137.01
		2006-07	1,533,840.25
		2007-08	1,535,559.92
	Equipment	2004-05	1,572,951.83
		2005-06	1,572,042.27
		2006-07	1,668,748.24
		2007-08	1,586,289.73
	Land/Land Improvements	2004-05	38,062.00
		2005-06	57,093.00
		2006-07	66,813.76
		2007-08	173,742.12
	Library Books/Materials	2004-05	68,197.40
		2005-06	98,944.66
		2006-07	76,218.96
		2007-08	72,425.36
5990 : Other-Depreciation Total			40,552,810.93

eremy P. Salazar
enior Accountant
osemite Community College District

lazar@yosemite.cc.ca.us

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Agriculture and Natural Resources	0100	1,467,518	480,956	534,132	162,080		2,644,686
Architecture and Environmental Design	0200	228,173	578	609			229,360
Environmental Sciences and Technologies	0300						
Biological Sciences	0400	1,939,234	247,895	32,922			2,220,051
Business and Management	0500	1,603,230	142,839	35,023	12,512		1,793,604
Communications	0600	473,864	6,578	20,349	3,148		503,939
Information Technology	0700	1,469,217	6,427	1,499			1,477,143
Education	0800	3,306,502	357,730	488,462	99,109		4,251,803
Engineering and Industrial Tech.	0900	1,772,201	522,496	333,652	231,691		2,860,040
Fine and Applied Arts	1000	3,739,228	273,044	214,445	53,172		4,279,889
Foreign Language	1100	830,892	1,936	89,878			922,706
Health	1200	2,864,663	219,958	542,045	247,779		3,874,445
Family and Consumer Sciences	1300	1,399,365	2,183,479	4,407,894	35,418		8,026,156
Law	1400						
Humanities (Letters)	1500	5,134,497	132,371	75,348	16,747		5,358,963
Library Science	1600	3,439	409				3,848
Mathematics	1700	2,756,455	131,793	7,633	24,359		2,920,240
Military Studies	1800						
[illegible]al Sciences	1900	1,477,345	120,827	120,679	117,074		1,835,925
Psychology	2000	1,110,182	11,172	62			1,121,416
Public and Protective Services	2100	1,411,958	512,294	839,536	85,324		2,849,112
Social Sciences	2200	2,466,433	24,681	39,217	30,931		2,561,262
Commercial Services	3000						
Interdisciplinary Studies	4900	2,211,161	1,351,223	505,805	63,057		4,131,246
Instruct. Staff-Retir's Bnfts & Retire. Incents	5900	1,855,688					1,855,688
Subtotal - Instructional Activities	599	39,521,245	6,728,686	8,289,190	[illegible]		55,721,522

** Salaries and Benefits of staff in noninstructional assignments * Salaries and Benefits of instructors and instructional aides in instructional assignments

Yosemite Community College District 590 District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Instruct. Admin. & Instruct. Governance (6000)							
Academic Administration	6010		4,999,988	618,590	245,556		5,864,134
Course and Curriculum Development	6020		22,768	2,949			25,717
Academic/Faculty Senate	6030		159,179	10,076	720		169,975
Other Instruct. Admin. & Instruct. Governance	6090						
Subtotal - Instructional Administration	**6000**		5,181,935	631,615	246,276		6,059,826
Instructional Support Services (6100)							
Learning Center	6110	352,383	194,803	64,412	1,402		612,999
Library	6120		1,817,033	259,221	401		2,075,853
Media	6130		1,111,068	94,117	63,498		1,268,683
Museums and Galleries	6140						
Academic Information Systems and Tech.	6150		841,783	27,446	25,599		894,828
Other Instructional Support Services	6190		43,991				43,991
Subtotal - Instructional Support Services	**6100**	352,383	4,008,678	445,196	90,097		4,896,354
Admissions and Records	**6200**		1,251,539	96,634	7,221		1,355,394
Student Counseling and Guidance (6300)							
Counseling and Guidance	6310		2,779,117	52,722	3,726		2,835,565
Matriculation and Student Assessment	6320		163,429	8,084	4,755		176,268
ansfer Programs	6330		141,907	4,603			146,510
Career Guidance	6340						
Other Student Counseling and Guidance	6390		288,668	14,792	1,535		304,995
Subtotal - Student Counseling and Guidance	**6300**		3,373,121	80,201	10,016		3,463,338

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District | 590 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Other Student Services (6400)							
Disabled Students Program & Services (DSPS)	6420		1,179,029	739,479	[illegible]		1,953,242
Extended Opportunity Prgms. & Services (EOPS)	6430		1,112,672	62,788	[illegible]	638,824	1,821,437
Health Services	6440		651,239	111,493	[illegible]		767,062
Student Personnel Administration	6450		607,920	47,807	[illegible]		675,933
Financial Aid Administration	6460		1,438,125	146,531	[illegible]		1,595,829
Job Placement Services	6470		42,637	11,740			54,377
Veterans Services	6480		66,625	2,755			69,380
Miscellaneous Student Services	6490		413,264	(5,689)	[illegible]		410,435
Subtotal - Other Student Services	**6400**		5,511,511	1,116,904	80,456	638,824	7,347,695
Operation and Maintenance of Plant (6500)							
Building Maintenance and Repairs	6510		2,160,503	767,301	103,505		3,031,309
Custodial Services	6530		2,442,576	95,198	1,107		2,538,881
Grounds Maintenance and Repairs	6550		589,020	53,669			642,689
Utilities	6570			2,276,230			2,276,230
Other Operation and Maintenance of Plant	6590						
Subtotal - Operation and Maintenance of Plant	**6500**		5,192,099	3,192,398	104,612		8,489,109
Planning, Policymaking, and Coordination	**6600**		2,562,909	1,096,833	987,614		4,647,356

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District **590** District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: **2006-07**

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
General Institutional Support Services (6700)							
Community Relations	6710		446,207	228,320	3,982		678,509
Fiscal Operations	6720		2,342,316	315,019	4,264		2,661,599
Human Resources Management	6730		1,057,387	102,600			1,159,987
Noninstrl. Staff Retirees' Bnfts. & Retire. Incents.	6740		1,327,125				1,327,125
Staff Development	6750		1,295	34,931			36,226
Staff Diversity	6760		449,392	394,915	8,314		852,621
Logistical Services	6770		2,853,609	354,953	179,496		3,388,058
Management Information Systems	6780		2,386,511	894,685	1,369,472		4,650,668
Other General Institutional Support Services	6790		19,635	1,679	4,143		25,457
Subtotal - General Institutional Support Services	**6700**		10,883,477	2,327,102	1,569,671		14,780,250
Community Svcs. & Economic Develop. (6800)							
Community Recreation	6810		75,451	101			75,552
Community Service Classes	6820	219,178	398,438	589,655	[illegible]		1,212,056
Community Use Facilities	6830		4,100	2,846			6,946
Economic Development	6840						
Other Community Svcs. & Economic Development	6890		265,869	96,046	[illegible]		378,961
Subtotal - Community Services	**6800**	219,178	743,858	688,648	21,831		1,673,515

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District | 590 | District Code No.

CALIFORNIA COMMUNITY COLLEGES
Annual Financial and Budget Report

SUPPLEMENTAL DATA
For Actual Year: 2006-07

Expenditures by Activity
S10 General Fund - Combined
(Total Unrestricted and Restricted)

S10 GENERAL FUND - COMBINED

Activity Classification	State Use Only (EDP)	SALARIES and BENEFITS		Operating Expenses (4000 - 5000) (3)	Capital Outlay (6000) (4)	Other Outgo (7000) (5)	Total (1000 - 7000) (6)
		Instructional* (1)	Noninstructional** (2)				
Ancillary Services (6900)							
Bookstores	6910		313				313
Child Development Centers	6920		449,608	321,194			770,802
Farm Operations	6930						
Food Services	6940		11,137				11,137
Parking	6950		214,531	(100,031)			114,500
Student and Co-curricular Activities	6960		47,861	3,798			51,659
Student Housing	6970						
Other Ancillary Services	6990						
Subtotal - Ancillary Services	**6900**		723,450	224,961			948,411
Auxiliary Operations (7000)							
Contract Education	7010	40,177	403,434	12,179	5,022		460,812
Other Auxiliary Operations	7090		122,248				122,248
Subtotal - Auxiliary Operations	**7000**	40,177	525,682	12,179	5,022		583,060
Physical Property and Related Acquisitions (7100)	**7100**						
Long-Term Debt and Other Financing (7200)							
Long-Term Debt	7210						
Tax Revenue Anticipation Notes	7220						
Other Financing	7290						
Subtotal - Long-Term Debt and Other Financing	**7200**						
Transfers, Student Aid, and Other Outgo (7300)							
Transfers	7310					756,500	756,500
Student Aid	7320						
Other Outgo	7330						
Subtotal - Transfers, Student Aid, and Other Outgo	**7300**					756,500	756,500
TOTAL EXPENDITURES and OTHER OUTGO	**391**	40,132,983	46,686,945	18,201,861	4,305,217	1,395,324	110,722,330

* Salaries and Benefits of instructors and instructional aides in instructional assignments
** Salaries and Benefits of staff in noninstructional assignments

Yosemite Community College District | 590 | District Code No.

Schedule 1A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Collection Functions.
Source: Schedules 2 and 4.
Findings:

***EFC 1**	57,283
Avg. time p/account	2.5
Total Time (in minutes)	143208
Per Hour	60
Hours Worked (** **Activity 11**)	**2386.8**
***EFC 2**	22,528
Avg. time p/student	3.3
Total Time (in minutes)	74342
Per Hour	60
Hours Worked (** **Activity 12**)	**1239.0**
***EFC 1**	57,283
Avg. time p/question	2.5
Total Time (in minutes)	143208
Per Hour	60
Hours Worked (** **Activity 13**)	**2386.8**
***EFC 2**	22,528
Avg. time p/file	2.2
Total Time (in minutes)	49562
Per Hour	60
Hours Worked (** **Activity 14**)	**826.0**
***EFC 4**	13,827
Avg. time p/account	3.5
Total Time (in minutes)	48395
Per Hour	60
Hours Worked (** **Activity 15**)	**806.6**
***EFC 5**	3,262
Avg. time p/student	2.5
Total Time (in minutes)	8155
Per Hour	60
Hours Worked (** **Activity 16**)	**135.9**

Conclusion: Findings will go forward to the EFCW-2.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 1B
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Year: *2006-2007*
Time Summary

Purpose: To calculate the time worked on Enrollment Fee Waiver Functions.
Source: Schedules 3 and 4.
Findings:

***EFW 6**	17,338
Avg. time p/question	4.7
Total Time (in minutes)	81489
Per Hour	60
Hours Worked **(** Activity 21)**	**1358.1**
***EFW 6**	17,338
Avg. time p/application	1.0
Total Time (in minutes)	17338
Per Hour	60
Hours Worked **(** Activity 22)**	**289.0**
***EFW 6**	17,338
Avg. time p/evaluation	1.3
Total Time (in minutes)	22539
Per Hour	60
Hours Worked **(** Activity 23)**	**375.7**
***EFW 8**	6,413
Avg. time p/application	3.0
Total Time (in minutes)	19239
Per Hour	60
Hours Worked **(** Activity 24)**	**320.7**
***EFW 7**	10,925
Avg. time p/application	6.6
Total Time (in minutes)	72105
Per Hour	60
Hours Worked **(** Activity 25)**	**1201.8**
***EFW 8**	6,413
Avg. time p/application	2.2
Total Time (in minutes)	14109
Per Hour	60
Hours Worked **(** Activity 26)**	**235.1**

Conclusion: Findings will go forward to the EFCW-2.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 2
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Collection Functions.
Source: EFCW 1.7-2. All backup is in 2005-06 files.
Findings:

		*EFC Workload Multiplier					
		1	2	1	2	4	5
		**Activity Codes					
Staff	Title	11	12	13	14	15	16
Abbott, Kathy	Account Technician	0.5	1.0	2.0	0.5	2.0	2.0
Auxier, Sara	Account Technician I	3.0	4.0	2.0	2.0	3.0	2.0
Ayers, Jan	Fiscal Services Tech		2.0	2.0		1.0	1.0
Carsner, Pam	Account Technician I	0.5	1.0	2.0	0.5	2.0	1.0
Day, Karen	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Doty, Judy	Fiscal Analyst I	3.0	4.0	3.0	4.0	8.0	2.0
Evans (Tomlinson), Terri	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Gardner, Darla R.	Fiscal Services Specialist		2.0	2.0		1.0	1.0
Gritz, Robert	Account Technician II	2.0	2.0	2.0	1.0	2.0	
Isaman, Terri	Administrative Secretary	0.5	2.0	3.0	2.0	2.0	5.0
Kiana. Ghorighos	Fiscal Analyst III	2.0	3.0	2.5	1.0	4.0	1.0
Lenstrom, Amy	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Marriott, Veronica	Fiscal Analyst II	3.0	4.0	2.0	2.0	2.0	2.0
Rule, Teresa N.	Fiscal Services Supervisor	3.0	4.0	3.0	2.0	3.0	4.0
Salazar, Jeremy	Fiscal Services Coordinator I	3.0	4.0	3.0	4.0	5.0	2.0
Turner, Kelly	Fiscal Services Specialist	3.0	4.0	2.0	2.0	3.0	2.0
Vera, Soledad	Account Technician I	3.0	4.0	2.5	2.0	5.0	5.0
Villafana, Kathryn	Fiscal Analyst I	3.0	4.0	2.5	2.0	5.0	2.0
Whitfield, Gary	Business Manager	3.0	4.0	3.0	2.0	3.0	4.0
Woodhead, Susie	Fiscal Analyst I	3.0	4.0	3.0	4.0	5.0	2.0
Average		**2.5**	**3.3**	**2.5**	**2.2**	**3.5**	**2.5**

Conclusion: Findings go forward to Schedule 1A.

***EFC Workload Multiplier (Client Provided; except for Activity Code 14, used default EFC 2)**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class l

****Activity Codes**
11 - Reference the student account or record which lists student courses, status of payments, and waiver eligibility, and printing out a list of enrolled courses.
12 - Calculating the enrollment fee, collect the payment or receivable, update student account/record, and print out receipt/course list/other report.
13 - Answer Questions and/or referring student to the appropriate person for an answer.
14 - Updating Student File for the enrollment fee information, and providing a copy to the student.
15 - Amounts Receivable/Delinquencies: Collecting enrollment fees due/delinquent (telephone contact, written notices, collection agencies, small claims court, etc.)
16 - Refunds for students who later become eligible for waivers (not just course changes), explain the process, and update student account/record.

Schedule 3
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2006-07
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3. Backup is in 2005-06 file.
Findings:

Staff	Title	*EFW Workload Multiplier					
		6			8	7	8
		**Activity Codes					
		21	22	23	24	25	26
Bailey, Candy	Financial Aid Tech II	5.0	1.0	1.0	3.0	8.0	2.0
Canutt, Sheryl	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Hesse, Wendy	Account Technician I	3.0	1.0	3.0	3.0	2.0	3.0
Pfieging, Elizabeth	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Salado, Carol	Support Staff	5.0	1.0	1.0	3.0	8.0	2.0
Shively, Marnie	Financial Aid II	5.0	1.0	1.0	3.0	6.0	
Vidaurri, Michelle	Financial Aid I	5.0	1.0	1.0	3.0	6.0	
Average		**4.7**	**1.0**	**1.3**	**3.0**	**6.6**	**2.2**

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

Schedule 3A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-99 through 2005-06
Time Study

Purpose: To summarize time spent by staff on Enrollment Fee Waiver Functions.
Source: EFCW 1.7-3.
Findings:

Staff	Title	06-07 PHR	
Bailey, Candy	Financial Aid Tech II	$23.87	A
Canutt, Sheryl	Support Staff	$23.26	A
Hesse, Wendy	Account Technician I	$23.87	
Pfleging, Elizabeth	Support Staff	$23.26	A
Salado, Carol	Support Staff	$23.26	A
Shively, Marnie	Financial Aid II	$23.87	A
Vidaurri, Michelle	Financial Aid I	$21.11	
Average		**$ 23.21**	

A: Used average for their title.

Conclusion: Findings go forward to Schedule 1B.

***EFW Workload Multiplier (Client Provided)**
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

****Activity Codes**
21 - Answer Questions regarding fee waivers or referring them to the appropriate person for an answer.
22 - Receive Applications from students by mail, fax, computer online access, or in person, or in the form of eligibility information processed by the financial aid office.
23 - Evaluating Applications: Each application and verification documents for compliance with eligibility standards.
24 - Incomplete Applications: Notifying the student of the additional required information. Holding the student application in a suspense file until all information is received.
25 - Approved Applications: Copying all documentation and filing the information. Entering information into district records. Providing student with proof of eligibility and filing documents.
26 - Denied Applications: Reviewing additional documentation provided when denial is appealed. Providing written notification to student of final eligibility status.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2006 Summer Term

Data Current As Of January 22, 2008 08:05:56

Total Headcount	1,371

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COLUMBIA MODESTO

SUMMER 1,371 9,041

FALL 3,368 18,748
3,387 17,492

total 8,126 45,281

total H/ed count 53407

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2006 Summer Term

Data Current As Of January 22, 2008 08:06:11

Total Headcount	9,041

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California Home

Tuesday,

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2006 Fall Term

Data Current As Of January 22, 2008 08:05:48

Total Headcount	3,368

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2006 Fall Term

Data Current As Of January 22, 2008 08:06:20

Total Headcount	18,748

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Columbia
For 2007 Spring Semester

Data Current As Of January 22, 2008 08:05:33

Total Headcount	3,387

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Demographics

Student Total Headcount For Modesto
For 2007 Spring Semester

Data Current As Of January 22, 2008 08:06:29

Total Headcount	17,492

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EFCW 1.6A

Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER
ADMINISTRATIVE ACTIVITIES

District: Ycc1D Fiscal Year: 2006

Marlin Rashid
Employee Name

Programmer Analyst II
Exact Position Title

IT Central Services
Department/Location

575-6555
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or waiver of enrollment fees in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding the type and number of waivers approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11/14/06	1A (1B) 2A 2B 3 (4)	Meeting	45 min
11/20/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
11/21/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
12/1/06	1A (1B) 2A 2B 3 (4)	Meeting	1/2 hour
12/5/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
12/7/06	1A 1B 2A 2B 3 (4)	Programming	4 hours
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		

EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature [signature] Date 12/7/06

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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Employee ACTUAL Time Record Sheet for Mandated Costs
308/95 ENROLLMENT FEE COLLECTION AND WAIVER ADMINISTRATIVE ACTIVITIES

District: YCCD Fiscal Year: 05/06

Holly Young
Employee Name

Programmer Analyst II
Exact Position Title

IT / District Bld 1000
Department/Location

209-575-6560
Telephone #

12mo/11mo/10mo/hrly
Work year length(circle)

Reimbursable Activities Codes:

Code 1 Policies and Procedures: Preparing policies and procedures:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 2 Staff Training: Preparing, conducting, or attending training:
A. Enrollment fee collection B. Waiver of the enrollment fees

Code 3 Record Retention: Time spent by staff recording and maintaining records which document all of the financial assistance provided to students for the payment or **waiver of enrollment fees** in a manner which will enable an independent determination of the district's certification of the need for financial assistance.

Code 4 State Reporting: Time spent by staff preparing and submitting financial and management information data and reports to the state agencies at specified times each year regarding **the type and number of waivers** approved and amounts waived.

NOTE: Only one code entry per line.

Date:	Activity Code (circle one):	Describe the activity:	Time in Hours
11 19 6	1A 1B 2A 2B 3 4	Meetings / [illegible] Write Code	3
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
/ /	1A 1B 2A 2B 3 4		
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EMPLOYEE CERTIFICATION: The State of California requires that school district personnel maintain a record of data for state mandates in order for the district to receive reimbursement. Your signature on this form certifies that you have reported actual data or have provided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the State of California to be true and correct based on your personal knowledge or information." This information is used for cost accounting purposes only. PLEASE USE BLUE INK

Employee Signature Holly Young Date 12/7/6

If you have any questions, please contact _____, at _____

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____

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EFCW 1.8-1

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT STATISTICS REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of students enrolled each fiscal year. (Not FTE's)			
Summer		11,525	
Fall		23,503	
Winter/ Intersession		N/A	
Spring		22,255	
Total *(These numbers obtained from report on Yosemite Gold)*		57,283	
2. Number of students who paid enrollment fees:			
Summer		3,187	
Fall		9,445	
Winter/ Intersession		N/A	
Spring		9,896	
Total		22,528	
exempted from paying enrollment fees (BOGG, etc):			
		4,252	
		8,616	
		NA	
		8,060	
		20,928	

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ATION: The State of California requires that school district personnel maintain a record of data for for the district to receive reimbursement. Your signature on this form certifies that you have reported ided a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the true and correct based on your personal knowledge or information." This information is used for cost ly. PLEASE USE BLUE INK

_____ Date Dec. 4, 2007

_____ Chief Operations Officer, MJC
Position or Title

, please contact _____, at _____

NFORMATION BY _____; TO _____

nd Associates

Revised July 2007

EFCW 1.8-2

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WORKLOAD STATISTICS REPORT

District: YCCD

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee accounts receivable requiring collection:			
Summer		4,086	
Fall		5,442	
Winter/Intersession			
Spring		4,299	
Total		13,827	
2. Number of enrollment fee refunds processed as a result of change in waiver eligibility			
Summer		1,096	
Fall		1.355	
Winter/Intersession			
Spring		811	
Total		3,262	

1.8-2

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TION: The State of California requires that school district personnel maintain a record of data for or the district to receive reimbursement. Your signature on this form certifies that you have reported ded a good faith estimate which you "certify (or declare) under penalty of perjury under the laws of the rue and correct based on your personal knowledge or information." This information is used for cost y. PLEASE USE BLUE INK

Date Dec. 4, 2007

Chief Operations Officer, MJC
Position or Title

s, please contact _____, at _____.

INFORMATION BY_____; TO _____.

and Associates

EFCW 1.8-3

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE WAIVER WORKLOAD STATISTICS REPORT

District: YOSEMITE COMMUNITY COLLEGE DISTRICT

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Number of enrollment fee waivers requested (BOGG etc.)			
Summer		3468	
Fall		6940	
Winter/Intersession		N/A	
Spring		6930	
Total		17,338	
2. Number of enrollment fee waivers approved (BOGG, etc.)			
Summer		2185	
Fall		4370	
Winter/Intersession		N/A	
		4370	
		10,925	

1.8-3

3,468 +
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ATION: The State of California requires that school district personnel maintain a record of s in order for the district to receive reimbursement. Your signature on this form certifies that ial data or have provided a good faith estimate which you "certify (or declare) under penalty of of the State of California to be true and correct based on your personal knowledge or rmation is used for cost accounting purposes only. PLEASE USE BLUE INK

_____ Date _____

ntel _____ Program Rep. II
) Position or Title

ons, please contact _____, at _____.

S INFORMATION BY _____; TO _____.

EFCW 1.8-4

308/95 ENROLLMENT FEE COLLECTION AND WAIVERS
ENROLLMENT FEE REVENUES REPORT

District: Yosemite Community College District

The following cost accounting statistics will be used to calculate your reimbursement. Please report the required information in the spaces provided.

Statistical Data	FISCAL YEARS		
	05-6	06-7	07-8
1. Enrollment Fees Collected	$	$5,190,023.00	$
2. Enrollment Fees Refunded	$	$478,034.50	$
3. Enrollment Fee Revenue - Net (Line 1 subtract line 2)	$	$4,711,988.50	$
4A. Total Enrollment Fees Waived (BOGG, etc.)	$	$3,561,028.00	$
4B. 2% Enrollment Fees Waived (Line 4A x 2%)	$	$71,220.40	$
5 Number of credit units for which enrollment fees were waived.			
A. Summer		22,352.50	
B. Fall		81,190.50	
C. Winter/Intersession		N/A	
D. Spring		74,508.00	
TOTAL x $0.91 per credit		162,026.41	

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Employee Signature: _____ Date _____

Dorothy Pimentel
Employee Name: (print)

Program Rep II
Position or Title

If you have any questions, please contact _____, at _____.

PLEASE SUBMIT THIS INFORMATION BY _____; TO _____.

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Schedule 4
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1998-1999 through 2005-2006
Statistics

Purpose: To calculate the statistics for Enrollment Fee Collection and Waivers.
Source: EFCW 1.7-1, EFCW 1.8-1, EFCW 1.8-2, and EFCW 1.8-3.
Findings:

*Workload Multiplier	Source		Totals								
			98-99	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
EFC 1	1.8-1	1. Enrolled Students	45,702	47,184	49,388	53,268	56,002	52,664	52,087	52,645	57,283
EFC 2	1.8-1	2. Paid Enrollment fees	18,321	19,623	19,855	21,390	26,038	23,848	21,106	22,457	22,528
EFC 3	1.8-1	3. Exempted from enrollment fees (BOGG, etc.)	X	15,862	16,622	17,969	16,633	17,603	20,202	20,424	20,928
EFC 4	1.8-2	1. Delinquencies collections	12,001	11,699	12,911	13,909	13,331	11,213	10,779	14,231	13,827
EFC 5	1.8-2	2. Refunds	1,591	1,668	1,904	2,639	2,954	3,113	2928	3,255	3,262
EFW 6	1.8-3	1. Waivers Requested	X	23,308	25,205	26,100	27,816	48,385	42,418	17,432	17,338
EFW 7	1.8-3	2. Waivers Approved	X	7,404	7,294	7,665	8,358	8,851	10,355	10,902	10,925
EFW 8	1.8-3 (1-2)	Waivers Denied	X	Did not provide						6,530	6,413

Conclusion: Findings will go forward to the Schedule 1A and 1B.

***EFC/EFW Workload Multiplier**
EFC 1 - Total number of students who enroll in the college
EFC 2 - Total number of students who paid enrollment fees
EFC 3 - Total number of students waived from enrollment fees (BOGG, etc.)
EFC 4 - Total number of students with enrollment fee accounts receivable (did not pay in full at time of registration)
EFC 5 - Total number of enrollment fee refunds due to change in waiver eligibility and not a result of just a change in class load
EFW 6 - Total number of enrollment fee waivers requested
EFW 7 - Total number of enrollment fee waivers granted
EFW 8 - Total number of enrollment fee waivers denied

Schedule 5
Yosemite Commu College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-00 through 2006-07
Offset Savings

Purpose: To calculate the offset savings for Enrollment Fee Collection and Waivers.
Source: EFCW 1.8-4 and attachments from district office.
Findings:

Source	Item	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07
1.8-4 line 3	Net Revenue Received	$ 2,108,649	$ 2,242,697	$ 2,393,622	$ 2,582,073	$ 3,468,086	$ 4,345,432	$ 4,709,608	$ 4,711,989
p/E.C. 76300 (c)	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192	$ 94,240
1.8 ..ne 4A	Enrollment Fees Waived	$ 1,187,073	$ 1,237,210	$ 1,345,946	$ 1,507,992	$ 2,532,425	$ 4,793,489	$ 4,999,859	$ 3,561,028
p/E.C. 76300 (I) (2)	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997	$ 71,221
(Line 4A X 7%) (99-00 only)	7% of Fees Waived (99-00 only)	$ 83,095	For 00-01 through 06-07 - unit fee						
1.8-4 line 5	Summer		2,458	3,420	6,656	20,465	23,232	22,353	22,353
	Fall		34,014	39,005	44,117	77,214	80,031	78,630	81,191
	Winter/Interssion								
	Spring		32,259	38,140	41,762	48,869	74,184	75,465	74,508
	Total # of credits		68,731	80,565	92,535	146,548	177,447	176,448	178,052
p/E.C. 76300 (I) (2)	Total # of credits X p/unit (waived cost $0.91)		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568	$ 162,027
Sum..ary									
2% of line 3	2% of Revenue Rec'd.	$ 42,173	$ 44,854	$ 47,872	$ 51,641	$ 69,362	$ 86,909	$ 94,192	$ 94,240
1.8-4 line 4B.	2% of Fees Waived	$ 23,741	$ 24,744	$ 26,919	$ 30,160	$ 50,649	$ 95,870	$ 99,997	$ 71,221
(Line 4A X 7%)	7% of Fees Waived (99-00 only)	$ 83,095							
1.8-4 5	Credit Units Waived		$ 62,545	$ 73,314	$ 84,207	$ 133,359	$ 161,477	$ 160,568	$ 162,027
Total Offset Savings	**Forward to EFCW-1**	**$ 149,009**	**$ 132,143**	**$ 148,105**	**$ 166,008**	**$ 253,370**	**$ 344,256**	**$ 354,757**	**$ 327,488**

Schedule 5A
Yosemite Community College District
308/95 Enrollment Fee Collection and Waivers
Fiscal Years: 1999-2000 to 2005-2006
Enrollment Fee Waivers Offsets

Purpose: To illustrate that waiver offsets for most fiscal years were higher than waiver costs and to show actual waiver offset amount being used on EFCW-1.
Source: Waiver costs from EFCW-1 and Waiver offset from Sch. 5
Findings:

ref	Item	Source (EFCW)	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07
1	Policies & Procedures for § IV.B.	(04)(B)(1)(a)								$ 36.02
2	Staff Training	(04)(B)(1)(b)							$ 1,797.58	
3	Adopting procedures, recording/maintaining records	(04)(B)(2)(a)								
4	Waiving student fees	(04)(B)(2)(b)	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ 74,237.78	$ 87,743.09
5	Reporting BOG fee waiver data to CCC	(04)(B)(2)(c)							$ 140.88	$ 443.36
6	EFCW - Fee Waiver Costs	Total	$ 63,866.06	$ 70,610.80	$ 74,591.06	$ 82,313.78	$ 131,710.10	$ 122,797.83	$ 76,176.24	$ 88,222.47
7	Less: Total Enrollment Fee Waiver Offset	Sch. 5	$ 149,009.00	$ 132,143.00	$ 148,105.00	$ 166,008.00	$ 253,370.00	$ 344,256.00	$ 354,757.00	$ 327,488.00
8	Fee Waiver Costs to claim after offsets	L6 - L7	$ (85,142.94)	$ (61,532.20)	$ (73,513.94)	$ (83,694.22)	$ (121,659.90)	$ (221,458.17)	$ (278,580.76)	$ (239,265.53)
	Offset Amount to Claim	**To EFCW -1, line 10**	**$ 63,866.06**	**$ 70,610.80**	**$ 74,591.06**	**$ 82,313.78**	**$ 131,710.10**	**$ 122,797.83**	**$ 76,176.24**	**$ 88,222.47**

Conclusion: If line 8 is negative, then line 6 - "Total EFCW waiver costs" will be carried forward to EFCW-1, line 10. Otherwise, line 7 - "Total Enrollment Fee Waiver Offset" from Schedule 5 will be carried forward to EFCW-1, line 10.

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Columbia College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 08:07:31

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	89	20,688
BOGW - Part B based on income standards	882	309,072
BOGW - Part C based on financial need	353	149,513

Total Amount = $ 479,273

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CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Student Financial Aid Awards

Modesto College
Financial Aid Count and Amount By type
For 2006-2007

Data Current As Of January 22, 2008 08:07:52

Download The Result In Comma Delimited Format

Financial Aid Type	Headcount	Total Amount
BOGW - Part A basis unreported	567	229,078
BOGW - Part B based on income standards	6,330	2,644,885
BOGW - Part C based on financial need	2,726	1,220,620

9623

Total Amount = $ 4,094,583

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